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A sexual abuse case series of infants and toddlers by a professional caregiver: A qualitative analysis of parents' experiences during the initial crisis period post-discovery

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ABSTRACT

Background: The discovery that one's child has been sexually abused may be one of the worst events a parent can experience. The importance of parental support for the recovery of child sexual abuse (CSA) victims emphasizes the need to gain insight in difficulties parents face after disclosure.
Objective: To improve crisis intervention by exploring how parents of very young, mostly male CSA victims involved in a large unique CSA case, look back on their initial reactions after disclosure, the impact of media coverage, and their experiences with service responses during the immediate aftermath of CSA discovery.
Participants and setting: We conducted 18 qualitative interviews with 21 parents enrolled in the longitudinal Amsterdam Sexual Abuse Case (ASAC) study.
Methods: We used thematic analysis, combining a deductive and inductive approach.
Results: We identified four themes regarding parents' initial experiences after disclosure: shock, uncertainty, roller coaster and survival mode. Four themes emerged regarding the impact of media coverage: vulnerable to exposure, fear that the child would recognize the suspect, no escape possible, and burden versus acknowledgement. Parents' experiences regarding the actions of professionals also generated four themes: stressful and confronting, need for support, need for information, and need for professional competence.
Conclusions: Disclosure of extrafamilial CSA left parents in shock, affecting their sense of control. Media coverage exacerbated stress for many parents, although some also drew support from it.

Abbreviations: CSA, Child sexual abuse; ASAC, Amsterdam sexual abuse case.

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Actions of professionals defined by parents as helpful included: being supportive, compassionate, accessible, and competent, providing information, and promoting autonomy. Implications for professionals are discussed.

1. Introduction

In the late 2010, an investigation into child pornography in the USA led to the unmasking of a male daycare assistant and babysitter in Amsterdam, the Netherlands, suspected of having sexually abused over 150 infants and very young children while carrying out his profession. The case, that became known as the Amsterdam Sexual Abuse Case (ASAC; "Amsterdamse zedenzaak"; Lindauer et al., 2014), shocked the Dutch public and drew considerable (international) media attention. To monitor the abused children and their families over a longer period, learn from their experiences, and gain more insight into the psychological consequences after CSA at such a young age, for boys in particular, we started a longitudinal quantitative and qualitative study in 2013. The ASAC study protocol is available for perusal on Lindauer et al. (2014). This article describes part of the qualitative study and focusses on how parents look back on their experiences during the crisis period following the discovery of the ASAC.

Unfortunately, child sexual abuse (CSA) is not uncommon. A meta-analysis by Barth, Bermetz, Heim, Trelle, and Tonia (2013) reported worldwide prevalence rates ranging from 8% to 31% for girls and 3% to 17% for boys up to eighteen years. A more recent meta-analysis by Stoltenborgh, Bakermans-Kranenburg, Alink, and van IJzendoorn (2015) shows a worldwide CSA prevalence rate of 18% for girls and 8% for boys. Unfortunately, studies on the prevalence of CSA in young children are very limited in number (Barth et al., 2013). Fontanella, Harrington, and Zuravin (2001) estimated that 25% to 35% of CSA victims are younger than seven years. Studies on the psychological outcomes for victims of adolescent and adult sexual abuse are accumulating (Cutajar et al., 2010; Irish, Kobayashi, & Delahanty, 2010). However, there is still a gap in knowledge regarding outcomes for children, and boys in particular, who are abused during their early life. The number of victims, their young age, the predominance of boys, and the available evidence in the ASAC is unique. The ASAC is one of the largest proven CSA case series by a single perpetrator, involving mostly male, very young victims all abused under similar circumstances. The suspect admitted to having sexually abused 87 children between the ages of two weeks to four years over the course of several years. Eventually, he provided the police with detailed information regarding the time span, location, nature, and frequency of the abuse for each victim. A large amount of child pornography was produced by the suspect and disseminated on the dark web.

The discovery that one's child has been sexually abused may be one of the worst events a parent can experience. It can provoke emotional and psychological problems in parents, including feelings of guilt, shame, and posttraumatic stress (Cyr et al., 2018; van Duin et al., 2018). On top of that, parents may be faced with a number of stressful situations following disclosure such as police questioning, juridical prosecution, and media attention. Especially in large CSA cases, media attention is reported to exacerbate trauma and impede recovery (Dyb, Holen, Steinberg, Rodriguez, & Pynoos, 2003; Jones, Finkelhor, & Beckwith, 2010; Kilroy, Egan, Maliszewska, & Sarma, 2014). These negative consequences can compromise parents' ability to provide the support their child needs (Plummer & Eastin, 2007a).

Adequate services provided to parents immediately after CSA discovery–at the time of crisis–from agencies such as police, child- and social services, mental- and medical health services, can prevent or buffer the adverse effects of CSA on parents—and with it, for children (van Toledo & Seymour, 2013). Evidence shows that the way parents evaluate their interactions with professionals during this critical time will determine the likelihood of them linking to services later on when they need help (Davies, 1995). The important role of parents in helping their children to cope with the effects of CSA emphasizes the need to raise insight in and understanding of difficulties parents face in the aftermath of CSA disclosure.

In the ASAC, parents of possible victims were confronted with a great deal of (international) media coverage, through TV, radio, newspapers and social media. Due to the size and seriousness of the sexual abuse case, the authorities assigned the case high priority and the service responses were exceptional: a large number of police investigators, (mental) healthcare professionals, and social workers were put on the case. An emergency outpatient department was set up in the hospital for the possible victims to be physically and psychologically examined. All families were monitored by the public health service of Amsterdam and screened for psychological problems related to the events at several time points, and referred for mental health support if necessary. To improve the alignment of crisis interventions to parents' needs, we aimed to gain insight into what parents experienced in the immediate aftermath of CSA discovery, how media coverage affected them, and how they evaluated service responses. Exploring parents' experiences in depth in this context can provide rich and detailed information on this phenomenon. We therefore decided a qualitative approach would be most appropriate. The current study was part of a larger qualitative study that aimed at gaining more insight into inter alia, parents' perceived condition of their child and family situation, the effects of legal proceedings, (mental) healthcare services, and the impact of knowing that pornographic material has been disseminated on the internet. In the current study, we examine how parents look back on the crisis period directly following the ASAC discovery. We focused on three research questions: (1) What were parents' experiences in the immediate aftermath of the CSA case discovery? (2) What impact did parents experience as a consequence of the media coverage? And (3) What were parents' experiences regarding the actions of professionals within the service responses (provided by police, public health service, city council of Amsterdam, medical and mental healthcare services)?

