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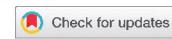


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Reactions to and Impact of Survivor Online Disclosures: A Qualitative Analysis

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ABSTRACT

Social reactions to disclosure of sexual victimization play an important role in the process of recovery. The purpose of this qualitative study was to explore the impact of online disclosure of sexual victimization. The sample for this qualitative study ($n = 17$) focused on participants who shared their experiences with disclosing about their sexual victimization online and the reactions received in these spaces. Using applied thematic analysis, the research team identified three major themes from the data, each with respective subthemes, including helpful, harmful, and mixed reactions to online disclosure. Findings highlighted the nuances of disclosing online and the diverse reactions that were received. Participants provided in-depth descriptions of not only how the disclosure experience and resulting reactions could be helpful or harmful but also nuanced, mixed, and simultaneously harmful and helpful. This data is a crucial reminder that survivors' stories are unique and that survivors experience many varying motivations for choosing if, when, where, to whom, or for whom they may disclose. The findings may help inform clinical recommendations for mental health practitioners working with survivors of sexual victimization and holding therapeutic space to process these decisions of disclosure. Future researchers should also consider further studying online interactions, especially within and between survivors, including when and how survivors choose to connect or disconnect.

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Sexual victimization is a pervasive public health problem in the United States (Bach et al., 2021; Fedina et al., 2018). Sexual victimization is defined as "a sexual act that is committed or attempted by another person without freely given consent of the person or against someone who is unable to consent or refuse" (Basile et al., 2014, p. 11), and includes acts of unwanted sexual contact, sexual coercion, attempted rape, and rape. Approximately one in three women, one in six men, and half of transgender individuals report

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experiencing some form of rape, sexual coercion, or unwanted sexual contact in their lifetime (James et al., 2016; Leemis et al., 2022; Smith et al., 2017). The impact of sexual victimization is far-reaching and includes both acute and persistent problems related to physical, behavioral, and psychological health and well-being. Immediate concerns include physical injuries, social isolation, and intense feelings of fear, shame, and sadness (Amstadter & Vernon, 2008; Gutner et al., 2006; Hackman et al., 2022; Rothman et al., 2019; Sugar et al., 2004). Longer-term problems may include increased substance use, risky sexual behavior, depression, anxiety, post-traumatic stress disorder (PTSD), and increased suicidality (Carey et al., 2018; Dworkin et al., 2017; Kaysen et al., 2006; Kilpatrick et al., 2013; Turchik & Hassija, 2014). The lifetime cost of rape is \$122,461 per survivor when accounting for medical bills, lost productivity at work, and criminal justice costs (Peterson et al., 2017). Given the cost of sexual victimization to individuals, and society at large, research that examines the process of recovery following sexual victimization is an important component to understanding how best to support survivors in their recovery.

How others respond to disclosure of sexual victimization plays a crucial role in the recovery process (Ahrens & Campbell, 2000; Ullman et al., 2007). Although formally reporting sexual victimization experiences to law enforcement or another formal source is relatively uncommon (Holland & Cortina, 2017; Orchowski & Gidycz, 2012), many survivors do disclose the experience to someone that they know; most commonly a friend (Fisher et al., 2003; Orchowski & Gidycz, 2012; Orchowski et al., 2009; Ullman, 2010). Responses to sexual assault disclosures can generally be understood as positive or negative (Ullman, 2010). Positive reactions may include sharing tangible support or resources with the survivor, such as advice and information, as well as responses characterized by empathy or kindness, such as listening to and believing the survivor (Ahrens et al., 2007; Davis et al., 1991; Ullman, 1996; Ullman, 2023). Conversely, negative reactions include any responses that serve to blame, shame, distract, or control the survivor's decision-making; other negative reactions involve displaying so much anger or distress that the survivor is unable to attend to their own needs (Ullman, 2000, 2010). How others react to disclosure of sexual victimization can impact the process of recovery for survivors (Dworkin et al., 2019; Edwards et al., 2015).

Prior research suggests that the perception of responses received, or their personal impacts may also be an important avenue of inquiry (e.g., Ahrens and Aldana, 2012). The personal impact of responses received upon disclosure includes perceiving the response as helpful or harmful (Dworkin et al., 2018; Lorenz et al., 2018). Additionally, qualitative research suggests that some survivors perceive social reactions classified by researchers as "negative" in nature (e.g., distraction) to be somewhat helpful and similarly some survivors perceive some social reactions classified by researchers as "positive" (e.g., receiving tangible aid) to be somewhat harmful (Ahrens & Aldana, 2012;

Dworkin et al., 2018; Lorenz & Ullman, 2016). Given the mismatch between perceptions and nature of responses received, it is important to investigate both.

Given the proliferation of social media and other online opportunities for discussion and community interaction, there is an urgent need to investigate the way in which individuals discuss their own experiences of sexual victimization online, as well as the types of online social reactions that are provided in response to online disclosure of sexual victimization (e.g., Bhuptani et al., 2023; Bogen & Ullman, 2001). Investigating what constitutes helpful versus harmful online social reactions to disclosure of sexual victimization may be particularly worthwhile, given the proliferation of online discussion of sexual victimization following the #MeToo Movement. Specifically, in 2017, the “#MeToo movement” emerged as a significant platform for survivors to disclose their experiences of sexual assault online. Given the #MeToo movement was one of the first and largest movements (McDonald, 2019), the current inquiry focused on disclosures via #MeToo. The movement provided a global platform for survivors to share their stories, raise awareness, and promote solidarity. Despite the movement’s widespread influence, research examining social reactions to online disclosure of sexual victimization is still in its infancy. Particularly lacking are qualitative studies, which offer a more in-depth exploration of the emotional, social, and psychological dimensions of online disclosure than might be accomplished via survey methods. Qualitative methods can capture complex narratives and diverse responses that quantitative approaches lack, providing rich, detailed insights into the benefits and challenges associated with online disclosure of sexual victimization.

