

ENGENDERING TRAUMA

Race, Class, and Gender Reaffirmation after Child Sexual Abuse

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Using extrafamilial child sexual abuse (CSA) as an example of family trauma, the author interviewed 60 parents of sexually abused boys on multiple occasions to analyze the organization of gender, race, and class in parental coping processes. Despite access to alternative interpretations of CSA that challenge conventional notions of gender, parents in this study typically rely on traditional themes to make meaning of the CSA experience. The author organized the data analytically around gender strategies and found that parents used race- and class-specific gender strategies in the aftermath of trauma. Most important, mother-blame is theorized as a form of gender reaffirmation. The author uses the term gender reaffirmation to illustrate the way social actors recuperate after a situation has been interpreted as detrimental, challenging, or stressful to heteronormative gender relations. Mother-blaming accounts encouraged race and class enactments of gender that had negative consequences for women and helped maintain men's cultural power.

Keywords: *child sexual abuse; family; race, class, and gender; trauma*

Once the primary domain of psychology, scholarship in trauma studies has become increasingly diversified. Conceptualizing trauma as a social and cultural experience has generated interdisciplinary work from a variety of fields. These new voices in trauma studies have used trauma to understand such phenomena as the context of human emotion, collective memory, and adult sexual expression. I take a sociological perspective and extend this literature by examining mother-blame, the idea that mothers are responsible for family problems, in the aftermath of family trauma.

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Using extrafamilial child sexual abuse (CSA) as an example of family trauma, I interviewed 60 parents of sexually abused boys on multiple occasions to analyze the organization of gender, race, and class in parental coping processes. It is in these types of "critical situations" (Giddens 1987), where assumptions are challenged and routines are disrupted, that we can inquire about what keeps power relations intact and examine the mechanisms deployed to restore them. Despite access to alternative interpretations of CSA that challenge conventional notions of gender, mothers and fathers in this study typically rely on traditional themes to make meaning of the CSA experience. I organized the data analytically around gender strategies, a concept proposed and used by Hochschild (1989). Gender strategies characterize women's and men's routine, culturally embedded constructions of gender to resolve dilemmas in daily life. Parents used class- and race-specific gender strategies in the aftermath of trauma.

Most important, I theorize mother-blame as a form of gender reaffirmation. I use the term *gender reaffirmation* to illustrate the way social actors recuperate after a situation has been interpreted as detrimental, challenging, or stressful to heteronormative gender relations. It rests on the assumption that gender can be "saved" if it is threatened. I focus on two aspects of this process within the contexts of families: ideologies of care and labor force participation. Changing economic patterns and divergent cultural practices have decreased the practicality of nuclear families based on traditional gender expectations (i.e., an emotionally distant breadwinning father and a nurturing mother who is primarily responsible for domestic tasks and the care of children). Research demonstrates, nonetheless, that women and men attempt to reaffirm gender traditionalism despite these changes. Francine Deutsch (1999), for instance, showed how parents justify traditional gender expectations when strictly economic considerations would encourage alternative arrangements. For example, even when wives earned more money per hour than their husbands, it was the women who reduced their labor force participation to care for children rather than the men. Many valorized the traditional model and reaffirmed their gender identities by emphasizing the traditional aspects of their lives and downplaying the divergences from this model. Likewise, Susan Walzer (1998) demonstrated how gender differentiation increases as women and men transition into parenthood. Although many of her study participants felt this was natural, even those who did not and wished for more egalitarian responsibilities participated in gender reaffirmation.

Gender reaffirmation is primarily achieved by adhering to two hegemonic ideologies that facilitate men's dominance in conjugal relationships. The first is the "belief in an 'essential' gender order" (Pyke 1996, 529) and the traditional ideals associated with domestic responsibilities. The second is the "primacy of the successful male career in marriage as economically efficient and in the best interest of all family members" (Pyke 1996, 529). In this way, families become an occasion for the reaffirmation of one's gendered self in the process of doing families. Gender is not merely the cause of gender-stereotyped divisions of labor in households. Rather, gender is embodied in the very work of families (Coltrane 1989). Mother-

blame, I argue, validates family traditionalism, and it provided explanations of family that received little dissent from many spouses. Traditional ideals of motherhood and fatherhood are so well articulated and dispersed in the contemporary United States that they are easy to fall back on (Hays 1998). In the face of family trauma, these mothers and fathers typically aligned their accounts with gender conservatism.

Mother-blaming accounts and gender reaffirmation processes have negative consequences for women. Specifically, mother-blame attributes extrafamilial CSA to a disruption of both a sexual division of labor within families and conventional sex-stereotyped parenting. In articulating this theme, mothers are held responsible for the majority of domestic tasks, including above all child care. Their accounts promoted gender reaffirmation by encouraging an increase in women's responsibility to children, decreasing women's economic participation, and increasing women's social isolation. For men, the responses to CSA both legitimated men's labor force participation and maintained men's cultural power. This work is not focused on childhood sexual abuse itself or the etiology of CSA. Rather, I focus on account themes of mothers and fathers in response to family trauma.

TRAUMA, INTERPRETATION, AND MOTHER-BLAME

Theoretical and empirical research on trauma suggests that meanings validate responses. Richard Lazarus (1983) called attention to the primacy of people's "appraisals" to traumatic situations and their reactions to stress. Similarly, Pauline Boss (1988) argued that familial interpretations determine how families will respond. Robert Hess and Gerald Handel conceptualized families as developing "themes" that comprise "some fundamental view of reality and some ways of dealing with it" (1959, 11). The developing themes then shape the ways families manage and cope with challenges. These studies, nonetheless, do not situate perceptions within relationships of power. This hinders their analytic utility and runs the risk of sustaining inequality.

The response to trauma literature, for instance, consistently reports that mothers are reproached for CSA although mothers are seldom the perpetrators of the abuse (Breckenridge 1994, 1995). Many social scientists have continued to perpetuate the idea that CSA can be linked to mothers. While theories that blame mothers often focus on intrafamilial CSA, a number of them view mothers as liable for the abuse because maternal employment is seen as a hindrance to a woman's ability to safeguard her child from the abuser (Breckenridge and Baldry 1997; Justice and Justice 1979; Miller-Perrin and Perrin 1999). Proponents of the "working mother" variety of mother-blame frequently draw their conclusions from quantitative data that show a correlation between maternal employment and increased risk of CSA. These scholars confuse correlation with causation and do not question gendered assumptions of care. Also, focusing on a mother's employment without addressing the labor of fathers diverts attention from men and reinforces the idea that women

not only are, but also should be, responsible for child care. These theories centralize mothers as the cause of family problems and misfortune.

