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Child Abuse Reporting: Characteristics of the Type of Abuse, Gender, and Disclosure on Likelihood of Reporting by Iowa School Psychologists

Stephen L. Schwiesow
University of Nebraska at Omaha

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CHILD ABUSE REPORTING:
CHARACTERISTICS OF THE TYPE OF ABUSE, GENDER, AND DISCLOSURE
ON LIKELIHOOD OF REPORTING BY IOWA SCHOOL PSYCHOLOGISTS

A Field Project
Presented to the
Department of Psychology
and the
Faculty of the Graduate College
University of Nebraska

In Partial Fulfillment
of the Requirements for the Degree
Specialist in Education
University of Nebraska at Omaha

by
Stephen L. Schwiesow

June 1995

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FIELD PROJECT ACCEPTANCE

Acceptance for the faculty of the Graduate College,
University of Nebraska, in partial fulfillment of the
requirements for the degree Specialist in Education,
University of Nebraska at Omaha.

Committee

Name

Department

Jeff A. Fowl

Psychology

Hans C. Langrum

Psychology

Sherran G. Sauer

Special Education

Noran H. Hamer

Chairman

6/15/95

Date

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Abstract

This study examined the effects of a child's gender, type of suspected child abuse, and child's disclosure of abuse allegations on school psychologists' likelihood of reporting. One hundred seventy Iowa-certified school psychologists responded to a set of three vignettes, each depicting a suspected case of child abuse (sexual, physical, neglect). Each vignette was followed by two questions requesting respondents to rate their level of certainty of suspected abuse, and their likelihood of reporting the case to an intake agency. Also recorded were respondents' demographic background and past reporting practices. As predicted, sexual abuse was rated significantly more reportable than neglect and physical abuse, but physical abuse was not rated more reportable than neglect. Also as predicted children who verbally disclosed to an interviewer were rated significantly more reportable than those who did not disclose. There was an expected interaction effect between past reporting behavior and likelihood of reporting again. Unexpectedly, level of satisfaction with intake agencies' handling of those reports had no effect on current reporting behavior. Suggestions are made for future research as well as implications for practicing school psychologists when dealing with child abuse situations.

Introduction

Child Abuse Reporting: Characteristics of the Type of Abuse, Gender, and Disclosure on Likelihood of Reporting by Iowa School Psychologists

Child abuse, regardless of the type, affects children of all ages, socioeconomic status, and sex. It is estimated that one in four girls and approximately one in seven boys will be abused by the age of 18 (Shaeffer, 1986). In 1989 alone, there were more than 2.4 million reported cases of child abuse and neglect which represents an increase of approximately 10% from 1988 in the United States (Daro & Mitchel, 1990). Left untreated child abuse can lead to academic difficulties, social maladjustment (Laird, Ecken, Rode and Doris, 1990), physical or neurological impairment (Green, Voeller, Gaines, & Kulsie, 1981) and even to death (Lindsey, 1994). Given the high number of suspected abuse cases and the potential detriment to children, it is important to understand the role of professionals required to report abuse.

Current state and federal laws mandate professionals who have frequent contact with children to report all cases of suspected child abuse to local authorities (Tower, 1992). These laws have been in effect since 1967 and vary state by state (Zellman & Bell, 1990). Mandated reporters across all states include health professionals (including mental

health), law enforcement personnel, day care providers, and certificated school personnel. The National Association of School Psychologists (NASP, 1992) supports mandated reporting in its ethics guidelines for school psychologists.

The state of Iowa statutes specify mandatory reporters in the school setting. The first requirement is that the person is a professional in one of several areas (i.e., teacher, principal, school psychologist, school nurse, etc.). Secondly, the professional must be working within the scope of their professional duties and examines, attends, counsels, or treats the child. Lastly, the person must reasonably believe the child has been abused (State of Iowa, Department of Human Services, 1991; Iowa Department of Education, 1993).

All states specify what constitutes a reportable suspicion of child abuse. Iowa Code Section 232.68(2) defines child abuse as follows:

- (a) [Physical Abuse]. Any nonaccidental physical injury, or lying which is at variance with the history given of it, suffered by a child as the result of the acts or omissions of a person responsible for the care of the child.
- (b) [Sexual Abuse] The commission of a sexual offense with or to a child . . . as a result of the acts or omissions of the person responsible for the

care of the child. . . .

(c) [Denial of Critical Care/Neglect] The failure on the part of a person responsible for the care of a child to provide for the adequate food, shelter, clothing, or other care necessary for the child's health and welfare when financially able to do so or when offered financial or other reasonable means to do so. . . .

d) [Child Prostitution] The acts or omissions of a person responsible for the care of a child which allow, permit, or encourage the child to engage in acts prohibited pursuant to section 725.1 of the Code of Iowa. (State of Iowa, 1991, p. 19)

Although professionals are mandated to report suspected child abuse, and given specific guidelines as to what constitutes abuse, not all cases are brought to the attention of local reporting agencies. Bavolek (1983) found that only 31% of suspected abuse cases and 30% of suspected neglect were ever reported by Wisconsin school personnel. Other disciplines report a similar incidence of non-reporting (Zellman, 1990). In two studies of licensed psychologists 34% (Kalichman, Craig, & Follingstad, 1989) and 37% (Kalichman and Craig, 1991) had at some time failed to report suspected abuse in their clinical practices. Additionally, Besharov (1990) projects that all

professionals fail to report 30 to 40% of serious physical abuse and 50% of moderate abuse cases of which they are aware.

Many studies have been undertaken to discern what variables are related to the likelihood of mandated reporters following through with a report of suspected abuse. One clear variable is the type of abuse. A study conducted by Wilson and Gettinger (1989) showed that when responding to hypothetical abuse cases Wisconsin school psychologists were more likely to report cases reflecting physical or sexual abuse rather than neglect. Likewise, Kalichman and Craig (1991) found that licensed psychologists were more likely to report hypothetical cases of physical abuse than sexual abuse, particularly in younger children. Other studies have identified an interaction of child and reporter variables as important in the likelihood of reporting (Kalichman & Craig, 1991; Nightingale & Walker, 1986; Zellman & Bell, 1990).

Variables which are related to the child are important to the likelihood of abuse reporting. One factor suspected by researchers is age. In general, younger children are believed more often than older children (Kalichman & Craig, 1991; Zellman & Bell, 1990). However, Kalichman and Brosig (1992) found no effect for child's age in the case of physical abuse.

Gender has been discussed as a possible factor in rate of reporting. Zellman and Bell (1990) reported that a higher number of professionals would report sexual abuse when it involved a girl.

Many other studies have gathered mandated reporters' demographic information which might influence their tendency to report child abuse. These variables include age, years of experience, gender, place of employment, training in child abuse, confusion regarding laws (Kalichman & Brosig, 1992), perceived effect on child (Zellman, 1990c), and perceived legal ramifications of false reporting. In general, most demographic variables had little to do with likelihood of reporting (Wilson & Gettinger, 1989). However, some studies did find that previous experience with local agencies and the outcome of the report were significantly related to reporting, with more positive outcomes and experiences related to a higher incidence of reporting (Finlayson & Koocher, 1991; Zellman, 1990b,c; Zellman & Bell, 1990). Consistency of reporting during the course of a professional career was found to be a predictor of likelihood to continue to report in the future (Zellman & Bell, 1990). Confusion over the state laws which mandate reporting appears to be a case variable endorsed by subjects as a common reason for failure to report (Zellman & Bell, 1990).

