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# Understanding Nonoffending Caregiver Protection in Child Sexual Abuse

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## Walden University

College of Social and Behavioral Sciences

This is to certify that the doctoral dissertation by

Christina Lynn Sally

has been found to be complete and satisfactory in all respects, and that any and all revisions required by the review committee have been made.

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> > Walden University 2019

#### Abstract

## Understanding Nonoffending Caregiver Protection in Child Sexual Abuse

by

Christina Lynn Sally

MS, Walden University, 2016

BS, San Jose State University, 1985

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology

Walden University

August 2019

#### Abstract

Child sexual abuse is a global issue that has affected children, families, and communities for centuries regardless of socioeconomic, religious, ethnic, race, or multicultural factors and distinctions. Sexually abused children may be reluctant to disclose sexual abuse due to perceptions or realities that their nonoffending caregiver (NOC) will not believe their reports and may fail to provide adequate protection. The purpose of this quantitative study was to assess if child demographics (i.e., age, sex, and race/ethnicity); type of sexual offense (i.e., contact or noncontact); and perpetrator relationship to the child (i.e., familial or extrafamilial) predict a NOC's response (i.e., protection or failure to protect) to child sex abuse disclosures, using cognitive dissonance theory and neutralization theory as theoretical foundations. Archived and extracted data (2015–2017) were utilized from the Utah Department of Human Services. A binary logistic regression was used to determine the predictive quality of the independent variables for the outcome variable. The results indicated that the odds of protection were greater for non-White females experiencing noncontact abuse by a familial offender. Age was not a statistically significant predictor of NOC protection in the full model. The findings from this study support positive social change by providing research-based conclusions that can promote prevention, intervention, and education programs by child protection teams for victims of child sexual abuse and their families.

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## Dedication

I would like to dedicate my dissertation to the girls, boys, women, and men who experienced child sexual abuse and the nonoffending caregivers who believed, supported, and protected their children.

#### Acknowledgments

It is an honor to acknowledge the many people who supported and encouraged me throughout this academic journey. Although I would like to list everyone individually, it would be far too verbose. Therefore, I would like to thank my family and friends for enduring my academic schedule; Eric Hutchison for his friendship, intellectual mentorship, and humor; Roy V. Parker for being a cheer leader and reminding me that I matter; my colleagues for allowing me latitude to write; Dr Jason Roach for his patience, quick wit, and brilliance; and Dr. Eric Hickey for his motivation to keep moving onward.

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#### Chapter 1: Introduction to the Study

#### Introduction

Child sexual abuse (CSA) has been occurring for centuries in all cultures, societies, and diverse socioeconomic groups (Murray, Nguyen, & Cohen, 2014; Olafson, 2011; Pellai & Caranzano, 2015; Pereda, Guilera, Forns, & Gómez-Benito, 2009a). In the United States, child protection teams, professionals, academics, and societal conjecture did not adequately acknowledge or recognize CSA as a deleterious attack on children until the mid-1960s to 1970s (Foster & Hagedorn, 2014a; Myers, 2008; Olafson, Corwin, & Summit, 1993). The feminist movement of the 1960s and 1970s and advances in psychological therapies brought awareness to the issues of CSA (Olafson, 2002, 2011). For example, the feminist evolution, also known as the women's liberation movement, brought political activism to the concerns of sexual violence and sexual harassment towards women (Beckett, 1996; Gordon, 1988). As women sought treatment for various mental health conditions, they began disclosing prior sexual abuse that occurred when they were children (Olafson et al., 1993).

While CSA was gaining crucial attention during this time, most people believed that CSA offenders were relegated to the "stranger" population (Jewkes & Wykes, 2012; Letourneau, Eaton, Bass, Belin, & Moore, 2014; Myers, 2008; Weatherred, 2015). Thus, public perceptions of strangers as primary CSA violators obscured the realities of CSA offending, namely that most CSA offenders are known to the victim (Craven, Brown, & Gilchrist, 2006; Glaser, 1998; Jackson, Newall, & Backett-Milburn, 2015; Jewkes & Wykes, 2012; Letourneau et al., 2014; McAlinden, 2006; McGuire & London, 2017; McLean, Morris, Conklin, Jayawickreme, & Foa, 2014; Melville, Kellogg, Perez, & Lukefar, 2014; National Center for Victims of Crime [NCVC], 2012; Olafson, 2011; Reitsema & Grietens, 2016; Smith et al., 2000). Such erroneous assumptions were likely to have impeded crucial public awareness about the true phenomena of CSA.

Over the last 40–50 years, researchers, academics, and professionals have recognized that CSA is primarily committed by someone known to the child (Craven et al., 2006; McGuire & London, 2017; NCVC, 2012; Olafson, 2011; Paine & Hansen, 2002; Reitsema & Grietens, 2016; Smith et al., 2000). For example, most CSA victims are abused sexually by a family member, person known to the family, or person known to the child (Caven et al., 2006; McGuire & London, 2017; Myers, 2008; NCVC, 2012; Olafson, 2011; Paine & Hansen, 2002; Reitsema & Grietens, 2016; Smith et al., 2000).

Researchers have examined the effects of intrafamilial and extrafamilial CSA on its victims. Based on study results, researchers have identified NOC support as a variable associated with a sexually abused child's psychological, psychosocial, and behavioral functioning after alleged CSA (Bick, Zajac, Ralston, & Smith, 2014; Cook et al., 2005; Godbout, Briere, Sabourin, & Lussier, 2014; Palo & Gilbert, 2015; Smith et al., 2000; Zajac, Ralston, & Smith, 2015). Previous research on NOC support has assessed support and protection as synonymous; however, these terms have divergent definitions and connotations are disparate (Bolen, Dessel, & Sutter, 2015; Bolen & Lamb, 2007a, 2007b; Smith et al., 2010).

The implications and reasons for variances in NOC support and protection are of substantial relevance for protecting children (Babatsikos, 2010; Coohey, 2006; Elliott &

Carnes, 2001; Eriksson, Cater, Andershed, & Andershed, 2010; Fontes & Plummer, 2010; Godbout et al., 2014; Marriott, Hamilton-Giachritsis, & Harrop, 2014). Notably, decisions made by child protection services are influenced by a NOC's protective response to their child's CSA disclosure (Bolen et al., 2015; Coohey, 2006; McLaren, 2013). Children victimized by CSA, with determined lack of protection or unsupportive reactions by NOCs, are more likely to be removed from their home (Bolen et al., 2015; Coohey, 2006; Everson, Hunter, Runyon, Edelsohn, & Coulter, 1989; Leifer, Kilbane, & Grossman, 2001; Yancey & Hansen, 2010). Further, the sequelae after CSA victimization can be impacted by the presence or absence of a NOC's emotional, physical, and psychological support (Bellis et al., 2017; Godbout et al., 2014; Rosenthal, Feiring, & Taska, 2003; Salmon & Resse, 2015; Yancey & Hansen, 2010).

This chapter includes the background, relevance, operationalization of the terms, problem, and purpose of the study. Theoretical foundations and research methods are discussed. The significance of the study and implications for social change are also addressed. In Chapter 2, I will expand on the literature that justified and grounded this research study as well as articles that represent gaps in the literature related to NOC responses and CSA disclosures. Chapter 3 will include a presentation of the methodological considerations and statistical analysis I selected. In Chapters 4 and 5, I will report the results, conclusions, recommendations, and social change relevance.

#### Background

Several years ago, a young woman wanted to speak with me about something that was happening to her. She was 19 years old and in distress. At the time of the

appointment, she hid on the floorboard of her car in the parking lot. Finally, when she had the courage to come inside the office, she disclosed pervasive sexual abuse by her father, a revered religious leader in a small community. The sexual abuse started when she was 11 years old and continued to occur. She wanted the abuse to stop; however, she did not want to disrupt the "family" core or jeopardize her father's standing in the community. She said her mother knew about the abuse, witnessed the aftermath, and refused to intervene.

While this case exemplifies a NOC's refusal to protect their child, it did not gain national attention as other cases with famous perpetrators, such as Jerry Sandusky or members of the Catholic church clergy. Additionally, the Sandusky scandal involved beloved coaches and families; the above case concerned a local theological dignitary beloved by a small, devout community. Unfortunately, the young woman who came to my office was shunned and left the area. No prosecution occurred.

Much of CSA remains undetected and unreported (Martin & Silverstone, 2013; Swingle et al., 2016). Without a child's sexual abuse disclosure, children cannot be protected. It is the obligation of child welfare workers and trusted adults to help children become conscious of CSA phenomena, promulgate reporting, and ensure subsequent protection.

#### History

CSA has existed for centuries. Awareness and protection discourses did not begin until the mid-1960s (Myers, 2008; Olafson, 2002, 2011; Olafson et al., 1993; Weatherred, 2015). As women became more vocal and moved from traditional female roles of the 1950s, the feminist movement of the 1960s and 1970s sparked increased intolerance for physical and sexual violence against women (Beckett, 1996; Gordon, 1988). During this women's liberation crusade and coupled with aspirations toward mental well-being, therapists and professionals began to uncover psychological and emotional problems experienced by CSA survivors, primarily women (Olafson et al., 1993). This was the beginning of recognizing the correlations between CSA and later psychological anguish (Myers, 2008).