Purpose of the current study

Accordingly, the current study aims to fill gaps in the current literature addressing online disclosure of sexual victimization by employing an exploratory qualitative approach to investigate the reactions to and impact of online disclosure of sexual victimization using the social media hashtag #MeToo. Specifically, we sought to explore the following questions:

- How might survivors describe reactions to their online disclosure of sexual victimization?
- How might survivors describe the personal impact of disclosing their stories online?

Method

Participants

Participants were recruited via social media to participate in an online study investigating the disclosure of unwanted sexual experiences. To enroll in the

study, participants needed to endorse that they were over the age of 18 and had experienced sexual victimization from the age of 14 to the time of the current study. To ensure that the sample consisted of survivors of sexual victimization from the age of 14 to the time of the current study, participants completed the Sexual Experiences Survey – Short-Form Victimization (Koss & Gidycz, 1985). The SES-SFV has been proven to be a valid and reliable measure of sexual victimization in a variety of different populations and is one of the most used measures in sexual victimization research (Canan et al., 2020; Johnson et al., 2017). All participants were asked at the end of the survey if they wanted to participate in an interview. Of the total sample ($N = 767$), 6.64% ($n = 51$) were interviewed regarding their disclosures of sexual victimization and 33.33% ($n = 17$) indicated they had disclosed their experiences of sexual assault online via #MeToo, which was our final analytic sample for the current study.

Of the 17 participants in the final analytic sample, 41.17% ($n = 7$) of the participants were between the age of 20–30; 47.05% ($n = 8$) of the participants were between the age of 31 and 40, and 11.76% ($n = 2$) of the participants were between the age of 41–50. Most participants identified as cisgender female (82.35%, $n = 14$), whereas 5.88% ($n = 1$) of the participants identified as non-binary, 5.88% ($n = 1$) as transgender male, and 5.88% ($n = 1$) as two-spirit. Nearly one-third (35.29%; $n = 6$) of the participants identified as heterosexual, 35.29% ($n = 6$) as bisexual, 5.88% ($n = 1$) as pansexual, 5.88% ($n = 1$) as queer, and three did not report their sexual orientation. In terms of race, 17.64% ($n = 3$) of the participants identified as Native American, 5.88% ($n = 1$) as Biracial, and 70.59% ($n = 12$) identified as white; one participant did not report their race.

Procedures

All procedures were approved by the Institutional Review Board. Participants were recruited throughout the U.S. using advertisements on social media platforms including Facebook, Instagram, and Twitter. Consent was obtained from the participants prior to gaining access to the survey materials, and a \$10 Amazon gift card was provided upon survey completion as compensation. At the end of the survey, participants were asked to indicate if they were interested in participating in an interview, and interested participants were contacted by the research team where they were informed of the study goals and e-consent was obtained. The study was conducted from February 2020 to February 2022.

Interviews were conducted via phone in a private location for 60 minutes by clinical psychology graduate students who had prior experience conducting qualitative interviews. The grounded theory approach was used to guide the phone interviews. Demographics were collected at the beginning of the interview. A semi-structured interview guide was

designed to elicit 1) online and in-person disclosure processes, 2) reactions received upon disclosure of sexual victimization, and 3) perception of disclosure reactions. Examples of questions included, "Can you tell me about how you would define unwanted sexual contact? Have you shared this experience with anybody on or outside of social media?, How did people react when you talked about your experience? How did these reactions make you feel?." Interviews were audio recorded and transcribed verbatim. Participants were compensated with \$30 for completing the qualitative interview.

Data analysis

A team of analysts (PHB, RK, LM, RP, and MCD) conducted applied thematic analysis (Guest et al., 2012) of the data. First, the interview agenda (deductive) and emergent topics raised by participants (inductive) were used to develop a coding structure. Two coders independently coded each transcript and then entered agreed-on codes into NVivo qualitative data software (QSR International). To further strengthen the trustworthiness of the data, the coding team met regularly to discuss codes, clarify definitions, come to concordance agreement, and compare the final application of codes to the data. Codes associated with the current study questions were reviewed, summarized, and interpreted (MCD and PHB) through further multiple readings of the codes and data. Illustrative quotes were identified for presentation in the below results.

Results

Three major themes and subthemes emerged from analyzing the data: 1) Helpful reactions to online disclosure; 2) Harmful reactions to online disclosure; 3) Mixed reactions to and impact of online disclosure. Each of the three major themes, along with their subthemes, is presented below. Exemplary quotes from participants are provided to further demonstrate each theme.

Theme 1: helpful reactions to online disclosure

Participants discussed what reactions to their online disclosure were helpful, such as responses that increased their confidence, sense of power or control, and self-esteem. Participants shared that disclosure online helped them feel supported, heard, believed, loved, understood, and increased feelings of personal safety. Within this major theme, two subthemes were identified 1) survivor support and solidarity and 2) clarity of experience.

