

To the Graduate Council:

I am submitting a thesis written by Patricia D. Hartman entitled, "The effects of foster care residence and age of child on credibility of child sexual abuse allegations." I have examined the final copy of this thesis and recommend that it be accepted in partial fulfillment of the requirements for the degree of Master of Science with a major in Research Psychology.

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recommend its acceptance:

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Accepted for the Graduate Council:

The Effects of Foster Care Residence and
Age of Child on Credibility of Child
Sexual Abuse Allegations

A Thesis

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Master of Science Degree

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Patricia D. Hartman

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Dedication

I would like to dedicate this thesis to several very special children. For Rosalee and her siblings with the hopes that those who come after you will be believed. For CC who went to be with our God in Heaven and never grew old enough for age to be a factor. For AG who became caught in between adults before she was old enough to talk for herself. Finally, for the countless number of children who reside in foster care now and in the future; with hopes that the adults who watch over you find ways to ensure your safety.

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Abstract

Research demonstrates that children who have been sexually abused are at increased risk for further abuse. Children placed into foster care are also at heightened risk for abuse in their foster homes. While much research has been conducted concerning the credibility of children's sexual abuse allegations, none has examined the believability of allegations of abuse within the foster care system.

In the present study, 223 undergraduate psychology students were randomly assigned to read one of six scenarios. Each scenario described a girl (age 6, 11, or 15 years of age) who either resided with her mother and stepfather or foster parents. The girl was described as a past sex abuse victim with behavioral and emotional difficulties who is currently alleging sexual abuse by the stepfather or foster father.

In a multivariate analysis of variance controlling for participant gender, there was a significant main effect for foster care residence but not for child age or the interaction between foster care condition and age. Children in foster care were less believable. For example, foster children were rated as more likely to be making up the allegation due either to anger at their caregivers, to get out of trouble at school, or to get out of their current living situations. Future research should investigate reasons for these negative views towards allegations by foster children.

Table of Contents

Chapter 1 Introduction and Background.....	1
Introduction.....	1
Overview of Child Witness Capabilities.....	4
Overview of Child Witness Credibility.....	9
Rationale for the Present Study.....	17
Chapter 2 Method.....	22
Participants.....	22
Materials and Procedure.....	24
Chapter 3 Results and Discussion.....	26
Results.....	26
Discussion.....	29
Limitations.....	35
Implications.....	40
References.....	41
Tables.....	50
Appendixes.....	59

Chapter 1

Introduction and General Information

Introduction

Over the past 30 years, a large body of research has examined many areas related to child sexual abuse, including risk and protective factors, preventions, and child outcomes. Additionally, researchers have explored the reliability and credibility of sexual abuse allegations. Social policies and legal practices have advanced tremendously as a result of this research. However, child abuse continues to affect thousands of children annually. The U.S. Department of Health and Human Services reports that in 2006 some 905,000 children in 51 reporting states were the subject of a child abuse investigation. The reported numbers for 2006 further indicated that children with a prior history of abuse were 96 percent more likely to experience re-victimization than children who had not been a victim before (U.S. Department of Health, 2006).

When an allegation of sexual abuse is made, minimally the child will undergo interviews for investigative purposes; in extreme circumstances to keep a child safe the foster care system is utilized to remove a child from their home of origin. Unfortunately, children are not always safe in foster care. The above-referenced report from the U.S. Department of Health and Human Services provides information regarding children who reside in foster care at the time of a reoccurrence of alleged abuse. Through Child Family Service Reviews, the Children's

Bureau has an established standard for children in foster care of 99.68 percent to be free of abuse or neglect while in foster care.

Research conducted by Benedict, Zuravin, Brandt and Abbey (1994) focused on the type and frequency of child maltreatment by foster family care providers in the urban region of Baltimore, MD. Due to the rising concern about maltreatment in out of home placements, the Federal Child Abuse Prevention and Treatment Act was amended to require reporting of child abuse in out of home placements. This study included foster homes that had been screened, evaluated and licensed by the state of Maryland to serve foster children from 1984-1988 and included 285 total homes. Four hundred forty-three reports of abuse were received, for an average of 1.5 reports per home. The allegations included allegations of physical abuse (over 60%), neglect (17.4%), and sexual abuse (10.7%). Substantiation rates were significantly different; only 9% of the physical abuse allegations were substantiated while over 55% of the sexual abuse allegations were substantiated (meaning found to be true). In over 80% of the documented reports alleging physical abuse or neglect, foster parents themselves were named as designated perpetrators. Conversely, in only 40% of sexual abuse allegations were the foster parents themselves named as an alleged perpetrator; the remaining percentages were allegations against biological or foster siblings.

Benedict, Zuravin, Somerfield and Brandt (1996) conducted an investigation of the health and functioning of children maltreated while in

family foster care. They defined family foster care as approved and licensed foster families in the state of Maryland. Foster care records for children with substantiated reports of maltreatment within the foster care system from 1984 - 1988 were analyzed and included children who had not been abused while in foster care and children who had been abused while residing in foster care. Thirty-eight (48.7%) of the children with substantiated reports while in foster care had been sexually abused. In over two-thirds of these incidents the foster father or other foster family member was the perpetrator, in 20% of the incidents other foster children were the perpetrators. Females were significantly more likely to be the victim of sexual abuse compared to other forms of maltreatment. Maltreated children were also significantly more likely to have had more than one foster home placement during their foster care episode or out of home placement. All foster care children, whether or not they had been maltreated after entering foster care, evidenced increased problems in health, development and overall functioning. However, those with substantiated reports of maltreatment after entering foster care evidenced these problems at significantly higher rates than the non-maltreated comparison group. Further comparison showed that children who had been sexually abused while in foster care were yet even more affected by the same problems and were more likely to have mental health problems as compared to the other groups. It could not be determined by the records if

the abuse in foster care occurred before the onset or worsening of symptoms or behaviors.

Overview of Child Witness Capabilities

Research has done much to assist in the understanding of the abilities of children when called upon to provide testimony. Children as young as preschool can give accurate accounts of their experiences. However, many factors affect the accuracy of child witnesses. Typically, research has examined suggestibility, cognitive ability (e.g., intelligence and memory), and social factors which influence a child's ability to render accurate testimony.

Suggestibility has been linked to external and internal factors; a child's individual level of suggestibility is associated with an interaction of these two factors (Bruck, Ceci, & Melnyk, 1997). External factors include interview techniques (e.g., leading questions), an involved adult such as a parent or relative, or environmental and situational factors such as place and time of interview, for example in court or at a police station versus a neutral setting (Cordon, Saetermore, & Goodman, 2005; Garven, Wood, Malpass, & Shaw, 1998; Goodman, Rudy, Bottoms, & Aman, 1990; Lepore & SESCO, 1994). Internal factors are more child specific and include factors such as cognitive abilities (memory and verbal), and emotional drives such as fear, guilt, and shame. Other characteristics that are consistently associated with suggestibility are intelligence, language ability, creativity, and self-concept (Melnyk, Crossman & Scullin, 2007;

Ceci, & Bruck, 1995; Ross, 2003). Intelligence, though often employed as an indicator of a child witness's ability, has not been shown to be a strong predictor of suggestibility; however, children with intellectual disabilities are more suggestible than children of normal intelligence. In regard to language abilities, the stronger a child's linguistic ability the less prone they are to suggestion. Highly creative children or those that are strongly imaginative appear to be more suggestible as are children with a weaker sense of self (Melnyk, Crossman & Scullin, 2007).

The strongest predictor of suggestibility in children is age. Older children (school age and above) typically exhibit better memory skills and are less prone to suggestion (Ceci, & Bruck, 1995). Some interview techniques are especially problematic for the young child and strongly impact levels of suggestibility. A reoccurring theme in this realm is that interviewer bias can cause young children to alter their reports in the direction of the interviewer's preconceived ideas. Bias can occur without an interviewer's awareness, and one piece of misinformation can produce suggestibility (Baker-Ward, Hess, & Flannagan, 1990; Dent & Stephenson, 1979; Howe, O'Sullivan, & Marche, 1992; Melnyk, & Bruck, 2004). Interviewer bias includes, for example, the sorts of questions asked, the number of times specific questions are asked during an interview or within the span of several interviews, introducing stereotypes (what he did was bad, wasn't it?), and non-verbal cues; all of which have been linked with increased levels of suggestibility especially in younger children

(Ceci, & Bruck, 1995; Toglia, Read, Ross, & Lindsay, 2007). Closed ended questions which provide limited response options can increase suggestibility as young children may assume the interviewer's intent and answer accordingly (Baker-Ward, Gordon, Ornstein, Larus, & Clubb, 1993; Ceci, & Bruck, 1995; Peterson & Bell, 1996; Steward & Steward, 1996). Questions to which the child cannot be reasonably expected to know the answer, such as "Why do you think he did that?", are problematic in that the child may create an answer to satisfy the question without truly knowing the answer (Ceci, & Bruck, 1995).