There is a small literature that takes an overtly feminist approach to trauma responses. In her landmark piece on father-daughter incest, Judith Herman (1981) challenged the validity of mother-blame and called for new theoretical models for understanding parental responses to family trauma. Herman proposed an examination of CSA that located responses to abuse within gendered power relationships. A feminist analysis of familial trauma acknowledges men's domination as an organizing component of micro and macro processes that differentially influence the choices and options that are available for women and men (Breckenridge 1994, 1995; Herman 1981).

A central premise that runs through the feminist mother-blaming literature is the iconography of the ideal mother. This mother is ever-present, intensely available to her children, and eternally selfless (for a social history of the iconic mother, see Hays 1998). Gender ideologies inform how mothers, fathers, the state, therapeutic organizations, and social scientists interpret CSA. Researchers who have utilized this approach have uncovered the numerous ways mother-blame has affected interpretations of trauma. Jan Breckenridge and Eileen Baldry (1997), for example, showed evidence of CSA workers' using mother-blaming accounts to imply that mothers implicitly colluded in the incest by allowing, or not knowing about, the sexual abuse. Breckenridge and Baldry concluded that CSA policy makers and workers often rely on mother-blaming perspectives that downplay the uneven power relationships from which women and men operate. Margaret Elbow and Judy Mayfield (1991) offered a more complex understanding of mothers' responses to incest by providing empirical evidence that women respond in a variety of ways depending on how mothers are informed about the incest, their available emotional and economic resources, and their individual coping mechanisms.

Some of the CSA research identifies racial differences in familial responses. White families tend to be characterized by family rigidity (Schmidt 1995). Family rigidity occurs when boundaries and expectations between family members are clearly defined, especially between husbands and wives. These families may have a more difficult time adjusting to trauma and negotiating changes in family routines. White families of CSA survivors also tend to be more isolated than their racial/ethnic minority counterparts. Isolation often reinforces rigidity. Black families, on the other hand, are known for gender flexibility and the use of extended kin in dealing with trauma (Abney and Priest 1995). This has been linked to patterns in the general Black population who have not been troubled by CSA. This type of adaptability is important to families who have been stressed by CSA and can also relax their adjustment to the new family reality (Ho 1992). While emphasizing the positive benefits of extended family, Veronica Abney and Ronnie Priest (1995) also suggested that strong kinship ties may have negative consequences. If extended kin think that parents are not responding in the appropriate manner, they may pressure parents to conform to family norms, intensify parental anxieties, and encumber therapy. Puerto Rican households that have experienced CSA, like Black families,

exhibit strong kinship ties (Aronson Fontes 1995). These ties, or *familismo*, provide emotional and financial support as well as child rearing responsibilities. Traditional Puerto Rican families, however, show evidence of more gender rigidity and patriarchal family dynamics (Comas-Diaz 1995). Kin who place a high value on traditions may pressure parents of CSA survivors into gender rigidity.

Cumulatively, this literature suggests that race shapes the gendered responses of parents. As parents do gender in their responses to CSA, they do so within a racial context. Unlike the majority of CSA research that assumes white families are the norm and families of color are different, the above research underscores the significance of racial enactments of gender in parental responses. As my findings will show, class is also important in parental performances.

My research adds to a feminist analysis of trauma responses in a number of ways. First, I make clear that mother-blame is a process that occurs in extrafamilial CSA as well as in cases of incest. Second, previous research has excluded the voices of nonoffending men. I help fill this void. Third, while others speculate about the differences between mothers with disparate family resources due to marital status, my sample provides direct comparisons between married and single mothers. Fourth, research on mother-blame has largely assumed a color-blind model and has ignored how this gendered process may unfold differently for parents of color. The differing accounts provided by white and racial/ethnic minority families disclose both racialized and classed aspects of mother-blaming projects. Most important, I locate mother-blaming sociologically as a form of gender reaffirmation. The current study reveals how in the complex process of doing family in micro interactions, parents experiencing family trauma often draw on macro understandings of gender, race, and class to interpret, excuse, and justify family activities that legitimate men's domination.

METHOD

Study Participants

I conducted multiple in-depth interviews with 60 parents who voluntarily enrolled sons in group therapy for sexually abused boys. Ten of the parents were single mothers, and the rest were married couples. The boys in treatment were between 8 and 11 years of age. Neighbors, babysitters, family friends and others who came in contact with the family molested the boys. Family members (e.g., uncles) sexually abused some boys, but members within the household abused no children. The boys met in seven cluster groups of 8 to 10 boys to keep the groups small and personable. The groups met once a week for two months. The boys' therapy sessions were conducted in the child abuse research and treatment center. The parents, themselves, did not receive any therapy.

Families learned about the treatment center in a variety of ways: referrals from doctors, friends, telephone directories, churches, social workers, and other state

agencies. All the parents had at least a college degree, lived in a northeastern urban city, and had a son enrolled in the treatment center's group therapy program. Household income ranged from \$39,000 to \$132,000. The 60 parents included 8 white single mothers, 2 Black single mothers, 16 white married couples, 8 Black married couples, and 1 Puerto Rican married couple. I solicited all parents of children in the first four groups for participation in this project. A 100 percent response rate was obtained along with written permission to participate. In the last three groups, I targeted only families of color to increase the racial diversity of my sample. Fourteen Black participants (seven married couples) were identified, and a 100 percent response rate was also obtained from these respondents. When I refer to specific respondents in this study, I identify their race, marital status, and gender in that order as follows: W = white, B = Black, P = Puerto Rican, M = married, S = single, W = woman, and M = man. For example, a Black married man will be represented as (BMM). Data were also gathered from the workbook that the therapists used and training guides given to researchers. All names in this study are pseudonyms.