Subtheme 1.1: survivor support and solidarity

This theme included participants' descriptions of receiving emotional support through reactions to their online disclosure, such as in the form of individuals sharing that they believed the participant, that they were not to blame for what happened, and other survivors reached out in solidarity. For example, one participant shared, "I saw other people sharing their support, hey, if you need to talk, I'm here, sending hugs, and just letting people know they were supported. I saw a majority of that." Participants described reactions of being reassured that they did nothing wrong, that they were there for them, wanted to listen to them, and apologized that this was their experience. A participant said, "I was really just floored to tears really about the fact that everyone was so supportive." Another shared, "I had some people like message me privately and like check in with me Who say like, "I just want you to know that I'm always here for you." For many participants, receiving these supportive reactions was incredibly helpful and validating to their experience.

Subtheme 1.2: clarity of experience

In describing helpful reactions to their online disclosure, participants also reflected on responses that helped provide clarity of their sexual victimization experience, including clarity in their choice of disclosing online. Some participants shared it was through the process of disclosing online that they learned what had happened was a sexual assault or realizing other experiences should also be labeled as an assault. A participant reflected, "I think, like, some experiences I didn't even realize were like nonconsensual or even like could be rape, so like the first experiences where it happened to me like I was talking to friends and learned about consent." Another participant said, "I didn't put two and two together until people said, "Hey, you remember that other experience that you told me about, that also counts." For some participants, clarity also came in the choice of disclosing their experience online and feeling affirmed in this decision. One said, "it was an enlightening experience in a sense that I had that extra clarity because of #metoo." Another said,

I'm still glad that I shared, and I sincerely believe that was the right thing to do. Um, it definitely helped empower a couple people and that means that world to me because I know that that's passing on the torch and that's exactly why I started doing this.

Although disclosing their sexual victimization was not necessarily an easy choice or process, participants still frequently noted that the process of disclosing was overall helpful in clarifying and putting words to their experience.

Theme 2: harmful reactions to online disclosure

Although participants described many instances of helpful and empowering reactions to disclosing online, they also shared reactions that were harmful.

Participants shared that they received responses and reactions that led to feelings of shame, guilt, fear, exposure, isolation, sadness, and invalidation or minimization. Within this major theme, two subthemes were identified 1) victim blame and burden of proof and 2) focusing and comforting others.

Subtheme 2.1: victim blame and burden of proof

This subtheme includes participants' reports of their disclosure recipient(s) either partially or fully holding them responsible for the assault or, overall, not believing them. Participants received comments that they should or could have done more to prevent this experience from occurring, that they were irresponsible or not cautious enough, and that they were to blame because of this experience. For example, one participant said,

And I know, like one person didn't react very well. They just like, were kind of like going off and like saying that that kind of stuff like doesn't really happen and that this was all like basically, like every like, I don't remember the exact wording, but it was like saying that like this, that like this fake bond like that women are trying to build for like the #MeToo movement was just like student. When it's like, "Oh, this wasn't fake. I wasn't lying."

Several participants shared not only receiving blame when disclosing online but also reactions that felt like the burden of proving what had happened fell solely on them instead of their perpetrator or receiving mixed messages, or unsolicited messages, of what to do or not do. In these instances, a few participants shared the weight and harm of proving that that they were a victim even in online spaces with other survivors. One participant shared,

I had to go to a victims' class to prove I was a fit mother. My attacker did not have to go to any classes, but I did, as a victim, to prove that I was not a crazy person . . . and then the anonymity of an online support group was just like there were some people that would get on and just be like "if you haven't turned your abuser in then I blame you for my rape" and things like that, like they would just go like bananas.

This response highlights how participants had to navigate not only the trauma and harm following their sexual victimization but also the weight of how to make sense of, respond to, or "prove" themselves to others continuously in the disclosure process. Although many participants noted feelings of victim blame, a couple participants, like in the above quote, more significantly noted the burden of proof than others.

Subtheme 2.2.: focusing on and comforting others

As participants shared harmful reactions to their online disclosures, a second subtheme emerged that highlighted some instances of receiving extreme reactions to the assault disclosure. For example, after disclosing their experience, several recipients would express so much anger or grief that the participant felt

like they were the one comforting, calming, or focusing on the recipient. In others, the act of disclosing focused on the recipient's reaction instead of the survivor's story and healing. One participant described disclosing online anonymously and not expecting her mother to find out. She said,

And I didn't really think about the fact that it would get back to her. Like that she would bring it up with me. I hadn't considered that possibility. But she was like, that was a really hard experience for her to like call me and like, like, interrogate me why I didn't tell her. And like, she was like, "Who did this to you?" Like, "How am I supposed to protect you?" Like, "Why didn't you tell me?" like, "How can, what can I do to help you?" And I was like, "Mom, it's like happened a few years ago now. I didn't want to share with you because I didn't think it would be helpful.

Other participants similarly shared that they disclosed to bring awareness or have open dialogs, but that they were not expecting to navigate the heaviness of everyone's comments, even the supportive ones. A participant summarized, "I think that's more of a me thing, that's my inclination to go comfort them, and like I probably had no obligation to, you know?" For a few of the participants that received responses like this, there was often an added layer of confusion, and at times surprise, felt in making sense of this focus shifting from their experience to what the recipient felt.

Theme 3: mixed reactions and feelings to online disclosure

Even though participants described reactions that were either explicitly helpful or harmful in sharing their story online, they also shared mixed reactions and feelings. Many participants shared the nuances, complexities, and the challenges of navigating online disclosures, including managing their own expectations, receiving no response, feelings of ambivalence, and holding the overall paradox of disclosure as being helpful, harmful, and complicated all at the same time. The three subthemes of this theme include ambivalence or no impact after online disclosure, online disclosure as both freeing and complicated, and navigating the context of social media.