The last important variable involves the specifics of

the child abuse case. Severity of abuse is one factor related to reporting; the more severe cases of physical and sexual abuse result in more reports (Zellman & Bell, 1990). Finlayson & Koocher (1991) also found severity increased reporting rates for sexual abuse cases. Additionally, more professionals were likely to report if a child gave a verbal account of abuse (Kalichman & Craig, 1991), while others found that if a child later recanted it resulted in a decreased tendency to report (Zellman & Bell, 1990). The most commonly endorsed reason for failure to report has been found to be lack of sufficient evidence that abuse had occurred (Zellman & Bell, 1990).

A significant body of literature has been conducted using vignettes to determine professionals' likelihood of reporting (Kalichman & Brosig, 1992; Kalichman & Brosig, 1993; Kalichman & Craig, 1991; Wilson & Gettinger, 1989; Zellman, 1990c). Background information and a scenario depicting an incident of a legally reportable child abuse case is sent to professionals who are in contact with children in a professional relationship. Scenarios are generally manipulated on one of several dimensions including: (a) type of abuse; (b) when the suspected abuse occurred (past or present); (c) whether the child asked the professional not to disclose the information; (d) age; and (e) gender of the child. Participants are then to indicate

whether they would or would not report the abuse and rate the importance of reasons for reporting or not reporting. Particular characteristics are then examined to determine a relationship between reporters and non-reporters. School psychologists are clearly mandated reporters of suspected abuse along with other school personnel such as principals, school counselors, school nurses, and teachers. Given the potentially dire consequences of failure to report child abuse, it is important to understand the variables related to reporting by school psychologists.

Given the importance of the topic, there appears to be a lack of current information about school psychologists' views on suspected child abuse cases. Especially important are their views about their reporting histories, the child and situational aspects which may influence their tendency to report suspected cases of abuse and the interactive effects between reporters and case variables.

A review of the relevant resources leads to the following research questions: (a) What influence does gender of child, child disclosure, and type of abuse have on school psychologists' certainty of and likelihood of reporting suspected cases of child abuse to an intake agency like the Department of Human Services (DHS), and (b) what characteristics of the reporter will affect their tendency to report a suspected case of child abuse?

From the previous research review, it was predicted that physical and sexual abuse would be reported more often than neglect and that children who verbally disclosed would be reported more frequently than those who do not disclose directly to an observer in a school setting.

An interaction effect was predicted in the case of gender of child and type of abuse. School psychologists who read the vignettes of sexual abuse involving girls would have a higher likelihood of reporting rate than other combinations of gender and type of abuse. No interaction effects between reporter characteristics and likelihood to report was expected with the exception of prior experiences with local reporting agencies (e.g., Department of Human Services, law enforcement, etc.) and level of satisfaction with the agencies' handling of these cases. Those psychologists with prior experiences with intake agencies would have a higher likelihood of reporting than those who had no prior experience. Also, those who were more satisfied with intake agencies' handling of abuse reports would have a higher likelihood of reporting.

Method

Participants

One hundred seventy state-certificated school psychologists currently employed in the state of Iowa served as the participants. A total of 352 surveys were mailed to

all Iowa-certified school psychologists listed in the 1994-5 Iowa School Psychologists Directory; surveys went to the participants at their Area Education Agency (AEA) main office addresses. To be licensed as a school psychologist in Iowa, one must have a Masters' degree plus 30 hours, an Educational Specialist degree or a Doctorate in school psychology.

Materials

Each school psychologist was mailed a survey packet which was to be completed and returned. The packet contained the following: (a) a cover page with instructions (Appendix A); (b) a summary of Iowa's Mandatory Reporting Law, 1991 Edition (Appendix B); and (c) three of a possible twelve vignettes (Appendixes C through N), each one describing a masked (no abuse descriptors), potential case of child abuse. Each packet included one sexual abuse, one physical abuse, and one neglect case. Each vignette concluded with two questions requiring Likert-type responses concerning respondents certainty of this case as reportable abuse and their tendency to report this case to an intake agency (e.g., DHS). Each scale was weighted as follows: (a) Definitely not = 1, (b) probably not = 2, (c) cannot decide = 3, (d) probably is (or would) = 4, and (e) definitely is (or would) = 5. Also included was a demographic data sheet-questionnaire (Appendix M) requesting data about the

respondent and four questions on reporting practices along with a self-addressed stamped return envelope. Background information was requested of each psychologist as to the following: gender, age (range), highest degree held, primary place of employment, years (of experience) at the primary place, years of practice as a psychologist, and university clock hours and inservice-type of child abuse training acquired. Also, inquiries were made about their prior child abuse reporting behavior (e.g., reporting history, number of reports made per year, whether child abuse training received was sufficient, and level of satisfaction with the handling of abuse cases reported to agencies.)

Twelve vignettes covering three of the four reportable types of child abuse (physical abuse, sexual abuse and neglect) were designed, primarily from samples from several sources (Zellman, 1990c; Wilson & Gettinger, 1988; Kalichman & Craig, 1991; Kalichman & Brosig, 1992; Finlayson & Koocher, 1991). Child prostitution was not included because of the young age (7) of the child depicted in the vignettes. Child variables manipulated were: (a) type of abuse (physical vs. sexual vs. neglect), (b) (child's) gender, and (c) child disclosure (disclosed or not disclosed). Pertinent background information was provided, including home and school behavior and symptom presentation.

To insure validity of the case vignettes, they were

previewed by three local Iowa DHS intake workers who had experience receiving and reviewing abuse reports such as those used in the vignettes. All three independently agreed on the presentations in the vignettes as potentially reportable cases of abuse in the state of Iowa. Some rewording was needed for 100% agreement on reportability of the vignettes. Two of the three intake workers agreed with wording which discriminated between the three types of abuse when the child did not disclose. As Iowa definitions for the three types of abuse were maintained (State of Iowa, 1991) and were similar to general standards for classifying the different abuse types, the vignettes were sent out to participants with agreement from the two intake workers.

Design and Procedure

Packets were mailed to all school psychologists listed in the 1994-95 Iowa School Psychologists Directory. After 15 days and receipt of approximately 160 surveys, nonrespondents were sent a thank-you card/reminder postcard. Approximately 10 more packets arrived and no additional reminders nor packets were mailed.

The cover letter explained the nature of the research project and invited voluntary and anonymous participation. Prior to completion of the vignettes and accompanying sets of questions, respondents were requested to read the summary model of the Iowa Child Abuse Reporting Law to guide their

decisions. This was done because confusion over state operational definitions of abuse and reporters' perceptions of those reporting laws were major contributors related to reporting intentions (Zellman & Bell, 1990).