Data Collection

I collected the data during 22 months. I interviewed parents jointly as well as individually. Parents were informed that both their joint and individual interviews would be used for research purposes. Many married respondents expressed ease with this approach because they did not feel comfortable articulating negative feelings toward their spouses in front of them. The in-depth interviews lasted from 30 minutes to 2 hours, and I interviewed all participants on more than two occasions. Although I sought all participants equally for interviews, mothers came to the center much more often and were more agreeable to meeting outside of the therapeutic setting. As a result, I have more interviews per subject for women than for men. I interviewed 20 fathers on three occasions each: 2 fathers on four occasions and 3 on eight occasions. In comparison, I interviewed 7 mothers on three occasions each: 6 mothers on six occasions, 19 mothers on eight occasions, and 3 mothers on nine occasions. These numbers include both joint and individual interviews. In all, I conducted a total of 328 interviews. The repeated interview technique allowed me to develop rapport with participants. As Kathryn Edin (2000, 115) suggested, data compiled from "in-depth, repeated, qualitative interviews" are more reliable than data that are based on single interviews with respondents.

I had an assistantship at this therapy program that required basic intake skills, such as oral, word processing, and data collection proficiency, typically associated with social services and other low-wage helping occupations. As an assistant, I was responsible for managing case records for social workers, updating service pamphlets, and administering the entrance and exit interviews of parents who had sons in the program. I had a very behind-the-scenes role as worker for this organization. I did not provide therapeutic guidance to parents, and I was not responsible for evaluating progress or compliance to therapeutic goals.

The initial and exit interviews were required for the purposes of the therapeutic program. With the exception of single mothers, the first interview was always with both parents. Besides gathering biographical data, the initial interview consisted of introducing the parent(s) to the program, the program's account of CSA, going over the workbook that the boys in therapy would be using, and answering any questions. In the exit interview, I recorded what they liked about the program as well as their frustrations with it. I conducted all other interviews specifically for this project. I had a relaxed, open-ended interview schedule that encouraged participants to respond in a conversational manner. Probing questions were used to get at gendered differences in behavior and the rationale for those differences from respondents. Most interviews took place at the therapeutic center. As I got to know participants and started developing a degree of trust, however, a number of them were completed off site (e.g., in the homes of participants and at parent-organized social gatherings).

It was made clear that these interviews were strictly voluntary and that respondents were free to refuse participation at any time. This is evidenced by the variability in the number of interviews per participant and the fact that a number of the interviews took place after the parents' children were no longer in the program. There did not appear to be any significant blurring of boundaries between my role as worker and as researcher due to my limited involvement as worker with the participants. The respondents generally came to see me as a confidant rather than a representative of the organization. After giving a very critical appraisal of the program, for example, one father said, "I forget that you work for them [the organization]. I talk to you like I talk to my friends. . . . That's good, though. I feel like I can be real. I can be myself."

Analysis

Interviews were transcribed, and I used an analytic-inductive process to organize the data (Miles and Huberman 1984). This process included data reduction (the technique of identifying themes), data display (clustering the data for conclusion derivation), and conclusion drawing (the process of making sense of the data). The clustering of themes emerged from the data and was not predetermined organizational categories. The findings are neither objective "facts" nor simply subjective interpretations (Glaser 1992; Glaser and Strauss 1967). Rather, the accounts provide a way for understanding how parents say they make meaning of extrafamilial CSA of boys and how gender, race, and class are used in that meaning-making process.

I also employed Hochschild's (1989) concept of gender strategy. A gender strategy is defined as "a plan of action through which a person tries to solve problems at hand, given the cultural notions of gender at play" (Hochschild 1989, 15). Husbands and wives use culturally embedded concepts of womanhood/motherhood and manhood/fatherhood to respond to problems and structure their daily lives. As Hochschild (1989, 15) argued, "To pursue a gender strategy, a man draws on beliefs

about manhood and womanhood, beliefs that are . . . anchored to deep emotions. He makes a connection between how he thinks about his manhood, what he feels about it, and what he does. It works the same for a woman.” The concept of gender strategy is used in this study to analyze how husbands and wives negotiate child care and paid work in response to family trauma. This analytic frame illuminated the gendered family response strategies to extrafamilial CSA. I do not insist, though, that the participants’ stated beliefs drive behavior. Rather, race and class enactments of gender are used to make sense of family life.

There are two caveats. First, while some respondents articulated single themes, others shifted and changed over time. Even so, distinct themes did emerge within single and among multiple interviews of individual respondents as well as between the responses of multiple participants. The lives of the participants are full of nuances. The themes and gender strategies that emerged, therefore, should be thought of as similar to Weberian ideal types. This allows for the analytic clarity that is necessary for empirical research that is theoretically grounded. Second, parents in this study are not representative. Self-report studies suggest that most CSA victims do not seek professional assistance, and a number of parents opt not to disclose the abuse (Watkins and Bentovim 1992). The participants in this study are likely more class homogeneous than all parents of CSA victims and also reflect the region’s relatively liberal gender ideology. This work largely presents insights limited to how middle-class families who have been able to use group therapy approaches talk about the trauma of extrafamilial CSA. It is precisely because of these distinctions, though, that these findings are so striking. The participants’ economic, education, and regional demographics—characteristics that are typically associated with gender liberalism (Deutsch 1999)—uniquely situate them to achieve gender equity. I will demonstrate that this is not the case. The results likely underestimate the gendered differences in the populace.

FINDINGS

Although mother-blame dominated my interviews, the group therapy that these parents’ children attended espoused an alternative interpretation. All parents were offered an account of CSA once their sons were admitted. In this account, perpetrators of abuse were explicitly blamed, and neither mothers nor fathers were held accountable for the abuse. The therapeutic process also encourages both parents to become more involved in the emotional aspects of child care. The emotional aspects of care refer specifically to helping the child process his feelings about the CSA experience. The agency workbook encourages child and parent(s) to discuss openly the sexual abuse experience so that their stress-related responses would slowly decrease until they have reached a comfort level at which they can discuss the abuse without harm (Grotzky, Camerer, and Damiano 2000). Although it is not important for the caretakers to have all the answers, it is crucial that they do not avoid or negatively reinforce their child’s inquiries. Parents of known sexually

abused boys often express concern over their child's sexual identity and often believe that same-sex CSA can lead to homosexuality (Watkins and Bentovim 1992). The group work currently under discussion advocates that the connection between same-sex CSA and homosexuality is not only doubtful but also irrelevant. It is understood that sexuality is a fluid process, and there is no attempt to "fix" or identify same-sex attraction unless it is being forced onto another individual. Given the emphasis of the group therapy program, one could assume that parents would use CSA as an occasion to talk about family within this framework. Even under these circumstances, however, gender reaffirmation emerged.