Prior to these movements and correlating discoveries, CSA had been relegated to confidential sources, and frequent denial or coverups were common (Olafson, 2011; Salmon & Reese, 2015). For example, in the United States, when children disclosed abuse by someone in close relational proximity and certain class moieties, the abuser was protected, and the child disregarded (Jewkes & Wykes, 2012; Myers, 2008; Olafson, 2011). Although academics, researchers, child protection organizations, and legal entities have moved to identify, prevent, treat, and seek legal remedies for CSA victims, there remains a significant amount of CSA that goes unreported in the United States and worldwide (Ceci & Bruck, 2005; Collin-Vézina, Daigneault, & Hérbert, 2013; Finkelhor, Shattuck, Turner, & Hamby, 2014; Jewkes & Wykes, 2012; Lemaigre, Taylor, & Gittoes, 2017; London, Bruck, Ceci, & Shuman, 2005; Martin & Silverstone, 2013; Mills, Kisely, Alati, Strathearn, & Najman, 2016; Priebe & Svedin, 2008; Reitsema & Grietens, 2016; Veenema, Thorton, & Corley, 2015; Wager, 2015; Weatherred, 2015).

#### **Importance of Disclosure**

Sexually abused children may feel shame (Feiring & Taska, 2005), self-blame, guilt, and responsibility for their abuse which can thwart their disclosures (Alaggia, Collin-Vézina, & Lateef, 2017; Dorahy & Clearwater, 2012; Easton, Saltzman, & Willis, 2014; Lemaigre et al., 2017; McElvaney, Greene, & Hogan, 2012, 2014; Melville et al., 2014; O'Leary, Coohey, & Easton, 2010; Ulman, 2003, 2007). Delays in disclosure challenge the credibility and veracity of the child and their disclosure of CSA (McElvaney et al., 2012; McGuire & London, 2017), as there typically lacks corroborative evidence such as witnesses or medical findings (Adams, Farst, & Kellogg, 2017; Babatsikos, 2010; Foster & Hagedorn, 2014b; Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; Hershkowitz, Lanes, & Lamb, 2007; London et al., 2005; London, Bruck, Wright, & Ceci, 2008; McGuire & London, 2017; Shackel, 2008).

CSA cannot be prevented if a child does not have the means, willingness, or support to disclose sexual victimization (Foynes, Freyd, & DePrince, 2009; Morrison, Bruce, & Wilson, 2018; Sawrikar & Katz, 2017). Children victimized by sexual abuse may be at risk for further abuse or revictimization if CSA is not disclosed (Alaggia et al., 2017; Das & Otis, 2016; McElvaney et al., 2014; Palo & Gilbert, 2015). NOC protection and support have been recognized in the literature as a necessary component for a child's readiness and ability to disclose CSA (Afifi & MacMillan, 2011; Hershkowitz et al., 2007; Hunter, 2015; Lovett, 2004; Malloy & Lyon, 2006; McElvaney, 2015; Priebe & Svedin, 2008; Rakovec-Felser & Vidovič, 2016; Sawrikar & Katz, 2017).

#### Gaps in the Research

There is a dearth of research in this area because some studies have focused on a child's perspective of their NOC's response to their disclosure and a CSA victim's perception of why their caregiver responded in such a manner (Hunter, 2015; McElvaney et al., 2014; Schönbucher, Maier, Mohler-Kuo, Schnyder, & Landolt, 2014; Smith et al., 2017). Other studies have assessed a NOC's viewpoint about their level of protection (McElvaney et al., 2014; Rakow, Smith, Begle, & Ayer, 2011; Wamser-Nanney, 2017). Specifically, gaps in the literature included identifying whether victim demographics, type of offense, and victim-perpetrator relationship may affect a NOC's reaction and protective measures for their child after a CSA disclosure (Palo & Gilbert, 2015; Schönbucher et al., 2014; Wamser-Nanney & Sager, 2018).

Moreover, there is a breadth of CSA research employing retrospective studies with adults victimized by CSA (Collin-Vézina, De La Sablonnière-Griffin, Palmer, & Milne, 2015; Lahtinen, Laitila, Korman, & Ellonen, 2018; London et al., 2008; Wager, 2015). Academics and researchers have suggested that retrospective studies of adverse childhood experiences, such as CSA, may provide less reliable and valid findings due to a participant's memory recall (Hardt & Rutter, 2004; Langeland, et al., 2015; London et al., 2008; Pereda et al., 2009b). Exploring the possible variables associated with a NOC's protective or unprotected comportment after a CSA disclosure as reported by government child welfare protection teams can inform professionals, communities, stakeholders, and organizations about how to intervene in suspected cases of CSA.

#### **Problem Statement**

CSA is a global problem that affects families, communities, and societies from all cultures (Dubowitz, 2017; Stoltenborgh, Bakermans-Kraneburg, Alink, & van IJzendoorn, 2015). Researchers have estimated CSA causes escalating financial burdens to states and countries (Fang, Brown, Florence, & Mercy, 2012; Herrenkohl, Leeb, & Higgins, 2016). Academics have surmised that perceived or actual parental response to CSA disclosures affects a child's willingness to disclose incidents of CSA victimization (Hunter, 2015; Lemaigre et al., 2017; McElvaney et al., 2014; Morrison et al., 2018; Schönbucher et al., 2014). Children may intuit their NOC might respond with dismissiveness, disbelief, blame, or shame (Gagnier & Collin-Vézina, 2016; Hunter, 2015; O'Leary et al., 2010; Tener & Murphy, 2015); therefore, victimized children may be more reluctant to disclose or report CSA (Foster & Hagedorn, 2014b; Hershkowitz et al., 2007; London et al., 2005; Morrison et al., 2018). If CSA is not disclosed or reported, children are vulnerable to continued victimization and subsequent psychological and emotional distress (Das & Otis, 2016; Hornor & Fischer, 2016; McElvaney et al., 2014; O'Leary et al., 2010; Palo & Gilbert, 2015). CSA disclosure is a prerequisite for child protection (Paine & Hanson, 2002; Wager, 2015).

Researchers have utilized retrospective studies with CSA victims to determine parental reactions to CSA disclosures (Collin-Vézina et al., 2015; London et al., 2008; Mannon & Leitschuh, 2002; Wager, 2015). Other researchers have recruited motherchild dyads or clinicians to assess the levels of support after a CSA disclosure (McElvaney et al., 2014; Rakow et al., 2011; Wamser-Nanney, 2017). Meta-analyses have also been conducted to summarize the findings of studies related to maternal support after CSA disclosures (Bolen & Gergely, 2015; Reitsema & Grietens, 2016). Notably, limited research has focused on predictors of a NOC's protective or FTP reaction. Therefore, it was essential to conduct an analysis of data collected by government child protection agencies to assess possible predictors or correlates of NOC protection (see Palo & Gilbert, 2015; Schönbucher et al., 2014).

#### **Purpose of the Study**

The purpose of this quantitative research study was to explore if child victim demographics, type of sexual abuse, and a perpetrator's relationship to a CSA victim predict a NOC's protection or FTP response after their child's sexual abuse disclosure. The predictor or independent variables were child demographics (i.e., age, sex, and race/ethnicity); type of abuse (i.e., contact or noncontact); and a perpetrator's relationship to the child (i.e., familial or extrafamilial). The dependent outcome variable was a binary or dichotomous variable of NOC protection or FTP as measured by a governmental child welfare organization tasked with ensuring children are protected.

A binary logistic regression analysis is utilized when trying to make predictions about group membership in the dichotomous outcome variable (Warner, 2013). Further, a binary logistic regression allows researchers to determine the odds of membership in the outcome variable based on the predictor variables (Warner, 2013). Therefore, the overall significance of the analysis and the odds of membership in the dependent variable can inform researchers about CSA characteristics (i.e., child demographics, type of CSA, and perpetrator relationship to the CSA victim) that may predict a NOC's protective response in future cases of CSA.

#### **Research Question and Hypotheses**

In this study, I used a quantitative research design with a binary logistic regression analysis to assess whether the independent categorical variables predict the dependent dichotomous outcome variable. The following research question and hypotheses guided the study:

Research Question: Does CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports?

*H*<sub>0</sub>: CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do not predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

*H*<sub>1</sub>: CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

#### **Theoretical Framework**

Researchers and academics have examined the implications of CSA trauma using various theoretical frameworks related to the child. Understanding a NOC's response to their child's CSA disclosure requires a theoretical framework that underpins the unique cognitive dynamics of the NOC. Cognitive dissonance theory and neutralization theory are discussed as the theoretical foundations for this study.

#### **Cognitive Dissonance Theory**

As a theoretical foundation, cognitive dissonance theory (Festinger, 1957) asserts that a person's behaviors are sometimes dissonant with their values, beliefs, and morals. For example, most NOCs (and people in general) believe that CSA is abhorrent, reprehensible, and repugnant. Based on these beliefs, the NOC might respond that they would protect their child and remove them from any contact with the perpetrator (Bolen, 2002b). In reality, some NOCs react to their child's CSA disclosure with blame, disbelief, shame, and anger towards their child (Foster & Hagedorn, 2014b) and fail to provide adequate protection from the perpetrator or future CSA. Thus, cognitive dissonance occurs when the actions of the NOC are dissonant or incongruent with their beliefs about CSA, the victim, or the perpetrator (Bennett & O'Donohue, 2014). Cognitive dissonance, as a theoretical framework, allowed for the conceptualization of the reasoning a NOC may adopt when reacting to CSA disclosures with protective or FTP responses.

