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Child Sexual Abuse of Elite Athletes: Prevalence, Perceptions, and Mental Health

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ABSTRACT

Despite a series of high-profile media reports of sexual abuse in sport over the past few years, little research has been done to explore the scope of the problem in the United States. The current article reports on prevalence of child sexual assault in elite athletes in the United States. Using a retrospective web survey, adults answered questions on their experiences in sport. Of the 473 elite athletes surveyed, 3.8% (n = 18) reported being sexual assaulted as a minor in the sporting context. Of those reporting assault, most (61%) reported being abused by an adult authority figure (usually a coach) and 44% reported being assaulted by a peer. Abused athletes were significantly more likely to report having been diagnosed with a mental disorder (Fisher's exact test; p < .001). The findings can be utilized to improve prevention and child protection measures and other safeguarding initiatives in sport.

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Child sexual abuse; elite athletes; sports; mental health; prevalence; beliefs

Child Sexual Abuse of Elite Athletes: Prevalence, Perceptions, and Mental Health

Sexual abuse in sport is a major and growing concern around the world. Abuse in the athletic community has been largely hidden; however, recent media reports have revealed problems in a number of different U.S. sports. USA Swimming (USAS) was engulfed in scandal when a Southern California News Group investigation revealed numerous cases of sexual misconduct of various forms by adult authority figures with at least 590 alleged victims (Reid, 2018). At least 368 child gymnasts have alleged sexual assault by gym owners, coaches, and staff working for gymnastics programs across the country in the last two decades, according to an investigation by IndyStar and the USA TODAY Network (Evans et al., 2018). The most publicized case of sexual assault in athletics is that of the former USAG doctor Larry Nassar. In one of the largest sexual abuse scandals in sports history, over 500 women accused Nassar of sexually abusing them, many of whom were Olympic gymnasts and some of whom were minors at the time of the crimes (Evans & Benbow, 2021).

Nassar was convicted and sentenced to 40 to 175 years in prison(Cacciola & Mather, 2018). These cases heightened public attention around sexual abuse in sport and underscore the need to assess the prevalence of abuse in elite athletics. Despite this, there is a dearth of research conducted on this topic in the United States in contrast to comparable countries (Wilinsky & McCabe, 2020).

This research is in response to the question of whether child sexual abuse (CSA) is a problem in other U.S. Olympic sports teams besides gymnastics and assesses the prevalence of child sexual abuse or assault in elite athletes in the U.S.

Background

Highly competitive organizational hierarchies, where youth compete for status, awards, and career progression, can increase the closeness and dependency between coach and athlete, creating safety risks (Kaufman et al., 2019). The hierarchical social structures in competitive sports carry risks for CSA and the misuse of power (Brackenridge, 2001). Athletes, especially elite athletes – wherein elite refers to those who compete at the national or international levels - may be especially vulnerable to abuse as compared to novice athletes (e.g., Bjørnseth & Szabo, 2018; Kerr & Stirling, 2012; Schipper-van Veldhoven et al., 2016). Elite child athletes form an exclusive and exceptional group based on their young age and athletic ability. Competing at the national or international level requires a significant time commitment with specialized training, expert coaching, and travel to sporting competitions. Children develop a private and exclusive relationship with coaches (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017) in which the coachathlete relationship is central, and parents are often marginalized (Kerr & Stirling, 2012; Wilinsky & McCabe, 2020). This can lead to social isolation and dependency on sporting relationships which can make the child more susceptible to grooming and normalization of abuse. Moreover, disclosure of abuse may be particularly difficult where the perpetrator is held in high regard by the community, such as well-respected coaches or sporting officials (Hartill, 2009). As a result, ascertaining true prevalence of abuse in sporting requires in-depth and rigorous study.

Prevalence

Over the past twenty-five years, a growing body of work has begun to examine the potential for sexual abuse of children in sports, though prevalence studies remain scarce (Brackenridge et al., 2010). In a mail survey of Canadian national team athletes, Kirby and Greaves (1997) found patterns of systematic sexual harassment and abuse of female athletes often by older, male authority

figures at all levels of sport competition. Over a quarter (28.1%) of the sample of 266 former female Olympians reported sexual intercourse with an authority figure in sport. Moreover, 1.9% of elite athletes from Canada were forced to have sexual intercourse in the sports context before turning 16 years old.

