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PROSECUTION OF CHILD SEXUAL ABUSE: WHICH CASES ARE ACCEPTED?

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Abstract—This study examined the relationship of case characteristics, maternal support, and child psychopathology to acceptance of child sexual abuse cases for prosecution. Cases referred to prosecutors' offices over a 1-year period in four urban jurisdictions ($N = 431$) were examined, and a smaller sample of mothers and children ($N = 289$) were interviewed as well. Background characteristics of the perpetrator and victim, severity of abuse, and nature of available evidence were all significantly related to acceptance for prosecution. Specific independent predictors of acceptance were victim age, presence of oral-genital abuse, use or threat of force, duration of abuse, and presence of physical or eyewitness evidence. With other variables controlled, maternal support was higher and child internalizing psychopathology lower in accepted cases. The results are interpreted in terms of prosecutors' concern for serving justice and protecting children and their perceptions of their ability to prosecute cases successfully.

Key Words—Prosecution, Child sexual abuse.

INTRODUCTION

THE DECISION TO prosecute child sexual abuse is extremely complicated. Often evidence is limited, and prosecutors must rely on child victims to testify. However, children may refuse to testify or recant, and families may oppose prosecution. In addition, prosecutors need to consider whether the benefits of prosecution outweigh the cost of potential psychological damage to children (see Goodman et al., 1989; Runyan, Edelsohn, Hunter, & Coulter, 1988; Whitcomb et al., in press), and whether interventions by child protective agencies or juvenile or family courts are more appropriate (Whitcomb, 1992). Because of the difficulties of trying these cases and concerns about children and families, considerable controversy surrounds prosecution of child sexual abuse (see Harshbarger, 1987; Myers, 1985–86; Newberger, 1987; Peters, Dinsmore, & Toth, 1989; Sandberg, 1987).

Although case examples and descriptions of typical practice suggest that multiple factors influence the decision to prosecute, there is a vacuum of empirical data on the nature of cases accepted for prosecution. The few available empirical studies focus on a small range of factors. An American Bar Association study found that cases characterized by sodomy and intercourse and cases involving multiple incidents were more likely to be prosecuted than other cases (Chapman & Smith, 1987). Cases involving older children were more likely to be prosecuted

with large increases starting with victims aged 7 years old and again at victims aged 11 years old. Finally, cases with perpetrators who had an extrafamilial relationship with the child were also more likely to be prosecuted. An analysis of data from a national study of child sexual abuse in day care found that specific combinations of the race and sex of the victim, number of victims, presence of oral sex acts, and the sex of the alleged perpetrator were associated with the perpetrator being arrested, although no data were published on which of these cases were subsequently prosecuted (Williams & Farrell, 1990).

We conducted a preliminary analysis of acceptance for prosecution in two jurisdictions for a 1-year period during 1986–1987 (Cross & De Vos, 1990; De Vos & Cross, 1990). A copy of a conference presentation of the results is available from the authors. This analysis found that several indices of severity of abuse were significantly related to acceptance for prosecution. Allegations of penetration were not significantly related to acceptance, but allegations of oral-genital contact were significantly related. In addition, perpetrator confession was highly related to acceptance for prosecution. Both perpetrator substance abuse and alcohol use during sexual abuse incidents were significantly related to acceptance for prosecution, although there is a strong possibility that this was an artifact of differential availability of information in accepted and declined cases.

Previous studies, however, have not assessed how the nature of the case and the child and family's reaction may be related to prosecution, nor has previous research attempted to control for possible confounding relationships among factors predicting prosecution.

Understanding which cases are prosecuted has several benefits. First, data on acceptance for prosecution may provide objective, policy-relevant information about prosecutor decision-making, counteracting public impressions unduly based on special cases like the McMartin case (People v. Buckey, 1990). Second, data on which cases are prosecuted may help identify obstacles to prosecution that could be addressed through innovative practices, local policies, changes in the law, or perhaps the development of alternatives to prosecution such as diversion programs. Third, understanding which cases are likely to be prosecuted can help identify those children who will undergo the process and need additional support and advocacy. Fourth, data on prosecutors' decisions may help settle the controversy over the merits of prosecution, since both arguments for prosecution (Harshbarger, 1987; Peters, Dinsmore, & Toth, 1989) and against (Newberger, 1987) depend on an assessment of the judgment of prosecutors.

This study first examined the bivariate relationship between acceptance for prosecution and variables representing the background characteristics of the case, severity of the abuse, nature of disclosure and investigation, available evidence and psychological response of the mother and child. Second, because these bivariate relationships were likely to be confounded, logistic regression analyses were conducted to assess the independent association of these factors with prosecution. Logistic regression analyses also yielded statistical models for predicting prosecutors' decision-making.

METHOD

Design and Samples

This study was conducted as part of the Child Victim As Witness Project, which gathered data on all cases of sexual abuse of children and adolescents (ages 4 to 18) referred to prosecutors' offices over a 1-year period (during 1988–1989) in four urban jurisdictions nationwide (see Whitcomb et al., in press). From records maintained by prosecutors, the police, and child protection agencies, project staff abstracted data to capture case characteristics and to track case flow and criminal justice outcomes.