#### **Neutralization Theory**

Neutralization theory posits that there are internal and external demands for rationalizing behavior (Sykes & Matza, 1957). Neutralization theory suggests five types of justifications or rationalizations for behavior that may oppose societal beliefs that are considered the norm (such as believing children disclosing sexual abuse): (a) denial of responsibility, (b) denial of injury, (c) denial of the victim, (d) condemnation of the condemners, and (e) appeal to higher loyalties (Maruna & Mann, 2006; Sykes & Matza, 1957). Such types of neutralization imply that the "actor" chooses a course of tangential action that contradicts cognitive schemas (Maruna & Mann, 2006).

Neutralization theory has been used as a theoretical underpinning for research about cognitive distortions related to child sex offending (Mann, Webster, Wakeling, & Marshall, 2007); however, the theory augmented the foundation for this research assessing the variables associated with NOC protection. Thus, neutralization theory can be interpreted to mean that NOCs may use various rationalizations for justifying their response to CSA that contravenes societal norms about protecting CSA victims. Chiefly, some NOCs may neutralize their failure to protect responses using one or more of the types of justifications listed above.

#### Nature of the Study

The methodology I used in this study was a nonexperimental quantitative research design. Quantitative research designs are appropriate for examining relationships deductively between variables (Creswell, 2014). The epistemological paradigm is associated with a postpositivist worldview that is correlational or predictive (Creswell,

2014). Quantitative methods allow a researcher to assess independent variables that predict a dependent or outcome binary variable (Field, 2013).

A predictive logistical regression design can determine the values and relationships of the independent variables and outcome variable that occur naturally (Field, 2013; Trochim, Donnelly, & Arora, 2016). Therefore, I considered the CSA variables, such as the victim demographics, type of abuse, and perpetrator relationship with the CSA victim, that are naturally occurring phenomena as they are not manipulated by any other controlling factors. Furthermore, the dichotomous outcome variable of caregiver protection was not affected by any other conditions.

For this study, I extracted data from 2015–2017 CSA reports from the Department of Child Family Services (DCFS) in a western state. The data included documentation generated by child protection social caseworkers who record facts related to child demographics (i.e., age, sex, and race/ethnicity); type of sexual abuse (i.e., noncontact or contact); and the relationship of the perpetrator to the CSA victim (i.e., familial or extrafamilial). Agency reports may be supported or unsupported for the abuse allegation; however, DCFS reports may indicate that a NOC "failed to protect" their child due to the NOC's unsupportive reactions and behaviors post-CSA disclosure. Therefore, "FTP" was recorded, and appropriate action was taken by the child protection agency to ensure the child's safety. If a NOC was protective and provided support postdisclosure, no "FTP" notation was made in the data entry.

The dependent or outcome variable was dichotomous, with two categories. I used a quantitative binary logistic regression analysis of the extracted archival data to explore membership in the target group or outcome variable (see Warner, 2013) of NOC protection or NOC FTP. The predictor or independent variables were: (a) child demographics (i.e., age, sex, and race/ethnicity); (b) type of offense (i.e., contact or noncontact); and (c) relationship of the perpetrator to the child (i.e., familial or extrafamilial).

#### Definitions

Problematic to assessing and addressing CSA is the ambiguity among CSA definitions (Collin-Vézina et al., 2013; Haugaard, 2000; London et al., 2008; Mannon & Leitschuh, 2002; Murray et al., 2014; Pellai & Caranzano, 2015; Veenema et al., 2015; Zeuthen & Hagelskjær, 2013). Furthermore, parental protection and support characterizations can be inconsistent and uncertain (Alaggia, 2002; Wamser-Nanney & Sager, 2018). In this section, I define CSA and variables associated with CSA based on the literature and organizations that research child abuse and maltreatment.

*Child sex abuse (CSA)*: CSA encompasses a wide range of sexual proclivities in addition to actual touching or intercourse. CSA includes contact and noncontact offenses with a person under the age of 18 (Martin & Silverstone, 2013; Olafson, 2011). Olafson (2011) defined CSA as "any use of a child for sexual gratification by another person" (p. 8). Finkelhor (2009) specified that CSA acts "include the entire spectrum of sexual crimes and offenses in which children up to age seventeen are victims" (p. 170).

The World Health Organization (WHO; 2006) defined CSA as:

The involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by adults or other children who are – by their age or stage of development – in a position of responsibility, trust or power over the victim. (p. 10)

The U. S. Health and Human Services' (USHHS 2017) Child Prevention and Treatment Act (CAPTA) 2016, §42 U.S.C. 5101a (4) defined CSA to include acts of exploitation:

A. the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or

B. the rape, and in cases of caretaker or interfamilial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children... (p. 37).

In the western state under study, CSA is defined by the Department of Child and

Family Services (Utah Department of Child and Family Services [UDCFS], 2018) as: An act or attempted act of sexual intercourse, sodomy, incest, or molestation directed toward a child. Subjecting a child to participate in or threatening to subject a child to participate in a sexual relationship, regardless of whether that sexual relationship is part of a legal or cultural marriage, or forcing a child under 18 years of age into marriage or cohabitation with an adult in an intimate relationship. Engaging in any conduct with a child that would constitute an offense under any of the following definitions (taken directly from Utah Code), regardless of whether the person who engages in the conduct is actually charged with, or convicted of, the offense. (p. 5)

These broad definitions capture the essence of CSA; however, they do not delineate the specifics of contact and noncontact offenses. Contact and noncontact offenses are further defined in this section. Moreover, state statutes articulate specific acts prohibited by criminal sanctions that include definitive actions, punishable by law. The prohibited criminal acts fall under the umbrella of the definitions of CSA.

*Child demographics*: CSA victim demographics encompass the child's age (at the time of disclosure or the offense), sex (i.e., male or female), and the child's race/ethnicity. Familial or guardian socioeconomic factors were not considered in the demographic variable.

*Contact child sexual abuse*: Contact child sexual offenses are those acts that include kissing; a perpetrator touching of the genitals, breasts, or anus of the victim; or the victim touching the genitals, breasts, or anus of the perpetrator (Martin & Silverstone, 2013). Additionally, contact offenses include attempted intercourse, intercourse, or penetration with a foreign object, including a finger or other body part (Barth, Bermetz, Heim, Trelle, & Tonia, 2013; Olafson, 2011; Putnam, 2003). Researchers have opined that children are more negatively impacted by contact offenses (Martin & Silverstone, 2013) because contact offenses that are more intrusive are deemed more severe forms of CSA (Browne & Finkelhor, 1986; Fergusson et al., 2013; Walker-Descartes, Sealy, Laraque, & Rojas, 2011; Yancey & Hansen, 2010; Yancey, Naufel, & Hansen, 2013) and may cause poor behavioral adjustments later in life (Evans, Steel, & DiLillo, 2013; Lalor & McElvaney, 2010).

*Disclosure*: The telling of abuse experiences by the victim to another person (Alaggia et al., 2017; Lovett, 2004; Ullman, 2003). According to Alaggia et al. (2017), the term "telling" is most closely associated with what study participants understand as disclosing or reporting incidents of CSA. Notably, disclosures may occur in a sequence of events and may occur based on a child's perception of the consequences of reporting (Malloy, Brubacher, & Lamb, 2011; McElvaney, 2015). Thus, disclosing or telling about abuse can be a complex, iterative, interactive, multifaceted, and ongoing dialogical process in which there are interpersonal and intrapersonal factors affecting disclosures (Alaggia, 2010; Alaggia et al., 2017; Jensen, Gulbrandsen, Mossige, Reichelt, & Tjersland, 2005; Lemaigre et al., 2017; Lovett, 2004; McElvaney, 2015; McElvaney et al., 2014; Reitsema & Grietens, 2016) and the emotionality of the disclosure (Katz, Paddon, & Barnetz, 2016).

*Noncontact child sexual abuse*: Noncontact CSA includes indecent exposure, exposure to pornography, exploitation of a child, or photographing a child(ren) or a perpetrator(s) in a sexualized manner (Bunting, 2014; Collin-Vézina et al., 2013; Fergusson, McLeod, & Horwood, 2013; Martin & Silverstone, 2013; Olafson, 2011; Putnam, 2003). Noncontact offenses do not involve touching of a child or a child touching the perpetrator; however, do constitute CSA. These types of offenses can desensitize a child to sexual behaviors, creating a situation in which a child feels less uncomfortable or unphased by the sexual abuse or contact (Elliott, Browne, & Kilcoyne, 1995; Knoll, 2010; Leclerc, Wortley, & Smallbone, 2011; McAlinden, 2006).

Furthermore, some children may be the victim of undetected noncontact abuse, such as surreptitious filming of a child(ren) for sexual gratification (Bunting, 2014).

*Nonoffending caregiver (NOC)*: An adult that is the biological or nonbiological caretaker, guardian, or custodian of a child (Leeb, Paulozzi, Melanson, Simon, & Arias, 2008; UDCFS, 2018) who has not perpetrated on the child. Much of the research examining NOCs or guardians refer to the mother of the CSA victim; however, in certain instances, the guardian or NOC may be a father, another biological relative, or adult responsible for the child's basic needs and overall welfare (Leeb et al., 2008).