Repeated interviews are linked to suggestibility in children with the younger children again being the most at risk (Ackil & Zaragoza, 1995; Ceci, Ross, & Toglia, 1987; Garven, Wood, & Malpass, 2000). As an investigation moves through the legal system, children can be interviewed as many as 12 times (Whitcomb, 1992). Although repeated interviews can increase the amount of detail (crucial for prosecution), they can also introduce misinformation.

Cognitive features, particularly memory abilities, are commonly linked to a child's ability to relate their experiences in ways that are meaningful to others. Generally speaking, not only are children with stronger memory abilities less prone to suggestion (Marche, 1999; Marche & Howe, 1993; Pezdek & Roe, 1995), their accounts have greater detail and length (Davies, Tarrant, & Flin, 1989; Flin, Boon, Knox, & Bull, 1992; Nelson & Grundel, 1981). The narratives of young children

(preschool age) are typically very brief, but highly accurate (Goodman & Reed, 1986; Oates & Shrimpton, 1991). Preschoolers can recall and relate single events such as a family vacation, even with long delays (Quas, Goodman, & Redlich, 2000). The younger the child the more apt they are to employ scripts to recall information (Oates & Shrimpton, 1991). Scripts are ways of organizing events that are routine and happen regularly such as going to daycare or the grocery store. The memory script contains a basic framework of the reoccurring event, such as getting up, getting dressed, eating breakfast, and leaving in the car. Scripts also include people the child encounters in a role aspect, such as a nurse or store clerk, not necessarily specific individuals (Farrar, & Goodman, 1992). While the young child can accurately and freely relay this information, their account may leave out specific details that may vary in one of the recurring events, such as on one occasion stopping at the gas station on the way to daycare, or which specific nurse was present at their check up (Davies, Tarrant, & Flin, 1989; Flin, Boon, Knox, & Bull, 1992; Martin, & Halverson, 1983; Nelson & Grunedl, 1981).

Source-monitoring is a memory related skill which develops as a child ages and refers to the ability to self-monitor internal information and identify the source of that information. Specifically, source-monitoring allows a child to differentiate between memories of an event that they actually experienced from an event they learned about from another source, such as interview questions or family discussions. This also helps

children distinguish between events that are real and events that are imaginary. Source-monitoring is often thought to be a large part of why younger children are more susceptible to suggestion as they have not yet achieved the ability to monitor their own memories and associated sources (Ceci, Huffman, Smith, & Loftus, 1994; Marche, 1999, Marche & Howe, 1993; Pezdek & Roe, 1995).

Social factors also contribute to a child's ability to give accurate statements. Children may offer answers to adults' questions out of compliance to authority figures. Additionally, as a child begins to understand social norms of conversation in general, they may attempt to give answers to questions to be a cooperative participant, even if they do not know the answer. Thus, ensuring a child's understanding of the interview process, such as informing them an "I don't know" answer is acceptable and permitted, is important, especially, for younger children (Toby, & Goodman, 1992). Clarke-Stewart, Thompson, and Lepore (1989) conducted an experiment involving "Chester the Janitor". Five and six year-olds and were interviewed by adults who assumed either an accusatory, exculpatory, or neutral interpretation of the events in the experiment. When the interviewer contradicted what a child had seen, the child was quick to conform to the statements of the adult; even with their parents after the interview, the children retained the statements of the authoritative adult. Likewise, Lepore and SESCO (1994) found that 4-6 year old children, when interviewed by an interviewer with an incriminating

stance on events under investigation (e.g., “He wasn’t suppose to do that was he?”), gave inaccurate information and even embellished their reports to match the adults incriminating statements.

Overview of Child Witness Credibility

In cases where strong physical evidence exists, evaluating a witness's ability to give accurate (correct) testimony is easily determined by the evidence as presented during the life of the case. Cases of child sexual abuse, however, more often than not lack such evidence and decisions of whether to believe a child or not are based on the perceptions of the adult making the judgment, not factual, verifiable evidence. Generally speaking there are two sets of factors relating to the determination of a child's credibility in a sexual abuse case: factors relating to the adult making the assessment and factors relating to the child being assessed.

One adult factor, gender, has been shown to significantly impact the ratings of a child witness's credibility. Specifically, women are more likely than men to have a pro-victim bias as well as attribute more responsibility to the alleged perpetrator than the child (Bottoms, Nysse-Carris, Broussard & Wagner, 1988; Collings & Payne, 1991; Harris, Tyda, 2003; Gabora, Sanos, & Joab, 1993; Quas, Bottoms, Haegerich & Nysse-Carris, 2002). Women tend to make decisions of defendant guilt and punishment that align more with the prosecution (Bottoms, & Goodman

1994; Bottoms, Davis, & Epstein, 2004; Haegerich & Bottoms, 2000, McCauley & Parker, 2001).

Child factors typically employed by adults when asked to assess a child's credibility include: level of confidence, susceptibility to suggestion, cognitive abilities (memory, language, intelligence), consistency of statement, level of detail, demeanor (such as crying, fear, or hesitancy), perceived level of honesty, and the age of child being asked to give testimony.

Confidence level of the witness is often cited by jurors as a factor of their decision to believe or disbelieve a witness. Child witness confidence is typically associated with the manner in which a child conducts themselves while rendering testimony, for example, how quickly they respond to questions, or identify an alleged perpetrator, (if unfamiliar) from a photo array or lineup. It is important to note that witness confidence has been demonstrated repeatedly as being the least reliable method in establishing either accuracy or credibility, yet is most frequently applied to both the child and the adult witness (Talwar, Lee, Bala, & Lindsay, 2002; Frank, & Ekman 1997; Ekman, P., & O'Sullivan, M., 1991; Holcomb & Jacquin, 2006; Talwar, Gordon, & Lee, 2007; London, & Nunez, 2002; Stromwall, Granhag, & Landstrom, 2006).

Adults have often listed consistency of the child's statement as part of their determination of a child's credibility. This was investigated by Brewer, Potter, Fisher, Bond, and Luszcz (1999) when they asked

undergraduate students to evaluate children's statements. The participants listed inconsistencies of the child across interviews to be the strongest indication of inaccuracy. Other researchers have reported similar results (Conte, Sorenson, Fogarty, & Rosa, 1991; Berman, Narby, & Cutler, 1995; Berman, & Cutler, 1996). Myers, Redlich, Goodman, Prizmich, and Imwinkelreid (1999) found that jurors perceived a child's honesty and consistency as the most influential factors in deciding the outcome of a child sexual abuse case.

Judgments regarding a child's credibility are often based on a belief that children are highly suggestible, indicating the child may give false information based on suggestion (Quas, Goodman, Ghetti, & Redlich, 2000; Talwar, Lee, Bala, & Lindsay, 2006; London, Bruck, Ceci, & Shuman, 2005). But, as numerous studies document, adults are typically unable to correctly identify true versus untrue statements above a level of chance (Talwar et. al.; Frank, & Ekman 1997; Ekman, P., & O'Sullivan, M., 1991; Holcomb & Jacquin 2006; Talwar, Gordon, & Lee, 2007; London, & Nunez, 2002; Stromwall, L.A., Granhag, P.A., & Landstrom, S., 2006; Tetterton, & Warren, 2005). Thus, adults may believe that children are highly suggestible, but they most often cannot actually determine if indeed the child is responding from suggestion or reality.

Ross, Dunning, Toggia, and Ceci (1990) surveyed adults about their beliefs concerning witness credibility, asking them to rate the accuracy, suggestibility, and honesty of witnesses ranging in age from 6 to

74 years old. The results documented that children are perceived as less credible than adults partially due to decreased cognitive abilities, including lower language levels, deficits in reasoning skills, and memory issues such as poor recall and source monitoring.

Quas, Thompson, and Clarke-Stewart (2005) used undergraduate college students as participants in survey research about children's memory capabilities, suggestibility, reactions to sexual abuse, and disclosure of abuse. The items in the survey related directly to either a 4 year old or an 8 year old, and included memory items such as, "Children can remember repeated, common experiences but not experiences that happen just once" and, "Children cannot remember events well enough to be reliable witnesses in court"; Seventy percent of the participants agreed that children can remember events that happened one time and remember events that were repeated more than one time. Sixty-six percent agreed that children could remember well enough to be reliable witnesses in court.