The vignettes were assigned to participants in a counterbalanced and random manner. Each participant received three vignettes, one of each type of abuse, which were counterbalanced to avoid order effects. The child variables of gender and disclosure were then randomly assigned to participants to insure even distribution across participants. Respondents were instructed to complete the questions related to each vignette before reading and responding to the next. The demographic data-questionnaire sheet was then completed.

Of the 352 surveys sent out, 170 were returned in completed form, one was returned as a duplicate number, five were returned as incomplete, and four were returned as no longer employed or not at the mailing address. The return rate of 49% for the 347 available school psychologists was split almost equally by male (49%, $n = 84$) and female (51%, $n = 86$) psychologists. The demographic breakdown is listed in Table 1. The "typical" school psychologist surveyed was between 40 and 49, held a Specialist degree, and primarily served in both an elementary and secondary setting. Length of time was not distinguishable, as the range varied only

Table 1

Respondent Demographics

Age Range	%
20-29	15
30-39	23
40-49	40
50+	22
Level of Ed.	%
Doctorate	15
Specialist	48
Masters	38
Place of Employment	%
College/University	2
Secondary (Jr.-Sr.HS)	18
Pre-School/Elementary	28
Both sec. & elem.	46
Private Practice	1
Hospital	1
Other	4
Length of Time	%
1-2 Years	17
3-5 Years	24
6-10 Years	20
11-20 Years	28
21+ Years	12

between 12% and 28% across groupings.

Returned vignettes were fairly evenly distributed across the 12 various conditions (See Table 2). There was some disparity in numbers between those depicting physical abuse disclosed ($n = 103$) and not disclosed ($n = 67$).

The research design was a 3 X 2 X 2 (Type of Abuse X Gender X Child Disclosure) mixed Analysis of Variance (ANOVA), with type of abuse as a within subjects variable and gender and disclosure were both between subjects variables.

Analysis

A mixed analysis of variance (ANOVA) was conducted on the factors in the 3 X 2 X 2 design to determine main effects and interaction effects of the likelihood to report cases of suspected abuse. Reporter characteristics and prior experiences with local reporting agencies were compared to likelihood of reporting using single factor ANOVAs and Bonferonni (Dunn) t -tests. Correlations (Pearson r) were calculated to determine the strength and direction of the relationship between the two dependent variables: level of suspicion and likelihood of reporting.

Results

The calculated Pearson correlation coefficient ($r = .917$) determined that the relationship between the two dependent variables was very strong. This finding indicates

Table 2

Vignette Cell Sizes

<u>Name</u>	<u>Gender</u>	<u>Disclosure</u>	<u>Cell Size</u>
Sexual Abuse			
Jennifer	Girl	Disclosed	40
Bobby	Boy	Disclosed	45
Michelle	Girl	Not disclosed	46
Donnie	Boy	Not disclosed	39
Physical abuse			
Lizzie	Girl	Disclosed	55
Richard	Boy	Disclosed	48
Susie	Girl	Not disclosed	34
Ronald	Boy	Not disclosed	32
Neglect			
Marie	Girl	Disclosed	45
Mark	Boy	Disclosed	42
Mavis	Girl	Not disclosed	43
Artie	Boy	Not disclosed	40

Note. N = 510 total vignettes, n = 170 in each abuse type.

that 84% of the variance in one distribution can be statistically predicted from the second distribution. Since psychologists' certainty that vignette cases were reportable and their likelihood of reporting that particular case to an intake agency were similarly rated, subsequent ANOVAS and t-tests were compared only to subjects' likelihood of reporting. This was the area of most interest and results would not differ significantly from those of certainty of abuse.

An Analysis of Variance (ANOVA) was conducted with the three independent variables (gender of child, verbal disclosure, and type of abuse) and the dependent variable of likelihood of reporting. An alpha level of .01 was selected for all tests. This more stringent level was chosen to guard against type I errors and to increase confidence in the results of this study. Results indicated that the main effects of child disclosure and abuse type ($F = 75.76$ and $F = 13.24$, respectively) were statistically significant ($p < .01$, see Table 3). Respondents were more likely to report when children disclosed in the vignettes ($M = 4.59$) than when they didn't ($M = 3.85$, see Table 4). Responses to the surveys also indicated a higher likelihood of reporting for sexual abuse cases ($M = 4.65$) than for physical abuse ($M = 4.15$) and neglect cases ($M = 3.94$).

To further discriminate between the within subjects

Table 3

ANOVA (Type of Abuse X Sex X Disclosure)

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Between subjects					
Gender (A)	1	0.25	0.25	0.25	<u>ns</u>
Disclosure (B)	1	75.73	75.73	75.76	0.0001*
A X B	1	0.48	0.48	0.48	<u>ns</u>
<u>S</u> within-group					
error	396	(395.85)	(1.00)		
Within Subjects					
Abuse type (C)	2	15.00	7.50	13.24	0.0001*
A X C	2	0.12	0.06	0.11	<u>ns</u>
B X C	2	0.05	0.03	0.05	<u>ns</u>
A X B X C	2	0.65	0.32	0.57	<u>ns</u>
C X <u>S</u> within-group					
error	102	(57.76)	(0.57)		

* Significant at the alpha = .01 level.

Table 4

Cell Means of Abuse Type, Gender, and Disclosure for
Likelihood of Reporting

Abuse type	<u>n</u>	Mean	<u>SD</u>
Sexual	170	4.65	0.79
Physical	170	4.15	1.13
Neglect	170	3.94	1.14

Gender	<u>n</u>	Mean	<u>SD</u>
Boys	247	4.23	1.08
Girls	263	4.27	1.07

Level of Disclosure	<u>n</u>	Mean	<u>SD</u>
Disclosed	275	4.59	0.77
Not disclosed	235	3.85	1.23

Note. Abuse type was a within subjects variable and n = 170. Gender and level of disclosure were between subjects variables and total N = 510 applied. Grand mean = 4.25.

variables, Tukey tests were employed. Results using a Tukey's Studentized Range (HSD) Test differentiated between treatment means of type of abuse on the dependent variable likelihood of reporting. Results indicated that vignettes of sexual abuse were likely to be seen as statistically more reportable than either physical abuse or neglect vignettes ($p < .01$, see Table 5).

Gender of the child and all interactions were not statistically significant (see Table 3). Cell means for interactions are presented in Table 6. Of the 510 vignette responses, overall school psychologists' ratings of boys and girls ($M = 4.23$ and $M = 4.27$, respectively) were not significantly discrepant from the grand mean ($M = 4.25$, see Table 4). Therefore, there was no difference in likelihood of reporting based on gender of the child. The interaction of abuse type with gender was expected to be statistically significant, but was not ($F = 0.11$, see Table 3). Girls were not more likely to be reported in hypothetical cases of sexual abuse than other interactions of gender and type of abuse.