*Nonoffending caregiver (NOC) protection*: Defining and conceptualizing NOC protection and support has been met with variance and inconsistencies (Alaggia, 2002; Bolen et al., 2015; Bolen & Gergely, 2015; Coohey, 2006; Shadoin & Carnes, 2006; Smith et al., 2017). Caregiver support has been operationalized to include levels that represent denial or acceptance of the disclosure, disbelief or belief of the disclosure, blame or vindication towards the child, whether the child was protected from the perpetrator, and a NOC's resource seeking behaviors (Alonzo-Proulx & Cyr, 2016; Coohey & O'Leary, 2008; Hornor & Fischer, 2016; Hunter, 2015; Schönbucher et al., 2014; Walsh, Cross, & Jones, 2012).

The USHHS (2017) CAPTA 2016, §42 U.S.C. 5101.3(2), defined NOC lack of protection as:

...at a minimum, any recent act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation or an act or failure to act which represents imminent risk of harm. (p. 6)

In this western state, protection or FTP is defined as:

Failure to take reasonable action to remedy or prevent child abuse or neglect. Failure to protect includes the conduct of a non-abusive parent or guardian who knows the identity of the abuser or person neglecting the child but lies, conceals, or fails to report the abuse or neglect or the alleged perpetrator's identity. (UDCFS, 2018, p. 12)

In this study, I defined NOC protection as the responsibility of the NOC to take necessary action to protect their child from sexual abuse, including separation from an alleged perpetrator.

*Perpetrator relationship*: The relationship of the perpetrator to the CSA victim refers to a perpetrator's familial or extrafamilial association with the child (Yancey & Hansen, 2010). Researchers have identified intrafamilial relationships as parental, a stepparent, a parent's intimate partner or cohabitant, siblings, step-relatives, aunts, uncles, grandparents, cousins, and other relationships deemed familial (Fischer & McDonald, 1998; Smith et al., 2000). Extrafamilial relationships are relationships that may be an acquaintance to the family or child, such as a neighbor, coach, teacher, religious or spiritual leader, older child, babysitter, a friend's parent, counselor, or person in a position of trust (Fischer & McDonald, 1998; Smith et al., 2000).

#### Assumptions

There are inherent assumptions related to CSA and NOC protection. Based on the data, several researchers have found that a significant portion NOCs are supportive of their child's disclosure and protect their child from contact with the perpetrator (Bick et al., 2014; Bolen & Gergely, 2015; Elliott & Carnes, 2001). However, problematic to these findings is the percentage of NOCs that provide ambivalent (Jensen et al., 2005), low, or nonexistent support and leave the child unprotected from the perpetrator or further CSA (Reitsema & Grietens, 2016). Nevertheless, I assumed that most NOCs provide necessary protection for their child.

Other assumptions included the deleterious effects of CSA on its victims. Research has shown that there can be negative sequelae following CSA victimization. Some children may be more resilient than others if protection processes are in place (Murray et al., 2014). Resiliency after CSA may be the result of NOC's physical, emotional, and psychological protection (Afifi & MacMillan, 2011; Elliott & Carnes, 2012; Knott, 2012; Marriott et al., 2014; Murray et al., 2014; Rosenthal et al., 2003). Therefore, not all children will suffer trauma from the CSA. Clancy (2009) argued that CSA is not always traumatic during the abuse because children may not recognize what is happening as "abusive." Other researchers made analogous inferences (see Kenny & Wurtele, 2010; Vaillancourt-Morel et al., 2016; Veenema et al., 2015). Regardless of the child's perception, CSA is a violation of the child's emotional, physical, and psychological wellbeing, oftentimes into adulthood (Herrenkohl, Klika, Herrenkohl, Russo, & Dee, 2012; Nemeroff, 2016; O'Leary et al., 2010; Palo & Gilbert, 2015; PérezFuentes et al., 2013). Therefore, I presumed that psychological and emotional distress might develop because CSA victims experience and recognize the betrayal, manipulation, and consequences of CSA violations (Elliott & Carnes, 2001; Evans et al., 2013; Finkelhor & Browne, 1985; Foster & Hagedorn, 2014b; Tavkar & Hansen, 2011).

Families and communities fear stranger attacks on their children (Letourneau et al., 2014) and teach their children how to avoid stranger violations (Babatsikos, 2010). While knowledge of stranger-danger is imperative, it may be a misguided assumption that leads children to fear unknown stranger attacks primarily. Thus, I assumed that CSA occurs at the hands of a known perpetrator in most situations (see Craven et al., 2006; Fischer & McDonald, 1998; Glaser, 1998; Jewkes & Wykes, 2012; McAlinden, 2006; McGuire & London, 2017; McLean et al., 2014; Melville et al., 2014; NCVC, 2012; Olafson, 2011; Paine & Hansen, 2002; Reitsema & Grietens, 2016; Smith et al., 2000).

#### **Scope and Delimitations**

The scope of the research problem examined in this study was the possible predictive factors that may influence or impact a NOC's protective response to their child's sexual abuse disclosure. While some researchers submitted that most NOCs (such as mothers) are primarily supportive and protective (Bick et al., 2014; Bolen, 2002b; Bolen & Gergely, 2015; Cyr et al., 2003; Elliott & Carnes, 2001; Knott, 2012), the ramifications of unprotective responses can have nocent effects on CSA victims (Melville et al., 2014). Therefore, the stakeholders in the child protection processes can be informed about factors that may contribute to a protective or unprotective action by a NOC. The reported data I evaluated in this study included input by caseworkers in a government child protective services agency that is challenged with making child protection assessments. These caseworkers must remain objective in their decision-making regarding the welfare of the child. Therefore, child protection teams assess the reactions and responses of NOCs when making determinations about the child's safety. The data were collected, collated, and coded based on the information entered into the case management system that inputs demographics, type of abuse, relationship of the offender to the victim, and a determination of protection.

The data analyzed were from a governmental agency in a western state, the DCFS, and represented all mandated CSA reports from 2015–2017 that were substantiated. Data included the demographics of age, sex, and race/ethnicity of the victim; contact or noncontact sexual abuse; and the relationship of the perpetrator to the CSA victim (i.e., familial or extrafamilial). Additionally, data had a determination of protection or FTP in alignment with a NOC's supportive or unsupportive response to their child's sexual abuse disclosure. A determination of FTP indicated that the NOC did not engage in measures to support their child's disclosure or protect them from the perpetrator and potential revictimization. No notation signified that the NOC provided necessary protection and safety for their child. Recorded data were mutually exclusive and commanded membership into only one attribute of the variable (see Trochim et al., 2016).

The data retrieved were unique due to the exploration of variables that may predict a NOC's protection of their CSA victim. Additionally, researchers have reported that most studies are done retrospectively (London et al., 2008) or with professionals that treat children and families affected by CSA (Bick et al., 2014; Collin-Vézina et al., 2015; Søftestad, Toverud, & Jensen, 2012; Wamser-Nanney, 2017; Wamser-Nanney & Sager, 2018). Although such research is important, retrospective studies may be subject to recall fallacies, embellishments, or lack of detail (Hardt & Rutter, 2004; Langeland et al., 2015; London et al., 2008; Pereda et al., 2009b). Population samples in therapeutic settings may be more proactive and supportive in healing with their child, excluding NOCs refusing to acknowledge the need for treatment. Furthermore, NOCs may respond to maternal self-report questionnaires based on perceptions of social desirability (Rakow et al., 2011; Smith et al., 2010; Zajac et al., 2015).

#### Limitations

There were several limitations to this study. NOC protection is not always binary (Bolen et al., 2015; Bolen & Lamb, 2007a; Coohey, 2006; Malloy & Lyon, 2006). For example, a NOC may be protective of their child after their child's CSA disclosure and provide ample protection from further abuse by the perpetrator; however, they may fail to believe or support their child emotionally. The antithetical may also present in which the NOC believes their child yet does not provide protection (Alonzo-Proulx & Cyr, 2016). Therefore, a qualitative study that explores the underlying reasons for belief, disbelief, blame, shame, support, nonsupport, protection, nonprotection, or ambivalence towards their child's sexual abuse reports could provide rich information about possible causal relationships between a child's sexual abuse disclosure and a NOC's normative reactions or responses.

Another limitation was the use of archived data from a government agency charged with the protection of children. Notably, such recorded information may be the result of bias by the caseworker (Coohey, 2006; Shadoin & Carnes, 2006). For example, if a child protection caseworker had previous involvement with a family, they may have an indiscreet prejudice towards their decision to identify a NOC as protective or failing to protect their child after a child has revealed sexual abuse victimization.

A potential weakness of the study could have been that a NOC may be intimidated by government involvement and wanted to comply initially with protection plans made by the government child welfare agency. Therefore, a NOC may protect the child after a CSA disclosure due to the requirements of the child protection bureau and legal statutes; however, they may later fail to protect their child by allowing an offender access to the child due to the NOC's relationship with the offender. This may occur when the NOC is in an amorous relationship with the perpetrator and has difficulty severing the relationship for a myriad of reasons (Alaggia, 2002). A number of NOCs in the protective category may ultimately fail to protect their child, and it remains undiscovered by the child welfare government agency.