In addition, following referral for prosecution, the research team contacted all families of child victims and invited them to participate in interviews. Consenting mothers were interviewed shortly after referral for prosecution to obtain their reports on children's behavioral and emotional well-being and to assess maternal support for their children. Children whose parents consented were also interviewed shortly after their cases were referred for prosecution to collect independent data on their behavioral mental health status. Interviewers had work experience in children's mental health care and were specially trained for this research.

As originally designed, the mother/child *interview sample* would have been a subset of the population-based *case abstraction sample*. However, the participation rate in this voluntary research effort was lower than our initial estimates had suggested. Prior field work undertaken by part of the research team (cf. Runyan et al., 1988) had evidenced a much higher participation rate. Differences in the population and recruitment process may well explain the difference observed. The earlier interviews were conducted exclusively with cases involving intrafamilial sexual abuse—all involved referral to the state child protective service agency. Further, the state agency was more directly connected to the research undertaking and was actively involved in the recruitment process. Finally, the earlier work was confined to a single state, which permitted more direct supervision and regular research team involvement.

To increase the sample size, the recruitment period was extended another 4 months beyond the target 1-year window. Thus, the two resulting samples are overlapping.

Case Abstraction Sample. This sample included all project-eligible cases of child sexual abuse referred for prosecution during a 1-year period starting in 1988. The data analysis to be reported here focused on 431 cases in which a single perpetrator and a single victim were identified. These cases represented 80% of those referred to prosecutors, and were the cases least ambiguous in terms of the factors under consideration. (In cases involving multiple victims and/or perpetrators, many factors do not easily lend themselves to unambiguous treatment. How one handles so seemingly straightforward a factor as the relationship between the victim and perpetrator, for example, depends upon the number of individuals involved, and whether the outcome of interest is victim-based, perpetrator-based, or inactive.)

Descriptive data are presented in Table 1 (See Whitcomb et al., in press, for a more complete description of the sample). The sample primarily consisted of young female victims, and perpetrators who were related to or knew them. Abuse was serious in type and duration. Perpetrators confessed in about one-third of cases. Victim's self-report was available as evidence in over half of the cases, but all other types of evidence were available in minorities of cases. The "hardest," most concrete types of evidence (physical and other eyewitness evidence) were the least available. Most cases were accepted for prosecution, but about a third were not.

Interview Sample. This sample consisted of 289 families who were interviewed. It was primarily a subsample of the case abstraction sample for the 1-year study period, but as noted above, also included some cases that entered the system in the following 4 months. The interview sample included data on all the variables represented in the case abstraction sample, plus additional variables derived from mother and child interviews. Because the interview sample primarily focused on the individual child as the unit of analysis, 91 cases involving multiple perpetrators and/or victims were included. For multiple perpetrator cases, data on perpetrator variables pertained to the perpetrator who had the closest relationship with the child and/or perpetrated the most severe abuse. A complete description of the procedures used for including data from multiple perpetrators in the interview data set is available from the first author.

The interview sample was likely to represent a somewhat different population than the case abstraction sample, because interviewed cases differed significantly from noninterviewed cases

Table 1. Characteristics of the Case Abstraction Sample

Characteristic	%
Victims	
Gender	
Female	89
Male	11
Age at Referral[a]	
4–6	23
7–12	42
13–17	35
Race	
White	71
African American	19
Hispanic	8
Other	2
Perpetrators	
Gender	
Male	98
Female	2
Age at Referral[b]	
15–19	9
20–29	31
30–39	33
40–49	14
50–59	7
60–80	6
Race	
White	64
African American	21
Hispanic	11
Other	3
Relationship to Victim	
Biological Parent	14
Adoptive/Stepparent	14
Mother's Boyfriend	14
Other Relative	15
Acquaintance	29
Stranger	4
Other	10
Cases	
Most Severe Abuse	
Penetration[c]	38
Oral-Genital	16
Digital-Vaginal	14
Other	32
Duration of Abuse	
1 Month or Less	57
2–12 Months	16
>12 Months	27
Type of Evidence[d]	
Perpetrator Confession	32
Physical	9
Other Eyewitness	15
Medical	32
Psychological	29
Fresh complaint/Excited Utterance[e]	16
Victim Self-Report	53
Strongest Available Evidence	
Level I (victim self-report or none)	26
Level II (medical, psychological, fresh complaint)	29
Level III (physical, other eyewitnesses)	13
Level IV (confession)	32
Accepted for Prosecution	
Yes	61
No	39

Note. Sample limited to cases with single perpetrators and single
victims. $n = 431$.
[a] $M = 10.3$.
[b] $M = 34.3$; Median $= 32$.
[c] Includes penile-vaginal, penile-anal, and digital-anal penetration.
[d] Coded as all that apply; categories are not mutually exclusive.
[e] Fresh complaint/excited utterance evidence refers to forms of hear-
say evidence in which witnesses are permitted to testify about victims'
initial disclosure of abuse.