Other prevalence studies have looked at both contact and noncontact forms of sexual abuse. Leahy et al. (2002) surveyed 370 adult male and female Australian athletes and reported the prevalence of CSA perpetrated by sports personnel was 13.3% in elite athletes which was more than double that reported by club athletes (6.3%). Timpka et al. (2014) surveyed 197 Swedish elite athletes and 3% reported having been sexually abused as minors by an authority figure in the athletic setting.

Schipper-van Veldhoven et al. (2016) surveyed a representative sample of 4043 adults from Belgium and the Netherlands who had participated in organized sports before the age of 18. The researchers used a broad definition of sexual violence that included noncontact forms of sexual abuse and sexual harassment and asked about all perpetrators, including peers. Results showed that 14.3% (n = 578) of participants reported having experienced sexual violence of some sort, with a third of the sexual violence judged by the researchers to be severe. A regression model showed being female, from an ethnic minority, having a disability, competing at an international sport level, and being a bisexual or homosexual man were all significant risk factors for sexual violence in sports. Using the same dataset, Vertommen et al. (2017) reported on characteristics of the perpetrators involved. Perpetrators were predominantly male, and more than half (56%) of the cases of sexual violence involved more than one perpetrator. The most frequently (41%) mentioned perpetrators were "other known persons" a group which included medical staff, board members, referees, and other sports personnel (excluding athletes and coaches). The next most prevalent groups of sexual perpetrators were same-age athletes (27%) and coaches (19%). Sexual violence was reported to be significantly more severe when a coach was mentioned as the perpetrator.

Using a similarly broad definition, Ohlert et al. (2020) examined the prevalence of interpersonal violence in a total of 1,665 elite athletes from the Netherlands, Belgium, and Germany. A similar number of elite athletes from the Netherlands and Belgium reported having experienced severe sexual violence before age 18 (7.4% and 7.6% respectively). The rate was higher in German athletes (11.5%), but this is accounted for by the fact that the German athletes were asked to report both victimization before the age of 18 years and during adulthood. Overall, female elite athletes were found to be at greater risk than males for sexual violence in general and for more severe forms of sexual violence.

Bermon et al. (2021) surveyed 480 elite athletes from numerous different countries and 10% reported having experienced abuse. In contrast with previous studies, sexual abuse was reported significantly more often by male

athletes compared to female athletes, although this was not true in North American athletes where over four times as many females reported having been sexually abused compared with males. A group consisting of friends, athletes, and partners represented 58% of the perpetrators of abuse in athletics, whereas coaches and trainers represented 25%. We could find no studies examining the prevalence of CSA in sports in the U.S.

In sum, there is a paucity of empirical studies examining the prevalence of sexual abuse against children in elite athletics. Of the existing literature, it is difficult to compare percentages of CSA reported due to differences between samples, methodologies, and operational definitions of abuse. Recurrent findings in the studies reviewed suggest that CSA in sport is not uncommon and is most likely to be perpetrated by males. The risk of abuse is also higher for girls than boys, and more so for athletes at the elite level.

The main goal of the current study is to address the lack of data on abuse of elite athletes in the U.S. by examining the prevalence of sexual assault of young elite athletes in the U.S. A secondary goal is to assess self-reported mental health of elite athletes and its relation to sexual abuse and to assess perceptions of sexual violence in the sports context. As such, this study addresses a research gap identified by Mountjoy et al. (2015) regarding a lack of understanding of the extent and impact of abuse on elite athletes. This research is part of a larger study that investigated the range of maltreatment and negative experiences elite athletes might face in sport settings. Papers reporting the findings on physical abuse and emotional abuse are in review and a paper on combined forms of maltreatment is in preparation.

Method

The disparate definitions of CSA used by various studies are one of the most significant challenges to determining a prevalence rate (Latzman et al., 2017). For the current study, we used the definition of CSA provided by the World Health Organization (WHO, as a starting point. WHO (1999) defined CSA as:

[T]he involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. (pp. 15-16)

We chose to use a conservative definition and operationalized sport-related sexual abuse to mean sexual contact between a young person aged 16 or younger with an adult in a position of authority in sports, or nonconsensual sexual assault by a peer athlete. We did not include noncontact forms of sexual abuse (e.g., exhibitionism, voyeurism). Although many CSA studies include non-contact sexual experiences in determining prevalence rates, the authors chose to include only data on contact abuse as non-contact sexual acts such as exposure of genitals may be a common occurrence in sport where children shower and undress in locker rooms. Another methodological issue involved whether to include peer-perpetrated abuse. Because peer athletes have been found by prior research to be frequently named as perpetrators (e.g., Schippervan Veldhoven et al., 2016) and because peer assaults can cause adverse outcomes similar to those related to sexual abuse by older people (e.g., Sperry & Gilbert, 2005) we include sexual assaults by peers although we do not term this CSA. Rather we refer to it as "peer sexual assault." For the purposes of this study, peer sexual assault was defined as any sexual act performed by a peer without consent.