2. Methods

2.1. Participants

The sample consisted of twenty-one parents, representing fifteen substantiated victims and four unsubstantiated victims (Table 1). Other sample characteristics including age at abuse onset and discovery are also presented in Table 1. Substantiated CSA meant the perpetrator had confessed to the abuse and/or the police had identified the child in pornographic images. Parents of unsubstantiated victims were included if the perpetrator had been in direct contact with the child at daycare and/or had babysat for the child, and if the parents strongly suspected abuse had occurred. These parents were included because sexual abuse could not be ruled out and because we assumed the disclosure affected these parents to a similar degree even though the CSA was not substantiated in the end. The ASAC study participation was also intended to have an aftercare function, monitoring the well-being of children and parents. Not allowing participation to unsubstantiated but suspected victims and their parents was therefore considered unethical. In addition, analyses of the first quantitative assessment in the longitudinal study (T1) (van Duin et al., 2018) has shown that there are no significant differences in outcomes between the substantiated victims and unsubstantiated victims. For details on the abuse characteristics and demographic characteristics of the complete longitudinal ASAC study sample, we refer to our earlier publication (van Duin et al., 2018).

2.2. Procedure

Participants involved a subgroup of parents already enrolled in the ongoing longitudinal research project that started three years after disclosure. Details on the recruitment of the participants for the complete longitudinal study are published elsewhere (van Duin et al., 2018). To recruit interviewees for the qualitative study, we compiled a list of parents who had expressed willingness to take part following the second quantitative assessment (T2), roughly four years after disclosure (39 out of 42 parents). These parents were explained that a randomly selected group would actually be interviewed until the data was saturated, so they were aware they might not be interviewed in the end. Between March and October 2015, the first author interviewed parents from this list, until saturation of information was achieved (after 18 interviews with 21 parents), meaning no new themes emerged from the interviews. Half of the interviews ($n = 9$) were held at the Amsterdam University Medical Centers – location AMC, or at the Public Health Service of Amsterdam. The others (n = 9) were held at parents' own home. Participants received reimbursement for transportation costs. The interviews had a semi-open structure. An interview guide was developed and reviewed together with four authors with expertise in childhood trauma (EV, APV, SNB, and RJLL) and two authors with expertise in qualitative research (YV and GAMW). The interviewer raised the subjects in the interview guide if they failed to come up naturally. The interview for the complete qualitative study lasted 99 min on average (range ½–2½ hours), of which the results presented in this article covered about a third.

2.3. Analysis

Interviews were audiotaped with permission, transcribed verbatim (with names, dates, and locations changed into functional codes to ensure anonymity) and checked against the recordings. The transcripts were imported into MAXQDA (version 2018), a qualitative data analysis software package. We used thematic analysis, with our three research questions as a starting point for studying the data, and an open coding of data, combining a deductive approach with an inductive approach (Braun & Clarke, 2006). Data analysis complemented the data collection process; interim analysis steered following interviews, enabling us to follow emergent leads within the data and further researching them. Two authors (EvD and YV) independently read and coded the first four transcripts and then discussed until consensus was reached. The first author coded subsequent interviews that were evaluated by the sixth author. Using an iterative process of constant comparison, new interviews were compared with existing codes to find comparisons and differences. The

Table 1
Sample characteristics

	Female (n)	Male (n)	Total (n)
Families	–	–	16
Parents	14	7	21
Interviewed with partner	3	3	6
Interviewed alone	11	4	15
Children	4	15	19
Sibling also included[a]	1	3	4
Substantiated CSA[b]	1	14	15
Unsubstantiated CSA[c]	3	1	4
		Mean (min – max)	n
Age at abuse onset (years)		1.1 (0–2)	14
Age at abuse discovery (years)		3.5 (0–6)	19

[a] Answers did not count twice.
[b] Substantiated by confession of the perpetrator and/or pornographic images.
[c] Unsubstantiated CSA if perpetrator had been in direct contact with the child at daycare and/or had babysat for the child, and if the parents strongly suspected abuse had occurred.

team of researchers continuously discussed emerging themes to determine the interrelationships. Quotations from the participants to illustrate the themes were selected and translated into English by a certified translator.

2.4. Ethical considerations

The Medical Ethics Review Committee of the Amsterdam UMC, location AMC, in the Netherlands, had approved the ASAC study, including the research reported here. All participants had given written informed consent.

3. Results

Analysis revealed four themes regarding parents' initial experiences after the discovery of the CSA case. Their experiences of the impact of the media attention, and their experiences regarding the actions of professionals also generated four themes (Table 2). The results discussed below show patterns and diversities in parents' experiences.

1. What were parents' experiences in the immediate aftermath of the CSA case discovery?

What parents experienced immediately after the discovery of the CSA case can be summarized in four themes: 'shock', 'uncertainty', 'roller coaster', and 'survival mode'. Most of the parents described the crisis period as lasting several weeks to months.

1.1. *Shock*. After being informed that their child was (possibly) sexually abused within a major CSA case, many parents experienced a sense of shock and disbelief. They could not comprehend that someone they trusted to take care of their child could commit such acts, and was able to victimize so many children without being caught for so long. They were shocked that sexual abuse at this young age is possible at all, and that they and others had not noticed anything. The situation felt surreal to them, as in a movie.

> *It's hard to believe. […] These are the things you watch on TV and the news and you read in the paper. It doesn't happen to you.*
>
> (mother, unsubstantiated victim)

> *It's beyond comprehension that you can just … that it's possible, yunno? […] And also that you don't notice anything about your child, that that's been happening to your child, so to speak. […] Whether that little body can endure that, so to speak. […] Incomprehensible […] that he could just do as he pleased for that long undisturbed.*
>
> (mother, substantiated victim)

Many parents felt overwhelmed by emotions such as sadness, rage in general or against the suspect, despair, panic, and guilt for not recognizing or preventing the CSA.