Child abuse training results, as measured by responses to number of clock hours received, indicated the following: over one-half (52%) of the psychologists received no training (zero clock hours) in a college or university setting as part of their coursework; 34% estimated 1-5 hours

Table 5

Tukey's Studentized Range (HSD) Test for Abuse Type
Based on Likelihood of Reporting

Abuse Type	Mean	<u>N</u>
Sexual	4.63 ^a	170
Physical	4.15 ^b	170
Neglect	3.94 ^b	170

Note. Means with different Tukey groupings, as indicated by the superscripts (a and b) are significantly different at $p < .01$ in the Tukey honestly significant difference comparison. MSE = 0.57. Critical value of studentized range = 4.21. Minimum significant difference = 0.24. Grand mean = 4.25.

Table 6

Individual Cell Means: Type of Abuse X Gender X Disclosure

Abuse Type	Gender	Disclosed	Cell Size	Mean	<u>SD</u>
Neglect	Girl	No	43	3.28	1.30
Neglect	Boy	No	40	3.75	1.13
Neglect	Girl	Yes	45	4.47	0.66
Neglect	Boy	Yes	42	4.24	1.03
Physical	Girl	No	34	3.56	1.28
Physical	Boy	No	33	3.64	1.29
Physical	Girl	Yes	55	4.53	0.74
Physical	Boy	Yes	48	4.48	0.99
Sexual	Girl	No	46	4.59	0.86
Sexual	Boy	No	39	4.13	1.10
Sexual	Girl	Yes	40	4.98	0.16
Sexual	Boy	Yes	45	4.89	0.38

Note. Cell mean indicates responses to Likert-type scale, with 1 = Definitely not reportable, 2 = Probably not reportable, 3 = Cannot decide, 4 = Probably is reportable, 5 = Definitely is reportable.

of training; and 9% and 4% responded with 6-10 and 11+ clock hours, respectively. However, one hundred twenty-nine (76%) reported receiving at least 2 hours of periodic inservices as mandated by Iowa guidelines. Five psychologists reported having received no training in child abuse reporting.

Eighty-two percent reported that they had received sufficient training in child abuse reporting from available sources. The survey indicated 11% responded with no knowledge of how agencies had handled previously reported abuse cases, 8% were very satisfied, 48% were somewhat satisfied, and 33% were not satisfied with the handling of cases reported to receiving agencies (DHS, police departments, etc.)

Of all those surveyed, 78% indicated they had reported at least 1 case of suspected child abuse; 75% had averaged 1-5 reports per year; 3% reported 6-10 cases; and fewer than 1% ($n = 1$) gave eleven or more reports per year.

Analyses of Variance (ANOVA) and Bonferroni t -tests were conducted to analyze pairwise significance for reporter variables and likelihood of reporting. An alpha level of .01 was again chosen for significance for both types of tests in order to minimize Type I errors. School psychologists' past reporting history ($F = 15.16$) and number of reports they had filed per year ($F = 5.45$, see Table 7) were both statistically significant. School psychologists who

Table 7

ANOVA for Respondents' Characteristics
And Likelihood of Reporting

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Gender	1	1.27	1.27	1.10	<u>ns</u>
Error	508	585.60	1.15		
Age	3	2.98	0.99	0.86	<u>ns</u>
Error	506	583.89	1.15		
Education	2	3.08	1.54	1.34	<u>ns</u>
Error	507	583.79	1.15		
Years Psych	4	2.19	0.55	0.47	<u>ns</u>
Error	505	584.68	1.16		
Level Served	6	16.75	2.79	2.46	<u>ns</u>
Error	503	570.11	1.13		
Years at Job	4	5.81	1.45	1.26	<u>ns</u>
Error	505	581.06	1.15		
Abuse Training	4	7.28	1.82	1.59	<u>ns</u>
Error	505	579.59	1.15		

(Table Continued)

Table 7 (continued)

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Sufficient	1	7.56	7.76	6.63	<u>p</u> <.05
Error	508	579.31	1.14		
Intake Satis.	3	8.37	2.79	2.44	<u>ns</u>
Error	506	578.49	1.14		
Ever Reported	1	17.00	17.00	15.16	* <u>p</u> <.01
Error	508	569.87	1.12		
Times Reported	3	18.38	6.13	5.45	* <u>p</u> <.01
Error	506	568.49	1.12		

Note. Error terms were calculated by vignettes total N = 510 rather than by individual respondents of N = 170.

* Significant at the alpha = .01 level.

indicated that they had reported suspected cases of child abuse as a part of their job had a statistically higher likelihood of reporting ($M = 4.34$) in this study than those who had never reported ($M = 3.90$, see Table 8). Those psychologists who indicated that they had reported suspected cases from 1-5 times per year in their jobs were statistically more likely to report ($M = 4.34$) than those who had never reported ($M = 3.90$, see Table 9). No other pairwise comparisons were statistically significant.

ANOVAs of school psychologists' primary age level served ($F = 2.46$) and their perception of the adequacy of abuse report training ($F = 6.63$) were not significant at the $\alpha = .01$ level, but were significant at the $\alpha = .05$ level (see Table 7). Gender ($F = 1.10$), age ($F = 0.86$), level of education ($F = 1.34$), years as a psychologist ($F = 0.47$), years at job ($F = 1.26$), and hours of abuse training ($F = 1.59$) which included only university clock hours were not significant ($p > .05$, see Table 7). Unexpectedly, intake satisfaction ($F = 2.44$) was not statistically significant (see Table 7). There were no statistical differences in reporters' satisfaction with agencies' prior handling of abuse reports and reporters' likelihood of reporting hypothetical cases.

Overall levels by gender of respondents indicated that males reported all vignettes slightly higher ($M = 4.30$,

Table 8

Bonferroni (Dunn) t-Tests for Ever Reported and
Likelihood of Reporting

Level of reporting	<u>n</u>	Mean
Yes	133	4.34
No	37	3.90

Note. Means are significantly different at $p < .01$. MSE = 1.12. Critical value of $T = 2.59$. Minimum significant difference = 0.29.

Table 9

Bonferroni (Dunn) t-Tests for Times Reported per Year and
Likelihood of Reporting

Number reported	<u>n</u>	Mean
0 (zero)	37	3.90*
1-5	127	4.34*
6-10	5	4.27
11+	1	5.00

Note. MSE = 1.12. Critical value of $T = 3.16$.

* indicates comparison significant at the $p < .01$ level.

$n = 84$) than did their female counterparts ($M = 4.20$, $n = 86$), although this difference is not statistically significant.

In this study children had a better chance of being reported to DHS (80% were reported), than not (10%) for all vignettes. This level was higher than Wilson and Gettinger's (1989) 61% reporting rate for school psychologists' responses in their survey. A breakdown by type of abuse likely to be reported in this study indicated 92%, 79%, and 75%, (see Table 10) for sexual abuse, physical abuse, and neglect, respectively.