Subtheme 3.1: ambivalence or no impact after online disclosure

This subtheme included participants' reports of reactions that were neutral, ambivalent, or no significant impact was noticed to disclosing their story online. One participant summarized this theme in sharing,

I think after I pressed send it was like I felt ambivalent. Like I wonder if I'm gonna get bullied or somebody's gonna do something weird. Because I obviously, the internet, I'm aware that that can happen . . . there [responses] weren't many . . . I didn't have many followers anyway. You know, I was never really all that active. But it was just like populating the hashtag, populating the hashtag. Like just keep it going and make sure that it's unignorable.

For some participants, overall responses received were generally supportive, but the amount or extent was not as significant as they had initially thought or expected. Consequently, through their responses, participants noted general feelings of no impact, neutrality, or ambivalence.

Subtheme 3.2: online disclosure as both freeing and complicated

Unlike the feelings of ambivalence noted in the subtheme above, participants shared explicit reflections of how disclosure could both be freeing and, yet, very complicated. On the one hand, many participants shared a general relief and sense of freedom in disclosing, sometimes for the first time, their experience online. One participant said, "I was kind of nervous to see what kind of response I would get, but in the moment kind of a relief to share what I had been through and kind of get that off my chest then." Yet, in the same vein, other participants named the complexities of disclosing their experiences online and navigating the reactions they received. A participant said, "It was freeing. But I felt very exposed. And the sense of liberation didn't last as long as the sense of exposure did." Or, another said, "It was a really complicated emotional experience after I shared it. In one way I felt kind of relieved and a little bit lighter." On the one hand, disclosing felt freeing, yet, navigating whether individuals chose to respond, ignore, and how they reacted, made the experience complicated. Another participant reflected these nuances in saying,

I would say both, you know it depends on the reaction but I think the reactions where somebody looked away with shame or guilt or just kinda pretend I didn't say it or actively used the information to hurt me later, those were extraordinarily harmful experiences . . . it's definitely been a mixed bag of sharing that information and that does make me vulnerable.

Taken together, participants demonstrated throughout this theme the process of disclosing and receiving reactions enveloped paradoxical feelings at times of freedom and vulnerability.

Subtheme 3.3: navigating the varied context of social media

Throughout their reflections of disclosing their experiences online, participants described various elements unique to navigating the context of social media through this experience. For example, participants shared how certain individuals shared resources online, engaged with social media processes in response (e.g., retweeted your #MeToo tweet, shared tweets with others online), or the unique ways that social media provides engagement opportunities (e.g., liked your #MeToo tweet[s], shared own experience online in response [in comments or direct messaging]). Others shared the contexts of when disclosures or reactions were anonymous, within friend or acquaintance groups, among strangers, or online support groups. Likewise, a few participants noted how it was interesting when certain people would respond online

but not in-person. Still, many participants stood by their decision to disclose online, even with navigating both harmful and helpful reactions or the general uncertainty and fear of how their stories would be perceived. A participant reflected,

I know that I did something that needed to be done and I know that, I always put it that I have to make it through this because then that means that the bad guys didn't win. And every single time someone is helped or they, the bad guys are just exposed for who they are. Whether there's comments, responses, feedback or anything like that doesn't matter. The world knows what they are and that's winning against them.

In navigating the context of social media, participants shared their persistence and sense of agency to put forth their story, even in uncertain social media spaces, for themselves, for other survivors, to educate their community, and to hold perpetrators and society accountable.

Discussion

The purpose of this study was to explore how survivors of sexual victimization disclosed their experiences online, specifically via the #MeToo hashtag. We analyzed posts on social media to determine how survivors might describe the reactions received to their online disclosure, and what the impact of disclosing online was like for them. As more survivors use the platforms of social media to disclose their experiences, research is needed to understand how survivors receive social reactions, what reactions may feel helpful or harmful, and how the experience of disclosing online is for their overall personal well-being. As a result, the research questions that we explored in this study were, "How might survivors describe reactions to their online disclosure of sexual victimization?" and "How might survivors describe the personal impact of disclosing their stories online?" Insights gained from this study may guide future research examining online disclosures of sexual victimization on social media platforms. Findings also have the potential to inform practical implications for support networks – both in-person and online – as well as clinical practice.

The primary findings of this study indicate survivors received social reactions that were helpful, harmful, and reactions that were complicated and nuanced within the context of social media. In the first theme of helpful reactions to disclosure, two subthemes were identified as survivor support and solidarity and clarity of the experience. Previous scholars have demonstrated the importance of positive, affirming, and validating reactions that help the survivor mitigate potential feelings of self-blame, guilt, or shame (Bhuptani et al., 2023; Bogen et al., 2019; Orchowski & Gidycz, 2015; Orchowski et al., 2013). Similarly, studies have shown how important it can be for survivors to feel a sense of solidarity, including with other survivors, in sharing their stories and feeling like their disclosure is contributing to a broader societal

consciousness-raising (Alaggia & Wang, 2020; Demers et al., 2017; Driessen, 2023). Finally, researchers have also found that the process of disclosing one's story can also be powerful in helping to clarify, define, or label a sexual victimization experience (Bogen et al., 2019; PettyJohn et al., 2022). As participants in this study shared, it was sometimes through engaging with others in the online setting that they learned more about what sexual victimization is and, thus, learned new insights about their own lived experiences. When working with survivors, mental health practitioners may discover the role that social media may play as a form of psychoeducation and meaning-making in the recovery journey.