> *(Father) At first we were overwhelmed in terms of emotion.*
> *(Mother) Well, yes, at first you feel grief.*
> *(Father) And I felt anger and grief.*
> *(Mother) Well, first you feel grief and then this tremendous anger and then … yeah.*
> *(Father) [I felt] anger right away, yeah, 'cause of course I had a feeling like "Goddammit, I'd already seen some signals and didn't do anything about it," so then you feel exasperated about that and you direct it at him. […] So it was also blaming myself and being livid at him and feeling grief.*
>
> (mother and father, substantiated victim)

In two cases, they even felt compassion for the suspect.

> *The strange thing was, at first I felt really sorry for [suspect], 'cause he was there all alone in the cell and, uh, it took a long time. Especially because I'd trusted him so much … it really did take a long time before I could see him as the bad guy.*
>
> (mother, substantiated victim)

Other parents experienced feeling emotionally numb, as if they were in a daze, or as if they were dreaming. They did not seem to really see what was happening.

Table 2
Results summary

Research question	Theme			
1. Initial experiences after the discovery of the sexual abuse case	Shock	Uncertainty	Roller coaster	Survival mode
2. Impact of the media coverage	Vulnerable to exposure	Fear that the child would recognize the suspect	No escape possible	Burden versus acknowledgement
3. Experiences regarding the actions of professionals	Stressful and confronting	Need for support	Need for information	Need for professional competence

At first you're also just living in a kind of daze or something, I think, and then you don't really realize….

(mother, substantiated victim)

Several parents described physical responses to the shock like pain, feeling sick, losing their appetite, losing weight, trembling and feeling cold. A few mentioned that their physical distress affected their ability to work.

You just have this unimaginable pain in your body, you have such a pain in your head and you're— everything disconnects. […] I had to cancel everything then, the only time in my life. I called in sick for two weeks. […] I could do nothing at all any more, […] my body was in distress.

(mother, substantiated victim)

I know I, uh … for maybe four whole weeks, I never felt warm a single time. I was cold all the time. I just kept shivering, kept shaking.

(father, substantiated victim)

1.2. *Uncertainty*. Initially, uncertainty existed regarding whether or not their child was sexually abused, what exactly had happened to their child, what their child possibly witnessed, how many victims there were and in what time frame the abuse had taken place. Parents responded differently to the uncertain situation. Some parents reacted to the lack of information by reassuring themselves with hope, approaching the situation with optimism and not immediately assuming the worst.

Then we were still thinking things like "Oh well, yunno, if he just flashed his weenie once or twice, well, uh … that's not too nice, that's not done […] but okay, yunno, we'll get over that," or something like that, yunno. So, yeah, at first everything was still so unknown, uh, what exactly had happened.

(mother, substantiated victim)

Sometimes their hopes turned out to be in vain:

And then you still have some hope it would still be just one of the two kids. "No, it was both of them." "Oh, okay, and hopefully it was just at the daycare." "No, it happened at home, too." It kept getting worse and more brutal.

(mother, substantiated victim)

For other parents, not knowing what awaited them caused great anxiety and stress. The uncertainty provoked many questions surrounding the events and the consequences.

You start, uh … you sit there speculating all day long about …, yunno?

(father, substantiated victim)

And that my father […] asked me, like, "Why does it make you cry so much, actually?" Yeah, I found that a very good question, really, and I couldn't really give a good answer why I just kept on crying so much. Merely the, or maybe also, the fear of what was going to happen.

(father, substantiated victim)

As the investigation progressed, the suspect started confessing in detail about his actions and the extent of the CSA case turned out to be worse and more brutal. The information that slowly seeped in added to the frightening scenarios parents imagined. As one parent put it:

The case also kept getting bigger and bigger, of course, and more brutal. At first it was like, "Well, he do seem fairly mild, done the abuse, [and] if it really got painful and rough for the kids then he stopped." That was still the story at first…. Well, that turned out to be just a little bit different.

(father, substantiated victim)

Although for some parents, the uncertainty diminished when they were informed of what the suspects had confessed to about their child (at least now they knew what they were dealing with, or were reassured nothing had happened), other parents questioned the credibility and completeness of his statement, or were not convinced nothing had happened. For them, uncertainty continued.

He didn't confess to her name but […] if he refuses to say something it stays with him.

(mother, unsubstantiated victim)

1.3. *Roller coaster*. Parents reported experiencing a turbulent period, with loss of control over the situation. Some parents used the term roller coaster, indicating that they were being swung back and forth between emotions with every new detail that arose as the investigations continued.

Then there's so much going through your head that you, or at least me, I'm speaking for myself now, […] that's really such a roller coaster ride for a while, uh, what you're going through then. Yeah. Also because, that keeps arriving bit by bit, yunno, that news, and yeah, uh yeah, yeah yeah that's just a roller coaster.

(mother, unsubstantiated victim)

Parents also used the term roller coaster in a more practical sense, related to the chaos parents were sucked into due to the many actions that were taken.

You get into a kind of roller coaster and you go from the, er, police detectives to the police family liaison officer to, [lawyer], to the next meeting with parents, and, er, to, er, uh, uh … meeting attended by [Dutch king and queen], which you're not keen on doing at all right then. […] And to, er, to the [hospital], er, yeah…. You know that won't be letting up for the first three or four weeks, it didn't let up. And, umm … so as far as that goes, you're also just being lived by others at times like that.

(father, substantiated victim)

1.4. *Survival mode*. Many parents pointed out how the need to care for their child/children forced them to stay afloat and act, and prevent emotions from taking over. Parents reported wanting to stay near to their child in order to keep a close eye on how they were doing, therefore in some cases they stayed home from work. For them, investigating and ensuring the well-being of their child/children was their main priority.

I think we tried to approach it quite rationally, to keep it emotionally … okay for ourselves, so to speak. And also with a reasoning the whole time like "Yeah, well, when it comes down to it, we just have to keep running a family here with three little kids." I mean, we can't just stop functioning because of our grief or anger, or whatever.