The presence or absence of emotion is also used as a factor in credibility. Meyers, Redlich, Goodman, Prizmich, and Imwinkelried, (1999) surveyed jurors to obtain the criteria they used to determine child victim credibility. Verdicts were correlated with the amount of emotion displayed by the child; specifically, the child's facial expressions, gestures, eye contact, nervousness and manner of speech were important. Victim crying was indicated by 16% to be the most important, 14% indicated that

nervousness was most important, 15% indicated that embarrassment was most important. Jurors appeared to reason that conventional wisdom suggested these child factors to be appropriate and expected from a victimized child. Likewise, Golding, Fryman, Marsil, and Yozwiak, (2003) explored displayed emotion by showing undergraduate jurors a drawing of either a calm, teary, or hysterically crying child. Participants who rated the defendant relatively guilty more often said they would convict the defendant if they saw the child victim portrayed as teary as opposed to calm or hysterical. In contrast to this finding, Wood, Orsak, Murphy, and Cross (1995) found that calm, unemotional children disclosing sexual abuse were perceived as credible by undergraduate students.

As mentioned previously, child age is quite often found to be highly significant to child credibility. In some cases, age is positively related to credibility, meaning that older children and adults are seen as more believable than younger children (Goodman, Aman & Hirschman, 1987; Goodman, Golding, Helgeson, Haith, & Michelli, 1987; Leippe & Romanczk, 1978). In other studies, age is negatively related to credibility, with younger children being more believable than older children and adults (Bottoms 1993; Bottoms, 1994; Holcomb & Jacquin, 2007; Goodman, Bottoms, Herscovici, & Shaver, 1989; Ross, 2003; Ross, Dunning, Toggia, & Ceci, 1990; Ross, Jurden, Lindsay, & Keeney, 2003). Whether the relationship between age and credibility is negative or

positive appears to depend on the context within which the child is being called upon to testify.

If circumstances demand the witness to remember specific details in sequence or a specific time frame it may impede a young child's credibility. Leippe and Romanczk (1978) found this to be the case when they conducted a study involving a robbery-murder case, varying the age of the witness from six, to ten, or thirty years of age. The results indicated the six year old was less credible than the ten year old, who was less credible than the thirty year old. Goodman, Aman, and Hirschman (1987) found that even when a four year old made an accurate identification from a photo array and answered 70 percent of the questions correctly, they were perceived as "very uncredible". Similarly, Goodman, Golding, Helgeson, Haith, and Michelli (1987) found in a simulated trial of a motor vehicle homicide and murder case, a 6 year old witness was deemed less credible than either a 10 year old or a 30 year old. The beliefs of participants remained the same when using college students as participants or a general population of jury eligible adults within the community.

Other studies find children equally believable to adults. Ross, Miller, and Morgan (1987) conducted a study involving narcotics charges; the eye witness was 8-, 21-, or 74-years-old. The participants rated the child equally credible as the 74 year old and more credible than the 21 year old. The child was also rated higher in accuracy, competency, and truthfulness than the 21 year old, and equal to the 74 year old. In this

context the child's lack of cognitive experiences may have rendered them more credible as it would be hard to believe a child could fabricate or have motive in the arena of narcotics, while the 21 year old may be viewed as being in a suspicious age for drug exploration. Similar to the 8 year old, the 74 year old would in all likelihood be viewed as having no motive or agenda in lying about narcotics.

Typically, cases of child sexual abuse share several common features; young children (6 and under) are usually perceived as more credible than older children, more honest (trustworthy), and more sincere than older children, yet less competent in regard to cognitive skills (memory, language) compared to older children (Bottoms 1993; Bottoms, 1994; Holcomb & Jacquin, 2007; Goodman, Bottoms, Herscovici, & Shaver, 1989; Ross, 2003; Ross, Dunning, Toggia, & Ceci, 1990; Ross, Jurden, Lindsay, & Keeney, 2003). While adults who make sexual assault allegations can be blamed or disbelieved in part due to their own sexual experiences or alleged consent, a child cannot legally consent to sexual activity with an adult and would not be expected to have had a sexual history. Therefore, when young children allege sexual abuse and possess explicit sexual knowledge they are more likely to be deemed credible compared to adults making the same allegations (Bottoms, & Goodman, 1994; Bottoms, Nysse-Carris, Harris, & Tyda, 2003; Duggan, Aubrey, Doherty, Isquith, Levine, & Scheiner, 1989; Leippe & Romanczyk, 1989; Nightingale, 1993). Adolescents however, may be perceived as trying to

get revenge on an adult or get out of some sort of unrelated trouble such as rejection by an adult to whom the adolescent is attracted, or running away from home (Dugan, Aubrey, Doherty, Isquity, Levine, & Scheiner, 1989).

Hicks and Tite (1994) utilized two scenarios with professionals to assess their views on child statements. One scenario involved a four year old girl who was exhibiting behaviors which may or may not suggest sexual abuse. The second involved a teenage girl, also exhibiting behaviors which may or may not suggest abuse. Most participants indicated a belief that sexual abuse had most likely happened in the four year old scenario. However, they were much more critical of the teenager, often assigning blame to her if a sexual encounter had occurred, or that she may have made up the allegation to get back at an adult or to go live with her father. Everson, Boat, Bourg, and Robertson (2005) conducted research with professionals regarding their beliefs about the rate of false allegations among children. Collectively the professionals rated allegations made by the 17 year old females as the least credible of all child allegations. The significant problems noted with the adolescent victim are particularly salient considering previously documented research which places adolescent girls at significantly higher risk of re-experiencing sexual abuse within the foster care system compared to other children (Benedict, Zuravin, Somerfield and Brandt (1996).

The idea that child credibility within sexual abuse cases can be predicted by assessing both the child's honesty and cognitive ability has

been proposed by researchers in several studies (Leippe, & Romanczyk, 1987, Ross, Millers, & Moran, 1989; Talwar, Lee, Bala, & Lindsay, 2006). Further testing this theory, Ross (2003) used college students as mock jurors in a simulated sexual abuse case where the alleged victim was a girl ten years of age. The mock jurors were asked questions regarding the child's memory. The memory questions posed included both sexual allegations and peripheral details not related to abuse. Additionally, questions about the child's honesty were posed, such as, "To what extent did the child fabricate the allegation?" Results indicated that both honesty and cognitive ability were predictive of perceived credibility ratings, whereas, only honesty was a predictor of verdict.

Rationale for the Present Study

Research has demonstrated that children who have already been a victim of sexual abuse one time are at significant risk for re-victimization. Children who reside in foster care bring specific challenges when assessing credibility, such as higher levels of mental health and behavioral issues compared to children not in foster care. Additionally, foster care children have been exposed through the custodial experience to various court proceedings, interviews, and stressors which may confound the issue of credibility. Furthermore, if a subject child entered foster care due to child sexual abuse, assessing credibility of a new sexual abuse allegation becomes complicated with the additional factors of prior interviews with various officials such as police and social workers, emotional distress or

psychological disorders, custodial disputes between the state and their families of origin, and the source of possible knowledge of sexual activity that is not typical for young children.

As previously discussed, children are often judged credible (believable) when disclosing sexual abuse allegations when they possess sexual knowledge not commonly expected for children their age. But, if a child has been sexually abused on at least one occasion, will that level of innocence continue to be ascribed to the child or will this experiential knowledge be considered when adults are asked to rate their beliefs of a child's sexual abuse report?

Children who report sexual abuse may report more than one incident of abuse (English, Marshall, Brummel & Orme, 1999), adding complexity to the perceptions of their credibility. Factors associated with child witness credibility in a repeated event are much the same as factors associated with a single event; however, children relating repeated events may be rated as less cognitively competent, less believable, and more suggestible than children reporting a single event (Connolly, & Lavoie, 2008; Connolly & Lindsay, 2001; Roberts & Powell, 2005). Although there is a growing body of research regarding children's memory and suggestibility in regard to repeated events, only one study was found specifically targeting the issue of adults' perceptions of child witness credibility when relating a repeated event. Connolly, Price, and Lavoie (2008) conducted a study regarding perceptions of children's credibility

using both a single event and a repeated event. Undergraduate college students watched a videotape of a child (age range from 4-7), classified as either high or low in accuracy. Each child reported an event they experienced either one time only, or the last event in a series of four events. Participants rated children in the repeat event group as lower in accuracy, honesty, credibility, consistency, confidence, likeability, and suggestibility. As in other studies the participants were found to be no better than chance level at determining accurate or inaccurate reports. The children who reported a single event were more consistent and provided more information during free recall as opposed to the cued questioning by the interviewer. Older children provided a greater amount of accurate information, less contradiction, and more specific detailed information than the younger children, confirming previous research (Berman, Narby, & Cutler, 1995; Brewer, Potter, Fischer, bond, & Luszcz, 1999; Myers, Redlich, Goodman, Prizmich, & Imwinkelreid, 1999).