Procedure

The prevalence of childhood sport-related sexual abuse was measured using a retrospective web-based survey of adult respondents who had engaged in organized sport at the elite level. Both the preliminary and final surveys were approved by the University of Pennsylvania Internal Review Board.

Elite athletes were recruited for the study through representatives of the Team USA Athletes Advisory Council, who sent out letters of recruitment on our behalf to the sports teams. Elite athletes were defined as having competed at one of the following competitions: AAU Regional Tournaments, AAU National Tournament, NCAA Regional Tournaments, Junior Nationals, Nationals, Summer Olympic Trials, Summer Olympics, Winter Olympic Trials, Winter Olympics, World Championships, or Pan Am Games. Because of the recent scandal in USAG involving a large number of elite athletes victimized by a single perpetrator, we did not invite the U.S. Olympic gymnastics team to participate in the current study as it would likely skew the results. The victimization in U.S.A. gymnastics is being addressed in a separate study. All other teams were asked to participate. The survey was delivered electronically to representatives who were members of the Team USA Athletes Advisory Council. These representatives then sent letters of recruitment to a total of 1,175 elite athletes in the 10 Olympic teams that agreed to participate. The survey was administered from February through May 2019.

⁽Alexander et al. (2011)), included noncontact forms of abuse in their prevalence rate of sexual harm experienced by children in sports. In their sexual harm category, 80% was being "flashed". In interviews with a subset of those surveyed, it appeared that much of the non-contact abuse was between boys in locker rooms and was not necessarily viewed negatively by the participants. One participant said, "I wouldn't consider this 'sexual harm'. I would consider it joking around with the lads. Nothing sexual was intended" (p. 73).

Survey tool

The survey was anonymous, and all responses were confidential. Athletes were informed that their participation was voluntary and that they could withdraw from their participation anytime. Respondents could only proceed with the survey after agreeing with the informed consent request.

The survey consisted of 128 questions. Questions were pre-tested with 10 participants and refined based on the results. The survey was administered online and took about an hour and 15 minutes to complete. Most (80.5%) of the respondents indicated that the survey questions were not difficult to understand. The authors developed the survey tool drawing from two main sources: the American Association of Universities (AAU) 2015 Campus Climate Survey (Cantor et al., 2015)² and the National Survey of Children's Exposure to Violence (NatSCEV; University of New Hampshire, 2014; Simon et al., 2018). The survey asked about an athlete's sports experiences in three major areas: (1) physical assault, (2) sexual assault or abuse and (3) emotional abuse. The survey also asked about mental and physical health. For space and clarity, this paper focuses only on sexual abuse-related and mental health responses.

The sexual abuse measure contained six questions adapted from the Campus Climate Survey on Sexual Assault and Sexual Misconduct. The first question asked whether the respondent had experienced nonconsensual sex in the sports context. This was followed by five other questions that asked about specific sexual behaviors experienced in the sports setting. These included: (1) kissing, touching, or grabbing; (2) oral sex; (3) sexual penetration; (4) unsuccessfully attempt to engage in sexual penetration or oral sex; and (5) unwanted sex while under the influence of alcohol or drugs. For all items answered with "yes," participants were asked to indicate the perpetrator's position in sports from a list of 15 choices. This list included peers and the following organizational roles: coaches (including parent, relative, and assistant coaches), trainers and assistant trainers, boosters, university/school sports organization members, National Governing Body (NGB) sports organization members, United States Olympic Committee (USOC) members, local/state/community sports organization members, sports facilities managers, physicians, psychologists, and other. If the participant answered affirmatively, we asked with whom the act occurred, and whether the act occurred when they were age 16 or younger. Through this method, we sought to capture data on the scope of sexual experiences without the athlete having to conceptualize these as abuse. This behaviorally specific approach is in line with other epidemiological research on child sexual abuse (Mathews & Collin-Vézina, 2019).