on several variables. For example, children in interviewed cases were significantly younger (mean = 9.6) than children in cases without interviews (mean = 10.6; $F(1,429) = 7.17$, $p <$ .01). There was also a greater proportion of perpetrator confessions in interviewed cases (41%) than in noninterviewed cases (27%, $\chi^2(1,N = 423) = 7.22$, $p < .01$); a greater proportion of oral-genital abuse in interviewed cases (35%) than noninterviewed cases (25%, $\chi^2(1,N = 430)$ $= 4.03$, $p < .05$); and a significantly smaller proportion of use or threat of force in interviewed cases (39%) versus noninterviewed cases (61%; $\chi^2(1,N = 429) = 4.78$, $p < .05$). The smaller percentage of cases in the interview sample with alleged use or threat of force is of particular concern because it suggests that this sample may be less representative of physically traumatized children. Nevertheless, data from the interview sample represent our best estimate of the psychological response of mothers and children to the abuse and the criminal justice intervention.

Measures

Following referral of a case for prosecution, case abstractors completed a *Case Tracking Form* from prosecution and other agency records to gather detailed information on case characteristics and the adjudication process. Case abstractors were primarily law students. Data in the *Case Tracking Form* were finalized at case disposition or the end of the study period, whichever came first. Among the categories of data collected for the *Case Tracking Form* were characteristics of the child victims, perpetrators, abuse, disclosure, investigation and prosecution. Most of the items on the *Case Tracking Form* represented objective, straightforward data on the case (e.g., date of referral), but a few items demanded some degree of interpretation of data about the abuse (e.g., occurrence of penile-vaginal penetration) and prosecution (e.g., nature of the evidence).

An ordinal scale was developed to operationalize the strongest available evidence in a case. Level I represented cases in which there was no evidence or only the victim's report. At Level II were types of evidence that seemed to require a greater degree of inference or expertise: psychological, medical, and fresh complaint/excited utterance evidence (fresh complaint/excited utterance evidence refers to forms of hearsay evidence in which witnesses, such as parents, teachers, or police officers, are permitted to testify about victims' initial disclosures of abuse). More tangible evidence was at Level III: physical and other eyewitness evidence. Finally, Level IV represented perpetrator confession.

Additional measures were used to gather data from the children and mothers in the interview sample. To measure maternal support, the *Parental Reaction to Abuse Disclosure Scale* or PRADS, was scored by the interviewer after interviewing the mother and child. Results of a study using an earlier version of the PRADS supports the validity of this measure for assessing maternal support: Maternal support score was significantly associated with perpetrator relationship to the victim, decision to place in foster care, and child psychopathology scores (Everson, Hunter, & Runyan, 1989). The PRADS includes four subscales: belief in child's report, emotional support offered to child, action toward perpetrator's behavior, and use of professional services. Each subscale can be rated from -2 (least supportive) to $+2$ (most supportive), with the total score ranging from -8 to $+8$. Children in third grade or older who were interviewed were administered the Child Assessment Schedule (CAS) (Hodges, Kline, Fitch, McKnew, & Cytryn, 1981). The CAS is a semi-structured psychiatric interview that in previous studies has demonstrated adequate interrater reliability (Hodges, Kline, Fitch, McKnew, & Cytryn, 1981; Hodges, Kline, Stern, Cytryn, & Kline, 1982a; Runyan, Everson, Edelsohn, Hunter, & Coulter, 1988; Verhulst, Berden, & Sanders-Woudstra, 1985), test-retest reliability (Hodges, Cools, & McKnew, 1989) and validity (Hodges et al., 1982a; Hodges, McKnew, Cytryn, Stern, & Kline, 1982b; Verhulst, Berden, & Sanders-Woudstra, 1985). In an interrater reliability study of

Table 2. Case Correlates of Acceptance for Prosecution

Characteristic	n	% Accepted	Odds of Acceptance	Odds Ratio	χ^2
Victim Age[a]					
4–6	95	34	0.51		17.44***
7–12	181	69	2.18		
13–17	149	68	2.10		
Perpetrator Race					
White	267	65	1.84		8.46*
African American	89	51	1.02		
Hispanic	47	57	1.35		
Other	12	83	5.00		
Relationship to Victim					
Biological Parent	59	41	0.69		21.95***
Adoptive/Stepparent	59	76	3.21		
Mother's Boyfriend	62	48	0.94		
Other Relative	63	68	2.15		
Other	181	64	1.74		
Most Severe Abuse					
Penetration	156	58	1.36		8.76*
Oral Genital	68	77	3.25		
Digital-Vaginal	58	57	1.32		
Other	135	57	1.33		
Use or Threat of Force					
Yes	197	67	1.98	1.59	5.34*
No	227	56	1.25		
Duration of Abuse[b]					
1 Month or Less	235	57	1.33	0.65	4.30*
>1 Month	179	67	2.03		

Note. [a] Children in accepted cases ($M = 11.0$) were on average nearly 2 years older than children in declined cases ($M = 9.2$), $t(310.39) = 4.71$, $p < .001$.
[b] The median duration of abuse in accepted cases (median = 12) was significantly higher than the median duration in declined cases (median = 4), Wilcoxon rank sum test, $W(194) = 4597.5$, $p < .05$.
* $p < .05$.
*** $p < .001$.

videotapes of interviews from each project interviewer, intraclass correlation coefficients ranged from .69 to .81 across different CAS scores.