As previously demonstrated, children who reside in foster care are at significant risk for behavioral and emotional problems as well as cognitive delays. Furthermore, foster children are at significant risk to re-experience abuse (Benedict, Zuravin, Brandt, & Abbey, 1994). No research was found specific to the perceived credibility of a foster child who discloses sexual abuse to have occurred within the foster care system. It is currently unknown, then, what impact foster care residence may have on adults when asked to rate the credibility of a sexual abuse allegation.

The pivotal role of children's reports makes a child's ability to convey accurate and credible statements crucial. If the evidence rests on a child's statement, the perception of the child and their statement could very well make the difference in whether a child receives protection from further abuse or not. For the foster child the issue of perceived credibility is further impacted by the happenstance of residing in foster care.

Therefore, I chose to investigate perceptions of sexual abuse allegations made by children of various ages residing in foster care. In all cases, the children had been previously abused. I predicted that allegations of sexual abuse from children residing in foster care would be perceived as less credible when compared to children residing with their natural families making the same allegations. This prediction was based first on the propensity of children in foster care to experience behavior and/or emotional problems and cognitive delays - both of which are used by adults to make decisions regarding child witness credibility. In the present study all child witnesses were described as having the same behavior/emotional problems and abuse experiences. However, I thought it possible that laypersons might bring to the judgment task their assumptions that foster children have more problems and are therefore less trustworthy or capable than children residing with their biological mothers.

Additionally, I expected a different pattern of age effects than that found in prior research. Specifically, I predicted that the 6-year-old and

11-year old would be equally believable, and that both the 6- and 11-year old would be more believable than the 15-year-old. In prior research, young children (age 6 in this study) are often more believable than older children because they are presumed to be sexually innocent, lacking the knowledge to fabricate a detailed sexual abuse allegation. In the present study, however, the 6-year old has prior sexual knowledge (from the prior abuse), and may not be presumed too innocent to make a false allegation. Furthermore, the 6-year-old should be considered as capable as the 11-year old regarding the cognitive skills necessary to make an accurate report of sexual abuse (able to remember the abuse in sufficient detail and to distinguish it from the prior abuse). Finally, I expected the 15-year-old to be rated as less believable than either of the younger children as in prior studies.

Finally, I did not predict an interaction between residence status and age. I assumed that the bias against foster children would hold true whether they were younger children or adolescents.

Chapter 2

Method

Participants

Undergraduate psychology students were invited to participate in this study; typically professors awarded extra credit for participation. A total sample of 245 participants was obtained through various classroom visits. Females comprised 65.3% of the sample. Participant age ranged from 18 to 41 years ($M= 3.174$, $SD=3.174$). Seventy-one (70.6) percent were white/Caucasian, 20% were black/African-American, 2.9% were Latino/Hispanic, 4.9% were Asian/Asian-American, and 1.6% specified another race or ethnicity. Most of the participants (92.7%) were single, 6.1% divorced, and 1.2% married. Ninety-six percent of the participants indicated they had no children, 98% had never served on a jury, 95% had no prior involvement with the foster care system, and 79% reported no prior involvement with a sexual abuse case. The sample of student participants included freshman (63.7%), sophomores (18%), juniors (11.4%), seniors (6.5%) and other (.4%). The majority (83.3%) reported they were not psychology majors (see Table 2 for detailed demographic information).

During each classroom visit participants were randomly assigned to one of 6 conditions using a 2 (custodial circumstance: foster care vs. residence with biological mother) x 3 (child age: 6-year old vs., 11-year-old vs., 15 year old) factorial design. A power analysis indicated an

approximate sample size of 210 (35 per cell) would be required to achieve power of .85 for a small effect size, to afford the greatest possibility of detecting significant differences between conditions, if present. Of the 245 participants, 124 were assigned to the foster care condition (age 6 $N=44$, age 11 $N=45$, and age 15 $N=35$), and 121 were assigned to the biological mother residence condition (age 6 $N=35$, age 11 $N=41$, and age 15 $N=45$).

Four manipulation check questions were included in the survey to assess each participant's understanding of the scenario being presented. The questions asked how old the child was in the assigned scenario, who she was currently living with, who had abused her a year ago, and who she was alleging was the current abuser. A total of 22 participants incorrectly responded to at least one manipulation check question. Between 2 and 5 participants in each condition missed at least one manipulation check question. The 22 individuals were subsequently excluded from further analysis.

The final sample of participants included 223 undergraduate college students (65.5% women). They were representative of the original sample in terms of other demographic characteristics (see Table 2). Forty-eight participants reported having had some prior experience with a child sexual abuse case. They were distributed across conditions as follows: non foster care age 6 ($n=6$), age 11 ($n=13$), age 15 ($n=4$); foster care condition age 6 ($n=9$), age 11 ($n=10$), and age 15 ($n=6$). Twelve participants indicated some prior involvement with the foster care system.

They were distributed across conditions as follows: non foster care age 6 ($n=2$), age 11 ($n=3$), and age 15 ($n=3$); foster care condition age 6 ($n=0$), age 11 ($n=2$), and age 15 ($n=3$).

Materials and Procedure

Each participant was presented with a packet of materials including a cover letter, signed consent form, a demographics page, a scenario and survey. I explained to the participants that their participation was voluntary and involved minimal risk which may include feelings of discomfort when reading about child sexual abuse. I called their attention to the counseling resources indicated on the cover letter for their use if desired. The informed consent was discussed and the procedure of collecting the consent separate from the survey to protect confidentiality was explained. The demographics page was included to collect information such as age, gender, and marital status (see Table 1 for exact percentages for all demographics collected). The scenario used included two factors which were manipulated (child age = 6, 11, or 15) and custodial circumstance (residing with mother and stepfather or with foster parents). Each scenario described a girl named Haley who had been previously abused by an uncle who was temporarily residing in her home at the time of abuse. Because past research has shown that girls residing in foster care are more likely to experience sexual abuse (Benedict, Zuravin, Brandt, & Abbey, 1994), the gender of the child was female in all scenarios. The race of the child was not defined. Haley was described as

having some emotional and behavioral difficulties in all scenarios and was reported to be in trouble at school for fighting. The principal in the scenario took Haley to the office to talk to her about the fight; at that time Haley disclosed to her principal a current allegation of sexual abuse. In the foster care scenario the allegation was against the foster father; in the non foster care scenario, the allegation was against her stepfather (see Appendix B for copies of all scenarios).

After reading the scenario, participants were asked to answer a 20 item survey which included four manipulation check questions to ensure the content and figures in the scenario were understood, such as child age, prior and current perpetrator, and current living arrangement. The remaining 16 items were the same for all participants with one exception. In the foster care condition, participants responded to the statement, "it is likely Haley was abused by her foster father", while in the non foster care condition they responded to, "it is likely Haley was abused by her stepfather." The survey items were intended to measure perceptions of children's credibility as well as items specifically relating to the child presented in the scenario. All survey items were presented in statement form followed by a seven point Likert scale (1= strongly disagree to 7 = strongly agree). Upon completion of the survey, the consent forms were collected first, followed by the survey.

Chapter 3

Results and Discussion

Results

I first conducted ANOVAS with participant gender, foster care condition, and child age as grouping/independent variables and each rating question as dependent variables. There were significant gender differences for several questions, and one significant interaction of gender with another factor. Women gave significantly higher ratings than men for the following statements: Children less than ten years of age have the ability to remember several similar events well enough to verbally relate them to others; children rarely lie about sexual abuse, and Haley is most likely telling the truth. Men gave significantly higher ratings than women for the following statements: Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime; Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation, and Haley was most likely making an accusation to get out of trouble at school. In general, women perceived children to be more credible (both having better memory abilities and being less likely to lie), while men expressed more doubt in children's abilities and disclosures. These gender differences were in the predicted direction, and in line with findings of prior research. See Table 3 for the descriptive statistics of all items. Because participant gender influenced responses to many items, and

because gender was not balanced across conditions, I controlled for gender in the subsequent analyses by using it as a covariate.

A MANCOVA (using Pillai's Trace criterion) was performed with child age and foster care as the independent variables, participant gender as the covariate, and the survey item responses as the dependent variables. There was a significant multivariate effect of foster care, $F(216, 1)=1.908$, $p=.021$, $\eta^2=.132$. No significant multivariate effects were found for child age, $F(216, 2)=1.229$, $p=.187$, $\eta^2=.089$. There was not a multivariate interaction between child age and foster care, $F(216, 2)=.964$, $p=.526$, $\eta^2=.071$.