(father, substantiated victim)

I do find it remarkable that you just keep on living, and just did everything to figure out whether [child] suffered any harm. […] All that, with the baby and with [child], who was just starting school, and … it was everything at once. But basically, you just do that, and then later you think, "Whew, that was pretty rough," but at that moment you just get into a kind of survival mode and, uh, and carry on.

(mother, substantiated victim)

2. What impact did parents experience as a consequence of the media coverage?

Parents' experiences regarding the impact of the media coverage is summarized in four themes: 'vulnerable to exposure', 'fear that the child would recognize the suspect', 'no escape possible', and 'burden versus acknowledgement'.

2.1. *Vulnerable to exposure*. Parents described feeling vulnerable because of the media attention. As a family, they experienced something very intense and personal. Through the media, this was now public for the whole world. Since everyone knew about the case, parents experienced diminished control over who was aware of their involvement. Parents were afraid that the media would expose them, or that people would 'discover' their involvement. For example, because friends and acquaintances knew that their child attended the daycare that was now in the news, because parents were very upset in the period after the discovery, or because the neighbors had seen officers with a police badge at their doorstep. Parents were sometimes questioned by their environment about their involvement and felt compelled to lie or open up.

Because all that media attention, it does— what can I say, somehow it's strange to see things in the papers that also affect you so personally, and I, … I'd never experienced that before, so to speak. And that feels, uh, no, that makes you feel very vulnerable, when, when…, errrr, like when everybody out there can read about what has hit you right in the heart of your family or in the heart of your home life.

(mother, substantiated victim)

Parents feared that identity exposure would stigmatize their child, preventing some parents from reporting the CSA to the police.

You're just very, very scared it'll become known. We felt that very strongly. We wanted to, uh, just, uh, yeah, not stigmatize, uh, toward [child 1] and toward [child 2].

(father, substantiated victim)

2.2. *Fear that the child would recognize the suspect*. Several parents described how the media attention restricted their freedom in their own home. They limited or eliminated watching the news on television or in the newspapers, because both regularly showed photos of the suspect and the outside of the daycare centers. Parents feared that the child would recognize the suspect or their daycare and ask questions about it.

Yeah, that's something else we were very, very worried about at first. We said "Hey, we just can't have that." In this case you just have to remove that from the newspaper. […] You don't want your child opening up the paper and saying, "Hey, that's …! I know him from the daycare."

(father, substantiated victim)

2.3. *No escape possible*. For parents the media attention felt impossible to escape, as the case was the main topic on every news- and radio channel, and every newspaper for several weeks. Sometimes they heard worrisome speculations or new details and did not know if they were true, or they did not want to know; for example, that the suspect had accomplices or that he supposedly drugged the victims.

So you were just sitting in the car just listening to the radio, and then suddenly, "In the case of [suspect's name]." Then you really go "Ooh [takes a deep breath]," … got a sort of, uh, heart attack. […] Especially 'cause in the beginning, you sometimes had to hear something new then, something you didn't know yet.

(mother, substantiated victim)

And then I read in the paper that he would take little bags of lubricant with him to work. Then I thought "Oh, that's another thing that would never occur to me, but I'd also rather not know about it." […] Then you're sitting in the train and suddenly there's a whole article in [newspaper], and then I can't not read it, so then I read it anyway, and on [website]. And things like that, um, so it's really hard to shut yourself off from it.

(mother, substantiated victim)

At the same time, some parents described that the media also served as a welcome source of information. Some parents wanted to follow the news to know exactly how the case developed and to hear how it had affected other families. In particular, for parents of unsubstantiated victims, the media was their main source of information because the police or a lawyer did not primarily inform them.

Well I think, yeah, that was our source of information. So, uh, in that sense it was positive, because you then find out more, because we both also wanted to know those things – how things went and how they happened.

(mother, unsubstantiated victim)

2.4. *Burden versus acknowledgement*. Several parents indicated that public attention through the media put an additional strain on them and confronted them with personal opinions of people unrelated to the case.

If [suspect] had raped one child, and it hadn't gotten into the media, then our life would have been quite a bit easier. The fact that it, that you were part of, the sexual abuse case, worldwide— relatives from [country abroad], "What've we been hearing now?"

(mother, substantiated victim)

Okay, yunno, I mean, people tweet the worst possible nonsense, er, about, er, everything. I think that's really so— that annoyed me so much.

(mother, substantiated victim)

On the other hand, some parents felt supported by the public attention generated by the media. They felt that the journalists, in their reporting, sided with the parents and acted respectfully toward them, for example by never exposing the identities of the parents and victims. The fact that the case had such a big impact on society felt as acknowledgement for the intensity of their own emotions.

In that sense it was good for us that it received so much attention, and still today, and that there's, um, because you then get—, yunno, you get validated. It's like you're a victim of something really momentous.

(mother, unsubstantiated victim)

3. What were parents' experiences regarding the actions of professionals?

From the moment the CSA case became known, parents encountered professionals of various disciplines, including representatives from the police department, public health service, city council of Amsterdam, medical- and mental healthcare services. Pertaining to parents' experiences regarding the actions of professionals within these service responses, four themes emerged: 'stressful and confronting', 'need for support', 'need for information', and 'need for professional competence'.

3.1. *Stressful and confronting*. Various participants described certain situations related to the actions of the professionals and the way in which the service responses were set up as particularly stressful or confronting. Parents were informed about the possible involvement of their child/children in the CSA case in a meeting with the police, mayor of Amsterdam, and chief public

prosecutor. Some parents told that the emotions of other parents and the presence of police officers and mental health professionals in this disclosure meeting made them aware of the seriousness of the situation. Several parents reported that showing the suspect's photo struck like a bomb. In that moment, they saw that they knew the person and realized something was terribly wrong.

And all at once I see a face like that on the screen. And, at that very moment, somebody pulls a rug out from under you. And you start falling, and that doesn't stop for the next two days.

(father, substantiated victim)

Walking into a section of the police station with the name 'vice police' above the entrance felt confronting. Parents experienced stress in hearing the suspect's statement about their child, even more so because they had to press charges before they were told what the suspect had confessed to.