I organize the findings by first showing how and why mothers are blamed and how gender, race, class, and marital status structure the meaning of blame. While acknowledging resistance throughout, I demonstrate that mother-blame is widely supported. I then outline how this meaning making has real gendered consequences as mother-blaming themes give rise to particular gender strategies for mothers and fathers. Specifically, I show how and why parents use gender reaffirmation to articulate changes in labor force participation and child care that justify inequality.

Mother-Blaming: "I feel like it's my fault"

Repeatedly, parents used mother-blaming themes to frame their accounts. In general, my respondents suggested that mothers are to blame, mothers should not work, and mothers should be primarily responsible for their child's treatment process. As I interviewed the parents in this study, it became clear that mother-blame was largely propagated from three areas: (1) immediate family members, (2) extended family, and (3) social services.

Family members and social service workers perceived women's labor force participation as hindering many women's abilities to mother properly. It should be no surprise, then, that many mothers blamed themselves. Katherine, a white married mother, considered her obligations outside of the household "as a deterrent from parenting responsibilities" that "blinded me to the horribleness that was happening right under my eyes. I feel like it's my fault." These women equated "good" mothering with taking time out for children and family, paying attention to the needs of children and spouse, and providing a warm home environment. Like Pam (WMW), most mothers felt "worthless" and "not very good" about themselves.

Family members—including husbands, parents, in-laws, and siblings—implicitly and explicitly blamed mothers. As Maria (WMW) stated, "When [my husband and I] first found out . . . [my husband] pretty much told me I had to fix this. . . . It was up to me because I was supposed to be the one watching [our son]. . . . I'm [his] mother. Even though I worked just as much as he." Jeff (WMM) conveyed that he "didn't understand how [his wife] could let just anybody hang around our kids. . . . It just seems [my wife] should have been more careful." Paul (WMM) makes a similar assertion: "Sometimes I just think [my wife] is too naïve. She should have paid more attention to who our son was with."

Mothers also suggested that since their husbands did not take equal responsibility in the treatment of their children (e.g., not taking their child to and from therapy or not talking to their child about the abuse), their husbands indirectly blamed them. Clara (WMW), for instance, stated,

Since my husband doesn't take [our son] to group therapy, I feel like he secretly thinks that I let the abuse happen. I feel that way because, why should I have to always be taking him to therapy? Why do I have to sit in the car ride home, by myself, and listen to the things my son is talking about? You know I love my son and would do anything for him, but it's hard to listen sometimes. If it's both of our responsibility to take him . . . then we both should. But I think he thinks it's my fault, so he leaves most of the work for me. I know he would never say that, but that's how I feel.

Clara's intuition that her husband may secretly blame her is correct. In a separate interview, her husband Rich (WMM) said, "I think Clara knows that I kind of believe she should have been more aware. . . . I mean, she spends more time with the kids, so you would kind of think she would at least suspect something was going on a while back." Even though Clara voices her frustration with her husband, the two of them practice gender reaffirmation. Rich blames Clara for the abuse and does not share in child care. If Clara did not fulfill the iconic role of mother, her child would most likely receive inadequate care. Despite her protest, Clara participates in reaffirmation by remaining centrally involved in her child's recovery while her husband reaffirms gender by taking a more distant approach to family responsibilities.

Mothers felt they were implicitly blamed when family members suggested that they quit work so that they could "take care of their family" or "honor the sacredness of family." Jennifer's sister, who is a stay-at-home mom, told Jennifer that she should "think about quitting work to help [her son] and [her husband] get through all this mess." As Jennifer (WMW) stated, "I knew what she meant by that. . . . She thinks that if I stayed home, that none of this would have happened. I can see it in [people's] eyes. For some reason, whether they admit it or not, they think I'm somehow, some way at fault. . . . Because I'm the mother, I should have known this was going on. I should have protected [my son]. . . . The thing is, I know it's not my fault, but I can't help feeling like it is." These women said their parents were the most explicit about blaming them for the abuse. Heather (WMW) was told by her mother that it was her responsibility to watch over the children and she needs to devote her time now to being a "full-time mother." Christine (WMW) was told by her father that if she "weren't working and paid as much attention to [her] home life as [she] did to her job, this never would have happened!" Christine said her father has since apologized for his harsh comments and suggested that they were merely said out of anger. Nonetheless, Christine knows, "I'm the mother so I get the finger pointed at me."

Single Mothers and Social Services: "Make me feel like an even worse mother"

A number of women who sought help from a variety of state-funded social services discussed how they were treated as "unfit" mothers. Most of those who

originally received aid from these organizations were single mothers. LeAnne (WSW) reported,

One caseworker that I had kept treating me bad . . . not like in your face rude or anything, but I could tell that something just wasn't right. Then one day, she said, "Did you know?" I asked her what she meant by that because I was here so of course I knew. Then she said, "No, have you known for a while? I can't imagine this going on for so long with my child and me not knowing." I just burst out into tears. I was just like, great, make me feel like an even worse mother than I already do.

LeAnne's account is not exceptional. Other single mothers expressed these themes. Repeatedly, mothers who sought out these services felt that they were being "judged," as one mother stated, and judgment increased these women's anxiety.

The two Black single mothers who sought out these services felt that their motherhood was particularly criticized due to their racial identities. Estelle explained that one social service organization "assumed I was on welfare and said I needed to take personal responsibility for my child and get a job. . . . Then another told me I should spend more time with my children. I felt like I couldn't do anything right." Estelle, in fact, is not on welfare. Like all families in this study, Estelle has a middle-class, white-collar occupation. She felt she was being unfairly stereotyped by social workers and social service counselors based on her race and gender.

Josephine, the other Black single mother, described a similar situation where a counselor questioned if she had the "mothering skills" to care for her child. She stated,

This one service counselor already thought I was a dreadful mother because, as she said, "I let this happen." Then this bitch had the audacity to ask if I had the ability to keep my child away from harm's way. I let her know that [the offender] was out of our lives and I had already pressed charges against him. She then goes, "No, I mean can you keep him free from danger? Is your neighborhood safe?" I looked at this wench right in the eye and said, "Where in the hell do you think I live?" When I told her where I lived, she looked shocked. So in her eyes, I am a bad mother because I "let" my son get molested, as she said. But I'm a Black woman. Therefore, I'm a horrendous mother, a mother who "lets" her son get sexually abused, a mother who obviously lives in a bad part of town who can't keep her children safe.