Discussion

The current study attempted to identify factors related to school psychologists' decisions to report cases of child abuse. The results suggest that type of abuse and the child's disclosure of abuse are significantly related to the likelihood of school psychologists to report. Also, reporter variables of psychologists' history of past reporting and number of reports were related to their likelihood to report again. By contrast, no other child variables including gender and various interactions affected psychologists' tendency to report. In addition, no other reporter variables, including gender, age, education, child abuse training, current employment setting, years of experience, and satisfaction of agency's handling of abuse reports, were

Table 10

Ratings by Abuse Type and Level of Disclosure

	Sexual abuse	Physical abuse	Neglect
	<u>Number of reports</u>		
Total	170	170	170
Report	156 (92%)	134 (79%)	128 (75%)
Disclose	83	90	77
Not disclose	73	44	51
Not report	5 (3%)	25 (15%)	26 (15%)
Disclose	0	6	6
Not disclose	5	19	20
Unsure	9 (5%)	11 (6%)	16 (9%)
Disclose	1	7	4
Not disclose	8	4	12

Note. Subtotals should add to total above. Report = 4 or 5 on Likert scale, Not report = 1 or 2 on Likert scale, and Unsure = 3 on the Likert scale. Percent totals are rounded to nearest whole percent and may not total 100%.

related to reporting behavior.

It was expected that both of the hypothetical abuse cases (sexual and physical abuse) would have a higher likelihood of being reported than would neglect cases. This research demonstrated that cases of suspected sexual abuse were more likely to be reported than physical abuse and neglect but that cases of physical abuse were not more likely to be reported than neglect. This is in partial agreement with Wilson and Gettinger's (1989) results which found that both physical and sexual abuse cases were more likely than neglect cases to be reported. However, the present results are inconsistent with Kalichman and Craig's (1991) results that physical abuse was more likely to be reported than sexual abuse. Possible explanations for the current finding may be found by (a) the depiction of physical marks (bruises, scrapes, etc.) on all children in the vignettes and (b) the possible multiplicity of types of abuse shown in the scenarios. As a result the school psychologists may have been confused as to which type of abuse was being portrayed.

Results also indicated that a child's verbal account of abusive incidents (disclosure) to a school psychologist in a hypothetical vignette increased the psychologist's likelihood of reporting with hypothetical vignettes. Zellman and Bell (1990) indicated that lack of sufficient evidence

that abuse had occurred and a child's recanting of disclosure were variables which decreased the tendency to report, indicating that a child's corroboration of an event is an important factor in substantiating abuse. It appears that the child's disclosure of abuse is one more factor which strengthens the psychologist's belief that abuse has occurred.

Contrary to prediction gender of the child was not found to be a factor in respondents' likelihood of reporting any of the abuse types. This is unlike Zellman and Bell's (1990) results which found that professionals are more likely to report girls who had been sexually abused than boys. It is possible that school psychologists are becoming more aware of their duty to report all cases of sexual abuse regardless of gender. It is also possible that professionals are more aware that sexual abuse occurs with boys at a higher rate than once believed or reported. It could be that with the young age of the children (7), they may have been seen by school psychologists as "children" rather than as "boys and girls".

Results of this study are consistent with those found by Wilson and Gettinger (1989) which indicated that many reporter characteristics were not related to the tendency to report. However, they proposed that an interactive effect of prior reporting experiences and outcomes of those

experiences would be related to tendency to report, and should be included in subsequent studies. The current study found that there was indeed a relationship between one of these characteristics (prior reporting behavior) and likelihood of reporting. Those psychologists who had reported in the past, at least in the range of 1-5 times per year, were more likely to continue to report.

Level of satisfaction with the outcome of reported cases was not related to likelihood of reporting, contrary to that suggested by Wilson and Gettinger (1989) and Finlayson and Koocher (1991). This response was unexpected, especially considering respondents' comments about DHS's handling of abuse cases. A full one-third were not satisfied with intake agencies' handling of reports they had submitted. Also, many of the somewhat satisfied respondents were not fully satisfied. For example, several psychologists reported actual cases where DHS revealed to families the identity of the informant. These acts caused greater tension between the school, the family, and DHS, and in some cases resulted in more abuse to the children reported.

The psychologists's degree of certainty that a case was reportable and whether they indicated that they would report were highly correlated ($r = .92$). This represents 84% of the variance between the two factors. It also may suggest that one of the factors might be eliminated in future studies and

participants simply asked for their level of reporting.

An additional factor which might be included in future studies could be a question about respondents' failure to report suspected abuse. Non-reporting has been studied by others (Bavolek, 1983; Kalichman & Craig, 1991; Kalichman, Craig & Follingstad, 1989; Wilson & Gettinger, 1989) with findings from 30 to 70% of suspected neglect and abuse cases not reported. The implications of these findings are obvious and should be investigated further.

This research attempted to find child, situation, and reporter characteristics which influence school psychologists' likelihood of reporting suspected cases of child abuse and neglect. The application of this research might highlight factors which could result in a better understanding of the reporting process which would aid communication between schools and service agencies. First, it suggests that improvement in training is needed at the graduate level for school psychologists. Five of those surveyed indicated no abuse reporting training, whether through college or university educational programs or through agency or school inservices. Perhaps more important is that one-half of all those surveyed had not received training in their graduate-level academic training. Luckily the state of Iowa mandates periodic abuse report training, to include at least 2 hours every five years at the local

level. This appears to be an important factor in school psychologists' understanding of the laws which mandate abuse reporting.

Another concern is that communication between intake agencies, especially the Department of Human Services, and service agencies, such as those in Iowa, does not appear to be open and cordial. From the high rate of comments (over 50%) from the respondents, several key issues seem to appear: (a) the slow pace of response by DHS to reports, especially when reports in Iowa must be made within strict time limits; (b) incompetent or poorly trained DHS intake workers; (c) reluctance from DHS workers to investigate unless there are bruises and to check out reports on older abused children; (d) the impediments of the judicial and legal systems; and (e) little or no follow-up on founded cases of abuse. Positive comments about DHS were few, but respondents suspected that case workers were probably overloaded, that intake workers cannot take "suspicions" of abuse without actual evidence, and that the job expected of the intake and case workers is a difficult and emotional one.

The issues raised above appear to indicate that overall respondents would report suspicious cases when they are presented with them (grand mean of 4.25 on a scale of 1-5, in the "probable" range of reporting) and that they perceive

a breakdown in communication between agencies as occurring more from the intake agency's side. If a rift does exist, communication between the two would not appear to enhance services to children and their families. Zellman and Bell (1990) indicated such a rift in a major study which included interviews with Child Protective Services (CPS) staff in six states,

School staff were often cited as a major problem group for CPS precisely because of their willingness to report. CPS staff frequently expressed annoyance with school staff for so often reporting cases they considered less serious because they involved neither an immediate threat to the child's life nor serious injury. Often, CPS staff noted, they concerned physical or educational neglect, two categories of abuse that are frequently assigned a low priority for investigation.

But as Slater (1988) points out, "The clearest duty of the school psychologist, because it is mandated by law, is to report any suspected case of abuse to the appropriate authorities."

The results of this study also point out the need for better identification of child and family needs. Type of abuse is still a concern. Although sexual abuse of children was seen as more severe than physical abuse and neglect,

this study's results indicated that suspected physical abuse would still probably be reported (mean = 4.15). Neglect cases were seen as reportable nearly as often (mean = 3.94). At the level indicated, this may be a moot point, but it may point out a need to further educate professionals as to what constitutes reportable neglect cases.