The second theme, which focused on participants' descriptions of harmful reactions to their online disclosure, included two subthemes of victim blame and burden of proof and, second, focusing on and comforting others. Researchers, who have studied both in-person and online disclosures, have continued to reiterate the harm that victim-blaming has for survivors' healing and well-being (Ahrens, 2006; Bhuptani et al., 2023; Driessen, 2023; Ullman, 2010). Too frequently, survivors have shared about the weight of navigating rape myths, guilt, shame, blame, and feeling like the responsibility of sharing their experience or navigating post-assault life is placed squarely on their shoulders instead of the perpetrator or the broader community (Ahrens, 2006; Ahrens et al., 2009; Driessen, 2023). Participants also highlighted that even responses that are intended to be helpful can quickly become unhelpful, particularly when the focus shifts from the survivor's experience to comforting the individual reacting to the disclosure. Participants described emotional reactions from family members and friends who were not supportive of the survivor but instead shifted the burden once again to the survivor to now comfort their audience. Although it is understandable that responses to disclosures will vary and that this may also be an individual's first-time hearing about a loved one's experience of sexual victimization, more research is needed to continue to help train, educate, and support, particularly loved ones, on how to appropriately respond in helpful ways that do not involve the survivor needing to comfort or manage them (Ahrens & Campbell, 2000; Alaggia & Wang, 2020; PettyJohn et al., 2022; Ullman, 2010). Mental health practitioners may find themselves in therapeutic spaces where they have to hold space to process the nuances of online disclosure and how these spaces impact survivor well-being, including choices of how to navigate, respond, or dis-engage through boundaries.

The third theme identified the mixed reactions and feelings that participants described. The three subthemes of this theme included ambivalence or no impact to disclosure, online disclosure as both freeing and complicated, and navigating the context of social media. This theme highlighted the nuances and paradox of the disclosure experience for participants. Although participants explicitly described helpful and harmful reactions to their disclosure,

they also described that the process of disclosing and engaging with social media through this process was a “both and” experience. Previous researchers have found even when survivors receive positive or supportive responses, the effect tends to be minimal on their well-being (Dworkin et al., 2019). Yet, researchers continue to demonstrate the extent to which survivors consistently receive victim-blaming messages that are harmful (Bogen et al., 2019). The findings from this study highlighted participants’ descriptions of this paradox that responses are both helpful and harmful, and that the meaning-making of what is harmful or helpful is also unique to that survivor. Overall, participants felt confident in their decision to share their story and that it was meaningful both individually and collectively for alleviating and responding to sexual victimization. The initial process of disclosure also felt embodied, as participants described feeling free and “getting it off of your chest,” meaning a physical release in sharing their story. Still, the initial disclosure was followed by feelings of vulnerability, ambivalence, neutrality, and complex emotions.

Similarly, participants shared about the nuances of disclosing online, including having to adjust their own expectations. For example, participants described moments of surprise or confusion when they received comments or were ignored, witnessing the frequency or number of interactive tools in response to their disclosure (likes, dislikes, resharing, retweeting, etc.), and the varying types of responses from survivors, friends, family, acquaintances, strangers, or individuals who were anonymous. Besides navigating the digital domain of disclosing online, participants also shared their feelings of not necessarily wanting to connect with other survivors. Participants described that once they disclosed, they would occasionally hear from other survivors. Although at times this was helpful in offering support, solidarity, or encouragement, it was also a complex and challenging experience to navigate. Participants shared that they did not necessarily want to hear or learn about other traumatic experiences. This data is a crucial reminder that survivors’ stories are unique, that there is value in the process of disclosing for the sake of disclosing and breaking the silence, and that navigating, holding, or feeling pressured to respond or join with other survivors is an individual choice. Future researchers should consider further studying these online interactions, especially within and between survivors, and when and how survivors choose to connect or disconnect.

The present study can also help inform clinical recommendations for mental health practitioners working with survivors of sexual victimization, especially within the social media context (Bogen & Ullman, 2001; PettyJohn et al., 2022). When working with survivors, clinicians need to not only remember the varying outcomes survivors may experience when disclosing online but also how to support survivors in deciding how to respond to the unique reactions and audiences that exist in online spaces. As this study demonstrated, these reactions can range from helpful to unhelpful, as well as bring up feelings of ambivalence,

neutrality, mixed emotions, and feelings that highlight the paradox of disclosure being all at once both helpful and unhelpful. Clinicians need to be able to hold this complex space with survivors, explore their social media engagement, reasons for disclosure, disclosure experiences with different audiences, and how the therapeutic process may help survivors navigate the responses that they may receive and how they may choose to respond or not (Bogen & Ullman, 2001; PettyJohn et al., 2022). Survivors may also request support navigating digital boundaries and digital well-being. Although social media in this study was used as a platform to share, the platform itself may at times both be a helpful and harmful intervention within the recovery journey. Mental health practitioners need to continue to learn about how survivors experience social media and when social media plays a healing role or becomes harmful. Finally, as previous researchers have begun to identify, even witnessing negative reactions to other survivors in online spaces can be distressing for survivors (PettyJohn et al., 2022).