The Child Behavior Checklist-Parent form (CBCL-P) (Achenbach & Edelbrock, 1981), a well-established behavioral checklist for obtaining parent reports, was administered to caretakers of the children. The CBCL yields measures of global functioning, internalizing psychopathology (which includes, for example, depression and social withdrawal), and externalizing psychopathology (which includes, for example, hyperactivity and aggression). Traumatic sexualization was assessed in children from 4 to 12 years of age with the Child Sexual Behavior Inventory (Purcell, Beilke, & Friedrich, 1986), a 35-item parent report that measures the sexualization of the children, compared to a normative sample of 880 children.

RESULTS

Correlates of Acceptance for Prosecution

Table 2 presents child, perpetrator, and abuse correlates of acceptance for prosecution. Acceptance for prosecution was highly related to children's age and their relationship to the perpetrator. Over two-thirds of cases involving children aged 7–17 were prosecuted, compared to just over one-third of cases involving preschoolers, and children whose cases were prosecuted

were, on average, 2 years older than children whose cases were declined. White perpetrators were more likely to be prosecuted than African American or Hispanic perpetrators (the number of perpetrators in other ethnic groups was too small for the acceptance rate to be meaningful). Only a minority of biological fathers and mothers' boyfriends were prosecuted, compared to 50% or more in every other category of perpetrator-child relationship.

The more severe the abuse was in terms of number of incidents, duration, severity of sexual acts, and use of force, the greater the likelihood of prosecution. The positive relationship between the severity of the type of abusive acts and acceptance for prosecution appeared to be solely a function of oral-genital contact, however. Cases in which the most severe abuse was penile penetration were no more likely to be accepted than cases involving digital-vaginal penetration, fondling and kissing or other acts (e.g., exposing children to pornography). There was a statistical trend ($p < .10$) toward male suspects being prosecuted at higher rates (61%) than females (33%), but this finding was based on only nine women defendants. Also at the trend level, those who had a prior criminal record had a higher prosecution rate (71%) than those who had no prior record (56%).

Table 3 presents disclosure and investigation correlates of acceptance for prosecution. Acceptance for prosecution was more likely when the abuse was first disclosed to friends or acquaintances rather than to family members or professionals, and when the first agency involved was law enforcement rather than a social services agency. Cases with shorter investigations were more likely to be accepted than cases with longer investigations, except that there was a small group of cases investigated for more than three months that had high rates of acceptance.

Not surprisingly, 90% of cases in which the perpetrator confessed were accepted, but the presence of several other categories of evidence (physical, other eyewitness, fresh complaint/ excited utterance) was also associated with a higher acceptance rate. In and of themselves, the presence of psychological or medical evidence did not significantly increase prosecution rates. Perhaps most importantly, reliance on victim interviews was significantly associated with a *decreased* rate of prosecution. Looking at the strongest evidence that was available in a case, what we called Level II evidence (psychological, medical, fresh complaint/excited utterance) had only a marginally larger acceptance rate than Level I (victim self-report or no evidence). Acceptance rates only climbed higher with what we called Level III evidence (physical or other eyewitness evidence) and then Level IV, confession.

Table 4 presents maternal and child response correlates of acceptance for prosecution. On average, mothers in cases that were prosecuted scored significantly higher on several maternal support scores than mothers in cases that were not prosecuted. Looking at the specific indicators of maternal support, mothers in accepted cases believed their children's report more, provided more emotional support to their children, and disapproved of the perpetrators to a greater degree. Children in accepted cases had, on average, lower scores than children in declined cases on the Internalizing Psychopathology scale of the CBCL, on the General Psychopathology subscale of the CAS, and on the Child Sexual Behavior Inventory score. Children in accepted cases also had, on average, lower scores on the CBCL Behavior Problems scale—a total score including items from both the Internalizing and Externalizing Psychopathology subscales— but this appeared to be a function of the Internalizing subscale.

Several important variables were *not* significantly related to prosecution, including child gender and race, perpetrator occupation and education, whether or not the abuse involved penetration, location of abuse, time span from the last abusive incident to the report, CBCL Externalizing Psychopathology score, and the maternal support subscale for use of professional services.