Data retrieved did not reflect all CSA victims because many victims and families do not report CSA even if they are cognizant or suspect it is occurring. The data reflected those cases reported by mandated reporters or citizens aware of potential CSA. Undisclosed reports of CSA were not included; therefore, some demographic populations may have been excluded. Due to the nature of archival data, population samples were fixed. These limitations may affect the generalizability or external validity of the results because not all CSA victims are represented. Additionally, the data analyzed did not reflect cofounding variables, such as socioeconomic status, that might impact internal validity.

Lastly, disclosing a potential for researcher bias is necessary. I currently conduct CSA investigations in the western state where the data originated; however, I was not involved in the data collection by the child welfare and family services governmental agency. Furthermore, the cases remained anonymous and confidential; therefore, I could not recognize any cases, victims, or perpetrators. The archival data analyzed were obtained through ethical, professional, and proper procedures available to other researchers.

# Significance

A recent case that came to my professional attention involved the prosecution of an alleged perpetrator for penetrative CSA. After the child's detailed disclosure of prolific and pervasive sexual abuse by the suspect, the NOC told her child she had to go to the law enforcement agency and tell officials she had been lying and wanted to apologize. The NOC did not want the perpetrator investigated because of her romantic relationship with the offender. Unbeknownst to the NOC, the suspect made a full and comprehensive confession that he sexually abused the child before the NOC arrived at the law enforcement department. The child was taken from the NOC and placed in foster care or other alternative living arrangements due to the NOC's FTP the child. This case exemplified further traumatization and victimization to a child if a NOC does not provide expected and mandated protection from a perpetrator as well as a supportive response. Therefore, understanding the variables associated with NOC support and protection are crucial for prevention, intervention, and social change.

In this study, I focused on the relationships and interactions between the independent variables related to CSA disclosure information and a NOC's protective or nonprotective response to the CSA report. Although researchers have studied a child's functioning after a CSA disclosure and a NOC's perceived level of maternal support, results of those studies have provided mixed results (see Bolen & Gergely, 2015; McLean et al., 2014; Wamser-Nanney, 2017, 2018). Many of the studies related to maternal or NOC support measured the presence or levels of support, without assessing the factors that may predict whether a NOC was protective or unprotective (Zajac et al., 2015). Therefore, the results of this study addressed a gap in the literature and provided insight by examining the variables associated with a NOC's actions after their child's CSA disclosure.

The contributions of the study connoted social change by informing academics, law enforcement, child protection teams, and professionals associated with child welfare and healing about specific variables related to CSA that may predict a NOC's protective or unprotective response in future cases of child sexual victimization. With this knowledge, specialists in the field of CSA investigations and treatment can proactively ensure a child's safety needs are being met. The burden of child protection rests with trusted adults and professionals in the child welfare discipline.

#### **Summary and Transition**

In Chapter 1, I introduced the study and the foundation for research transparency. CSA is a public health concern that affects all cultures, geographic areas, and socioeconomic demographics. Child protection is of paramount importance to foster a victim child's resiliency and healing; therefore, the variables that may predict protective responses from NOCs have been explained and aligned with theoretical constructs and nature of the study. The definitions excluded common terms that did not require explicit characterizations but included descriptions that can be deemed ambiguous if not defined clearly. The framework for the pellucidity of the research was articulated in the assumptions, scope and delimitations, and limitations sections. In the significance of the study section, I emphasized the relevance to the field and implications for positive social change.

In Chapter 2, I will examine the existing literature related to CSA, its effects, and NOC responses. Notably, some of the work is seminal; however, because CSA was recognized as a public health problem, researchers have conducted relevant, timely, and vital research related to CSA. Therefore, in Chapter 2, I include synthesis and analysis of peer-reviewed journal articles, books, and statistical information. Additionally, discrepancies, conflicting findings and supportive conclusions, themes, and gaps in the literature will be discussed.

#### Chapter 2: Literature Review

# Introduction

CSA is a global issue that affects children, families, and communities from a myriad of socioeconomic and cultural backgrounds (Barth et al., 2013; Dubowitz, 2017; Murray et al., 2014; Mustaine, Tewksbury, Huff-Corzine, Corzine, & Marshall, 2014; Pellai & Caranzano, 2015; Olafson, 2011; Pereda et al., 2009a; Singh, Parsekar, & Nair, 2014; Stoltenborgh et al., 2015; Stoltenborgh, van Ijzendoorn, Euser, & Bakermans-Kraneburg, 2011). The economic burden of CSA and maltreatment is considerable (Fang et al., 2012; WHO, 2006), with some researchers estimating that child abuse related costs to welfare services and agencies in the United States are millions of dollars each year (Herrenkohl et al., 2016; WHO, 2006). The fiscal implications are adverse, and the emotional and psychological effects on victims, families, and communities are pernicious.

CSA did not garner significant social service or law enforcement attention until the 1970s (Myers, 2008; Olafson et al., 1993). As awareness of CSA mounted, it was determined that sexually abused children are most often abused by someone they know or are familiar with (Craven et al., 2006; Elliott & Carnes, 2001; Glaser, 1998; Jewkes & Wykes, 2012; Lalor & McElvlaney, 2010; McAlinden, 2006, 2014; NCVC, 2012; Ullman, 2007). The prevalence of CSA mandates public health and social change responses to ensure that children are safe and protected from sexual abuse (Herrenkohl et al., 2016; Kenny & Wurtele, 2012; Lalor & McElvaney, 2010; Laws, 2000; Letourneau et al., 2014; Marriage et al., 2017; Mercy, 1999; Mian & Collin-Vézina, 2017; Veenema et al., 2015; Weatherred, 2017). The onus of child protection cannot rest with children alone (Pellai & Caranzano, 2015). Therefore, CSA demands that trusted adults, families, communities, and professional organizations recognize the signs, symptoms, barriers to disclosure, and lack of protection that possibly befalls CSA victims.

The importance of understanding the variables associated with NOC responses cannot be underscored. This area is underresearched because some studies have been conducted to assess a child's perception of their caregiver's response and their perspective of why a trusted adult responded in such a manner to their disclosure (Hunter, 2015; McElvaney et al., 2014; Schönbucher et al., 2014). A child's perception may be skewed by recall fallacies or a lack of comprehension regarding protection. Furthermore, in studies assessing NOC protection using NOCs self-reports, NOCs may be reluctant to describe or report their responses as less than optimal or supportive (Rakow et al., 2011; Smith et al., 2010; Zajac et al., 2015).

Support and protection of children victimized by CSA are of paramount importance for a child's willingness to disclose sexual abuse (Hunter, 2015; McElvaney et al., 2014; Schönbucher et al., 2014). Identifying and assessing variables that may predict protection by a NOC can inform researchers, academics, and agents for social change about the factors associated with CSA. Studies that examine a caregiver's protective response have implications for prevention and intervention because victims of CSA may be at risk for further victimization (Hornor & Fischer, 2016; Leclerc, Smallbone, & Wortley., 2015; McElvaney et al., 2014; Palo & Gilbert, 2015). In this chapter, I examine literature search strategies for locating relevant, timely, and seminal studies. Theoretical foundations and key variable identification are explained based on previous research and literature reviews. The prevalence and effects of CSA from past studies are investigated.

#### **Literature Search Strategy**

After 30 years in law enforcement, I developed an interest in understanding the dynamics of CSA in familial or caretaker contexts. As a child abuse investigator, I have witnessed the impact of a NOC's lack of protection or absence of support after their child's sexual abuse disclosure. Therefore, I became motivated to explore the reasons children do not disclose CSA and the reactions to their disclosures when they do tell.

My literature search strategies for this study included searching multiple databases and books related to CSA, parental response to CSA disclosures, and theories that could provide the foundation for a framework. Search publication dates were seminal as well as within the last 5 years. The databases I searched included PsycINFO, EBSCO, ScienceDirect, ProQuest, Google Scholar, Thoreau, book title searches, and statistical information clearinghouses. Specific journals searched included *Child Abuse and Neglect, Child Maltreatment*, and *Journal of Child Sexual Abuse*. I used the search term of *child sex\* abuse*, which yielded more than 92,000 articles in Google Scholar and more than 100,000 in Thoreau. Terms were refined and narrowed to include Boolean phrases such as *CSA effects; parent\* or caregiver response to CSA disclosures; reactions to child sex\* abuse or CSA; disbelief, belief, support, and nonsupport of child sex\* abuse or CSA; maternal response or reaction to child sex\* abuse or CSA; ambivalence and*  support of child sex\* abuse or CSA disclosures; telling about child sex\* abuse or CSA; prevalence of child sex\* abuse or CSA; effects of child sex\* abuse or CSA; history of child sex\* abuse or CSA; and theories of child sex\* abuse or CSA.

From these initial terms, I was able to locate literature and subsequent cited research related to CSA disclosures, caregiver responses, the impact of reactions to CSA, and the effects of CSA. In addition, I sought the counsel of authors of research studies, including McElvaney (personal e-mail communication, April 2017) and Bolen (personal communication, February 14, 2018). I also reviewed theoretical concepts such as cognitive dissonance theory (Festinger, 1957), neutralization theory (Sykes & Matza, 1957), attachment theory (Bowlby, 1988), and betrayal trauma theory (Freyd, 1994).