The accounts of mothers who used social services corroborate with the work of Breckenridge and Baldry (1997) which states that CSA workers use mother-blame to inform their treatment of clients. Mothers themselves recognize that social service workers are blaming them, and this exacerbates their anxieties. The accounts of the Black mothers also suggest that racial meanings overlap with gender to produce racialized mother-blame. The Black single mothers also interpret CSA workers as tallying low socioeconomic-class-based assumptions to their motherhood based on their race. "Black" and "poor" are not associated with good mothering (Roberts 1997). These Black single mothers may have multilayered offenses

against them since their motherhood is devalued due to their racial and assumed class designations.

Accounts of Resistance: "You done good, girl!"

Even mothers who resisted mother-blame used it as a general frame of reference because other social actors forced them to contend with the traditional themes. Strategies of resistance took many forms and often overlapped. Even so, three general forms emerged. One form of resistance involved mothers' physically removing themselves and their children from those who participated in mother-blaming. A second strategy involved women's self-consciously valorizing their nontraditional style of motherhood. In a third strategy, women developed empowering networks that provided emotional support. The following three cases illustrate these strategies.

Melissa (WMW) stated that she "went into a deep depression" and "cried all the time" when she discovered that her son was being abused. She explained that her husband insinuated that "[she] should have known." After months of "emotional abuse" from her husband, Melissa moved herself and son out of the house and moved in with her brother. By removing herself from the situation, Melissa stated, "I was able to take better care of my son because I was taking care of myself. . . . After leaving [my husband], I didn't have to worry about [my husband] always looking over my shoulder and chastising me." Although Melissa and her husband reunited, she explains that temporarily leaving him increased her self-esteem. She said that by leaving him, she "knew [she] could do it on [her] own," and it gave her some power in the relationship. "When [my husband] realized that I could take care of myself . . . he stopped all the emotional abuse."

Gloria (WSW) at no time blamed herself for the abuse. Unlike many mothers, Gloria did not discuss her mothering in negative terms, nor did she even suggest that her employment was detrimental to her parenting abilities. She spoke in very positive terms about herself and said that without her job, she would not be able to afford to send her child to therapy. Gloria's father moved in with her and helped Gloria manage between child care, paid work, and therapy sessions. Taking off of work was not an option for Gloria. She relied too heavily on her income for daily subsistence. She said she knew that there were "probably people out there who think I'm not being a good mother . . . but I don't have time to think about them. I'm too busy raising my child."

Estelle (BSW) received widespread support from her church congregation and family members. They helped her see that the abuse was not her fault. "I couldn't blame myself anymore because I had to take care of my child." Using a network of relatives, friends, and fictive kin, Estelle worked out plans that allowed her to manage work, family, and her son's therapy. While she feels confident in herself now, Estelle still relies on her mother, especially for emotional support and encouragement: "Every now and then, when I feel like I'm going to start blaming myself again or feel self pity, I just call my mom and she always says, 'Child, you better stop

because you done good, girl!’ Then I realize that I have done good and I’m not going to let anyone tell me otherwise.”

Resistance highlights the importance of social networks in the lives of women. Resistant mothers (both single and married) were those women who experienced a wider range of social networks and were not solely reliant on a husband for economic, social, and emotional support. The isolation that often accompanies two-parent, middle-class families can keep women confined and dependent on husbands. Single mothers in my sample were much more likely than married mothers to have other people in their lives on a regular basis. Also, since single mothers cannot rely on the income of a husband, relying on gender reaffirmation is difficult. Of 10 single mothers, 7 articulated resistance to mother-blame as compared to only 9 of 25 married mothers.

Race also appeared to shape resistance. Whereas only 2 of the 16 married white mothers could be categorized as resistant to mother-blame, 6 of the 8 married Black mothers rebuked this form of gendered blame. Married Black mothers were more likely to describe a constant flow of kin and friends in their lives than their white counterparts. The networks of these middle-class Black women included single mothers and working-class households who actively challenged mother-blame. The two Black married women who did participate in mother-blame were relatively new to the city and without strong ties to Black communities.

Mother Time: “Sometimes I feel so alone”

Most women in the sample responded to the psychological tax of mother-blame by altering their work responsibilities. Prior to discovering that their sons had been (or were being) sexually abused, all of the mothers in the sample were employed in the labor market. Of the 35 mothers, 26 were full-time employees, and 9 worked part-time. After the sexual abuse of a son was brought to the forefront, 6 of the full-time employees switched to part-time work, and 1 quit the paid labor force. Of the 9 part-time employees, 5 worked shorter hours, and 1 quit altogether. Ten of the mothers remaining in the labor market full-time were taking advantage of the Family and Medical Leave Act. The Family and Medical Leave Act allows for 12 weeks of unpaid leave per year. Friends and relatives legitimated this gender strategy to reduce and/or leave the paid labor force that relegates women to child care.

While many mothers said they “chose” to alter their labor force participation, this gender strategy left many mothers feeling isolated and powerless in their caregiving work (see also Abel 1991). These mothers suggested that they felt their isolation was especially detrimental since their previous labor force participation kept them out of the house for long periods of time. By being “forced into the home,” as one white mother remarked, “after working for so long, sometimes I feel so alone. . . . I love my son and my family, but I don’t know how much longer I’m going to be able to do this.”

Most mothers took their sons’ behavior as an indicator of their own self-value and judged themselves by their sons’ progress. When their sons talked about the

abuse or started activities that were deemed inappropriate, many mothers felt as if they had failed—yet again—in their parenting. In tears, Judy (WMW) discussed her grief when she caught her son masturbating in the bathroom of a fast-food restaurant. Judy explained, “I just didn’t know what to do because I was all by myself. That’s when I really almost went crazy. I couldn’t keep him from the abuse and now I can’t help him get over it. I can’t do anything to help him.” Blanche (WMW) claimed, “Whenever [our son] goes backward to bad behaviors because of the molestation, I just know I’m not the best mother. . . . I’m watching him most of the time, so I kind of think it’s mostly up to me to see how he progresses over time.” As Deborah Rutman (1996) claimed, the isolating characteristics of child care intensify women’s feelings of blame and ineptitude. As the primary caretakers of their sons, this isolation and the feeling of powerlessness overwhelmingly fell on the shoulders of mothers.