Logistic Regression Analysis

One of the difficulties of the above correlational results is the potential for confounding relationships among the variables associated with prosecution. Logistic regression analyses

Table 3. Disclosure and Investigation Correlates of Acceptance for Prosecution

Characteristic	n	% Accepted	Odds of Acceptance	Odds Ratio	χ^2
First Person Notified					
Family	240	62	1.64		8.91*
Friend/Acquaintance	54	78	3.50		
Institution	89	53	1.12		
First Government Agency Notified					
Law Enforcement	248	67	1.99	1.94	10.69**
Child Protective Services	170	51	1.02		
Investigation Duration[a]					
Within 1 Week	114	73	2.68		17.44***
>1 Week to 1 Month	154	60	1.53		
>1 Month to 2 Months	83	51	1.02		
>2 Months to 3 Months	30	40	0.67		
>3 Months to 6 Months	16	75	3.00		
More than 6 Months	6	67	2.00		
Nature of Evidence[b]					
Perpetrator Confession					
Yes	135	90	9.38	10.81	73.84***
No	284	47	0.87		
Physical					
Yes	37	89	8.25	6.01	13.88*
No	382	58	1.37		
Other Eyewitness					
Yes	65	74	2.82	2.03	5.64*
No	354	58	1.39		
Fresh Complaint/Excited Utterance					
Yes	68	82	4.67	3.61	16.06***
No	351	56	1.29		
Victim Interview					
Yes	219	56	1.26	0.65	4.64*
No	200	66	1.94		
Strongest Evidence					
Level I	109	30	0.60		90.71****
Level II	121	44	0.78		
Level III	54	70	2.38		
Level IV	135	90	9.38		

Note. [a] Time from report to authorities to referral to district attorney. Median time for accepted cases (median = 14 days) was significantly less than median time for declined cases (median = 24 days), Wilcoxon rank sum test, $W(403)$ = 35326.5, $p < .01$.
[b] All categories that apply were coded for each case. Odds ratio and χ^2 tests compare cases where such evidence was available and useful to cases in which it was not available or not useful.
* $p < .05$; ** $p < .01$; *** $p < .001$; **** $p < .0001$.

were therefore conducted to assess the independent contribution of correlates of acceptance for prosecution and to develop predictive models of prosecutorial decisionmaking. Two models were developed. One model used background variables, measures of severity of abuse, disclosure and investigation variables, and evidence variables to develop a predictive model from the case abstraction sample. A second model, using the Interview Sample, employed most of the same predictors from the first model and also added measures of maternal support and child psychopathology.

Our initial logistic regression analyses revealed that perpetrator confession was such a powerful predictor of acceptance—over 90% of such cases were prosecuted—that we restricted analysis to those cases without confessions. We felt that this more accurately paralleled prosecutors' decision-making, since a confession significantly diminishes the salience of other factors.

The first analysis examined 273 nonconfession cases from the case abstraction sample, using

Table 4. Maternal and Child Response Correlates of Acceptance for Prosecution

	Accepted			Declined			
Variable	Mean	sd	n	Mean	sd	n	t
Maternal Support[a]							
Belief in Child's Report	1.38	0.74	173	0.87	1.06	55	3.33**
Emotional Support to Child	0.54	1.00	173	0.18	1.02	55	2.28*
Action Toward Perpetrator	1.23	0.92	173	0.84	1.03	55	2.65**
Total Score	3.91	2.93	173	2.60	3.25	55	2.82**
CBCL Internalizing							
Psychopathology	61.37	10.15	212	65.04	9.60	70	2.66**
CBCL Behavior Problems	63.08	10.98	212	66.60	11.11	70	2.29*
CAS General Psychopathology[b]	45.84	19.33	156	53.35	13.71	30	2.55*
Child Sexual Behavior Inventory	5.81	7.51	137	10.76	9.91	54	3.31**

Note. CBCL = Child Behavior Checklist; CAS = Children's Assessment Schedule.
[a] For multivariate analysis of variance on Maternal Support subscales, Hotelling's $T = .079$, Approximate $F(4,223)$ = 4.45, $p < .01$.
[b] Limited to children in third grade or above.
* $p < .05$; ** $p < .01$.

data available from agency records. All variables that were significantly related to acceptance for prosecution in the bivariate analyses were made available for inclusion in the logistic regression model. When variables had a substantial number of missing values, a missing value category or variable was included in the analysis to maximize the number of cases available for analysis (see Cohen & Cohen, 1983).

A hierarchical model was developed in which sets of variables were entered in order of causal priority, in other words, in order of the judged direction of causal influence (Cohen & Cohen, 1983). Although this method has primarily been developed for standard ordinary least squares regression models, the logic of hierarchical analysis applies equally well to logistic regression. To guard against experiment-wise error in the examination of the statistical significance of individual variables, the significance of an individual variable was examined only when the entire set of variables added significantly to the prediction of acceptance for prosecution (see Cohen & Cohen, 1983 for a similar procedure in multiple regression).

Sets of variables that were significantly related to acceptance for prosecution in bivariate analyses were entered hierarchically. Entered first were *Background Characteristics*: Site (although not significantly related to acceptance for prosecution, site was added because of concern that other effects might otherwise be confounded with site), Perpetrator Race, Victim Age, and Perpetrator-Victim Relationship. Entered second were *Severity of Abuse* variables: Most Severe Type, Duration and Use of Force. Entered third were *Disclosure and Investigation* variables: First Person Notified, First Agency Notified, and Investigation Duration. Entered Fourth were variables representing *Strongest Available Evidence*: Level II versus Level I, and Level III versus Level I. The logistic regression model was then refined by the deletion of three outlier cases that did not fit the logistic regression model well. (Outliers were those cases that had standardized residuals greater than + or −3. A residual was the difference between the observed outcome [coded as 1 if a case was accepted and 0 if it was not] and the predicted probability of an event [Norusis, 1990].)