In the following sections of this chapter, I discuss the literature analysis, gaps in the research, and relevance of theory in understanding caregiver responses to CSA disclosures. I included sections on the prevalence of CSA to underscore the pervasiveness of CSA worldwide. The possible detrimental effects of CSA are examined based on previous empirical studies.

#### **Theoretical Foundation**

Many people have a visceral reaction and vehement opinion about CSA. Common and frequent responses to CSA include disgust, horror, fear, empathy for the victims, and hatred of the perpetrators. Some parents of children may say they would "kill" or "hurt" someone who sexually violated their child. Others deny that such abuse occurred or may blame their child for the sexual abuse. Research has shown that CSA has detrimental emotional and psychological effects on children that can cause personal and behavioral difficulties for its victims (Amado, Arce, & Herraiz, 2015; Barrera, Calderon, & Bell, 2013; Dorahy & Clearwater, 2012; Elliott & Carnes, 2001; Fergusson et al., 2013; Finkelhor, Omrod, Turner, & Hamby, 2005; Stoltenborgh et al., 2011). It is unclear what compels some NOCs to FTP their child after their child's sexual abuse disclosure.

# **Theory of Cognitive Dissonance**

Cognitive dissonance occurs when a person's attitudes and beliefs are inconsistent with their behaviors (Festinger, 1957). Freud termed this cognitive response *rationalization* but failed to address the cognitive implications of the dynamic (Morvan & O'Connor, 2017). Cognitive dissonance theory has been applied to numerous psychological and social studies (Festinger, 1957; Gawronski, 2012). Gawronski (2012) argued that cognitive dissonance is ubiquitous and can be applied to numerous psychological phenomena and attitudes. An example of cognitive dissonance may be when a person believes and values good health; however, they behave in a way that is inconsistent or incongruent (i.e., dissonant) with their attitudes about good health. The person will seek to minimize the dissonance by attempting to create consonance (Festinger, 1957; Morvan & O'Connor, 2017). Therefore, an individual may change their attitudes regarding what is considered good health, or they may change their behavior to encompass more healthy behaviors.

Importantly, cognitive dissonance refers to elements of a decisional making process (Stone & Cooper, 2001). To operationalize the definition of cognitive dissonance, cognitive elements are the feelings, opinions, values, beliefs, and thoughts about a subject or oneself (see Festinger, 1957). The behavior is the reaction to the subject or the manner a person responds to the cognitions (see Festinger, 1957). A response can be consonant or congruent with a person's feelings or opinions (Festinger, 1957). Dissonance occurs when an individual's behavior causes a discomfort as the reaction is inconsistent with their thoughts, opinions, attitudes, and self-standards (Stone & Cooper, 2001). Additionally, the two elements of cognition and behavior can be irrelevant when the alternatives between the cognition and behavior are deemed unimportant (Festinger, 1957). Therefore, a person may not feel any equivocation or tension about their thoughts and reactions.

People experience dissonance, consonance, or irrelevance regarding decisions (Festinger, 1957). Typically, when responding to a situation, a person is faced with two or more alternatives (Festinger, 1957). A simplistic example would be a jury's decision-making about someone's guilt during deliberation in a rape case. A juror may feel passionate about the violation of power and violence towards the sexual assault victim; however, they must decide guilt based on the facts of the case, which can be dissonant with their feelings, opinions, and attitudes towards rape. They will seek to minimize the dissonance in a myriad of ways.

Reduction of dissonance occurs when a person changes their cognitions and attitudes or their behavior (Festinger, 1957). A parent or caregiver may believe that CSA causes psychological, emotional, and possible physical harm to the child victim. Additionally, they may have the belief that their child would not lie about such matters. A NOC may feel that they could kill or hurt someone who violated their child. Furthermore, a NOC may acknowledge that they would protect their child through the disclosure investigatory processes and subsequent healing. However, their reaction or response to their child's CSA disclosure may be disbelief, denial, or blame of their child. This response is dissonant with their beliefs about CSA (Bennett & O'Donohue, 2014; Craven et al., 2006; McLaren, 2013; van Dam, 2001). Therefore, a parent may react by not offering the necessary protection from further victimization.

Mitigation of the dissonance or inconsistency of their response could include changing their attitudes about CSA or changing their behavior to demonstrate belief and protection of their child's disclosure. Notably, dissonance can be relieved by changing their opinions and attitudes about their child. For example, a NOC may believe their child is honest; yet, they are challenged with conflicting feelings towards the perpetrator. Therefore, a NOC may reduce the dissonance or tension by finding justification for their child's disclosure, such as the child wanted the perpetrator to get in trouble or the child was seeking attention. The dissonance is reduced, and their response is justified based on the cognitive dissonance reduction strategies (Yaryan & Festinger, 1961). Additional forms of cognitive dissonance reduction are denial of responsibility or trivializing the events (Gosling, Denizeau, & Oberlé, 2006).

When applied as a theoretical framework for a NOC's protective or nonprotective response after their child's CSA disclosure, cognitive dissonance theory is for attempting to understand why a parent or caregiver may respond in a certain manner. Therefore, cognitive dissonance theory is relevant for underpinning the reasons for NOC protective and unprotective responses.

## **Neutralization Theory**

Neutralization theory is similar to cognitive dissonance theory in that some individuals utilize techniques to neutralize or invert behaviors or actions that may be counterintuitive to their values (Sykes & Matza, 1957). Neutralization theory posits there are five types of justifications for behaviors or reactions that are capricious or contrary to beliefs that may be held by an individual: (a) denial of responsibility, (b) denial of injury, (c) denial of the victim, (d) condemnation of the condemners, and (e) appeal to higher loyalties (Sykes & Matza, 1957).

In the context of a NOC's lack of protection after their child's sexual abuse disclosure, denial of responsibility refers to a NOC's eschewal of responsibility in protecting their child after a sexual abuse disclosure. In this situation, a NOC may feel they are not responsible for their protective or unprotective actions due to the nature of the disclosure or other details of the abuse. For example, a NOC may feel they are not responsible for disbelief or blame of their child's disclosure due to forces occurring outside of their actions, such as the child's misbehavior or delinquency.

Denial of injury suggests that a NOC refutes that the child suffered any injury or trauma, negating a protective response. For example, I investigated a case in which the NOC did not support her child after her child's sexual abuse disclosure because she thought the child was not injured. Notably, in many instances, sexual abuse does not cause physical injury to a child (Adams et al., 2017; Shackel, 2008).

Denial of the victim indicates that a NOC may place blame on a victim for their victimization. A NOC may intimate that a child victim put themselves in a precarious

situation that resulted in their abuse. In a case in my jurisdiction, currently in the prosecution phase, a NOC blamed their 12-year-old child for the child's victimization because of the victim's behavior with the perpetrators. The NOC believed the child victim was responsible for their sexual abuse victimization.

Condemnation of the condemners asserts that a NOC may condemn the actions of child protection teams or law enforcement. In cases where the suspect is in a paramour relationship with the NOC, the NOC may castigate and criticize those that arrest, prosecute, and hold the perpetrator accountable. In this example, they deflect their response to their child (which can be deemed as unprotective) by focusing on those who implicate the suspected offender.

Lastly and importantly, appeal to higher loyalties is particularly applicable. A NOC may be bound by religious, societal, or cultural beliefs that influence their protective responses (Alaggia, 2010). For example, Alaggia (2002) and Fontes and Plummer (2010) found that cultural or religious schemas that adhere to strict patriarchal doctrines can affect a NOC's belief, support, and protective actions.

The application of neutralization theory to a NOC's protection of their child may help explain the reasons a NOC may disbelieve, blame, and fail to protect their child after a sexual abuse disclosure. Specifically, the justifications used when neutralizing behavior are applicable to a NOC who fails to protect their child after a CSA report. Recognizing the neutralization dynamics can facilitate insight into NOC FTP.

# **Other Theoretical Frameworks**

Attachment theory. Attachment theory (Bolen, 2002a; Bowlby, 1988; Leifer et al., 2001) has been used as a theoretical framework for conceptualizing adult caregiver responses to CSA disclosures. Attachment theory considers the relative attachment of the parent/child in constructing a theoretical foundation for protective or unprotective responses to CSA reports. Problematic to attachment theory is the difficulty in operationalizing and measuring parental attachments (Bolen, 2002a; Bolen & Lamb, 2007a). Attachment theory may provide a useful framework for a child's decision and reasoning for nondisclosure; however, for this study, assessing the divergent attachment paradigms did not offer the necessary foundation for a NOC's FTP response associated with CSA characteristics.

**Betrayal trauma theory**. Betrayal trauma theory (Freyd, 1994; Freyd, DePrince, & Gleaves, 2007) suggests that victims of CSA may forget or remain "unaware" of their abuse to facilitate maintenance of important relationships. Betrayal trauma theory refers to the isolation that may occur when the person (adult) a child depends on for support, well-being, and caretaking violates the child's trust by disbelief, nonsupport, or FTP after CSA (Freyd et al., 2007). Betrayal trauma theory perhaps addresses part of the issues of nondisclosure due to betrayal; however, fails to provide the requisite framework for factors associated with a NOC's protective or unprotective response to their child's CSA disclosure.