Reaffirming Mother Time: “It makes me feel like a good mother”

Although mothers talked about the difficulty of being the primary caretakers of their sexually abused sons, mothers also discussed the rewards of caring for their children. These accounts reaffirmed their gender identities as “good mothers” and shielded mothers from further mother-blame. In some interviews, for example, Ira (WMW) talked about the hardships she endured as a result “of all the time I spend alone with my son” and the “emotional problems that I have to go through when my son acts out.” In others, though, Ira talked about the “joys of seeing [my son] grow. I like being there to help him develop past the abuse issues. It makes me feel like a good mother to take care of my son.” Pam (WMW) agrees: “You know, I get bored and scared sometimes when I’m the one always watching my son . . . but then there’s that sense of Wow! That feeling that I am the one who is going to get [my son] through this! That’s what good mothers have always done.”

Maria (WMW) is more specific about the connection between work, family, and gender reaffirmation: “Taking off of work was hard, but it’s worth it. It’s a way for me to make up for what’s happened to my family. See, I know that I didn’t do anything to make this happen [i.e., the sexual abuse] but I can make up for not being there to stop it from happening. By doing this, I can make it better—not perfect again, but at least a little better.” Dorothy (WMW) makes a similar claim: “I feel bad that I was not there for my child like I should have been. This [i.e., switching to part-time work and spending more time with my son] shows everybody that I’m dedicated to my child. . . . It lets the world know that my kids are first in my life.”

Mothers of color expressed both gender and racial concepts in their accounts of gender reaffirmation. Describing the difference between white and Puerto Rican mothers of sexually abused children, Marianna (WPW) stated, “It’s harder being a Puerto Rican mother than a white mother. [White mothers] only have to worry about living up to the white female standard. I have two cultures that tell me different things I’m supposed to do with family troubles. It’s hard to figure out what I’m going to do.”

Vivian, a Black married mother who comes from a working-class family, expressed similar frustrations. She and her husband, Darrel, currently reside in a well-to-do suburb. At least some of their neighbors are aware of the sexual abuse situation because an older white adolescent in the community abused their son. For Vivian, gender reaffirmation requires strategic maneuvering between her “lily white neighbors” and her working-class Black extended family. She explained,

My white neighbors and friends expect me to be sad, soft, almost diffident. I'm supposed to drop everything and take care of my son . . . which I have. It's supposed to be a corrective for my faults as a career mother. It's supposed to redeem me. My family, on the other hand, is very working class. A mother is supposed to exude strength and confidence. A Black woman, regardless of how rich or poor, is supposed to be the pillar of strength in times of crisis. The truth is I'm in between, sometimes diffident and strong at the same moment. My neighbors think that I'm a good mother because I'm taking time off [of work]. . . . My family knows I'm a good mother because I'll do anything for my children and I ain't takin' no mess from nobody.

Vivian's mode of self-expression in this quote is intentional and strategic. She employs Standard English that attests to her high level of education and middle-class position for most of this passage. At the end, though, she shifts her diction and firmly establishes herself as a resolute, racially authentic Black mother by stating “I ain't takin' no mess from nobody.” Vivian's comment underscores the significance of race and class in the interpretive frameworks mothers use in the aftermath of trauma. White middle-class mothers are supposed to be “diffident”; Black mothers, “rich or poor” are supposed to be “strong.” As a middle-class Black woman who lives in a white community and who regularly interacts with a working-class family, Vivian reaffirms gender in dissimilar ways to satisfy all parties.

Father Time: “That just makes sense”

Although fathers in this study often said that they should be spending more time with their sons, very few acted on this belief. While most fathers could have taken advantage of job leaves, only three fathers did. Most explained this discrepancy by stating that leaves were unpaid and both they and their wives could not take off of work. Men's gender strategies, therefore, largely revolved around, and were legitimated by, perceived economic considerations. Since 24 of the 25 husbands made more money than their spouses, parents thought that wives should take off work to care for the son while the husband remained in the labor market. As Luke (WMM) stated, “I need to spend more time with my son, but I make more money than [my wife], so of course she took off work instead of me. That just makes sense.”

Decisions about family and work, however, are not simply economic. Six couples' individual salaries differed by about \$3,000 or less. Luke, who stated above that it “just makes sense” that his wife take off work because he makes more money, is paid less than \$1,000 more a year than his wife. In one case, a husband made less

money than his wife, but she was the one who switched to part-time work. His labor force participation did not change.

The time fathers did spend with their sons involved more play activities, rather than helping the children process the sexual abuse experience. Fathers said they played with their sons more after work and took them to events on weekends. An emerging literature, while acknowledging the inequality that exists in the day-to-day maintenance of family life, is stressing the importance of this playtime. Lareau (2000), for instance, proposed that a father's "play time" and related activities can add laughter, fun, and affection to family routines.

When sons brought up issues related to the sexual abuse experience, many fathers, like Jim (WMM), avoided the comment by "just ignoring it or start talking about something else." Although fathers admitted that one reason they avoided such conversations was because it made them uncomfortable, most said that it was not productive and actually dangerous for the child to discuss the sexual abuse experience. David (WMM), for instance, stated, "It's really ridiculous to even talk about it [i.e., the CSA] with [our son]. For one thing, it makes me feel weird. I mean, who wants to talk about it? Another, I don't think it's best for him. It makes him think about it, and that's not good. He needs to forget it."

The deployment of traditional themes and gender strategies in response to family trauma (re)asserted men's power by linking the doing of gender to the allocation of household responsibilities. Using traditional themes to understand the CSA experience justified men's avoidance of nurturing work while primarily leaving mothers with the tremendous responsibility of their sons' healing process.

Father Fears: "I got a lot of correction to make up for"

Parents also used extrafamilial CSA as an occasion to express blatant homophobia. Parents expressed a notion that CSA of boys presented a particular threat to gendered sexuality. Not only have their children been sexualized, but there has been a challenge to conventional ideas of gendered sexual exploitation. Conventional sexual scripts, via heterosexuality, had been defied. In these cases, males are not only the sexual aggressors but also the sexual victims. Many families thus felt they had to vigorously reconstruct gendered and sexualized identities for their sexually abused sons. All of the men—as well as most mothers—contended that the fact that a man had sexually abused their son required extra intervention on the part of the father or stepfather. As Michael (WMM) explains, "Any child, boy or girl, who is molested is a horrible, horrible thing. But the fact that these are boys just makes it worse. How do we explain this to them? I got a lot of correction to make up for." When asked how they would feel if it had been a daughter who was sexually abused, all the fathers said they would also want to spend more time with daughters. Nonetheless, most agreed that the sexual abuse of a son is more devastating because it threatened traditional sexual scripts that constitute heteronormative gender relations.