²The survey was designed to assess the incidence, prevalence and characteristics of incidents of sexual assault and misconduct. It also assessed the overall climate of the campus with respect to perceptions of risk, knowledge of resources available to victims and perceived reactions to an incident of sexual assault or misconduct.

Sample

A total of 772 athletes initially responded to the survey. Respondents who revoked consent (n = 3), were under the age of 18 (n = 88), or who did not complete enough of the survey to indicate their primary sport or athlete status (n = 209) were excluded from analysis, leaving the study with a final sample of 473. Respondents represented 10 elite sports groups: Track and Field (39.6%), Synchronized swimming (17.9%), Swimming (non-synchronized) (11.9%), Judo (10.6%), Ski and Snowboard (8.7%), Luge (3.2%), Table Tennis (2.8%), Rowing (2.3%), Goal Ball (2.1%%), and Fencing (0.9%). Five and a half percent of the athletes competed as para-athletes. The average response rate per sport was 26.4%. Overall response rate was 31% before data cleaning.

The mean age of participants was 29 (SD = 9.9 years) with a range of 18 to 71. Most participants (69.8%) were female, and one participant identified outside the gender binary. Two participants were assigned female gender in competitions, though one identifies as male and the other as neither male nor female. Most (74.4%) of the sample identified as white, 11.6% as Black or African American, 6.8% as multiracial, 4.2% as Asian, 0.4% as American Indian or Alaska Native, and 2.5% as other. Most (64.8%) respondents were single and had a college education (40% held a bachelor's degree, and 29.4% had some form of graduate training).

All respondents competed in at least one of eleven different elite sporting events. The mean age at which an elite athlete had their first coach or trainer (other than a parent) was 10.6 years (SD = 4.9 years, Range 1–32, n = 449).

Analysis

Data was cleaned in Microsoft Excel and SPSS. A codebook was created to cipher the cleaning and aid with analysis. All descriptive statistics and relational analyses were calculated in SPSS; relational analyses were all either chisquare or Fischer's exact tests. As the survey took over an hour to complete, some participants skipped questions or answered incompletely; these responses were included in the analysis when the respondent completed a majority (over 80%) of the survey. Where a small group of respondents skipped a question, the new *n* is reflected in our reporting.

Results

Sexual abuse

Of the 473 athletes surveyed, 3.8% (18) reported being sexually assaulted as a minor in the sporting context. All of the abused athletes were female. Most (61%) reported being abused by an adult authority figure. Nine of the women reported being abused by a coach. One indicated she was also abused by an assistant coach. Two indicated their coach was a parent. Two women indicated that they had been abused by an adult connected to sports: one by a sportscaster and another by a sports mentor.

Most (78%) of the women who reported having sex with their coach also indicated the abuse happened more than once. Those abused by a coach reported abuse that ranged from being kissed and grabbed up to and including rape. Eight of the nine athletes who reported being abused by their coach reported the types of abuse they experienced (see, Table 1). Half of the women reported more than one type of abuse. The most reported (47%) form of abuse by those reporting a coach or trainer as their perpetrator was being kissed or grabbed followed by sexual penetration (26%). In addition to questions about specific sexual acts they had experienced, a separate question asked about any sexual acts that they had experienced that occurred in "a nonconsensual manner" and with whom they had occurred. Only two-thirds of those reporting sex with a coach as a minor, responded affirmatively to this question raising the possibility that they viewed the experience as consensual.

Of athletes reporting abuse, eight (44%) reported being assaulted by a peer. One athlete indicated they were assaulted by both a coach and a peer. Most (75%) of those assaulted by a peer indicated that the assault happened more than once. Most (88%) also reported more than one type of assault. The most common types of abuse reported were being kissed or grabbed and attempted sexual assault.

Disclosure of abuse

Participants were asked whether they had reported their abuse to anyone and if not, why. Only two participants answered this question. Both indicated that they had not reported their abuse. Only one indicated why they hadn't, writing "I didn't know where to go or what to do."

Table 1. Types of abuse experienced by elite underage athletes assaulted by perpetrator.