Six items relating specifically to Haley indicated significant foster condition effects, including: Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation; Haley was most likely making an accusation to get out of trouble at school, Haley was most likely telling the truth, Haley's recent behavior problems show that she is being abused again, it is likely that Haley was abused by her (stepfather/foster father), and knowing Haley was abused before helps me believe her most recent reports. All items indicated the child in foster care would be more likely to be making up the allegation to get out of trouble at home or school or to get out of her current living situation. The child in foster care was more likely to have her current behavior problems attributed to past abuse and not current abuse. The foster care child was also less believed when asked how likely

it was that she had been abused by the foster/stepfather. Two items relating to children in general were significantly different by foster care condition: children less than ten years of age have the ability to remember several similar events well enough to verbally relate them to others, and children who have been sexually abused often experience sexual abuse again by different perpetrators. In both items the child in foster care was rated lower than the child not in foster care.

Although age did not have a significant multivariate effect, in prior research age is frequently a factor in child witness credibility. Therefore the univariate tests were examined, several of which indicated significant findings and were followed by post-hoc testing (Tukey B). Three of the items showed similar patterns including: "it is likely that Haley was abused by her foster/stepfather", "knowing Haley was abused before helps me believe her most recent report", and "Haley's recent behavioral problems show that she is being abused again", the pattern indicated no significant difference between the 11 year old and the fifteen year old, but both older children were significantly different from the six year old who was assigned the highest level of believability. Another pattern was shared by three items which included: "Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation", "Haley was most likely making an accusation to get out of trouble at school", and "Haley is most likely telling the truth". For these items, the highest believability ratings were again given to the

six year old, the eleven year old was given the lowest rating of believability, whereas the 15 year old was not significantly different from either the six year old or the 11 year old.

One significant interaction was found between child age and foster care in the follow-up univariate tests; the item "children rarely lie about sexual abuse", $F(216, 2) 3.982, p=.020, \eta^2=.036$. For this item the previously observed pattern of the non foster care child being perceived as more believable was true for the 11-year old and the 15 year old, however, the six year old foster child was perceived as more believable than the non foster child. Such an interaction was not predicted, as it dealt with a general statement of child witness ability and had nothing to do with the current scenario. Therefore, it is possible that this effect is spurious, or that despite random assignment, there may have been some pre-existing differences across participant groups. Either way, caution should be exercised in interpreting this and other effects.

Discussion

The data lend support for the hypothesis that when children in foster care make sexual abuse allegations they are perceived as less credible than children not in foster care, even when both exhibit the same behavioral and emotional problems. As predicted, the children presented in the scenario as foster care children were less likely to be believed and more likely to be assigned some responsibility for the allegation. For example, for the item that states "children who have been sexually abused

often seek attention and may falsely claim abuse again", participants indicated higher levels of agreement for children residing in foster care than not. The child presented in foster care was also assigned higher agreement ratings on statements such as trying to get out of trouble at school, get back at her caregivers out of anger, or trying to get out of her current living situation. Foster care children additionally were more likely to be perceived as attention seeking, as confusing past abuse with normal affections, and as possessing lower memory skills such as would be needed to remember several similar events and be able to distinctly report them to others.

It is unclear why the foster children in this study were less likely to be believed. No existing study specifically helps to explain this result, as no prior study has addressed the topic of child witness credibility specifically targeting children in foster care. However, as previously discussed foster children exhibit greater levels of cognitive delays, emotional difficulties, and behavioral problems (Benedict, Zuravin, Brandt, & Abbey, 1994); factors which potentially impact child witness credibility (Bottoms 1993; Bottoms, 1994; Dugan, Aubrey, Doherty, Isquity, Levine, & Scheiner, 1989; Everson, Boat, Bourg, & Robertson, 2005; Hicks & Tite, 1994; Holcomb & Jacquin, 2007). Knowing these factors can impede a child's credibility, I controlled for behavior and emotional problems within the scenarios by making the children in both conditions have identical behavioral and emotional problems. Yet, it

appears that participants in the present study believed the foster child more likely to intentionally (to get out of trouble or out of the foster care placement) or unintentionally (confusion) to make a false allegation. This finding is quite concerning given that most child sexual abuse cases lack physical evidence, and are often decided upon based on child statements. The implications for a child in foster care who discloses sexual abuse are alarming. Future research should examine perceptions of children in foster care in greater depth to determine whether potential jurors hold inaccurate views.

Ross (2003) proposed use of a two factor (honesty and cognitive ability) to determine witness credibility. When applied to the foster care differences seen in the present study, it appears that participants perceived the foster children as less honest (e.g., Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation; Haley was most likely making an accusation to get out of trouble at school, Haley was most likely telling the truth). Perhaps they viewed foster children as having more motivation or more to gain from making an allegation. Only one item directly relating to cognitive ability was included in this study (children under the age of ten have the ability to remember several similar events well enough to verbally relate them to others), foster children were rated lower than non foster children. The item "Haley is probably confusing what happened to her the first time with normal night time routines such as a hug or kiss at bedtime", may

also be related to cognitive abilities as well as to emotional factors.

Participants were more likely to rate the foster child as confusing normal routines as abuse. Future research should examine the role of both cognitive and social factors in the credibility of sexual abuse allegations made by children residing in foster care.

Historically, younger children (age 6 or younger) have been considered innocent of sexual knowledge, and therefore typically assigned higher levels of credibility. It was thus expected that a six year old who had been sexually abused previously (therefore having knowledge of sexual activity), might *not* be viewed as highly credible or as unable to fabricate a sexual abuse allegation. Frequently, a six year old is perceived as being honest while having poorer cognitive ability; a fifteen year old may be believed to have good cognitive ability but may also be believed to have more motivation to make a false allegation, whereas the 11 year old may be believed to have good cognitive ability and low motivation to lie. This was not the case in the analyzed data. In both foster care and non foster care conditions the six year old was more likely to be believed than either the fifteen year old or the eleven year old (even if not significantly so). In several instances, the eleven year old was perceived as less credible than either the six year old or the fifteen year old, depicting a U shaped relationship with the 11 year old being the lowest point. In the items relating specifically to Haley (scenario child), the eleven year old was more likely to be viewed as trying to get out of trouble at school or being

angry at her caregivers, and least likely to be believed in the current allegation. On a few items, there were no significant differences between the eleven year old and the fifteen year old; both were believed at lower rates than the six year old. This finding was surprising in light of previously presented research indicating that often adolescent females (i.e., the 15-year-old) are perceived as less credible than younger children. It is unclear why the eleven year old was perceived so negatively. Future studies may help explain or negate this finding.

Ross's (2003) two-factor model has proven useful in cases of child sexual abuse in that younger children are often viewed as more credible than older children. Although the younger child is typically perceived as less cognitively competent, they are perceived as more honest which was shown as being more salient in cases of child sexual abuse. For example, Ross (2003) found the decisions of mock jurors in a sexual abuse case were related to the level of perceived child honesty, but not the level of perceived child cognitive ability. The two factor model may fit well with this thesis as well. In items such as, "Haley most likely made the allegation to get out of trouble at school", participants strongly disagreed with this for the six year old child, and rated higher levels of agreement for the 11 year old and the 15 year old. It is possible that the participants viewed the six year old as not having the cognitive ability to fabricate such an escape from trouble, as well as viewing the six year old as more honest than the older children. Other items within this study evidenced similar

results with the six year old being assigned higher levels of believability than either the 11 year old or the 15 year old.

Typically, the means of the child specific items clustered at midpoint levels of between 3 and 4; extreme values (less than 3 or greater than 4.5) were unusual, however a few items indicated strong responses, most often in favor of the six year old child being believed or of the eleven year old being disbelieved. Extreme items were all regarding the specific child depicted in the scenario. The item receiving the most extreme value was "It is likely that Haley was abused by her (stepfather/foster father); the six year old non foster child was assigned the highest rating ($M=5.74$), followed by the six year old foster child ($M=5.07$); the lowest value for this item was the eleven year old foster child ($M=4.24$). Children in all conditions were assigned higher levels of believability in the item "Haley was most likely telling the truth" with the strongest rating being the six year old non foster child ($M=5.29$), followed by the foster care 6 year old ($M=4.54$), and the lowest rating assigned to the 11 year old foster child ($M=3.85$). The six year old non foster child was also assigned an extreme endorsement ($M=5.32$) on the item "Haley's recent behavior problems show that she is being abused again"; the foster care six year old was lower ($M=4.61$), and again the eleven year old foster child was the lowest rated ($M=4.05$). Another extreme item was "Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation", in which the six year old non foster care child

was given a mean rating of 2.68 (indicating strong disagreement with statement), all other means were 3.10 or higher. The item "Haley was most likely making an accusation to get out of trouble at school", evidenced an even stronger level of disagreement for the six year old non foster child ($M=2.39$) and the six year old foster child ($M=2.71$). These ratings endorse prior research indicating high levels of believability for young children in sexual abuse cases, and yet contrast with research findings that have depicted adolescents as less believable than pre-teens.

Limitations

Several limitations of this study are noteworthy: the method of presenting participants with information; the depth of information gathered from participants; the nature of the allegation; and the ages of the target children.