First you have to press charges before they'll tell you what he's confessed to. So that was very difficult too, thinking, like, with a kind of sword of Damocles hanging over your head, like, he must have said something, something must have happened, but no idea how big that is.

(mother, substantiated victim)

In addition, several parents explained that choosing a photograph of their child and handing it over to the police for matching with pornographic material felt extremely stressful.

Of course you're choosing your photo based on criteria that you, of course, are averse to thinking about. None of the pictures we have is one with him naked … we don't have it […] but anyway, so that uh, that uh— uh, it's inhuman to have to do that, so to speak, really strange.

(father, substantiated victim)

Some parents experienced the medical and psychological evaluation of their child in the hospital as stressful. Some found the physical part of the examination stressful; others found it difficult to be separated from their child for part of the evaluation. Several found it difficult to be confronted with other parents in the waiting room because they were afraid other children had received a different explanation from their parents for being there. Some found it confronting to see other victims, and some feared for their own privacy.

Here [at the hospital] you're sitting there thinking, like, "Okay, how do I make sure I explain this to, uh, [child] in as normal a way as possible?" […] And suddenly you run into somebody else that maybe has a completely different story, so then you have to try to fit them together. Umm, plus, this was quite early on, this was in the first week. And yeah, so you're still enough absorbed in yourself, and you don't at all want to get confronted with the fact that there's other parents going through the same thing as you.

(father, substantiated victim)

Some parents did not experience the services offered to them as voluntary. They felt pressured to report the CSA, to have their child examined in the hospital, to inform their child about the CSA or felt they were not allowed enough time to contemplate what steps they wanted to take.

Yeah, the police were indeed pretty keen on that [us pressing charges], but they shouldn't say that to us really … that's up to us to decide.

(father, substantiated victim)

3.2. *Need for support.* Parents reported a need for support. In general, parents felt supported by the amount of professionals available to them and their dedication to pursue justice. They mentioned that everyone took the matter seriously, that special facilities were arranged for them and that the interests of the victims were elected above the interests of the process or regulations. Several parents described the professionals as committed, compassionate and accessible, with even professionals with the highest positions presenting themselves as equivalents. The police family liaison officers in particular were described as 'life lines' that played an important role in the experienced support, acting as a kind of personal assistant, always available to parents.

I thought the mayor did a very good job. […] He got up right in front of the parents […] and down-to-earth, personal, accessible, that emotion in his voice. And also that he decided, for example, […] he just named that name [suspect] and immediately showing the picture of [suspect]. […] I think he broke some rules for us then.

(mother, substantiated victim)

They involved us in everything, uh, they showed a huge amount of understanding, always there, uh, when they were needed. And that's really, I, I can very well imagine, if that hadn't been there, it would have been so much more difficult. […] We were given every opportunity to ask any questions we had, and to be present at everything. That was all organized very well, uh, and also with a great deal of effort put into the, uh, protection of privacy.

(father, substantiated victim)

Parents of unsubstantiated victims sometimes felt less supported by the professionals and described the feeling of being a 'b-victim' for whom less were made possible. The police came across as less interested, and parents had less access to the facilities, because the focus was on the substantiated cases.

> *Because then you feel like, I'm neglected, only because the damage I suffer is less serious than the damage the others suffered. (…)It was like you know, they made a big affair and then, end up in smoke and the result is I have nothing, no money, no compensation, no help, no assistance. And I have to argue for months with this collection agency that wants to be paid for the assistance. Because it has no records of proof that it was the police and the case, they send me there.*
>
> (mother, unsubstantiated victim)

3.3. *Need for information*. Parents wanted to be able to prepare for what awaited them. They wanted to be informed of developments in the case and possible outcomes.

> *It's nice if you're just aware of things like "Now these are the things that have to take place." Legal things have to be done, things with the police have to be done, things have to be done with, uh, uh, the children, and that thing is medical and that thing is psychological, and things with the parents have to be done and that is psychological. […] Then you can also decide things like "This is what I want, and I don't want […]." It wasn't always automatically clear.*
>
> (father, substantiated victim)

Parents were often positive about the level of communication. They felt professionals intended to inform them first, and were always available if they had any questions. They pointed out that their lawyer and the police family liaison officers were the key figures in informing them and were often their points of contact.

> *Well, just hearing something occasionally, yunno. Like they [police family liaison officers] would tell you, "Hey, tomorrow morning that […] is gonna be on TV or, uh, that's gonna be in the papers," or, like, yeah, yeah, what all was going to happen. […] Actually that's the thing: you just need to know what's going to happen.*
>
> (father, substantiated victim)

Some parents reported dissatisfaction about the level of communication about the case, in particular parents of unsubstantiated victims, stating that new information sometimes appeared in the media without being shared with them beforehand. In addition, some parents felt confused about whom to contact in case they had questions.

> *I can indeed remember that there were a couple of times that you read things in the paper and you think, "Hey, I thought the idea was that we'd be kept informed about that."*
>
> (father, substantiated victim)

> *So if you've never had anything to do with those kinds of institutions, then you don't understand it well, how it all works. At some point you don't understand any more who you need for what, because we were also involved with Victim Support and uh, and uh, the Victim Fund, and then you had the lawyer, and then you had the public health service, and then you had [hospital], and it was all quite a lot. […] So maybe it could come in handy, then, if you could maintain one, uh, contact that you can ask about everything. So you don't have to phone around to all those offices and ask things like "Okay, so how does that work again with […]?"*
>
> (mother, substantiated victim)

One parent said that the invitation letter about the disclosure meeting was so general that she had underestimated the intensity and went to the meeting without her partner:

> *I went down there with the idea that I'd get to see a photo of someone that, well, the chance is really very small that I'll know him [the suspect]. […] Then they started by just very briefly showing that picture, and then I think I immediately texted you [spouse]. […] "You've got to get down here, because, uh, I can't handle this."*
>
> (mother, substantiated victim)

3.4. *Need for professional competence*. Parents reported a need for professional competence. Several parents considered the actions of professionals as well organized. They used terms like 'well-arranged', 'in order', 'well-oiled machine', 'right time'. They were impressed by the thoroughness of the investigation and everything that was set up for them on such short notice to ensure their child's and their own well-being. They experienced the professionals involved as specialists with much expertise and experience.