Limitations

It is important to note several limitations. First, survivors were included in the study if they disclosed online via #MeToo movement. However, the #MeToo movement has been criticized for almost exclusively focusing on white, heteronormative experiences of sexual victimization (Ison, 2019; Kagal et al., 2019). Similarly, the type of sexual victimization disclosure was not analyzed as part of this study but should be considered in future research. Thus, future studies examining reactions to online disclosure should focus on other movements, such as #UsToo, that may capture disclosures of survivors with marginalized identities and explore multiple social media sites to increase sample size and generalizability. Second, the data collection included participants who had disclosed online and disclosed in-person, along with individuals who disclosed only in-person. However, the sample did not include participants who only disclosed online but not in-person. The research team speculated that this may have been due in part to a sampling bias of participants who self-selected to participate in discussing their experience via telephone. Finally, data for this study did not include an in-depth analysis of interactions online between survivors and responders. For instance, data collection did not include how responders tweeted back, provided their perspectives via comments, or likes/dislikes. However, the research team made this intentional decision to study in-depth what was helpful versus not from the survivor's perspective. Still, future researchers should consider extending their data collection to include other online interactions from various stakeholders to provide a more comprehensive picture of online disclosures of sexual victimization.

Conclusion

The purpose of this study was to explore how survivors perceived the reactions they received online when they disclosed their sexual victimization. Participants described reactions as helpful, harmful, and, perhaps most importantly, complicated, nuanced, mixed, and unique to the survivor. The findings support previous calls from researchers to examine the varying perceptions of reactions from survivors, particularly through qualitative analysis (Bhuptani et al., 2023; Campbell et al., 2001). As research continues to demonstrate, the disclosure process for survivors, including in online spaces, remains critical to their healing journey. Future researchers, clinicians, family, and friends may learn from these findings in strengthening their support and response efforts for survivors. As more survivors use social media platforms to disclose their experiences of sexual victimization, research is needed to understand how survivors receive social reactions online, what types of reactions may be helpful or harmful, and how the experience of disclosing online impacts survivors' overall well-being. Reactions of survivors' disclosures can aid in facilitating processing through clinical treatment. Similarly, survivors may explore in the therapeutic process strategies for how to navigate these decisions and social media spaces for sharing their story, responding to disclosure recipients, and potentially choosing to engage in solidarity efforts with other survivors and communities. Each of these choices is unique to the survivor and may have a myriad of different outcomes. Clinicians particularly play a crucial role in processing these choices and engagement efforts with survivors.

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Ethical standards and informed consent

All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation [institutional and national] and with the Helsinki Declaration of 1975, as revised in 2000. Informed consent was obtained from all patients for being included in the study.

References

Ahrens, C. E. (2006). Being silenced: The impact of negative social reactions on the disclosure of rape. *American Journal of Community Psychology*, 38(3–4), 31–34. <https://doi.org/10.1007/s10464-006-9069-9>

Ahrens, C. E., & Aldana, E. (2012). The ties that bind: Understanding the impact of sexual assault disclosure on survivors' relationships with friends, family, and partners. *Journal of Trauma & Dissociation*, 13(2), 226–243.

Ahrens, C. E., Cabral, G., & Abeling, S. (2009). Healing or hurtful: Sexual assault survivors' interpretations of social reactions from support providers. *Psychology of Women Quarterly*, 33, 81–94. <https://doi.org/10.1111/j.1471-6402.2008.01476.x>

Ahrens, C. E., & Campbell, R. M. (2000). Assisting rape victims as they recover from rape: The impact on friends. *Journal of Interpersonal Violence*, 15(9), 959–986. <https://doi.org/10.1177/088626000015009004>

Ahrens, C. E., Campbell, R., Ternier-Thames, N. K., Wasco, S. M., & Sefl, T. (2007). Deciding whom to tell: Expectations and outcomes of rape survivors' first disclosures. *Psychology of Women Quarterly*, 31(1), 38–49.

Alaggio, R., & Wang, S. (2020). "I never told anyone until the #metoo movement": What can we learn from sexual abuse and sexual assault disclosures made through social media? *Child Abuse and Neglect*, 103, 1–10. <https://doi.org/10.1016/j.chab.2019.104312>

Amstadter, A. B., & Vernon, L. L. (2008). Emotional reactions during and after trauma: A comparison of trauma types. *Journal of Aggression, Maltreatment, & Trauma*, 16(4), 391–408. <https://doi.org/10.1038/jid.2014.371>

Bach, M. H., Beck Hansen, N., Ahrens, C., Nielsen, C. R., Walshe, C., & Hansen, M. (2021). Underserved survivors of sexual assault: A systematic scoping review. *European Journal of Psychotraumatology*, 12(1), 1895516. <https://doi.org/10.1080/20008198.2021.1895516>

Basile, K. C., Smith, S. G., Breiding, M. J., Black, M. C., & Mahendra, R. R. (2014). *Sexual violence surveillance: Uniform definitions and recommended data elements*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Bhuptani, P. H., Lopez, G., Peterson, R., & Orchowski, L. M. (2023). Online social reactions to disclosure of sexual victimization via #metoo and symptoms of post-traumatic stress

disorder. *Journal of Interpersonal Violence*, 38(19–20), 1–20. <https://doi.org/10.1177/08862605231176792>

Bogen, K. W., Bleiweiss, K., & Orchowski, L. M. (2019). Sexual violence is #notokay: Social reactions to disclosures of sexual victimization on twitter. *Psychology of Violence*, 9(1), 127–137. <https://doi.org/10.1037/vio0000192>

Bogen, K. W., Orchowski, L. M., & Ullman, S. E. (2001). Online disclosure of sexual victimization and social reactions: What do we know? *Women & Therapy*, 44(3–4), 358–373 doi:10.1080/02703149.2021.1961448.