A major difference between this thesis and the literature reviewed is the method of presenting the relevant child information. The lack of direct testimony is a major limitation of this study in that the participants could not judge if there were inconsistencies in the child's statement or if the child's demeanor was what they believed to be expected, or if when evaluating the child's report they believed the child had been suggestively interviewed. Prior researchers typically have presented much more information about the child and the context and nature of the allegation than was contained within this thesis. For example, when exploring the two factor model (Ross 2003), mock jurors watched a video recreation of

a sexual abuse trial in the first experiment and in the second experiment only the child's testimony was presented. In both of these experiments the participants were able to see and hear the child give their complete testimony, and in the first experiment actually viewed not only the child, but other witnesses and evidence. Meyers, Redlich, Goodman, Prizmich, and Imwinkelried, (1999) documented the importance of a child's demeanor when assessing credibility. In the presented scenario within this thesis, participants had limited one dimensional information available to make a decision of credibility. Participants could not make any determination in regard to consistency of statement, demeanor, behavior, or perceived levels of suggestibility which have been documented to influence ratings of child credibility.

The survey in this thesis was brief, containing only 16 items. Past research on child credibility has often included many more total items and more items specific to each area under consideration, such as susceptibility to suggestion, cognitive abilities and consistency of statements. While several items did relate to the perceived honesty of the child, only one item specifically targeted cognitive ability (of a child less than ten years of age). This may help explain the lack of significance in regard to child age (if one exists). Possibly, if participants had been asked more questions about their perceptions of the child's cognitive abilities a greater difference would have been observed between the 6, 11, and 15 year old conditions.

The target event was a new allegation of sexual abuse from a child who was known to have been abused previously. The status of being in foster care was the primary hypothesis under investigation, not repeat events. It cannot be inferred that the participants believe that foster children are less credible when making repeat allegations, only that in this scenario foster children were less believed than non foster care children. It is unclear to what extent the effects of foster care or age might have applied to a first allegation of sexual abuse, either from a child who had never alleged any form of abuse or a child who had previously experienced physical abuse, emotional abuse, or neglect.

The age of the target child within this study was specified as either a 6 years-old, 11 years-old, or 15 years-old. Perhaps I did not find age differences similar to those in prior studies because an 11 year old may be considered an adolescent, unlike the 8 to 10 year olds often used as the middle age group in prior studies. Furthermore, many studies use 3 to 5 years old as the youngest age group. Preschoolers are often considered to be distinctly different in cognitive abilities from school aged children. However, I chose 6 as my youngest age because in all scenarios the child making the current sexual abuse allegation had also been previously sexually abused a year prior to this target event. Consideration had to be given not only to the youngest child's current ability, but also the ability of a year ago. The oldest child needed to be an adolescent, however, not so far into adolescence that the child might be considered an adult; therefore I

chose age 15. Being a natural midpoint, 11 was chosen for the third age grouping.

Another possible limitation of this study is the use of undergraduate participants. However, research has demonstrated that undergraduates are very similar to community members and jurors in their ratings of child witnesses and child abuse allegations (e.g., Quas, Thompson, & Clarke-Stewart, 2005). It is not known whether or how experience with child abuse or foster care might have influenced these results. As mentioned previously, 21.5% of the sample indicated some experience with a child abuse case and 5% reported experience with foster care, but the nature of those experiences was not requested due to the sensitivity of those issues. There were not enough participants with these experiences to determine any correlation to the ratings of credibility. Further research may help clarify the contribution (if present) of a participant's past experiences to their impressions of foster children.

It should be noted that typically univariate tests are not examined and/or reported when the multivariate testing first shows no significance. However, recognizing that much research on child witness credibility has found age as a significant factor, I chose to examine and report the univariate findings even though the multivariate effect of age was not significant. This was done for the sole purpose of comparing this thesis to existing research. Given that the risk of a Type I error increases with the number of analyses conducted, the traditional alpha of .05 may have

overestimated the number of significant findings. Therefore, the results on age differences should be interpreted with caution. Although much research has been conducted concerning the credibility of child witnesses, no prior research was found specific to foster children. Therefore, there are no other similar studies for comparison. Hence, the present study should be viewed as a preliminary step toward a better understanding of children in foster care who allege sexual abuse.

Sexual abuse allegations and investigations are much more complex and involved than a one page scenario and a three page questionnaire. It is recognized that jurors who must make decisions about the credibility of child abuse allegations have far more information than what was available to those participating in this thesis research.

Implications

The findings of this study may have important implications for future research and exploration. Future directions may include a more in depth analysis of the perceptions of children residing in foster care. Specifically, it would seem a logical progression from this study for the design to first manipulate both foster care status and the nature of the allegation (first sexual abuse allegation or repeated allegation). Additionally, it would be beneficial to obtain sample populations of professionals involved in the legal system as well as police and child protective services professionals who investigate child sexual abuse cases to determine if biases against foster children exist.

It is hoped that this thesis will serve to alert the research community to a great need. Children who reside in foster care are, as previously documented, at high risk for re-abuse. Often, foster children have been abused previously, and most have experienced significant trauma either while living with their families of origin or after being removed from them. In addition, foster children collectively present increased potential for behavioral and emotional difficulties, and lower IQ and cognitive abilities, all of which are associated with decreased credibility. The combination of these features is quite concerning and potentially makes the already difficult job held by finders of fact much more complex.

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Tables

Table 1. Participant Demographics

N		Full Sample N=245	Final Sample N=223
Age	Mean	19.75	19.79
	Standard Deviation	3.174	3.287
	Range	18-41	18-41
	Male	34.7%	34.7%
Gender	Female	65.3%	65.5%
Race	Caucasian	70.6%	70.9%
	African American	20.0%	19.3%
	Latino/Hispanic	2.9%	3.1%
	Asian/Asian American	4.9%	4.9%
	American	1.6%	1.8%
	Other		
Marital Status	Single	92.7%	92.8%
	Married	1.2%	1.3%
	Divorced	6.1%	5.8%
Have Children?	Yes	3.3%	3.6%
	No	96.3%	96.3%
Educational Status	Freshman	63.7%	63.2%
	Sophomore	18.0%	19.3%
	Junior	11.4%	10.8%
	Senior	6.5%	6.3%
	Other	0.4%	0.4%
Psychology Major	Yes	Yes=16.7%	Yes=16.1%
	No	No=83.3%	No=83.9%

Table 1. continued.

N		Full Sample N=245	Final Sample N=223
Have you ever been involved in the foster care system?	Yes	4.9%	5.4%
	No	95.1%	94.6%
Have you ever served on a jury?	Yes	2.0%	2.2%
	No	98.0%	98.0%

Table 2. Distribution of Participants - Gender by Condition

Gender	Age of Child Assigned to read		Assigned Child Foster Care?		Total
			No	Yes	
Male	6	count	5	17	22
		% within age of child	22.7	77.3	100
		% within foster care	14.3	40.5	28.6
	11	count	17	15	32
		% within age of child	53.1	46.9	100
		% within foster care	48.6	35.7	41.6
	15	count	13	10	23
		% within age of child	56.5	43.5	100
		% within foster care	37.1	23.8	29.9
Total	count	35	42	77	
	% within age of child	45.5	54.5	100	
	% within foster care	100	100	100	
Female	6	count	26	24	50
		% within age of child	52	48	100
		% within foster care	35.6	32.9	34.2
	11	count	20	26	46
		% within age of child	43.5	56.5	100
		% within foster care	27.4	35.6	31.5
	15	count	27	23	50
		% within age of child	54	46	100
		% within foster care	37	31.5	34.2
Total	count	73	73	146	
	% within age of child	50	50	100	
	% within foster care	100	100	100	

Table 3. Univariate Analysis of Individual survey items by Child Age, Foster Care, and Interaction of Child Age vs. Foster Care.

Rating Item	Statistics		
	F	Sig.	Power
It is likely that Haley was abused by her foster/step father.			
Child age	(2,216)=4.965	.008	.807
Foster Care	(1,216)=7.742	.006	.791
Child age vs. Foster Care	(2,216)=.170	.843	.076
Hale is most likely telling the truth.			
Child age	(2,216)=4.825	.009	.795
Foster Care	(1,216)=5.558	.019	.651
Child age vs. Foster Care	(2,216)=.261	.770	.091
Haley's recent behavioral problems show that She is being abused again.			
Child age	(2,216)=5.262	.006	.830
Foster Care	(1,216)=4.941	.027	.600
Child age vs. Foster Care	(2,216)=.361	.697	.108
Knowing Haley was abused before helps me believe her most recent report.			
Child age	(2,216)=4.965	.008	.807
Foster Care	(1,216)=8.497	.004	.827
Child age vs. Foster Care	(2,216)=.367	.693	.108
*Haley was most likely making an accusation to get out of trouble at school.			
Child age	(2,216)=3.081	.048	.590
Foster Care	(1,216)=.690	.407	.131
Child age vs. Foster Care	(2,216)=.060	.942	.059
*Haley's behavioral problems are most likely due to the abuse last year instead of anything in her current situation.			
Child age	(2,216)=2.008	.137	.412
Foster Care	(1,216)=4.433	.036	.554
Child age vs. Foster Care	(2,216)=.120	.887	.240

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability.