Perpetrator	Type of Abuse	Rate	
Coaches (n = 8)	Kissing, grabbing	47%	
	Oral sex	7%	
	Penetration	26%	
	Attempted rape	13%	
	Unwanted sex while inebriated	7%	
Peers $(n = 8)$	Kissing, grabbing,	24%	
	Oral sex	19%	
	Penetration	19%	
	Attempted rape	24%	
	Unwanted sex while inebriated	14%	



Mental health

The majority of respondents rated their physical health positively: 81.3% (n = 455) of elite athletes reported they are in excellent or very good physical health, 14.7% in good physical health, and 4% in fair to poor physical health. In contrast, only 60% reported excellent or very good mental health, while 25.3% reported good mental health, and 14.7% fair to poor mental health. In addition, 41.3% of the total sample reported that they had been evaluated or received counseling for emotional, behavioral, or developmental problems at some point in their lives, with 21.1% reporting having been evaluated or receiving counseling within the year prior to taking the survey. Almost a third (31.9%) of all elite athletes reported that they had been diagnosed with a psychiatric disorder at some point in their lives with 15.8% of the sample reporting multiple diagnoses. The most reported diagnoses were depression and anxiety.

Elite athletes who reported having been sexually abused as minors were significantly more likely to have a mental disorder diagnosis (Fisher's exact test; p < .001). In fact, 77.8% of those reporting CSA and/or peer sexual assault reported having received at least one mental health diagnosis with most (85%) reporting multiple diagnoses. Two-thirds of the abused athletes (66.6%) reported having seen a mental health professional at some point in their lives and 55.6% reported seeing one in the preceding year. Among sexually abused athletes, the most common mental health diagnoses were depression (50%), anxiety (50%), and PTSD (38.9%). A Fischer's exact test was performed to compare participants reporting sexual victimization and those who did not. Significantly more sexually victimized participants reported having been diagnosed with depression, anxiety, and PTSD (see, Table 2).

Table 2. Psychiatric diagnoses reported by elite athletes.

Diagnosis	Non-CSA (n = 455)	CSA (n = 18)
Depression	16%	50%a*
Anxiety Disorder	15.6%	50%**
ADD or ADHD ¹	6.0%	16.7%
Post-Traumatic Stress Disorder	3.5%	38.9%**
Other Psychiatric Disorder	3.3%	11.1%
Learning Disorder	2.8%	5.6%
ODD ³ or Conduct Disorder	1.5%	11.1%*
Bipolar Disorder	1.4%	5.6%
Substance/Alcohol Disorder	1.2%	
Autism, PDD ² , or Asperger's	0.9%	
Developmental Delay	0.9%	
Personality Disorder	0.5%	

Note: 1. ADD = Attention Deficit Disorder, ADHD = Attention Deficit Hyperactivity Disorder; 2. PDD = Pervasive Developmental Disorder; 3. ODD = Oppositional Defiant Disorder

 $ap < .05; ** p \le .001$



Perceptions of abuse in sports

Participants were asked to rate several questions about abuse in sports on a five-point scale. When asked how problematic sexual assault is in the elite athlete community, 45.1% of athletes said it was not problematic, 30.9% said it was somewhat problematic, and 24.0% said assault was very or extremely problematic. Elite athletes thought they were slightly more likely to be sexually assaulted somewhere other than an elite sport competition: 89.2% of elite athletes did not think it likely that they will be sexually assaulted while at an elite sports competition; while 81.9% did not think it likely that they will be sexually assaulted anywhere. Put another way, only 1.4% think it more likely they would be assaulted at a sports competition than elsewhere.

Elite athletes' knowledge of sexual assault definitions (per elite sport organizations such as the United States Olympic Committee or the National Governing Bodies), where to report sexual assault, and what happens after making a report varied considerably. Over a third (34.8%) of elite athletes reported they are not knowledgeable about these definitions, 33.6% reported being somewhat knowledgeable, and 31.6% reported they were very or extremely knowledgeable of these definitions. At the same time, only 25.2% of elite athletes said they knew where to report sexual assault at sporting competitions. The majority (62.2%) were not knowledgeable of where to report while 32.0% were somewhat knowledgeable. Similarly, 73.2% were not knowledgeable about what happens after a report is made.

While most elite athletes (64.2%) believed that other athletes would support a peer who reported abuse, only 56% considered it very or extremely likely that sports officials would take a report of sexual misconduct seriously. At the same time, most elite athletes (89.8%) indicated that, if a report is made, it is likely that the alleged offender (or their associates) would retaliate against the athlete. Respondents also did not voice much confidence that they would be protected if they reported a sexual assault. Only 45.8% of respondents were confident that sport officials would protect the safety of one who reports sexual assault and only 38.4% were confident action would be taken against the offender (see, Table 3).