#### **Literature Review - Child Sexual Abuse**

I reviewed literature by researchers and academics about the prevalence and effects of CSA, which helps provide an understanding of the epistemology of NOC support. Variables associated with CSA as it relates to the victim are examined. Texts, literature, and research articles were reviewed within the last 5 years as well as more seminal work that has been cited in more current studies. Although NOC support and protection after child maltreatment has received substantial attention, gaps in the identified research suggest that further studies are warranted to comprehend the unique dynamics of NOC protection after a child's CSA disclosure.

# **Child Sexual Abuse Prevalence**

The last few decades have been replete with studies that assess the prevalence of CSA worldwide. One in 12 to as many as 1 in 8 children globally will be sexually victimized before the age of 18 (Amado et al., 2015; Barth et al., 2013; Finkelhor et al., 2005; Pereda et al., 2009a, 2009b; Pérez-Fuentes et al., 2013). These rates may be considerably more as many children do not report CSA (Martin & Silverstone, 2013; Swingle et al., 2016). Additionally, some children may not be aware of CSA dynamics. For example, one child I interviewed said she did not tell about the sexual abuse she suffered at the hands of her father because she thought all dads did "that" to their daughters.

Child maltreatment rates in this western state have remained consistent during 2015–2017, with an average of 9,868 cases annually reported to child protective services (UDCFS 2018). The statistic in this state for CSA was roughly 26% (2,566) of all child

maltreatment reports (UDCFS, 2018). The USDHHS (2016) most recent annual report revealed that the rate of CSA reports for this state was roughly 17.4% of all child maltreatment reports. CSA is prevalent throughout the world, nation, and this western state.

# Effects

There has been a breadth of research regarding the effects of CSA on its victims. Authors have opined that CSA effects manifest after CSA has occurred, and the child recognizes the implications of CSA (Clancy, 2009). Other researchers and scholars have surmised that CSA has ongoing detrimental effects, beginning in childhood and continuing into adulthood (see Finkelhor & Browne, 1985; Pérez-Fuentes et al., 2013). Thus, a postvictimization psychological sequelae or trajectory for CSA victims may present.

A NOC's response to their child's CSA disclosure has been associated with a child's postvictimization internalizing (depression, low self-esteem, anger, PTSD, anxiety, suicidal ideation) behaviors (Aydin, Akbas, Turla, & Dundar, 2016; Feiring, Coates, & Taska, 2001; Fontes, Cruz, & Tabachnick, 2001; Kendall-Tackett, Williams, & Finkelhor, 1993; McLean et al., 2014; Mills et al., 2016; Putnam, 2003; Smith et al., 2017; Yancey & Hansen, 2010). CSA postvictimization externalizing conduct may include disruptive, antisocial, and sexualized behaviors (Bellis et al., 2017; Butler, 2013; Cook et al., 2005; Everson et al., 1989; Fontes et al., 2001; Hornor, 2010; Kendall-Tackett et al., 1993; Lewis, McElroy, Harlaar, & Runyan, 2016; Melville et al., 2014; Putnam, 2003; Rakow et al., 2011; Wamser-Nanney, 2018; Yancey & Hansen, 2010;

Zajac et al., 2015). Further, CSA can affect a child's overall psychological adjustment (Butler, 2013; Cook et al., 2005; Zajac et al., 2015); and the potential for revictimization (Das & Otis, 2016; Hornor & Fischer, 2016; Reese-Weber & Smith, 2011; Widom, Czaja, & Dutton, 2008).

Conversely, Bolen and Gergely (2015) conducted a meta-analysis on the postdisclosure functioning of CSA victims related to NOC support. The authors found that there was not necessarily a strong relationship between NOC support and a child's functioning. Wamser-Nanney (2017, 2018) and McLean et al. (2014) found similar results in their quantitative studies.

Discrepant results are problematic due to the inconsistencies of the findings. As noted, some authors reported that NOC response was related to a child's functioning, while others did not (see McLean et al., 2014; Wamser-Nanney, 2017, 2018). Such conclusions necessitate further examination of the variables associated with NOC protection.

### **Literature Review - Key Independent Variables**

The following sections report literature associated with the key independent variables proposed in this study. The variables included are child demographics (i.e., age, sex, and race/ethnicity); type of sexual abuse (i.e., contact or noncontact); and perpetrator relationship to the CSA victim (i.e., familial or extrafamilial). NOC protection related to the literature will be examined later in the chapter.

## **Child Demographics**

Age. Age has been categorized to include membership into two dichotomous age ranges of 0–10 years old and 11–17 years old. The age of a child has been associated with CSA disclosures, which can impact NOC protection if CSA is not reported (McElvaney, 2015). Leach, Powell, Sharman, and Anglim (2017) conducted a quantitative study to examine the linear, quadratic, and interaction effects of age on CSA disclosures with 527 children, aged 3–16 years. Leach et al. found that age had linear and quadratic effects as disclosure increased until about 11 years old, then decreased to 16 years old. There were moderating effects of the child's relationship with the perpetrator and type of abuse severity on disclosure rates (notably, variables described in this study). Leach et al. suggested that a limitation was the lack of inclusion of cases that were not reported. This limitation was cited in this study as well.

In more dated research, Goodman-Brown et al. (2003) concluded that older children may fear consequences of their disclosure and feel responsible for the abuse. Thus, those children chose not to report leaving them vulnerable to continued abuse and possibly no protection. Jackson et al. (2015) supported these findings based on their quantitative study of 2,986 cases of CSA with victims between 5 and 18 years of age.

Conversely, McElvaney (2015) conducted a qualitative study and posited that older children were more prone to disclose. In a comprehensive research review of 33 studies, Alaggia et al. (2017) suggested that an increased number of disclosures are made by older children. Further, Alaggia et al. theorized that age was a factor in a child's ability and willingness to disclose. Notably, the studies by McElvaney and Alaggia et al. may provide less generalizable conclusions due to the qualitative nature of their work.

Martin and Silverstone (2013) reviewed relevant literature from 1990 to 2012 to determine the rates and other variables associated with CSA. Their findings confirmed that most CSA occurs when girls are between 13–17 years old. McGuire and London (2017) suggested that most targeted children for CSA were between the ages of 9 to 13 years old.

The seminal literature revealed that younger children were more apt to be believed and supported than older children (Elliott & Carnes, 2001). In their frequently cited analysis, Elliott and Carnes (2001) found that there was a correlation between younger age CSA victims and positive support. In a quantitative study with 435 mothers, Pintello and Zuravin (2001) opined that as a CSA victim became older, a NOCs support and protection waned. Pintello and Zuravin recommended further research to assess variables associated with NOC protection and support using a standardized definition of NOC protection.

Schönbucher et al. (2014) examined the lived experiences of 26 CSA victims. In their qualitative study, the researchers found that age was negatively associated with levels of satisfactory NOC support. Thus, the younger a child, the more NOC support the child received. Although this finding is consistent with other research, the results have been contradicted elsewhere.

Knott (2012) conducted a quantitative secondary analysis of 373 CSA incidents. After a regression procedure, Knott concluded that as children aged, the odds became greater for a negative NOC response, with the 12–15-year-old range receiving less support. Walsh et al. (2012) had consistent results with NOC blame associated with increased age of the victim. Cyr, McDuff, and Hérbert (2013) did not find a relationship between age and maternal support.

Wamser-Nanney and Sager (2018) researched variables associated with maternal support. Utilizing the Maternal Self-Report Support Questionnaire (MSSQ; Smith et al., 2010), the authors sampled 247 children and their NOC from a child advocacy center serving CSA victims. Wamser-Nanney and Sager's multivariate predictors of support indicated that older children were more apt to have higher levels of support by a NOC. The researchers suggested older children may be deemed more credible. A significant limitation of this research was the use of clinical seeking families as they may be more prone to offer support due to treatment.

Statistical knowledge retrieved from this state's child protective services website indicated that child maltreatment rates were greatest for children between 0–10 years of age (65%) than children 11–17 years of age (Utah Department of Human Services [UDHS], 2017). National reports from 2016 for this western state purported that younger children were more often victims of maltreatment (USDHHS, 2016). Problematic to these annual data are the lack of breakdown of the type of maltreatment by age. Regardless, the statistical data supports the categorization of the age variable of 0–10 years of age and 11–17 years of age. Additionally, the conflicting results of the studies reviewed bolstered the justification for further studies examining age as a variable predicting NOC protection. Sex. Sex of the CSA victim refers to the identified gender of male and female. Stoltenborgh et al. (2011) and Barth et al. (2013) conducted meta-analyses and found that the prevalence of CSA for girls was greater than that of boys. Barth et al. suggested that the prevalence of CSA for girls ranged from 8%–31% and 3–17% for boys worldwide. Martin and Silverstone (2013) found similar results in their broad review of the literature. Collin-Vézina et al. (2013) suggested that the magnitude of CSA was 1 in 5 girls and 1 in 10 boys. Finkelhor et al. (2014) conducted a survey that measured the lifetime prevalence of CSA for adolescents. Finkelhor et al. found that approximately 1 in 4 girls and 1 in 20 boys were victims of sexual abuse or sexual assault in childhood. Pereda et al. (2009a, 2009b) found that the international epidemiology has remained consistent with earlier research in the 1990s, with the prevalence of sexual abuse for girls greater than that for boys.