The element that children who verbally disclosed were much more prone to be reported than those who displayed with nearly the same situational variables may indicate a good news-bad news scenario: the good news may be that children who are more vocal and not afraid to tell an adult about their situation, may eventually get appropriate services to help them or their family. The bad news may be that children who are not very verbal or who do not disclose due to fear or other reasons may be overlooked by schools and service agencies and possibly subjected to further abuse at home. Therefore, it is important for the observer to be vigilant in discerning "signs" of abuse.

This current study is encouraging in that it reflects the knowledge base of practicing school psychologists. It appears that the school psychologists in this sample are (1) informed about their mandated duty to report; (2) knowledgeable about the types of abuse and the long-term effects of abuse on children; and (3) ethically responsible to continue to report because of the potential harm to the

child or the family if leads are not investigated.

It is suggested that Iowa state laws were not as confusing to the respondents as seen by their high likelihood of reporting. Confusion over state laws was a point of conjecture in an earlier study by Kalichman and Brosig (1992).

Although this research clearly identified some of the factors related to child abuse reporting by school psychologists, there are some significant limitations which must be noted. One limitation may have been the inclusion of physical marks (bruises, scrapes, etc.) in all 12 vignettes. This may have caused some of the non-disclosed sexual abuse and neglect vignettes to be interpreted as depicting physical abuse, thereby negating the expected mean difference between physical abuse and neglect.

Secondly, all mean scores for type of abuse were at or near the probable to definite level (grand mean = 4.25); this may indicate a ceiling effect for reporting. Although precautions were taken to write succinct vignettes (review of previously used samples and suggestions by DHS intake workers), they may be in need of revision in order to make them less overtly distinguishable. It is also possible that inclusion of the summary laws for mandated reporters may have keyed the respondents into thinking that all the vignettes were reportable cases.

In addition, but contrary to the previous point, comments from several respondents indicated that there was a lack of sufficient evidence in the vignettes. This concern may have been limited by the scope of this research. It may also reflect the school psychologist's drive for child advocacy and proper response to suspected cases of child abuse (gathering more data), rather than to concerns over the limited nature of the vignettes.

A limitation also related to the last two comments is that of the survey format. If the school psychologists were biased towards reporting in a socially desirable way, then their tendency to report may have been inflated.

Lastly, another limitation is that of ecological validity. Would a school psychologist report in the same way if faced with a suspicion of abuse in the course of their day to day dealings with children and families? A school psychologist's response to a hypothetical case of child abuse may differ significantly from their actual response in their schools. Although this research format has been used extensively it is important to continue to ask the question of validity.

References

Bavolek, S. (1983). Why aren't school personnel reporting child abuse in Wisconsin? Teacher Education and Special Education, 6, 33-38.

Besharov, D.J. (1990). Recognizing child abuse: A guide for the concerned. New York: The Free Press.

Daro, D., & Mitchell, L. (1990). Current trends in child abuse reporting and fatalities: The results of the 1989 annual fifty state survey. Chicago, IL: National Committee for the Prevention of Child Abuse.

Finlayson, L. M., & Koocher, G. P. (1991). Professional judgment and child abuse reporting in sexual abuse cases. Professional Psychology, Research and Practice, 22, 464-472.

Green, A. H., Voeller, K., Gaines, R. W., & Kulsie, J. (1981). Neurological impairment in maltreated children. Child Abuse and Neglect, 5, 129-134.

Iowa Department of Education (1993, October). Model policy on identifying and reporting child abuse and model policy and Rules on procedures for investigating allegations of abuse of students by school employees. Des Moines, Iowa.

Kalichman, S. C., & Brosig, C. L. (1992). The effects of statutory requirements on child maltreatment reporting: A comparison of two state laws. American Journal of Orthopsychiatry, 62, 284-296.

Kalichman, S. C., & Brosig, C. L. (1993). Practicing psychologists' interpretations of and compliance with child abuse reporting laws. Law and Human Behavior, 17, 83-93.

Kalichman, S. C., & Craig, M. E. (1991). Professional psychologists' decisions to report suspected child abuse: clinician and situation influences. Professional Psychology: Research and Practice, 22, 84-89.

Kalichman, S. C., Craig, M., & Follingstad, D. (1989). Factors influencing the reporting of father-child sexual abuse: Study of licensed practicing psychologists. Professional Psychology: Research and Practice, 20, 84-89.

Laird, M., Eckenrode, J., & Doris, J. (1990). Maltreatment and the social and academic adjustment of school children: Final report. Ithaca, NY: Cornell University.

Lindsey, D. (1994). Mandated reporting and child abuse fatalities: Requirements for a system to protect children. Social Work Research, 18, 41-54.

National Association of School Psychologists. (1992). Principles for professional ethics. (NASP Publication No. 6021-A.) Silver Spring, Maryland.

Nightingale, M., & Walker, E. (1986). Identification and reporting of maltreatment by Head Start personnel: Attitudes and experiences. Child Abuse and Neglect, 10, 191-199.

Shaeffer, C. (1986). The sexual abuse of children: Scandalous statistics. Communique, 15, 4.

Slater, B. R. (1988). President's Message: School Psychologists and Abused Children. The School Psychologist, 42, 2-4.

State of Iowa. (1991) Recognizing and reporting child abuse & neglect: An explanation of Iowa's mandatory reporting law. Department of Human Services, Division of Adult, Children & Family Services. Des Moines, IA.

Tower, C. C. (1992). The role of educators in the protection and treatment of child abuse and neglect. (Report No. ACF 92-30172.) U.S. Department of Health and Human Services, National Center on Child Abuse and Neglect. (ERIC Document Reproduction Service No. Ed 355 732)

Wanat, C. L., Helms, L. B., & Rosien, J. E. (1994). Home v. school: Issues for school leaders in reporting child abuse. Journal of School Leadership, 4, 223-244.

Wilson, C. A., & Gettinger, M. (1989). Determinants of child-abuse reporting among Wisconsin school psychologists. Professional School Psychology, 4, 91-102.

Zellman, G. L. (1990a). Child abuse reporting and failure to report among mandated reporters. Journal of Interpersonal Violence, 5, 3-22.

Zellman, G. L. (1990b). Linking schools and social services: The case of child abuse reporting. Educational Evaluation and Policy Analysis, 12, 41-55.

Zellman, G. L. (1990c). Report decision-making patterns among mandated child abuse reporters. Child Abuse and Neglect: The International Journal, 14, 325-336.

Zellman, G. L. (1991). Reducing underresponding: Improving system response to mandated reporters. Journal of Interpersonal Violence, March, 115-118.

Zellman, G. L., & Bell, R. M. (1990). The role of professional background, case characteristics, and protective agency response in mandated child abuse reporting. Santa Monica, CA: Rand.

Appendix A

COVER LETTER

PLEASE READ THIS COVER LETTER FIRST BEFORE GOING ON!