Elite athletes were also asked about their reactions to witnessing or suspecting abuse. When asked if they had ever suspected a peer athlete was sexually assaulted, 20.7% (n = 89) of participants indicated that they had. Participants who answered affirmatively were then asked what they did afterward. They were asked to choose from four responses: (1) Did nothing because I wasn't sure what to do; (2) Did nothing for another reason; (3) Spoke to them or someone else to seek help; or (4) Took action in another way. Of the athletes who witnessed or suspected abuse, approximately half (48.9%) reported they did nothing, while 51.2% reported they took action in some way. Of those who reported they did nothing, most (60.5%) indicated they did nothing because



Table 3. How likely	sports officials or	r other athletes would	l support victims of	sexual misconduct.

How Likely	Very or Extremely	Somewhat	A little or Not at all
Sports officials would take a report of sexual misconduct seriously	56%	31.4%	12.6%
Offender (or their associates) would retaliate against the athlete	29.3%	38.4%	32.3%
Sport officials would protect the safety of one who reports sexual assault	45.8%	37%	17.2%
Sports officials would conduct a fair investigation	44.2%	40.2%	15.6%
Sports officials would take action against an offender	38.4%	38.8%	22.8%
Sports officials would address factor that led to misconduct or assault	30.7%	40.7%	28.6%
Other athletes would support an athlete who makes a report	64.2%	25.6%	10.2%

they did not know what to do. The majority (84.4%) of those who reported taking action did so by speaking directly to the possible victim or to someone else.

Approximately one quarter (25.2%) of elite athletes reported that they had seen or heard a sport official or peer acting sexually violent toward or sexually harassing another official or peer. Of these witnesses (n = 108), 27.8% did nothing because they were unsure what to do, 34.3% did nothing for another reason, 10.2% directly intervened to stop the violence (or harassment), 13.9% spoke to someone else to seek help, and 13.9% attempted to help in some other way.

Discussion

This study examined the prevalence of contact CSA and peer sexual assault in elite U.S. athletes. Of the 473 athletes surveyed, 3.8% (n = 18) reported being sexually assaulted as a minor in the sporting context. All were female. Of those reporting assault, most (61%) reported being abused by an adult authority figure (usually a coach). Our results are slightly higher than those reported by Kirby et al. (2002) who surveyed 1200 Canadian National Team athletes and found that 2% reported unwanted sexual touching in sport prior to the age of 16 years. Our results are also higher than those reported by Timpka et al. (2014) in a study of Swedish elite athletes; Using a definition that included both noncontact and contact sexual abuse, 3% of their sample reported having been sexually abused in the athletic setting. The perpetrators in both of these studies included authority figures and peers.

Overall, the prevalence of contact CSA by an authority figure in sport was 2.3% in our sample. The prevalence of contact CSA by a coach was 1.9% of the total sample. CSA by coaches and other authority figures has been found in many populations of athletes. In a survey of adolescent athletes in the general Canadian population, 2.4% reported CSA by a coach (Parent et al., 2016). Using a broad definition of sexual violence that included noncontact forms of sexual abuse and sexual harassment, Vertommen et al. (2017) surveyed a representative sample of adults in the Netherlands and Belgium that had participated in organized sports before age 18. They found that found that 2.7% had been abused by a coach.

It appears that the close relationship between coaches and athletes can lead to the sexual exploitation of the athlete. In our study only two-thirds of those reporting sex with a coach as a minor responded affirmatively when asked in a separate question if they had had any sexual experiences in sport that occurred in a "nonconsensual manner." This raises the possibility that some adult athletes view the childhood sexual experience with their coach as consensual. This is supported by a study of 1,660 Danish athletes where 8% of the athletes reported having had intimate relations (i.e., close emotional and physical relationship) with their coach as a minor (Toftegaard Støckel, 2010). Parent et al. (2016) surveyed a representative sample of 6,450 adolescents (between 14 and 17 years) in Quebec and 1.6% reported experiencing consensual sexual contact with a coach in the 12 months preceding the study. Stirling and Kerr (2009) conducted semi-structured interviews with nine elite athletes who had been abused by their coach. The coach's power influenced the athletes' ability to perceive their experiences as abusive and their ability to report incidences of maltreatment. A review by Gaedicke et al. (2021) found that the closeness, power differential, blurred boundaries, and ambiguous roles that characterize grooming behavior seem to be inherent in the coach-athlete relationship. Future studies should be mindful of the fact that extensive grooming by coaches may lead some participants to view a coach as a romantic partner rather than a predator. Thus, questions asking about sexual abuse should be worded in neutral, behaviorally specific terms rather than asking about experiencing sexual abuse, assault or harm. In addition, our findings and those of several other studies of athletes the survey incidentally provides a deeply interesting starting point for future studies on the interpretation of consent.