> *I was truly impressed. […] Yes, I thought it was really fantastic how it all was organized. That all of this was being done for us, and right now, and, uh, at just the right time. […] The opportunities that were available to, like, to do absolutely everything to respond to it, yunno, to examine what … how your child is doing. And the opportunities for the parents, um, and you could also not make use of them. So you just had a choice, it wasn't that you had to take part.*
>
> (mother, substantiated victim)

No, it was great, because again we started out there as a sort of VIPs, and it was easy just to work our way through it all. And while we were talking to a lady from some agency, uh, psychologists, uh, the children were being examined, both of them, in the other room next door. Everything went like a well-oiled machine.

(father, substantiated victim)

Although parents generally appreciated the efforts of professionals, some of them criticized the competence of professionals. To them, the professionals came across as unprepared, seemed to have insufficient knowledge, or jumped to conclusions. Some parents reported their dissatisfaction about being confronted with a lack of knowledge about the possible consequences of the abuse like 'we don't know' or rather confronting statements about the possible consequences like 'the younger, the greater the impact'.

So they'd found a small place on his, uh, anus and, and then they all – yeah, it wasn't too subtle – there were really five adults standing around, and a picture of it had to be taken with his legs spread, and then surrounded by five adults, yunno? […] But in retrospect I think maybe "Yeah, that could have been done more aptly and more subtly and more, uh, yunno, capably or something."

(mother, substantiated victim)

(On a child that didn't want to undress for a physical examination)
Well, he was really hysterical, and you could see there were about three doctors there, and all of them thinking, "Ooh, yeah, look, that's a sexually abused child, […] this is not a normal reaction." […] Whereas he does that at the dentist's, he does it at the barber's … [there] he does that too, and probably that'll pass. I found that, like, very annoying.

(mother, substantiated victim)

(Doctors' remarks on the likelihood of abuse following a physical examination)
"Okay, we don't see anything about him, so it almost can't be the case that he was, uh, indeed, um, uh, so to speak, was really raped […] because you can tell that by looking at a baby." What can I say? It's just clear from pictures, and he [suspect] also admitted it, that it did happen. […] So obviously, uh, you don't necessarily see that, even if it happened recently.

(mother, substantiated victim)

4. Discussion

This qualitative study provides a detailed and contextual understanding of parents' experiences in the immediate aftermath following the discovery of a unique large-scale CSA case involving very young, predominantly male children. We explored parents' initial experiences, including the impact of media coverage, and their experiences regarding the actions of professionals within the service responses (provided by police, public health service, city council of Amsterdam, medical- and mental healthcare services). We discuss our results in relation to the corresponding research questions.

4.1. What were parents' experiences in the immediate aftermath of the CSA case discovery?

We identified four themes in response to the first research question: 'shock', 'uncertainty', 'roller coaster', and 'survival mode'. Our outcomes show that the CSA case discovery initiated an emotional crisis for parents that lasted between several weeks to months, during which they were in *shock*. These findings confirm that the disclosure of CSA constitutes a major life crisis that causes high levels of emotional distress in parents (Fong et al., 2017; van Toledo & Seymour, 2013). Shock is a common response following a traumatic event. However, as evidenced by the experiences of the participants, in the ASAC some factors contributing to the shock were unique: the large scale of the CSA case, the severity of the abuse, the young age of the victims, and the trust parents had put in the professional caregiver. Besides, there was so much proof of the CSA that denial, which is often an unconscious strategy of parents to avoid experiencing discomforting feelings (Lipovsky, 1991; Schonbucher, Maier, Mohler-Kuo, Schnyder, & Landolt, 2014), was nearly impossible. Our findings highlight deeper insights by showing how parents specify various reactions to the shock: feeling either emotionally overwhelmed, or emotionally numb, and/or by experiencing physical reactions. This suggests that being in shock has different meanings for different individuals, depending on their coping. That two parents in our sample initially felt bad for the suspect, before they could see him as the culprit, was unexpected. Different to what The Center for Substance Abuse Treatment (2014) describes, this does not seem to be the result of cognitive distortion that can occur in victims in response to trauma, where the behavior of the perpetrator is unjustly justified. Instead, it is probably due to the emotional connection and sense of trust they had experienced with the suspect. It seems that parents felt sorry for him out of sympathy.

The *uncertainty* parents described shows that the disclosure of CSA is to be seen as a process and not a static event. What made the situation even more uncertain in this particular case is that the young age of the victims made it impossible for parents to check with their child what had happened. On top of that, little knowledge was available about the possible long-term consequences of CSA at such a young age. Parents responded differently to the uncertainty, i.e. some responding emotionally, while others responded avoiding or trivializing, which seems to correspond to two main styles of coping with stress, described as approach and avoidance coping by Roth and Cohen (1986). While approach coping is geared toward anxiety-arousing stimuli and their consequences, avoidance coping is characterized by denial or hope, as a way to protect against the overwhelming power of the stressor. Although this has short-term benefits, because it reduces stress and helps regulate emotions (Roth & Cohen, 1986), evidence suggests that it may increase the risk of negative post-trauma outcomes (Aldwin & Yancura, 2004; Olff, Langeland, & Gersons, 2005).

Parents were caught up in a *roller coaster*, indicating that they experienced little control and that the situation overwhelmed them,

similar to the findings of Plummer and Eastin (2007a, 2007b), who reported that mothers of sexually abused children felt exhausted and helpless.

The shock and continuous uncertainty caused parents to go into *survival mode,* that is: to stay afloat to ensure the safety and well-being of their child and family. At the time of threat, survival mode is an adaptive response to enhance safety. In this specific situation, having to take care of their small children protected parents against completely breaking down from the trauma. However, it imposes several potential problems. Firstly, parents in survival mode have no room for tasks other than those needed for 'survival', meaning cognitive and emotional abilities are reduced (Brom, 2014), energy for normal parent–child activities are lessened (Plummer & Eastin, 2007a), and other everyday tasks are subordinated. Secondly, consistent with Lakey and Roman (2014) and Dyb et al. (2003), some participants indicated that they left their job to stay near to their child which put them at risk of financial problems and social isolation. Thirdly, when this survival mode persists once stressful events subside, it might result in overprotective parenting, with the risk of exacerbating children's symptoms (Ehrensaft, 1992; Hadar, Sagron, & Peleg, 2019; Plummer & Eastin, 2007a).