To “fix” what had happened, many fathers’ gendered strategic plans stressed the need to do more masculine activities with their sons. This included signing their sons up for sports teams, roughhousing, and consciously rewarding heterosexuality. These fathers hoped that these formulaic masculine activities would hinder their sons from becoming gay and (re)construct a masculine, heterosexual identity. The gender strategies of most men included condemning any same-sex affection and the blatant objectification of girls and women.

As one white mother illustrated, her husband often took out his homophobia on their son. She gave an example of an incident that involved their son and a neighborhood friend. She explained that the two boys were playing a video game and when they won, the two boys jumped up and started screaming and laughing with excitement. At one point, the two boys hugged. When the two boys hugged, “John jumped up, grabbed [our son], and yelled for the other boy to go home. He then yelled to [our son] that there would be ‘no faggot touching in this house!’ But it was, oh, so innocent. They were just having a good time.” Incidents such as this were common.

Other fathers actively encouraged their sons to objectify women. Rich (WMM) stated that he purposely pointed out women and girls to his son “so that he knows that he is supposed to be attracted to girls. . . . Sometimes if I see a pretty girl, I’ll say, ‘Look over there, [son], wouldn’t you like to get a piece of that?’ We usually both smile and laugh. I don’t mean any harm in it.” Rich’s wife was not happy with this behavior and asked Rich to stop. Nonetheless, Rich felt that it was important to instill in his son “proper values” and “to teach him what it means to be a man.” According to these fathers, to do gender correctly (i.e., “to be a man”) includes knowing proper sexual scripts (i.e., heterosexuality).

Although all fathers were concerned about their sons’ sexual identities, not all fathers actively promoted misogyny. Philip, for instance, challenged some of these views. He understands the concerns of the other fathers; he also worries that his son will be gay and signed his son up for football and other masculine-identified activities. Still, he recognizes that the actions taken by the other fathers may do more harm than good: “By teaching their sons that homosexuals are bad and lusting after women is good, the fathers are really teaching them that being sexually attracted to a male is bad and being attracted to a female is good. They’re taking the focus off of the abuse and putting it on the attraction. When these boys grow up, they may abuse women because all they know is that their abusers’ *attraction* was wrong, not the abuse itself.” Philip’s assertion that the fears of the other fathers may be detrimental to their sons’ emotional well-being is supported by the CSA literature (Watkins and Bentovim 1992). A parent’s own homophobia projected on the child may lead boys to reassert their masculinity in negative ways that may harm themselves and others. Philip, though, was an exception. For the most part, CSA became an opportunity for fathers to articulate homophobic attitudes. Homosexuality was routinely condemned and viewed as something that their son could become if not properly treated with a heavy dose of stereotypical, chauvinistic masculinity.

Each individual father discussed fears of homosexuality in more than 50 percent of their interviews. Some used every interview as an occasion to communicate homophobia. While mothers also talked about a possible connection between CSA and homosexuality, as a group, they were generally less anxious about the prospect. Married mothers were much more likely to discuss homophobia as it related to their husbands' actions. Married mothers often talked about how they were "concerned" about the possibility of their son's "turning" gay, but their husbands were overly concerned and, as one mother put it, "take it too far." As Heather (WMW) stated, "All [my husband] seems to think about is whether or not [our son] is now gay. I'm worried that our son will come out gay, too . . . but [my husband] is a lot more worried than me. He's preoccupied with making sure our son ends up straight."

Single mothers articulated more homophobic concerns than married mothers and actively challenged the gender and sexual liberalism of their child's therapy program. Helen (WSW) made her concerns clear: "I know that this therapy says I shouldn't be thinking about if [my son] is gay or whatever, but the fact is it matters. Life is going to be hard if he becomes homosexual, so I got to help him figure things out . . . let him know that men-on-men is immoral." This suggests that marriage may facilitate women's relative sense of ease concerning sexuality as women depend on the gender strategies of husbands to "correct" the assumed damage to the sexual and gender identities of their sexually abused sons. Whether it is fathers or mothers who express the homophobia, these themes contribute to men's domination by constructing gender in ways that reinforce sexual dichotomies and support hegemonic gender ideals through (hetero)normative sexual scripts.

Innovative Father Time: "She's not Superman!"

Three fathers rejected mother-blame and traditional family themes. These three "innovative fathers" (Arendell 1998) are men who renounce traditional ideals of fatherhood, take more time out for children, are more nurturing than traditional fathers, and are child centered. In this study, innovative fathers shared three characteristics: (1) flexible work schedules, (2) gender flexibility, and (3) an explicit and continued rejection of mother-blame. Although all three innovative fathers articulated these three characteristics, I will use each case to emphasize one specific point.

Philip (WMM) committed the most physical time caring for his household. Individual and joint interviews suggest that Philip and his wife, Rose, had a fairly equitable distribution of household labor. Philip and Rose stated that both before and after CSA disclosure, they rotated cooking responsibilities, "equally" attended to their child's needs, and "valued each other's jobs" outside the home. Philip has taken five weeks of leave from his job. He took this time to care for his son and his wife. He directly related the time he devoted to his family as a result of job flexibility. "I'm lucky," he stated, "to have a job that allows me to take so much time off. Plus, now that I'm back to work, my job still gives me the ability to make my own

schedule. As long as I meet my deadlines, my boss pretty much leaves me alone. This gives me more time to spend with my family.”

While many fathers followed traditionalism as a way to reaffirm gender, innovative fathers like Darrel (BMM) narrated more gender flexibility. Darrel took off two weeks of work to care for his son. He expressed pride in his efforts to help his son through therapy by talking to his son about abuse issues. He also recognized that being a mother is hard “because of all the pressure that is put on Black women to be a good mother, have a job, and work in the home at the same time.” According to Darrel and his wife (in both joint and individual interviews), Darrel increased the amount of time he dedicated to child rearing and housework. Darrel also planned to take the rest of his leave time once his wife, Vivian, had exhausted hers. Darrel attributed his gender flexibility to his parents’ example. Both of his working-class parents were employed full-time with alternating shifts. “My mother took care of the mornings and afternoons, but my father was the one there during the evenings. . . . My father cooked dinner, helped us with our homework, and got us [the three children] ready for bed. So my mom and pops are my role models of how to be a family man. . . . Both the man and the woman are responsible for taking care of the house and kids and family problems.”