To: Certified Iowa School Psychologists
From: Steve Schwiesow, AEA-13 School Psychologist
Re: Child Abuse Reporting Survey

Dear Fellow School Psychologists,

I am a school psychologist working in southwestern Iowa who is finishing my Education Specialist degree in School Psychology. To complete this program I am surveying the child abuse reporting practices of Iowa school psychologists.

This survey is a voluntary enlistment of your time and energy and is meant to help gain information about the reporting of child abuse in the state of Iowa. YOUR RESPONSES WILL REMAIN CONFIDENTIAL. Results will be published as part of my field project, but may be requested from the address listed below:

Steve Schwiesow, School Psychologist
Loess Hills AEA-13, Manawa Extension Office
1600 South Hwy. 275
Council Bluffs, Iowa 51503

Directions:

1. Please DO NOT read ahead. Read materials as presented in the order sent to you.
2. Read the page concerning the Iowa Child Abuse Reporting Statutes.
3. Read each of the three vignettes which follow and complete the two questions given after each vignette.
4. Complete the Demographic Data sheet enclosed.
5. Please return the entire packet in the enclosed self-addressed stamped envelope.

Thank you for your support in this endeavor!

Steve Schwiesow

Appendix B

Excerpt from Recognizing and Reporting Child Abuse & Neglect: An Explanation of Iowa's Mandatory Reporting Law
(1991 Edition)

According to Iowa Code Section 232.69, there are four requirements for a person required to report child abuse:

1. The person is in a profession listed as a mandatory reporter of abuse (this includes school psychologists).
2. The person is in the scope of his or her professional practice.
3. The person examines, attends, counsels/treats a child.
4. The person reasonably believes the child has been abused or neglected.

A report is not an already established fact, but rather the request for assessment into the condition of a child...The Iowa Department of Human Services (DHS) conducts child abuse investigations pursuant to the following definitions of child abuse found in the Iowa Code: (3 of the 4 reportable types are presented here.)

Physical Abuse

Any nonaccidental physical injury, or injury which is at variance with the history given of it, suffered by a child as the result of the acts or omissions of a person responsible for the care of the child.

Sexual Abuse

The commission of a sexual offense with or to a child pursuant to chapter 709, section 726.2 or section 728.12, subsection 1, as a result of the acts or omissions of the person responsible for the care of the child. Notwithstanding section 702.5, the commission of a sexual offense under this paragraph includes any sexual offense referred to in this paragraph with or to a person under the age of eighteen years.

Denial of Critical Care (Neglect)

The failure on the part of a person responsible for the care of a child to provide for the adequate food, shelter, clothing or other care necessary for the child's health and welfare when financially able to do so or when offered

(Appendix B Continues)

Appendix B (Continued)

financial or other reasonable means to do so. A parent or guardian legitimately practicing religious beliefs who does not provide specified medical treatment for a child for that reason alone shall not be considered abusing the child...

Summary: For DHS to conduct a child abuse investigation, three factors must be present:

1. The alleged victim must be a child (under age 18).
2. The child must have suffered child abuse as defined in Iowa Code (listed above).
3. The child abuse must have been the result of the acts or omissions of the person responsible for the care of the child.

Appendix C

Vignette: [Sexual Abuse, Girl, Disclosed]*

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Jennifer. She was originally referred by her teacher for learning difficulties, but she has also been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Jennifer's friends has told a teacher that Jennifer was afraid of her stepfather.

During your session with Jennifer, she remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview you notice that Jennifer has a long, narrow bruise on the inside of each of her upper legs. When you ask her about the bruises, she breaks down crying. She then tells you how her step-father comes into her room at night when her mother works late and that he rubs Jennifer "down there." After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

* The descriptors in the brackets of Appendixes C-N were not part of the vignettes sent out to school psychologists.

Appendix D

Vignette: [Sexual Abuse, Boy, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Bobby. He was originally referred by his teacher for learning difficulties, but he has also been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Bobby's friends has told a teacher that Bobby was afraid of his stepfather.

During your session with Bobby, he remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview you notice that Bobby has a long, narrow bruise on the inside of each of his upper legs. When you ask him about the bruises, he breaks down crying. He then tells you how his stepfather comes into his room at night when his mother works late, and that he rubs Bobby "down there." After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix E

Vignette: [Sexual Abuse, Girl, Not Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Michelle. She was originally referred by her teacher for learning difficulties, but she has also been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Michelle's friends had told a teacher that Michelle was afraid of her stepfather.

During your session with Michelle, she remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview you notice that Michelle has a long, narrow bruise on the inside of each of her upper legs. She takes a bathroom break and comes back complaining, "It hurts when I go to the bathroom." When you ask her about the bruises, she breaks down crying and refuses to talk to you any further. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix F

Vignette: [Sexual Abuse, Boy, Not Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Donnie. He was originally referred by his teacher for learning difficulties, but he has also been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Donnie's friends had told a teacher that Donnie was afraid of his stepfather.

During your session with Donnie, he remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview you notice that Donnie has a long, narrow bruise on the inside of each of his upper legs. He takes a bathroom break and comes back complaining, "It hurts when I go to the bathroom." When you ask him about the bruises, he breaks down crying and refuses to talk to you any further. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?
 - ☐ Definitely not reportable
 - ☐ Probably not reportable
 - ☐ Cannot decide if reportable
 - ☐ Probably is reportable
 - ☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?
 - ☐ Definitely not report
 - ☐ Probably not report
 - ☐ Cannot decide on reporting
 - ☐ Probably would report
 - ☐ Definitely would report

Appendix G

Vignette: [Physical Abuse, Girl, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Lizzie. She was originally referred by her teacher for learning difficulties, but she has also been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Lizzie's friends had told a teacher that Lizzie was afraid of her stepfather.

During your session with Lizzie, she remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview you notice that Lizzie has a bruise on the left side of her face and one on her left arm. When you ask her about the bruises, she breaks down crying. She then tells you that her stepfather babysits her when her mother works late at night, and that he often gets mad and pushes her when she doesn't mind right away. The other night he got mad and pushed her down when she didn't pick up her toys right away. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix H

Vignette: [Physical Abuse, Boy, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Richard. He was originally referred by his teacher for learning difficulties, but he has also been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Richard's friends had told a teacher that Richard was afraid of his stepfather.

During your session with Richard, he remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview, you notice that Richard has a bruise on the left side of his face and one on his left arm. When you ask him about the bruises, he breaks down crying. He then tells you that his stepfather babysits him when his mother works late at night, and that he often gets mad and pushes him when he doesn't mind him right away. The other night he got mad and pushed Richard down when he didn't pick up his toys right away. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix I

Vignette: [Physical Abuse, Girl, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Susie. She was originally referred by her teacher for learning difficulties, but she has also been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Susie's friends had told a teacher that Susie was afraid of her stepfather.