4.2. What impact did parents experience as a consequence of media coverage?

Regarding our second research question, we identified four themes: 'vulnerable to exposure', 'fear that the child would recognize the suspect', 'no escape possible', and 'burden versus acknowledgement'. We found many similarities in the experiences of the respondents. All of them felt overwhelmed by the amount of media coverage. We found differences in the perceived support through the media attention, and the way the media coverage served as a source of information for some parents. The latter was mainly the case for parents of unsubstantiated victims, as they had less access to information first hand.

Our findings show similarities with previous studies by (Englund, Forsberg, & Saveman, 2014; Maercker & Mehr, 2006). Their studies among victims of crime and accidents showed that media coverage was experienced as either harmful, insignificant or helpful. Parents reported they felt *vulnerable to* the *exposure* of their identity and experienced diminished control over who knew about their involvement. This had social consequences because parents felt they had to lie or open up to their direct social environment. Media attention is known to pose a threat to one's privacy (Englund et al., 2014; Jones et al., 2010). Although our respondents appreciated that the media never directly revealed the victims' identities, our data show that even reporting the name of the suspect and the name of the daycare center, increased the experienced risk of exposure. Especially in the case of CSA, children and parents are vulnerable to stigmatization when their identities are revealed, a fear that often fuels privacy concerns, and could restrain parents from reporting CSA to the police (Jones et al., 2010), a finding that is confirmed by our results.

A finding very specific to this context was that parents experienced *fear that the child would recognize the suspect* in the media broadcasts and thereby become aware of their sexual victimization. Consequently, they restricted their media consumption at home. Previous research has reported that parents protect their child from media attention (Dyb et al., 2003), yet the unusual situation that most victims were not (consciously) aware of their victimization due to their young age, added a further concern for our respondents.

Some parents felt there was *no escaping* the media attention, meaning that emotionally triggering information could confront them at any given moment. Jones et al. (2010) propose that these triggers have the potential of delaying recovery and prolonging the time of not being in control. Even so, for some parents–especially those of unsubstantiated victims–the media was their primary source of information to stay updated about the developments in the case, which helped them to make sense of everything that happened, which they experienced as positive, a finding also reported by Englund et al. (2014).

Some parents perceived the public attention as a *burden*, adding to the stress they already experienced. Other parents however, reported positive experiences with the media attention. Similar to Englund et al. (2014) and Maercker and Mehr (2006) who showed that train crash survivors and victims of crime felt seen and supported by the media, these parents also felt supported and *acknowledged* as a victim by the community due to the extensive media coverage. What might have affected parents' relationship with the media is the way reporters acted and reported about the case and whether they perceived this as respectful or burdensome. On one hand, media reporting inaccurate information or speculations are experienced negatively, while on the other hand, it is experienced positively when journalists report about- and act in a respectful manner toward victims (Maercker & Mehr, 2006).

4.3. What were parents' experiences regarding the actions of professionals within the service responses?

Concerning the third research question, we found several themes describing positive and negative experiences with professionals and the way in which the service responses were organized: 'stressful and confronting', 'need for support', 'need for information', and 'need for professional competence'. The results indicate that the disclosure of the CSA case was followed by a series of additional *stressful and confronting* situations within the investigation process, e.g. the medical evaluation, providing a photograph of their child to the police for identification, and hearing the suspect's statement about their child. Stressful events following CSA disclosure are reported in multiple studies e.g. (Dyb et al., 2003; Manion et al., 1996).

Consistent with van Toledo and Seymour (2013), parents reported a *need for support* from the professionals. Most parents felt supported by the professionals. They perceived them as empathic and accessible, felt that they were taken seriously, and that professionals were determined to pursue justice. Their relationship with the family liaison officers in particular played an important role. Parents described them as key figures to whom they could always turn for information. Lack of professional support is often attributed to interventions focusing on the investigation and the child victim, while the support needs of parents are overlooked (Davies, 1995). The service responses in the current study however, were for a large part focused on the well-being of the parents. Another factor that often complicates the level of support is the lack of evidence to substantiate CSA. This makes professionals more inclined to question the credibility of the parent, making them feel judged and unsupported (Davies, 1995; Plummer & Eastin, 2007b). In contrast, in this

case the level of evidence was overwhelming. However, a clear difference was found in the experiences of parents of unsubstantiated victims. They did not all experience support. For them, professional services felt less accessible, because of the focus on substantiated cases.

In line with Lakey and Roman (2014), parents also reported a *need for information*. They wanted to be consulted about decisions, informed about the process, policy, and possible outcomes of the CSA, and the first to be updated about new developments in the case. While most parents felt professionals provided them with regular feedback and were always available for questions, some parents, again particularly parents of unsubstantiated victims, felt uninformed and unprepared for what awaited them. Some of them felt confused about whom to contact in case of questions and preferred one main contact person.

Lastly, parents reported a *need for professional competence*. Even though some parents criticized the level of expertise, commenting on professionals lacking knowledge or jumping to conclusions, the predominant notion was that they were impressed by the actions of professionals and the thoroughness of the service responses. An explanation for our findings may be the extensive (after)care that was provided in this CSA case. Cases concerning less victims, or individual cases, generally might not receive services provided at this level.

4.4. Strengths and limitations

The use of a qualitative design provides a unique perspective on the experiences and needs of parents in the aftermath of CSA disclosure, which transcends the limitations of structured, predetermined, quantitative data collection. Few studies have focused on the impact for parents within the context of exceptionally thorough service responses, which serves as an important base to extract learned lessons from and formulate recommendations for the way service responses should be organized in similar, smaller, or individual cases of CSA. Additionally, our study looks beyond the impact of the disclosure alone, to the impact of several secondary stressors known to exasperate or reduce stress reactions; the media attention and community response, and the service responses. Finally, this study provides the rare opportunity to assess the different perspectives of parents who were all involved in the same CSA case and were all offered the same services. This provides a nuanced picture of the variety of experiences and strengthens our recommendations.