Table 3 continued

Rating Item	Statistics		
	F	Sig.	Power
*Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation.			
Child age	(2,216)=4.025	.019	.714
Foster Care	(1,216)=4.870	.028	.594
Child age vs. Foster Care	(2,216)=.271	.763	.092
*Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime.			
Child age	(2,216)=1.012	.365	.225
Foster Care	(1,216)=.269	.605	.081
Child age vs. Foster Care	(2,216)=1.159	.316	.253
Children less than 10 years of age have the ability to remember several similar events and to report them distinctly.			
Child age	(2,216)=2.184	.115	.443
Foster Care	(1,216)=3.869	.050	.499
Child age vs. Foster Care	(2,216)=.252	.777	.504
Children with behavioral problems are just as believable as other children when they make reports of sexual abuse.			
Child age	(2,216)=1.297	.297	.279
Foster Care	(1,216)=.577	.448	.118
Child age vs. Foster Care	(2,216)=.852	.428	.195
Children with emotional problems are just as believable as other children when they make reports of sexual abuse.			
Child age	(2,216)=1.485	.229	.315
Foster Care	(1,216)=.524	.470	.111
Child age vs. Foster Care	(2,216)=.381	.683	.111
*It is common for children that have been abused to misinterpret physical affection and unknowingly make false allegations.			
Child age	(2,216)=.331	.719	.102
Foster Care	(1,216)=3.117	.079	.420
Child age vs. Foster Care	(2,216)=.705	.495	.168

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability.

Table 4. Means (and standard deviations) for all items by foster care and gender (collapsed across age).

Rating Item	Residence Status			
	Mother & Stepfather		Foster Parents	
	Male	Female	Male	Female
It is likely that Haley was abused by her foster/step father.	5.03 (1.524)	5.26 (1.700)	4.52 (1.546)	4.67 (1.740)
Hale is most likely telling the truth.	4.40 (1.684)	4.484 (1.491)	3.86 (1.424)	4.44 (1.545)
Haley's recent behavioral problems show that She is being abused again.	4.46 (1.615)	4.79 (1.349)	4.21 (1.440)	4.33 (1.463)
Knowing Haley was abused before helps me believe her most recent report.	4.54 (1.482)	4.37 (1.349)	4.00 (1.725)	3.84 (1.519)
*Haley was most likely making an accusation to get out of trouble at school.	3.17 (1.224)	2.66 (1.227)	3.29 (1.470)	2.77 (1.328)
*Haley's behavioral problems are most likely due to the abuse last year instead of anything in her current situation.	3.37 (1.374)	3.42 (1.615)	3.93 (1.659)	3.82 (1.727)
*Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation.	3.20 (1.132)	3.00 (1.453)	3.83 (1.430)	3.27 (1.512)
*Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime.	3.40 (1.397)	3.01 (1.389)	3.67 (1.541)	3.07 (1.427)
*Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime.	3.40 (1.397)	3.01 (1.389)	3.67 (1.541)	3.07 (1.427)
Children less than 10 years of age have the ability to remember several similar events and to report them distinctly.	3.943 (1.3491)	4.438 (1.5365)	3.619 (1.6072)	4.055 (1.5446)

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability. □

Table 4 continued.

Rating Item	Residence Status			
	Mother & Stepfather		Foster Parents	
	Male	Female	Male	Female
Children who have been sexually abused often experience sexual abuse again by different perpetrators.	3.83 (1.339)	4.26 (1.453)	3.19 (1.455)	3.66 (1.455)
*Children who have been sexually abused often seek attention and my falsely claim abuse again.	4.20 (1.324)	4.15 (1.604)	4.48 (1.401)	4.30 (1.622)
Children rarely lie about sexual abuse.	3.89 (1.811)	4.52 (1.692)	3.93 (1.568)	4.38 (1.587)
Children with emotional problems are just as believable as other children when they make reports of sexual abuse.	4.23 (1.416)	3.88 (1.423)	3.88 (1.565)	3.88 (1.471)
*It is common for children that have been abused to misinterpret physical affection and unknowingly make false allegations.	3.74 (1.221)	3.96 (1.504)	4.43 (1.532)	4.14 (1.593)
Children with behavioral problems are just as believable as other children when they make reports of sexual abuse.	4.09 (1.197)	3.92 (1.341)	3.88 (1.742)	3.84 (1.323)

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability. □

Table 5. Means (and standard deviations) for all significant child age items from the univariate analysis.

Rating Item	Child age 6		Child age 11		Child age 15	
	Male	Female	Male	Female	Male	Female
Haley is most likely telling the truth.	4.55 (1.63)	5.00 (1.41)	3.66 (1.47)	4.37 (1.64)	4.30 (1.52)	4.52 (1.49)
Haley's recent behavioral problems show that She is being abused again.	4.77 (1.51)	4.98 (1.36)	4.06 (1.56)	4.33 (1.52)	4.26 (1.42)	4.26 (1.51)
Knowing Haley was abused before helps me believe her most recent report.	4.68 (1.43)	4.50 (1.64)	3.84 (1.53)	4.00 (1.48)	4.39 (1.88)	3.80 (1.14)
*Haley was most likely making an accusation to get out of trouble at school.	2.95 (1.09)	2.40 (1.09)	3.41 (1.52)	2.87 (1.47)	3.26 (1.36)	2.88 (1.22)
*Haley was most likely angry at her caregivers and made the allegation to get back at them or get out of her current living situation.	3.36 (1.33)	2.72 (1.23)	4.09 (1.30)	3.26 (1.77)	2.96 (1.11)	3.44 (1.36)
*Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime.	3.36 (1.33)	3.10 (1.37)	3.97 (1.56)	3.04 (1.52)	3.13 (1.40)	2.98 (1.35)

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability.

Table 6. Univariate Analysis of Individual survey items significant for participant gender.

Rating Item	Statistics		
	F	Sig.	Power
Hale is most likely telling the truth.	(1,216)=4.161	.043	.528
*Haley was most likely making an accusation to get out of trouble at school.	(1,216)=6.599	.011	.725
*Haley is probably confusing what happened to her the first time with normal night time routines such as a kiss or a hug at bedtime.	(1,216)=6.317	.013	.706
Children who have been sexually abused often experience sexual abuse again by different perpetrators.	(1,216)=4.524	.035	.563
Children less than ten years of age have the ability to remember several similar events well enough to verbally relate them to others.	(1,216)=4.340	.038	.545

All items were rated on a scale of 1 to 7, where 1 = strongly disagree and 7 = strongly agree. Items with an asterisk are such that higher means indicate lower believability.

Appendix A: Consent Forms

[Date]

Dear Student:

I am Graduate Student under the direction of Professor Amye Warren in the Psychology Department at the University of Tennessee at Chattanooga. I am conducting a research study to perceptions of children who may have been sexually abused.

I am requesting your participation, which will involve reading a brief scenario of a fictional child who has disclosed sexual abuse and then answering some questions regarding your thoughts about that scenario, this should take approximately 20 minutes. Your participation in this study is voluntary. If you choose not to participate or to withdraw from the study at any time, there will be no penalty and will not negatively affect your grade. Any extra credit will be awarded according to your professor's guidelines. The results of the research study may be published however, the attached questionnaire is anonymous and no participant names will be collected.

While this survey deals with fictional and hypothetical events, sometimes thinking about child sexual abuse can be disturbing for some people. If the topic makes you uncomfortable, please do not participate. In addition, if you feel that you need to talk to anyone about any issues raised by this survey please contact the student counseling center at 423-425-4438, located on the second floor of the University Student Center.

If you have any questions concerning the research study, please email myself or Dr. Warren at the email addresses listed below.

This research has been approved by the UTC Institutional Review Board (IRB). If you have any questions concerning the UTC IRB policies or procedures or your rights as a human subject, please contact Dr. M. D. Roblyer, IRB Committee Chair, at (423) 425-5567 or email instrb@utc.edu.

Return of the questionnaire will be considered your consent to participate. Thank you.

Sincerely,

Patricia Hartman
Patricia-Hartman@utc.edu

Dr. Amye Warren
Amye-Warren@utc.edu

Informed Consent Form

PERCEPTIONS OF CHILD SEXUAL ABUSE ALLEGATIONS UNIVERSITY OF TENNESSEE AT CHATTANOOGA

Please read this consent document carefully before you decide to participate in this study.