Campbell, R., Ahrens, C. E., Seifl, T., Wasco, S. M., & Barnes, H. E. (2001). Social reactions to rape victims: Healing and hurtful effects on psychological and physical health outcomes. *Violence & Victims*, 16(3), 287–302. <https://doi.org/10.1891/0886-6708.16.3.287>

Canan, S. N., Jozkowski, K. N., Wiersma-Mosley, J., Blunt-Vinti, H., & Bradley, M. (2020). Validation of the sexual experience survey-short form revised using lesbian, bisexual, and heterosexual women's narratives of sexual violence. *Archives of Sexual Behavior*, 49(3), 1067–1083. <https://doi.org/10.1007/s10508-019-01543-7>

Carey, K. B., Norris, A. L., Durney, S. E., Shepardson, R. L., & Carey, M. P. (2018). Mental health consequences of sexual assault among first-year college women. *Journal of American College Health*, 66(6), 480–486. <https://doi.org/10.1080/07448481.2018.1431915>

Davis, R. C., Birckman, R., & Baker, T. (1991). Supportive and unsupportive responses of others to rape victims: Effects on concurrent adjustment. *American Journal of Community Psychology*, 19, 443–451. <https://doi.org/10.1007/BF00938035>

Demers, J. M., Roberts, A. P., Bennett, S., & Banyard, V. L. (2017). Victim motivations for disclosing unwanted sexual experiences and partner abuse. *Affilia*, 32(3), 327–343. <https://doi.org/10.1177/0886109917704936>

Driessen, M. C. (2023). Student stories of resilience after campus sexual assault. *Qualitative Social Work*, 1(2), 1–16. <https://doi.org/10.31274/jctp.12949>

Dworkin, E. R., Brill, C. D., & Ullman, S. E. (2019). Social reactions to disclosure of interpersonal violence and psychopathology: A systematic review and meta-analysis. *Clinical Psychology Review*, 72, 101750. <https://doi.org/10.1016/j.cpr.2019.101750>

Dworkin, E. R., Menon, S. V., Bystrynski, J., & Allen, N. E. (2017). Sexual assault victimization and psychopathology: A review and meta-analysis. *Clinical Psychology Review*, 56, 65–81. <https://doi.org/10.1016/j.cpr.2017.06.002>

Dworkin, E. R., Newton, E., & Allen, N. E. (2018). Seeing roses in the thorn bush: Sexual assault survivors' perceptions of social reactions. *Psychology of Violence*, 8(1), 100.

Edwards, K. M., Dardis, C. M., Sylaska, K. M., & Gidycz, C. A. (2015). Informal social reactions to college women's disclosure of intimate partner violence: Associations with psychological and relational variables. *Journal of Interpersonal Violence*, 30(1), 25–44.

Fedina, L., Holmes, J. L., & Backes, B. L. (2018). Campus sexual assault: A systematic review of prevalence research from 2000 – 2015. *Trauma, Violence & Abuse*, 19(1), 76–93. <https://doi.org/10.1177/1524838016631129>

Fisher, B. S., Daigle, L. E., Cullen, F. T., & Turner, M. G. (2003). Reporting sexual victimization to the police and others: Results from a national-level study of college women. *Criminal Justice & Behavior*, 30(1), 6–38. <https://doi.org/10.1177/0093854802239161>

Guest, G., MacQueen, K. M., & Namey, E. E. (2012). *Applied thematic analysis*. Sage.

Gutner, C. A., Rizvi, S., Monson, C. M., & Resick, P. A. (2006). Changes in coping strategies, relationship to the perpetrator, and posttraumatic distress in female crime victims. *Journal of Traumatic Stress*, 19(6), 813–823. <https://doi.org/10.1002/jts.20158>

Hackman, C. L., Bettergarcia, J. N., Wedell, E., & Simmons, A. (2022). Qualitative exploration of perceptions of sexual assault and associated consequences among LGBTQ+ college

students. *Psychology of Sexual Orientation and Gender Diversity*, 9(1), 81. <https://doi.org/10.1037/sgd0000457>

Holland, K. J., & Cortina, L. M. (2017). "It happens to girls all the time": Examining sexual assault survivors' reasons for not using campus supports. *American Journal of Community Psychology*, 59(1–2), 50–64. <https://doi.org/10.1002/ajcp.12126>

Ison, J. (2019). It's not just men and women': LGBTQIA people and #metoo. In B. Fileborn & R. Loney-Howes (Eds.), *#MeToo and the politics of social change*. Palgrave Macmillan. https://doi.org/10.1007/978-3-030-15213-0_10

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The report of the 2015 U.S. Transgender survey*. National Center for Transgender Equality.

Johnson, S. M., Murphy, M. J., & Gidycz, C. A. (2017). Reliability and validity of the sexual experiences survey—short forms victimization and perpetration. *Violence & Victims*, 32(1), 78–92. <https://doi.org/10.1891/0886-6708.VV-D-15-00110>

Kagal, N., Cowan, L., & Jawad, H. (2019). Beyond the bright lights: Are minoritized women outside the spotlight able to say #metoo? In B. Fileborn & R. Loney-Howes (Eds.), *#metoo and the politics of social change* (pp. 133–149). Palgrave Macmillan. https://doi.org/10.1007/978-3-030-15213-0_9

Kaysen, D., Neighbors, C., Martell, J., Fosso, N., & Larimer, M. E. (2006). Incapacitated rape and alcohol use: A prospective analysis. *Addictive Behaviors*, 31(10), 1820–1832. <https://doi.org/10.1016/j.addbeh.2005.12.025>