The set of *Background Characteristics* itself represents a significant improvement in prediction above and beyond the base rate (χ^2 Improvement(10) = 39.86, $p < .0001$), correctly predicting 66% of the outcomes. The following sets in succession each had a significant association with acceptance for prosecution above and beyond the preceding set(s): *Severity of Abuse* (χ^2 Improvement(6) = 19.24, $p = .004$), *Disclosure and Investigation* (χ^2 Improvement(5) = 16.57, $p = .005$), and *Strongest Available Evidence* (χ^2 Improvement(2) = 12.75,

$p = .002$). The significant relationship between acceptance and *Disclosure and Investigation*, however, appears primarily to be an artifact due to the greater proportion of missing values on these variables for declined cases, and the nature of the disclosure and investigation itself was *not* significantly related to acceptance after *Background Characteristics* and *Severity of Abuse* were taken into account. There was only one significant relationship for these variables: cases with missing data on whom the child disclosed to were more likely to be declined than cases without missing data on this variable. This is most likely a by-product of the greater information available in the files for accepted cases. There was also the following trend ($p = .06$): cases in which law enforcement was the first agency involved were more likely to be prosecuted than cases in which social services was the first agency involved. The total model significantly improved prediction of acceptance for prosecution over the use of base rate of acceptance alone (i.e., the fact that 61% of cases were accepted), correctly predicting 68% of the cases that were accepted and 76% of the cases that were declined, for an overall correct prediction rate of 72%. The probability associated with the goodness of fit test was substantially greater than .05, indicating a good fit between the statistical model and the data (Goodness of Fit $\chi^2(249) = 254.87$, $p = .40$).

A second logistic regression analysis of nonconfession cases from the interview sample ($N = 173$) was conducted to examine whether maternal support and mothers' assessment of children's internalizing psychopathology added to the prediction of acceptance for prosecution. Because too few cases were available to allow a valid analysis of all the predictor variables entered into the previous analysis, only those variables that had a significance level less than .15 on the first logistic regression were entered (the variables entered were: *Background Characteristics* [race/ethnicity, child age, perpetrator relationship to child]; *Severity of Abuse* [most severe type, duration, use of force]; *Disclosure and Investigation* [first person notified, first agency notified, investigation duration]; and *Strongest Available Evidence*) along with the Maternal Support Total score and CBCL Internalizing Psychopathology. Child Sexual Behavior Inventory score was omitted because it was moderately correlated with CBCL Internalizing pathology score ($r = .48$), and, in separate analyses, appeared to be redundant with CBCL Internalizing Psychopathology in predicting acceptance. In a separate logistic regression analysis, increases in this score were also significantly associated with a *decreased* likelihood of prosecution. Both Maternal Support Total score and CBCL Internalizing Psychopathology were significantly related to acceptance for prosecution above and beyond the other variables. The probability associated with the goodness of fit test was again substantially greater than .05, indicating a good fit between the statistical model and the data (Goodness of Fit $\chi^2(147) = 122.83$, $p = .90$).

Table 5 presents the logistic regression results for partialled correlates of acceptance for prosecution, that is, individual variables in the full models for the case abstraction sample and the interview sample that had a significant ($p < .05$) relationship with acceptance for prosecution, with all other variables controlled. The only *Background* variable that was significantly independently related to prosecution was child's age at referral for prosecution. The odds ratio means that an increase of 1 year in age was associated with a 1.13 greater likelihood of prosecution. Applying this finding to a more meaningful age difference, an increase of 5 years was associated with a 1.88 greater likelihood of prosecution—nearly twice as great. Perpetrator race was not significantly related to acceptance when other *Background Characteristics* were controlled, and site was not significant after *Strongest Available Evidence* was entered into the model. The perpetrator being a biological father was a significant factor in the initial steps of building the model, but was no longer significant after *Strongest Available Evidence* was entered.

Among the *Severity of Abuse* variables, presence of oral-genital abuse (as the most severe type of abuse) and the use or threat of force were both significantly independently associated

Table 5. Correlates of Acceptance for Prosecution in the Logistic Regression Analyses

Variable	Final Odds Ratio	Lower Bounds	Upper Bounds	p
Case Abstraction Sample, n = 273				
Victim Age	1.13	1.04	1.24	.006
Oral-Genital Abuse[a]	2.69	1.34	5.41	.005
Use or Threat of Force[a]	2.35	1.25	4.42	.008
Duration of Abuse[b]	1.98	1.02	3.88	.045
Direct Evidence[c]	5.12	2.02	12.96	.001
Interview Sample, n = 173[d]				
Maternal Support	1.43	1.16	1.77	.001
Internalizing Pathology	0.95	0.91	<1.00	.042

Note. n = 273.
[a] 0 = Absent, 1 = Present.
[b] 0 = 1 Month or Less, 1 = >1 Month.
[c] 0 = None or Victim Self-Report, 1 = Physical or Other Eyewitness Evidence.
[d] Variables added through analysis of interview sample.

with prosecution. Duration of abuse was not significantly associated with acceptance after *Background Characteristics* and other *Severity of Abuse* variables were controlled.