Purpose of the research study:

The purpose of this study is to examine views of sexual abuse allegations.

What you will be asked to do in the study:

First you will be asked to read a short scenario about a child who has made allegations of sexual abuse. Next you will be asked to respond to survey questions about your perceptions of what you have read.

Time required:

Approximately 20 minutes

Risks and Benefits:

While this survey deals with fictional and hypothetical events, sometimes thinking about child sexual abuse can be disturbing for some people. If the topic makes you uncomfortable, please do not participate. In addition, if you feel that you need to talk to anyone about any issues raised by this survey please contact the student counseling center at 423-425-4438, located on the second floor of the University Student Center. The benefits include a better understanding of how different people view child sexual abuse allegations.

Compensation:

You will be given an opportunity to sign a participation roster to be provided to your professor. Any extra credit, if applicable will be awarded by your professor at their discretion.

Confidentiality:

Your identity will be kept confidential to the extent provided by law. No identifying information is collected within the survey itself. This signed consent form will be collected and stored separately from the research data. Your name will not be used in any report.

Voluntary participation:

Your participation in this study is completely voluntary. There is no penalty for not participating.

Right to withdraw from the study:

You have the right to withdraw from the study at anytime without consequence.

Whom to contact if you have questions about the study:

Patricia D. Hartman, (Patricia-Hartman@utc.edu) or Dr. Amy Warren;
Holt Hall Psychology Office 350, 423-425-4293, Amye-Warren@utc.edu

Agreement:

I have read the procedure described above. I voluntarily agree to participate in the procedure and I have received a copy of this description. I am at least 18 years of age.

Participant: _____ Date:

Principal Investigator: _____ Date:

This research has been reviewed and approved by the UTC Institutional Review Board. If you have any questions about your rights as a subject/participant in this research, or if you feel you have been placed at risk, you can contact the IRB Committee Chair, at 423-425-5567. Additional contact information is available at www.utc.edu/irb.

We would like to know a little more about the people who complete this survey. Please be assured that the information you provide is **completely anonymous and confidential**. All information will be used only for summary statistics of our participants, and will not be connected to your name or used to identify you in any report of our results.

Please fill out the following questions.

Age: _____

Sex: _____Female _____Male

Ethnicity (Race): _____White/Caucasian _____Black/African American
 _____Latino/Hispanic _____Asian/Asian American
 _____Other (please specify)_____

Marital Status: _____Single _____Married
 _____Divorced _____Widow/ Widower

Do you have any children? _____Yes _____No

Have you ever been directly involved in a case about child sexual abuse (i.e.: juror, witness, close friend or family member as victim or accused, or any other involvement)?

_____Yes _____No

Have you ever been directly involved in the foster care system?

_____Yes _____No

Have you ever served on a jury?

_____Yes _____No

Current educational status: _____Freshman
 _____Sophomore
 _____Junior
 _____Senior
 _____Other (please specify)_____

Are you a psychology major? _____Yes _____No

How many psychology courses have you taken, including this one? _____1 (this class only)
 _____2
 _____3
 _____4
 _____5 or more

Appendix B: Scenarios

Control Child age 6

A referral was made to child protective services regarding 6 year old Haley who is in first grade. Haley lives with her mother and stepfather. Haley has the same teacher for first grade as she had last year in kindergarten. The teacher reports that Haley did well at the beginning of school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other children. By the end of the school year she seemed to be doing much better. The family has seemed very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking responsibility for her behaviors and becomes angry with authority. After picking fight on the playground at school this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her stepfather had touched her private parts. She said that her stepfather stuck his finger in her peepee. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her mom and stepfather argue about her mom working at

night. After her mom leaves for work and Haley goes to sleep her stepfather comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her stepfather fondled her and put his finger inside of her peepee.

Control child age 11

A referral was made to child protective services regarding 11 year old Haley who is in sixth grade. Haley lives with her mother and stepfather. Haley has the same teacher for sixth grade as she had last year in fifth. The teacher reports that Haley did well at the beginning of school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other children. By the end of the school year she seemed to be doing much better. The family has seemed very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking responsibility for her behaviors and becomes angry with authority. After picking fight on the playground at school this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her stepfather had touched her private

parts. She said that her stepfather stuck his finger in her vagina. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her mom and stepfather argue about her mom working at night. After her mom leaves for work and Haley goes to sleep her stepfather comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her stepfather fondled her and put his finger inside of her vagina.

Control child age 15

A referral was made to child protective services regarding 15 year old Haley who is in tenth. Haley lives with her mother and stepfather. Haley has the same teacher for English 10 as she had last year in freshman English. The teacher reports that Haley did well at the beginning of school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other students. By the end of the school year she seemed to be doing much better. The family has seemed very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking

responsibility for her behaviors and becomes angry with authority. After picking fight on the school grounds this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her stepfather had touched her private parts. She said that her stepfather stuck his finger in her vagina. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her mom and stepfather argue about her mom working at night. After her mom leaves for work and Haley goes to sleep her stepfather comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her stepfather fondled her and put his finger inside of her vagina.

Foster Child age 6

A referral was made to child protective services regarding 6 year old Haley who is in first grade. Haley lives with her foster mother and foster father. Haley has the same teacher for first grade as she had last year in kindergarten. The teacher reports that Haley did well at the beginning of school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other children. Her mother became unable to care for her and she entered foster care. By the end of the school year she seemed to be doing much better. The foster parents have been

very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her foster mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking responsibility for her behaviors and becomes angry with authority. After picking fight on the playground at school this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her foster father had touched her private parts. She said that her foster father stuck his finger in her peepee. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her foster mom and foster father argue about her foster mom working at night. After her foster mom leaves for work and Haley goes to sleep her foster father comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her foster father fondled her and put his finger inside of her peepee.

Foster child age 11

A referral was made to child protective services regarding 11 year old Haley who is in sixth grade. Haley lives with her foster mother and foster father. Haley has the same teacher for sixth grade as she had last year in fifth. The teacher reports that Haley did well at the beginning of

school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other children. Her mother became unable to care for her and she entered foster care. By the end of the school year she seemed to be doing much better. The foster family has been very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her foster mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking responsibility for her behaviors and becomes angry with authority. After picking fight on the playground at school this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her foster father had touched her private parts. She said that her foster father stuck his finger in her vagina. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her foster mom and foster father argue about her foster mom working at night. After her foster mom leaves for work and Haley goes to sleep her foster father comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her foster father fondled her and put his finger inside of her vagina.

Foster child age 15

A referral was made to child protective services regarding 15 year old Haley who is in tenth grade. Haley lives with her foster mother and foster father. Haley has the same teacher for English 10 as she had last year in freshman English. The teacher reports that Haley did well at the beginning of school last year, however, was victim of sexual abuse by an uncle that was temporarily living in the home. After the abuse, Haley became aggressive and would often pick fights with other students. Her mother became unable to care for her and she entered foster care. By the end of the school year she seemed to be doing much better. The foster family has been very supportive of Haley and have been very involved with school and Haley's needs.

Over the past month Haley has been arguing with the teacher and not doing her school work. Her foster mother has reported to the teachers that the same behaviors are happening at home. Haley frequently lies, not taking responsibility for her behaviors and becomes angry with authority. After picking fight on the school grounds this week, Haley was sent to the principal's office. In the office Haley became very upset, angry, and crying. She told the principal that her foster father had touched her private parts. She said that her foster father stuck his finger in her vagina. The principal called child protective services.

When the cps worker came to the school and interviewed Haley, she said that her foster mom and foster father argue about her foster mom

working at night. After her foster mom leaves for work and Haley goes to sleep her foster father comes into her room, pulls the covers up and starts touching her under her clothes. Haley said that her foster father fondled her and put his finger inside of her vagina.

Appendix C: Questionnaire

Survey

1. How old was the child you read about? _____
2. Who was the child abused by a year ago? _____
3. Who does the child live with now? _____
4. Who did the child say was currently abusing her? ____

For the following questions please circle the number that corresponds to your choice for each question.

5. It is likely that Haley was abused by her (stepfather/foster father)?

1	2	3	4	5	6	7
Strongly disagree			Agree			Strongly agree

6. Children rarely lie about sexual abuse.

1	2	3	4	5	6	7
Strongly disagree			Agree			Strongly agree

7. Children who have been sexually abused often experience sexual abuse again by different perpetrators.

1	2	3	4	5	6	7
Strongly disagree			Agree			Strongly agree

8. Children who have been sexually abused often seek attention and may falsely claim abuse again.

**Strongly disagree
agree**

Agree

Strongly

20. Children under ten rarely if ever lie about sexual abuse and should therefore always be believed.

1
**Strongly disagree
agree**

2

3

4

Agree

5

6

7

Strongly