This study and others suggest that while coaches may pose a risk to young athletes, peers are also potential perpetrators (e.g., Alexander et al., 2011; Vertommen et al., 2017). Of athletes reporting abuse, eight (44%) respondents in our sample reported being assaulted by a peer. Our findings are in line with results of other surveys that show that peers are frequently perpetrators when sexual violence occurs in sport. For example, in Vertommen et al.'s (2017) survey, peers were reported as perpetrators in 27% of cases of sexual violence. In an international sample of elite athletes, Bermon et al. (2021) found that a group consisting of friends, peer athletes, and partners represented 58% of the perpetrators of abuse in athletics. These results are also consistent with sexual assaults of youth in the general population outside of sport. In a pooled national sample of over 2000 youth, Finkelhor et al. (2014) found that over half of the total sexual assaults experienced were at the hands of juvenile perpetrators. While there is



increasing acknowledgment of peers as potential perpetrators of sexual assault in sports settings, research on peer assaults among young athletes remains scarce and the underlying dynamics involved in sporting contexts relatively unexplored.

We found that elite athletes who reported having been sexually assaulted as minors were significantly more likely to have been diagnosed at some point in their life with a mental disorder and over half abuse participants reported seeing a mental health professional in the past year. Half of the abuse participants had been diagnosed with anxiety and/or depression and over a third had been diagnosed with PTSD. It is well recognized that CSA has short- and longterm mental health consequences, including lifetime diagnosis of post-traumatic stress, anxiety, depression, externalizing symptoms, eating disorders, problems with relationships, sleep disorders and suicidal and self-harm ideation and behaviors (Chen et al., 2010; Maniglio, 2009; Molnar et al., 2001). Also, Fasting et al. (2002) interviewed 25 elite female athletes in Norway who had experienced sexual harassment in sport and found it not only had negative effects on the athletes' mental health, but also had negative effects on their performance.

Our results indicate that stronger efforts are needed to protect young athletes from becoming victims of sexual violence and a process for reporting sexual assaults needs to be communicated to athletes. Only two participants indicated whether they had reported the abuse; both indicated they had not. When asked why, one did not answer and the other indicated that she didn't know where to go or what to do. We also assessed whether elite athletes ever saw or heard a sport official or athlete acting sexually violent toward or harassing another official or athlete and 25.2% indicated they had. Of these witnesses, only 13.9% talked to someone else about what they witnessed. Most (62.1%) of the athletes reported having done nothing and explained their inaction by indicating that they didn't know what to do. The majority (62.2%) of participants indicated that they were not knowledgeable of where to report abuse. These findings suggest that athletes need more education on recognizing and responding to sexual violence in sport.

Despite a series of high-profile media reports of sexual abuse in sport over the past few years, sports institutions have been slow to develop appropriate responses and prevention programs (Mountjoy et al., 2016). In 2020, the Olympic Charter was updated to expand the mission of the International Olympic Committee (IOC) "to promote safe sport and the protection of athletes from all forms of harassment and abuse" (International Olympic Committee, 2020, p. 17). In its Consensus Statement on harassment and abuse in sport, the IOC recommended sport organizations establish a response system for handling concerns and complaints with reporting and referral mechanisms (Mountjoy et al., 2016). Our results suggest, however, that many athletes do not trust sports officials to protect the abuse victim. Less than half (46.7%) of the elite athletes

surveyed, indicated that they believed it was very or extremely likely that sport officials would protect the safety of one who reports sexual assault and only 44% were confident that sports officials would conduct a fair investigation.