During your session with Susie, she remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview, you notice that Susie has a bruise on the left side of her face and one on her left arm. When you ask her how she got the bruises, she breaks down crying and refuses to talk to you any further. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?
 - ☐ Definitely not reportable
 - ☐ Probably not reportable
 - ☐ Cannot decide if reportable
 - ☐ Probably is reportable
 - ☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?
 - ☐ Definitely not report
 - ☐ Probably not report
 - ☐ Cannot decide on reporting
 - ☐ Probably would report
 - ☐ Definitely would report

Appendix J

Vignette: [Physical Abuse, Boy, Not Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Ronald. He was originally referred by his teacher for learning difficulties, but he has also been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Ronald's friends had told a teacher that Ronald was afraid of his stepfather.

During your session with Ronald, he remained somewhat shy and withdrawn, which made rapport-building slow. However, during the student interview, you notice that Ronald has a bruise on the left side of his face and one on his left arm. When you ask him how he got the bruises, he breaks down crying and refuses to talk to you any further. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?
 - ☐ Definitely not reportable
 - ☐ Probably not reportable
 - ☐ Cannot decide if reportable
 - ☐ Probably is reportable
 - ☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?
 - ☐ Definitely not report
 - ☐ Probably not report
 - ☐ Cannot decide on reporting
 - ☐ Probably would report
 - ☐ Definitely would report

Appendix K

Vignette: [Neglect, Girl, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Marie. She was originally referred by her teacher for learning difficulties, but she has been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Marie's friends had told a teacher that Marie was afraid of her stepfather.

During your session with Marie, she remained somewhat shy and withdrawn, which made rapport-building slow. You notice that her clothes are smelly and dirty. During the student interview, you notice that Marie has a slight bruise on the left side of her face and nasty scrapes on her left arm and knee. There are no dressings on the scrapes. When you ask her about the bruise and scrapes, she breaks down crying. She then tells you that her stepfather is supposed to babysit her when her mother works late at night; however, he often takes off with his buddies and leaves Marie by herself. Marie recently fell down the stairs during one of those times. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix L

Vignette: [Neglect, Boy, Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Mark. He was originally referred by his teacher for learning difficulties, but he has been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Mark's friends had told a teacher that Mark was afraid of his stepfather.

During your session with Mark, he remained somewhat shy and withdrawn, which made rapport-building slow. You notice that his clothes are smelly and dirty. During the student interview, you notice that Mark has a slight bruise on the left side of his face and nasty scrapes on his left arm and knee. There are no dressings on the scrapes. When you ask him about the bruise and scrapes, he breaks down crying. He then tells you that his stepfather is supposed to babysit him when his mother works late at night; however, he often takes off with his buddies and leaves Mark by himself. Mark recently fell down the stairs during one of those times. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable

2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix M

Vignette: [Neglect, Girl, Not Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old girl, Mavis. She was originally referred by her teacher for learning difficulties, but she has been displaying a change of behavior in her classes over the last two months. She has become socially withdrawn, has begun lying to her teachers, and has been arguing with peers and teachers at school. In addition, one of Mavis' friends told a teacher that Mavis was afraid of her stepfather.

During your session with Mavis, she remained somewhat shy and withdrawn, which made rapport-building slow. You notice that her clothes are smelly and dirty. During the student interview, you notice that Mavis has a slight bruise on the left side of her face and nasty scrapes on her left arm and knee. There are no dressings on the scrapes. When you ask her about the bruise and scrapes, she breaks down crying and says, "Nobody cares." Mavis then refuses to talk to you any further. She keeps eyeing the apple on your desk and asks if she could have a bite. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?

☐ Definitely not reportable
☐ Probably not reportable
☐ Cannot decide if reportable
☐ Probably is reportable
☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?

☐ Definitely not report
☐ Probably not report
☐ Cannot decide on reporting
☐ Probably would report
☐ Definitely would report

Appendix N

Vignette: [Neglect, Boy, Not Disclosed]

Imagine yourself as a school psychologist in the following situation:

You have been on a building assistance team concerning the evaluation of a 7 year old boy, Artie. He was originally referred by his teacher for learning difficulties, but he has been displaying a change of behavior in his classes over the last two months. He has become socially withdrawn, has begun lying to his teachers, and has been arguing with peers and teachers at school. In addition, one of Artie's friends told a teacher that Artie was afraid of his stepfather.

During your session with Artie, he remained somewhat shy and withdrawn, which made rapport-building slow. You notice that his clothes are smelly and dirty. During the student interview, you notice that Artie has a slight bruise on the left side of his face and nasty scrapes on his left arm and knee. There are no dressings on the scrapes. When you ask him about the bruises, he breaks down crying and says, "Nobody cares." Artie then refuses to talk to you any further. He keeps eyeing the apple on your desk and asks if he can have a bite. After this session, you realize you must make a decision whether or not to report this situation to the Department of Human Services (DHS).

Please answer the following questions:

1. What is your degree of certainty that this is a case of reportable abuse/neglect?
 - ☐ Definitely not reportable
 - ☐ Probably not reportable
 - ☐ Cannot decide if reportable
 - ☐ Probably is reportable
 - ☐ Definitely is reportable
2. What is your likelihood of reporting this situation to DHS?
 - ☐ Definitely not report
 - ☐ Probably not report
 - ☐ Cannot decide on reporting
 - ☐ Probably would report
 - ☐ Definitely would report

Appendix O

DEMOGRAPHIC DATA SHEET

Gender: ☐ M ☐ F Age: ☐ 20-29 ☐ 30-39
☐ 40-49 ☐ 50+
 Highest degree held: ☐ Doctorate ☐ Specialist
☐ Masters
 Primary place of employment as a school psychologist:
☐ College or University setting
☐ Secondary school (Middle School-Junior High/High School)
☐ Preschool or Elementary school
☐ Private practice/Contract out
☐ Hospital setting
☐ Other

(_____)

Years at the primary place of employment:
☐ 1-2 ☐ 3-5 ☐ 6-10 ☐ 11-20 ☐ 21+
 Years of practice as a school psychologist, including
 internship:
☐ 1-2 ☐ 3-5 ☐ 6-10 ☐ 11-20 ☐ 21+

Clock hours of "child abuse reporting" training you have
 received as part of a university-level course:
☐ 0 hours ☐ 1-5 hours ☐ 6-10 hours
☐ 11+ hours

or as additional training (e.g., inservices or workshops,
 specify type: _____ hours

Please also answer the following questions:

1. Have you ever reported suspicions of child abuse or neglect as part of your job as a school psychologist?
☐ YES ☐ NO
 If YES, about how many per year? ☐ 1-5 ☐ 6-10
☐ 11+
2. Do you believe you have received sufficient training in the reporting of child abuse? ☐ YES ☐ NO
3. What is your level of satisfaction with the handling of abuse cases reported to receiving agencies (police, DHS, etc.)?
☐ No knowledge of how abuse cases have been handled
☐ Very satisfied with the handling of abuse reports
☐ Somewhat satisfied with the handling of abuse reports
☐ Not satisfied with the handling of abuse reports
 If somewhat or not satisfied, please elaborate:

THANK YOU VERY MUCH FOR COMPLETING THIS DATA SHEET!