A number of fathers initially rejected mother-blame, especially in joint interviews with mothers. Over time, though, mother-blaming accounts surfaced, and as I argued earlier, some mothers are aware of this. In contrast, innovative fathers challenged the notion that mothers were to blame. Carlos, a Puerto Rican father who took two nonconsecutive weeks off of work, stated, “Marianna sometimes gets into these fits where she thinks that she could have done something to stop this. I keep saying that this is wrong for her to do.” In a separate interview he noted, “She’s blaming herself again. . . . I tell her the only way she could have known is if she had x-ray vision or some other supernatural power. She’s not Superman!” In another interview, Carlos related a conversation that his wife, Marianna, had with her mother. In it, Carlos’s mother-in-law suggested that Marianna “give up on this ‘American woman’ stuff and stick back to tradition . . . and make sure that this doesn’t happen to another of our other children.” Getting back to tradition included Marianna’s quitting work since Carlos made enough to support her and the children. Carlos reportedly told his mother-in-law “that he meant no disrespect but she [the mother-in-law] was out of line and that Marianna is a great mother. I told her that Marianna had nothing to do with it, and if she was going to point the finger at Marianna, then she had to point another at me. Marianna wasn’t doing anything that I wasn’t.”

All innovative fathers exhibited work and gender flexibility as well as a renunciation of mother-blame. The data suggest that all three may be necessary to challenge gender reaffirmation in the aftermath of family trauma. For example, most fathers in this study could have made use of job leaves; only three fathers chose to do so. These three fathers also expressed gender flexibility. It stands to reason that gender flexibility can curb mother-blame. Gender is not static, and responsibility

can be allocated in a myriad of ways. Innovative fathers, while few in number, illustrate the flexibility of gender and the possibilities of men's responses to family trauma. These possibilities deconstruct heteronormative gender relations that oppress women and open the possibilities for more equitable family arrangements.

CONCLUSION AND DISCUSSION

Traditional gender reaffirmation was a primary consequence of family trauma. Most of the middle-class families in this study consisted of full-time, dual-earner parents before CSA was identified. This changed after CSA disclosure. Many mothers switched to part-time work, some took advantage of family-friendly policies that allowed them to assume an idealized (stay-at-home) form of motherhood for a limited time, and two mothers left the labor market all together. While many mothers often felt it was their duty to leave and/or limit their paid labor activities, other family members encouraged them, both implicitly and explicitly, to do so as well. In the context of extrafamilial abuse on intrafamilial family relations, individual mothers, kin, and social services reinforced mother-blaming and gender reaffirmation. The accounts of these mothers suggest that larger structural forces fashioned the gender strategies pursued by these women. Fathers say that they should be spending more time with their sexually abused children, but they rarely do so. The usual excuse given is their commitment to work. Their higher incomes informed their gender strategies and justified why they did not reduce their labor force participation. However, even when income differentials were negligible, most men continued to work the usual hours whereas mothers drastically adjusted their lives to care for their abused children.

Extrafamilial CSA was also an occasion to express homophobia and to combat homosexuality. Many parents, especially fathers, thought their sons were in jeopardy of "becoming" or "turning" gay as a result of the same-sex sexual abuse. Most attempted to actively construct a heterosexual identity in their children. Their strategic plan for constructing a heterosexual identity included stereotypically masculine activities associated with boys/men and heteronormative sexual scripts. This highlights the assumed connection between the performance of gender and sexual behavior as well as these families' interest in protecting heterosexuality.

These gender strategies placed an immense psychological tax on women. As the traditional themes justified conventional gender arrangements, mothers generally blamed themselves for the abuse (taking the focus off of men and the systemic qualities of gender oppression), and the isolating features of child care left many feeling powerless. As the primary care providers for their sexually abused sons, they often felt that their sons' progress, or lack thereof, was a reflection on them.

The social organization of family life, however, is not one that is simply predicated on dominance. Mothers also claimed that they "chose" to participate in family life in traditional ways to help their families cope with the disruptive

consequences of trauma. Unlike theorists of “difference,” however, I do not link women’s caring work to a distinctly gendered characteristic, either biologically or psychoanalytically (Chodorow 1978; Gilligan 1982). The data illustrate the ways in which family trauma is constructed as both the fault and the responsibility of mothers. The care work that is assumed to be necessary is, likewise, constructed as the primary domain of mothers. The accounts of these parents suggest that gender, race, and class both constrain and create the choices that women can pursue after family trauma. These choices of constraint often direct women into caring work that sustains gender inequality. By defining parental trauma as the fault and responsibility of mothers, parents attempt to align their accounts with prevailing ideas of family. White, heterosexual, two-parent households can rely on their race, class, and marital status (along with the assistance of family leave policies, which are also gendered, classed, and racialized; see Gerstel and McGonagle 1999) to actualize dominant conceptions of family life that reaffirm gender traditionalism.

Single mothers and families of color demonstrate that alignment with traditional gender reaffirmation is difficult to attain. Single mothers may experience the brunt of mother-blame via familial networks, social services, and cultural expectations of motherhood, yet the absence of a husband (and more specifically, another household income) made it difficult to reaffirm gender in traditional ways. The majority of single mothers in this sample provided accounts of resistance to mother-blame.

Although the middle-class ideal of motherhood is often coded as white (Hays 1998; Roberts 1997), other, less validated, constructions of motherhood also exist and obscure clear affiliations for mothers of color. Mothers of color, whose social locations and networks more clearly cross race and class boundaries, may have to manage multiple alignments during family trauma. This further suggests the need to reconceptualize feminist analyses of mother-blame and family trauma as racialized and classed processes. This reconceptualization challenges models that pathologize individual women by unveiling the structure of blame and how this structure reinforces gender, race, and class boundaries.

The deployment of traditional themes and gender strategies in the aftermath of trauma legitimates a particular type of family. It is striking that although women and men respond differently, they often operate within the same thematic frame. Indeed, CSA is an opportunity for the reassertion of gender traditionalism. Traditionalism, in turn, supports and rationalizes an ideology of heterosexual, male domination that primarily regulates women to (and absolves men from) care work and child care and blames women for extrafamilial CSA while simultaneously fortifying men’s economic advantage. Even those who resisted traditional themes felt the power of its primacy. Future research should examine other forms of trauma and develop methods that include families who do not make use of institutionalized services, especially low-income families who cannot afford these services and more families of color. Incorporating a more diverse population can increase our knowledge of how gender, race, and class inform the experience of family trauma and the production of gender reaffirmation.

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