Considering *Strongest Available Evidence*, Level III evidence (i.e., physical and other eyewitness evidence) was highly independently associated with acceptance for prosecution. Indeed, all nonconfession cases in which there was physical evidence were accepted for prosecution. Presence of Level II evidence (medical, psychological, or fresh complaint/excited utterance evidence) as the strongest evidence was not, however, significantly independently related to acceptance for prosecution.

In the interview sample, as mentioned above, Maternal Support Total score and Child Internalizing Psychopathology were significantly independently related to acceptance for prosecution. Given the odds ratio of 1.43 for Maternal Support Total score, a meaningful increase of one standard deviation in maternal support (*sd* = 3.04; approximately 3 points on a 16-point scale) was associated with a 2.97 greater likelihood of prosecution. Increasing child internalizing psychopathology, on the other hand, was linked with decreased likelihood of prosecution. An increase of one standard deviation on CBCL Internalizing Psychopathology (*sd* = 10.13) was associated with a likelihood of acceptance that was .61 what it would have been otherwise.

DISCUSSION

In summary, in the single predictor analyses, acceptance for prosecution was significantly related to age of the child, the relationship between the perpetrator and child, severity of the crime, the availability of several different forms of evidence, and how the case was disclosed and investigated. It was also related to maternal support for the child, and the child's level of psychopathology and sexualized behavior. When we restricted our analysis to cases without a confession, and controlled for the relationships among the predictors, the variable sets, *Background Characteristics, Severity of Abuse,* and *Strongest Available Evidence* were all significant and meaningful predictors of acceptance for prosecution. The following individual variables were significant independent predictors: age of the child, oral-genital abuse as the most severe type, use or threat of force, presence of physical or other eyewitness evidence, total maternal support, and child internalizing psychopathology. Several preliminary conclusions can be drawn from these data.

Child's Age

The sharp increase in acceptance at age 7 suggests that a certain threshold developmental level of the child distinguishes "prosecutable" cases from "not prosecutable" cases. The effect of child age exists independently of perpetrator relationship to victim, type of evidence, child psychopathology and maternal support. It probably reflects children's ability to provide credible information and serve as credible witnesses, or prosecutors' perceptions about their credibility and judgments regarding jurors' assessments. Future analyses of the data set will examine which of these children testify and under what circumstances. Policy debates will need to consider the difference in prosecution rates between preschool and older children.

Severity of Abuse

These data provide quantitative evidence for the severity of the alleged abuse in the population of cases referred to prosecutors. Majorities of cases involved allegations of penetration and multiple incidents, and large numbers involved force and long durations. Although the severity of accepted cases is well known among prosecutors, these data may be relevant to those in the policy community and public who lack information about the nature of the offenses referred to prosecutors. Of course, these data only concern allegations, and they do not rule out the possibility that individual trivial cases may be pursued. Nevertheless, they underscore the seriousness of the prosecutor's task in most cases.

The fact that penetration did not significantly increase the likelihood of acceptance for prosecution compared to other forms of sexual abuse is not easily explained. It contrasts with the American Bar Association study's findings of much higher rates of prosecution for cases alleging sodomy and intercourse (Chapman & Smith, 1987). The significant relationship between oral-genital contact and prosecution is similarly perplexing; this category of abuse was not examined separately in the ABA study. One highly speculative hypothesis is that it reflects prosecutors' judgment that juries will not expect conclusive medical evidence of oral-genital abuse, whereas they would have such expectations when penetration is alleged, even though recent research suggests that medical evidence is often inconclusive even when penetration occurs (Muram, 1989). The significant relationship between use or threat of force and acceptance may stem from prosecutors' ability in these cases to use additional charges beyond sexual abuse charges.

The Evidence Dilemma

Except for perpetrator confession, the most effective evidence (physical and other eyewitness evidence) was often not available, while the most available evidence appears not to have been effective. This finding also held true for the logistic regression analysis of the nonconfession cases. Fresh complaint/excited utterance evidence, though classified at Level II, was significantly related to prosecution in the bivariate analysis and may therefore be more effective than other Level II evidence such as psychological or medical evidence. Evidence from the victim's interview, while often available, did not increase the probability of prosecution. It appeared to be coded when fewer other forms of evidence were available, suggesting that prosecutors may have relied on victim interviews primarily when other evidence was not forthcoming. These findings suggest that the evidence available to prosecutors, short of confession, is seldom so compelling that it impels prosecution independently of such factors as the child's ability to testify about the abuse.