Nevertheless, we need to mention possible limitations. First, the ASAC study relied on parents' willingness to participate. The views of parents not willing to participate might have shed a different light on the subjects discussed in the interviews. Second, as part of a larger qualitative study on the long-term impact of the ASAC, parents were asked about their experiences regarding the immediate aftermath four years after the events were discovered. It is possible that their memories are subject to recall bias. Their views might have changed and evolved over the years. They might have reported different experiences when they were interviewed in the ‘heat of the moment’. An advantage however, is that the passing of time also generates more integration of what mattered, and that there is more peace and quiet to view things from a bit more distance. Moreover, the stories show that the respondents had the event still very much in mind. Indeed, the poignancy of the initial experiences made it easy to recall them. Later changes seem not to have influenced their views on what had happened; this is substantiated because we found the same experiences in people for whom much and for whom little has changed in the past years. Third, our sample was rather homogeneous, with the majority of parents having a high level of education and income. This could limit the generalizability of our results. Fourth, our research questions drove the analysis. Based on literature, different research questions could emerge resulting in new themes. However, as we reached saturation, we assume that our results are reproducible. Last, we examined the perspectives of parents. While their views have important implications, assessing the perspectives of professionals involved in the service responses at the time, may provide complementary information.

4.5. Conclusion and implications

This study indicates that the disclosure of a child's extrafamilial sexual abuse elicits shock in parents, and shows that the way individuals respond to shock varies. CSA disclosure and the events that follow can cause great uncertainty. In this case even more so because the children were too young to inquire and little was known about the possible (long-term) consequences of CSA at such a young age. In addition, parents felt they lost control over their lives. Nevertheless, taking care of their child(ren) forced them to not completely break down. The media coverage made it even harder for parents to cope, and challenged their sense of control even more. It threatened parents' privacy, and specific to this case, caused parents to fear that their child would learn they were victimized, through the media. Parents' experiences with the media seem affected by the way reporters handled the information. Most parents felt the reporters acted in a respectful manner and appreciated that they never disclosed personal information. Additionally, media coverage for some, acted as a source of support and information.

Contrary to what is often described in literature, the professional care families received after the ASAC was exceptional. On top of that, there was overwhelming evidence of the CSA. This contributed to parents experiencing more professional support than usual. Despite the extensive service responses, parents indicated very clearly what they needed and what they sometimes lacked. They expressed a need for supportive, compassionate, accessible, and competent professionals, a need for information, and a need for autonomy. Although many parents evaluated the actions of professionals positively, some parents, especially parents of unsubstantiated victims, criticized the way professionals acted. The impact of CSA disclosure needs to be seen as a process of distressing events that affect parents' sense of control. We argue that professionals should assess the emotional state of shock parents are in, be aware of the diversity of shock responses in parents, including the less obvious numbing and compassionate responses, and inform parents adequately by providing psycho-education. Emotional numbness suppresses underlying emotions as a way to protect oneself from the overwhelming impact of a stressor (Malta, Levitt, Martin, Davis, & Cloitre, 2009). Because numbing hides the actual emotions, professionals explicitly need to pay attention to parents who do not visibly react emotionally as they might be in shock regardless. In

addition, it is important that professionals identify maladaptive forms of coping with stress and uncertainty that might result in false hope or excessive anxiety and discuss ways in which parents can increase their effective coping strategies. During the time in which many actions need to be undertaken for the investigation of CSA allegations, parents are overwhelmed and rely on a survival mode, in which their normal functioning is disrupted. This makes it hard to process and retain information and affects the quality of decision-making. Professionals need to carefully consider the timing and content of informing parents about the details of CSA. There is a tension between sharing every new piece of information as soon as it appears, and waiting to tell until there is more clarity. It is important to repeat information regarding the investigative process and services and provide written and visual information in addition to oral information (van Toledo & Seymour, 2013). Professionals should also keep an eye on aspects of parents' lives that might get neglected e.g. health, occupational- and social functioning, and the household, and should foster a responsive parenting style by promoting a sense of safety. The media need to act in a way that minimizes exacerbated stress, by preventing publishing information that could lead to exposure, by publishing accurate information and restraining from sensationalism, by minimizing repetition and upsetting images, disturbing information and reporting ambiguity. They need to carefully balance the value of informing the public and protecting the welfare of the people directly involved. Psycho-education following CSA disclosure for parents should cover the possible impact of media coverage and help them decide on their personal preferences on how to limit media usage or use it as a source of information. It is important for professionals to realize that the level of support they provide, and the way services are organized greatly influence parents' experiences. Parents defined the determinants of good quality service responses as professionals acting supportive, compassionate, and accessible, having sufficient knowledge, providing timely and accurate information, and respecting and promoting their autonomy. Parents need to be the first to be informed about new developments in the case, while being sensitive to the timing of sharing information. Parents should preferably be provided with one main contact. Professionals should carefully consider that their actions might inadvertently lead to stressful situations for parents in the aftermath of CSA disclosure, including the police investigation, and the medical and psychological evaluation, and address these situations. We recommend that services be provided to parents in addition to children, at an early stage post CSA disclosure. Given that the adjustment of children after CSA is related to the psychological well-being of the parents and the level of parental support (Domhardt, Münzer, Fegert, & Goldbeck, 2015), we emphasize the importance of offering mental health support to parents after such traumatic events. Our results show that especially parents of unsubstantiated victims experience more permanent uncertainty, less professional support, and less access to information. We argue that regardless of the level of evidence, substantiated and unsubstantiated cases deserve the same services and the same supportive approach by professionals, meaning that professionals working with unsubstantiated cases inform families about the possible lasting uncertainty and what they can expect, and are aware that these families experience the same difficulties as substantiated cases.

Ultimately, these outcomes may inform policy makers or government agencies to find better ways to support parents in the aftermath of CSA disclosure, and mitigate short- and long-term negative outcomes.

Declaration of competing interest

None.

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