Our respondents' concerns are supported by research conducted by Kirby et al. (2002) and Parent (2011). In interviews with elite Canadian Athletes, Kirby et al. noted sexual harassment and assault victims experienced strong pressure from teammates and authority figures in sport not to "rock the boat" if they wish to continue to be successful (p. 135). In interviews with stakeholders in athletics, Parent found one obstacle to the process of athlete disclosure to be beliefs and myths, including fears of false allegations, that seemed to perpetuate a culture of inaction and silence. In addition, sport stakeholders (including athletes) tended to minimize the problems experienced by victims, blamed victims for the acts perpetrated against them, and challenged the victims' credibility.

Our respondents' concerns about sports officials taking their concerns seriously were echoed by respondents to a national survey of over 1,000 elite Canadian athletes who were asked open ended questions about improving safety in sports (Kerr et al., 2019). The Canadian athletes noted they are silenced through threats of negative repercussions and not having a safe, confidential place to disclose or to report abuse. The most frequent recommendation by athletes was the implementation of a third-party, neutral, independent body where athletes can go when they feel they have faced abuse or harassment.

These findings indicate a need for systemic action on multiple fronts. More work is needed to address the unique types of situations that arise in sports settings including the control that trainers and coaches exert on numerous aspects of athletes' lives and the risks raised by out-of-town travel and overnight stays for competition. Our findings also suggest that in addition to targeting staff, prevention and training initiatives should also be aimed at peer athletes. It is critical that sports organizations work to support the disclosure process with detailed information on how to report abuse and a protective response for disclosing athletes. A confidential third-party reporting mechanisms should be available, and an international registry of offenders be developed to eliminate perpetrator migration to new sport organizations (Mountjoy, 2020). T Such a registry should also prevent athletes charged with misconduct from competing for other sport organizations. Policy initiatives at the state level could also ensure that athletic personnel are included in regulatory language as mandated reporters. Finally, there is a critical need for more research about the prevalence of sexual violence in sports, the circumstances that allow the abuse, barriers to disclosure, and the effectiveness of current policy efforts in elite sporting.



Limitations

The present study is limited by a low response rate (31%) creating the potential for nonresponse error. However, some studies have also shown little variation in overall outcomes under different response rate assumptions (Gerrits et al., 2001). In addition, response bias has been shown to be less of a problem when surveying more homogeneous populations such as persons having a strong group identity (Leslie, 1972).

Secondly, we were forced to rely on sport officials to invite athletes to participate and not all elite sports agreed to participate. It is possible that sports where problems had surfaced refused to participate in order to conceal the extent of CSA in their sport. Due to an ongoing study of Larry Nassar's victims, and the likelihood of skewing the present results due to the large number of victims, athletes from USAG were not invited to participate. We only surveyed adults; current child athletes are not represented in our sample. Our study contained a sensitive topic. Athletes who have been affected by sexual violence may have declined to participate in the study because they did not trust the data privacy protection or because they did not want to actively remember their experiences. Conversely, participants may have been motivated to take the survey because they wanted to share their experiences and support sexual violence prevention. Either of these situations could have led to a response bias that affected our findings.

Our prevalence rate for CSA and peer sexual assault is limited in that we did not record non-contact forms of sexual abuse. Therefore, the rate of CSA presented in this paper is likely an underestimate. Future studies should include questions designed to measure noncontact forms of sexual abuse including Internet victimization as this would provide a more accurate illustration of the scope of sexual violence experienced by elite-athletes in the U.S. In addition, our ability to correlate mental health with abuse status is limited by the fact that mental health is not directly measured by this survey. Rather, respondents were asked if they had received a mental health diagnosis from a professional. Many athletes may have had symptoms that have not been formally assessed by a mental health professional. Thus, the correlation between abuse and mental health issues is also likely an underestimate of the true relationship between these variables. Future studies should directly measure post-traumatic correlates of sexual victimization in sport.

Finally, as the study targeted elite athletes in the U.S., its findings may not generalize to lower-level athlete communities or elite athletes globally. Future studies could include all athlete levels and incorporate prospective, longitudinal designs. Not only would this differentiate rates of abuse and maladaptive outcomes among elite and non-elite athletes, but it could also examine sportcareer trajectories and long-term mental health outcomes.



Conclusions

Our study is the first to explore the sexual abuse and peer sexual assault experiences of elite athletes during childhood in the U.S. This study demonstrates that sexual contact between sports officials (particularly coaches) and child athletes does occur in elite sports in the U.S. Peers also perpetrate sexual assaults. The results supported an association between sexual victimization and being diagnosed with a psychiatric disorder – particularly anxiety, depression and/or PTSD.

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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.

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