Maternal Support

The relationship between maternal support and acceptance for prosecution resists simple interpretation. The relationship does not necessarily mean that maternal support influences

prosecutors' decisionmaking. Prosecutors' decisions may indeed be based partly on maternal support, because maternal support may sway judgment about an alleged perpetrator's guilt, and because maternal support may be necessary to prevent recantation and assist children with interviews and testifying. But prosecutors' decisions may also influence mothers' beliefs about the abuse, and mothers' responses and prosecutors' decisions may be related because both are responding rationally to the quality of the evidence, which was only imperfectly controlled in our study. Some combination of these explanations seems likely. It is also possible that knowledge about whether a case was accepted might have biased interviewers' judgments about maternal support, since they could not be blind to the prosecutor's decision, but this seems an unlikely cause for the size of the effect that was found. Note also that the results based on analysis of the interview sample (i.e., maternal support and child psychopathology results) may not be fully representative of the population because of differences between interviewed and noninterviewed cases on such variables as use or threat of force. The relationship between maternal support and prosecutor decision-making deserves further investigation, perhaps in studies that measure maternal support earlier in the investigation and adjudication process and measure the credibility of an allegation more intensively.

Child Psychopathology

Because the decision on acceptance preceded the measurement of child psychopathology in many cases, the meaning of the significant relationship between the two is unclear. Prosecutors may be less likely to accept cases involving disturbed children, children in cases that are declined may become more disturbed as a result of the decision, or a third factor may be correlated both with child psychopathology and with prosecutor decisions. Some or all of these processes may take place together. Regardless of the cause of this relationship, this finding suggests the importance of coordination between prosecutors and mental health agencies. Future research could evaluate children's mental health status prior to the decision to prosecute as well as afterwards.

These results portray a process in which the nature of the alleged crime influences decision-making but in ways that require more understanding, and "hard" evidence counts for much but is often unavailable. In addition, the results suggest that children's maturity and well-being and support from their family are important parts of the process. The relationship of child age and maternal support and perhaps child psychopathology to the decision to prosecute probably reflects the need for children to provide accurate and credible information about the abuse, to qualify as competent witnesses and testify effectively if they do qualify. It may also reflect prosecutors' consideration of the vulnerability of children to the process of adjudication. A sad irony is that, when victims were more vulnerable or damaged, and the alleged crime therefore arguably more heinous, cases were less likely to be prosecuted.

These findings suggest a need for increased attention to strengthening children's ability to testify convincingly and perhaps developing more sophisticated investigative practices to increase the availability of other evidence. Recent U.S. Supreme Court opinions (White v. Illinois, 1992; Idaho v. Wright, 1990) making it easier to introduce certain types of hearsay testimony, particularly from witnesses who may have heard the child's early disclosures, underscore the importance of quality investigations. Despite society's best efforts, however, some cases may not be prosecutable; for these children, it may be imperative to identify alternative avenues to assure their protection while maintaining control over perpetrators.

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Résumé—Cette étude a voulyu mieux comprendre comment les caractéristiques des cas d'abus sexuels, l'appui moral de la mère et le degré de psychopathologie chez l'enfant affectent la decision du procureur de poursuivre ces crimes devant le tribunal. On a étudié 431 cas d'abus sexuels soumis aux procureurs pour fin de oursuite judiciaire durant une période d'un an, dans quatre municipalités. De plus, on a interviewe un plus petit échantillon de 289 mères et

enfants. Les caracteristiques des agresseurs et des victimes, la gravité des mauvais traitements et la nature et la presence de preuves sont tous des facteurs qui ont joué par rapport à la décision du procureur de poursuivre les cas. Plus particulièrments, l'âge de la victime, la présence d'abus oral-génital, le recours à la force, la dureé de la maltraiteane et la présence de peruves ou de témoins se sont avérés des factueurs importants lorsqu'il s'agit de poursuite judiciaite suite à des abus sexuels. Ayant contrôlé d'autres variables, on anote que les cas qui ont fait l'objet de poursuite judiciare etaient ceux où la mère était capable d'un appui moral et òu l'enfant n'intériorisait pas la psychopathologie. On discute des résultats de l'etude par rapport au desir des procureurs de bien desservir la justice et de proteger les enfants. On discute aussi de l'assurance qu'ils ressentiront de pouvoir s'acquitter de leur tâche avec succès.

Resumen—Este estudio examinó la relación entre las caracteristicas de los casos, apoyo materno y la patologia infantil para la aceptación de los casos de abuso sexual contra los niños para ser enjuiciados. Fueron examinados los casos referidos a las oficinas de los fiscales en un período de un año en cuatro jurisdicciones urbanas ($n = 431$), y una muestra pequeña de madres y niños ($n = 289$) también fueron entrevistados. Caracteristicas del historial del perpetrador y la víctima, severidad del abuso, y la naturaleza de la evidencia disponible fueron todos significativamente relacionados con la aceptación del enjuiciamiento. Predictores independientes de la aceptación eran la edad de la víctima, presencia de abuso oro-genital, uso de amenaza o fuerza, duración del abuso, y presencia de evidencia física o testimonial. Con las otras variables controladas, el apoyo materno estuvo más alto y la internalización de psicopatologia menor en los casos aceptados. Los resultados son interpretados en términos de la preocupación de los fiscales para servir la justicia y proteger a los niños en sus percepciones du su habilidad para enjuiciar los casos exitosamente.