Kilpatrick, D. G., Resnick, H. S., Milanak, M. E., Miller, M. W., Keyes, K. M., & Friedman, M. J. (2013). National estimates of exposure to traumatic events and PTSD prevalence using DSM-IV and DSM-5 criteria. *Journal of Traumatic Stress*, 26(5), 537–547. <https://doi.org/10.1002/jts.21848>

Koss, M. P., & Gidycz, C. A. (1985). Sexual experiences survey: Reliability and validity. *Journal of Consulting & Clinical Psychology*, 53(3), 422–423. <https://doi.org/10.1037/0022-006X.53.3.422>

Leemis, R. W., Friar, N., Khatiwada, S., Chen, M. S., Kresnow, M. J., Smith, S. G., & Caslin, S., Basile, K. C. (2022). *The national intimate partner and sexual violence survey. 2016/2017 report on intimate partner violence*.

Lorenz, K., & Ullman, S. E. (2016). Alcohol and sexual assault victimization: Research findings and future directions. *Aggression & Violent Behavior*, 31, 82–94.

Lorenz, K., Ullman, S. E., Kirkner, A., Mandala, R., Vasquez, A. L., & Sigurvinssdottir, R. (2018). Social reactions to sexual assault disclosure: A qualitative study of informal support dyads. *Violence Against Women*, 24(12), 1497–1520.

McDonald, A. F. (2019). Framing #metoo: Assessing the power and unintended consequences of a social media movement to address sexual assault. In W. T. O'Donohue & P. A. Schewe (Eds.), *Handbook of sexual assault and sexual assault prevention*. Springer. https://doi.org/10.1007/978-3-030-23645-8_6

Orchowski, L. M., & Gidycz, C. A. (2012). To whom do college women confide following sexual assault? A prospective study of predictors of sexual assault disclosure and social reactions. *Violence against women. Violence Against Women*, 18(3), 264–288. <https://doi.org/10.1177/1077801212442917>

Orchowski, L. M., & Gidycz, C. A. (2015). Psychological consequences associated with positive and negative responses to disclosure of sexual assault among college women: A prospective study. *Violence Against Women*, 21(7), 803–823. <https://doi.org/10.1177/1077801215584068>

Orchowski, L. M., Meyer, D. H., & Gidycz, C. A. (2009). College women's likelihood to report unwanted sexual victimization to campus agencies: Trends and correlates. *Journal of aggression, Maltreatment & Trauma*, 18(8), 839–858. <https://doi.org/10.1080/10926770903291779>

Orchowski, L. M., Untied, A. S., & Gidycz, C. A. (2013). Social reactions to disclosure of sexual victimization and adjustment among survivors of sexual assault. *Journal of Interpersonal Violence*, 28(10), 2005–2023. <https://doi.org/10.1177/0886260512471085>

Peterson, C., DeGue, S., Florence, C., & Lokey, C. N. (2017). Lifetime economic burden of rape among U.S. adults. *American Journal of Preventive Medicine*, 52(6), 691–701.

PettyJohn, M. E., Anderson, G., & McCauley, H. L. (2022). Exploring survivor experiences on social media in the #metoo era: Clinical recommendations for addressing impacts on mental health and relationships. *Journal of Interpersonal Violence*, 37(21–22), NP20677–NP20700. <https://doi.org/10.1177/08862605211055079>

Rothman, K., Georgia Salivar, E., Roddy, M. K., Hatch, S. G., & Doss, B. D. (2019). Sexual assault among women in college: Immediate and long-term associations with mental health, psychosocial functioning, and romantic relationships. *Journal of Interpersonal Violence*, 36 (19–20), 9600–9622. <https://doi.org/10.1177/0886260519870158>

Smith, S. G., Chen, J., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., Walling, M., & Jain, A. (2017). *The national intimate partner and sexual violence survey (NISVS): 2010 – 2012 state report*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Sugar, N. F., Fine, D. N., & Eckert, L. O. (2004). Physical injury after sexual assault: Findings of a large case series. *American Journal of Obstetrics & Gynecology*, 190(1), 71–76. [https://doi.org/10.1016/S0002-9378\(03\)00912-8](https://doi.org/10.1016/S0002-9378(03)00912-8)

Turchik, J. A., & Hassija, C. M. (2014). Female sexual victimization among college students: Assault severity, health risk behaviors, and sexual functioning. *Journal of Interpersonal Violence*, 29(13), 2439–2457. <https://doi.org/10.1177/0886260513520230>

Ullman, S. E. (1996). Social reactions, coping strategies, and self-blame attributions in adjustment to sexual assault. *Psychology of Women Quarterly*, 20(4), 505–526. <https://doi.org/10.1111/j.1471-6402.1996.tb00319.x>

Ullman, S. E. (2000). Psychometric characteristics of the social reactions questionnaire. *Psychology of Women Quarterly*, 24(3), 257–271. <https://doi.org/10.1111/j.1471-6402.2000.tb00208.x>

Ullman, S. E. (2010). *Talking about sexual assault: Society's response to survivors*. American Psychological Association. <https://doi.org/10.1037/12083-000>

Ullman, S. E. (2023). *Talking about sexual assault: Society's response to survivors*. American Psychological Association.

Ullman, S. E., Filipas, H. H., Townsend, S. M., & Starzynski, L. L. (2007). Psychosocial correlates of PTSD symptom severity in sexual assault survivors. *Journal of Traumatic Stress*, 20(5), 821–831. <https://doi.org/10.1002/jts.20290>