Early work by Everson et al. (1989) did not find a relationship between gender and maternal support in their quantitative study. However, Cyr et al. (2003) sampled 120 adolescents and their mothers to determine association with CSA characteristics and maternal support. Multiple regression analyses were performed, and their findings suggested that boys are more often provided with supportive responses to their CSA disclosures than girls. Elliott and Carnes (2001) had the same conclusions based on their review. Cyr et al. commented that gaps in the research include the effects of gender and age on subsequent NOC support and protection.

More recent research has found such associations between gender and maternal support (Wamser-Nanney & Sager, 2018). Specifically, Wamser-Nanney and Sager

(2018) conducted a quantitative study with 247 children and their nonoffending caregivers. Their research examined gender (sex) and levels of maternal emotional support and blame/doubt using the MSSQ (Smith et al., 2010). Wamser-Nanney and Sager concluded there was a slight increase in NOC support for girls than boys.

Obvious limitations of these studies were CSA cases that remain undetected and unreported. Additionally, boys may be more reluctant to report incidents of CSA due to fear, shame, stigma, and embarrassment (Alaggia et al., 2017; Goodman-Brown et al., 2003; Pérez-Fuentes et al. 2013). The results of these studies intimated the need for further research to explore the predictive quality of sex on NOC responses.

**Race/ethnicity.** For the purpose of this study, race/ethnicity was categorized into White, Hispanic, and Other. The ethnic makeup of this state comprises the three categorizations with populations equaling roughly 78% White, 14% Hispanic, and 8% Other (U.S. Census Bureau, 2018). The Other category included individuals identifying their race or ethnicity other than White or Hispanic.

Walsh et al. (2012) conducted quantitative research with 358 cases of CSA to explore levels of NOC blame or support when the CSA perpetrator was an adolescent versus adult. Race characteristics were included. Data analyses inferred that African American NOCs presented more blame and less support after their child's CSA disclosure. Wamser-Nanney (2017) concluded that racial or ethnic minority NOCs had higher levels of blame and doubt than White NOCs. In a review of the literature, Lovett (2004) cited disparate findings. Primarily, Lovett surmised that African American NOCs were more supportive of their children after a CSA disclosure. In a quantitative study assessing CSA victims' satisfaction with support after their disclosure, Feiring et al. (2001) reported that African American children affected by CSA felt more supported than other ethnic groups.

Cultural contexts are an integral component of understanding a child's willingness to disclose and a NOC's protectiveness (Alaggia, 2010). Religious doctrines, multicultural beliefs, and societal attitudes may compel a NOC's belief, support, and subsequent protection or lack thereof of their sexually abuse child (Alaggia, 2010; Alaggia et al., 2017; Babatsikos, 2010; Cromer & Goldsmith, 2010; McElvaney et al., 2012; Swarikar & Katz, 2017). Hegemony in cultural, ethnic, and patriarchal groups may contribute to silence, reproach, and lack of protection for a CSA victim (Fontes & Plummer, 2010; Sawrikar & Katz, 2017). For example, in their quantitative study, Feiring et al. (2001) examined the relationships of ethnic group differences of 130 children (African American, European American, and Hispanic); CSA characteristics; and NOC support. Chi-square analysis revealed that Hispanic children were more often left to live with the perpetrator and be abused by a family member. Additionally, an analysis of variance (ANOVA) indicated that Hispanic children were more dissatisfied with NOC support than African American or European American children.

Collin-Vézina et al. (2015) sampled 67 CSA adult victims in a qualitative, grounded theory study to explore and understand obstacles to CSA disclosure. One theme that emerged was cultural challenges or "Barriers in Relation to the Social World" that CSA victims face (Collin-Vézina et al., 2015, p. 128). Thus, the cultural contexts identified in their study comprised "labeling, taboo of sexuality, and lack of services available" as barriers to disclosures (Collin-Vézina et al., 2015, pp. 130-131).

Veenema et al. (2015) reviewed integrative literature regarding CSA in diverse socioeconomic countries. Specifically, the authors sought to assess themes related to CSA phenomena in developing countries through an integrated literature review. One theme that emerged was barriers to CSA disclosure. Veenema et al. speculated that cultural obstacles such as stigmatization in the social milieu and patriarchal ideologies inhibited disclosure and NOC support, especially if the perpetrator was a family member.

Fontes et al. (2001) and Fontes and Plummer (2010) conducted research pertaining to cultural beliefs about CSA. In their qualitative study with 58 African American and Latino participants aged 20–60, Fontes et al. found that cultural schemas and gender judgments influenced perceptions of CSA. For example, Latinas expressed their concern with socioeconomic pressure to stay with a perpetrator. Fontes and Plummer suggested that cultural values about sexuality and CSA may ascribe shame and blame to victims, preventing a CSA disclosure.

Although these studies concentrated on assessing the experience of CSA victims' impediments to disclosure and cultural beliefs about CSA, recognizing the cultural themes that inhibit disclosures have implications for a child's willingness to disclose and receive protection from the NOC. Without a child's disclosure of CSA, they cannot be protected after abuse. Therefore, contradictory results and cultural considerations warrant a research study that explores race/ethnicity as a predictor of a NOC's protective reaction.

## **Type of Abuse (Noncontact and Contact)**

Type of CSA was defined in Chapter 1 as contact and noncontact sexual abuse, with contact abuse determined to be more injurious. Bunting (2014) classified sexual offense types into four categories. Two of the categories reflected contact offenses including rape or attempted rape, and sexual assault (intentional touching). Noncontact offenses were demarcated as indecent exposure or other types of nontouching sexual offenses, which could include "sexual activity" (Bunting, 2014).

Fergusson et al. 2013 operationalized CSA noncontact abuse as indecent exposure, enticed masturbation, and unwanted sexual proposals. Noncontact offenses may not come under the awareness of "abuse" by a child (Finkelhor, 2009; Murray et al., 2014). Thus, a child may be less likely to report such an offense (Vaillancourt-Morel et al., 2016). Notably, noncontact offenses can be a step in the grooming etiology used by CSA offenders to lure children into further sexual activities (Craven et al., 2006; Jackson et al., 2015; Katz & Barnetz, 2016; Leclerc et al., 2011; Williams & Hudson, 2013).

In earlier studies, researchers established a relationship between the type of abuse (contact and noncontact) and a NOCs protectiveness. In a qualitative study, Coohey and O'Leary (2008) sampled 85 mothers engaged with child protective services. Coohey and O'Leary sought to assess a relationship between the severity of abuse and a NOC's consistent protectiveness. Their findings indicated that just more than half of the NOCs protected their children after a CSA disclosure. Analyses revealed that the severity of abuse was not related to a NOC's protective actions. The small sample size was of concern for generalizability. Wamser-Nanney and Sager (2018) assessed the variable of severity of CSA and support from a caregiver. In a multivariate analysis, the researchers found that severity of CSA (penetrative offenses) was not associated with emotional support from a caregiver. This research did not examine protective reactions from a NOC, such as whether a NOC removed their child from the propinquity of the perpetrator.

Hershkowitz et al. (2007) utilized a small sample of 30 alleged victims of CSA and their parents to explore bivariate associations related to child disclosures. Hershkowitz et al. concluded that children suffering more severe CSA met with more unsupportive responses from their NOC. This research should be viewed with circumspection due to the small sample size and inclusion of children 7–12 years of age only. Thus, their research did not include children 13 or older or younger than 7.

Other studies have examined the severity of abuse related to later psychological and trauma-related symptoms (Evans et al., 2013; Fergusson et al., 2013). The findings by Evans et al. (2013) and Fergusson et al. (2013) suggested support buffers later trauma manifestations when support is present. Notably, research is needed to assess a NOC's response to their child's sexual abuse disclosure based on the severity of the abuse as many studies examined the correlation between the severity of CSA abuse and the victim's later functioning.

### **Perpetrator Relationship to Victim**

The relationship of the perpetrator to the victim is an important variable when examining NOC protection. Two types of relationships to a CSA victim have been operationalized: (a) intrafamilial relationships, and (b) extrafamilial relationships. Yancey and Hansen (2011) described intrafamilial abuse as abuse suffered at the hands of a blood relative or someone related by marriage. Extrafamilial abuse was defined as abuse occurring by someone not related or outside of the family. This wide-ranging explanation appeared to place a NOC's live-in significant other in the extrafamilial category which can be deceiving, especially if a child perceives that relationship with the NOC's significant other as "parental" (Kendall-Tackett et al., 1993; Yancey & Hansen, 2010).

Rakow et al. (2011) characterized intrafamilial abuse as a "first degree relative or mother's live-in partner" (p. 471). The authors defined extrafamilial relationships as "non-first-degree relatives, acquaintances, or strangers" (p. 471). Their definitions simplified descriptions of the relationship of the perpetrator by placing secondary blood relatives in the extrafamilial category.

Several researchers have conceptualized intrafamilial relationships to include a NOC's intimate cohabitant as well as blood relatives and those related by sociolegal relationships, such as step or adoptive parents (Fischer & McDonald, 1998; Seto, Babchishin, Pullman & McPhail, 2015). Extrafamilial relationships included family and child acquaintances, neighbors, coaches, teachers, religious leaders, older children, babysitters, a friend's parent, counselors, or anyone determined to be in a position of trust with the child (Fischer & McDonald, 1998; Smith et al., 2000). Importantly, the conceptualizations above are used for this study.

Furthermore, intrafamilial CSA has been associated with lower rates of CSA reports and a NOC's support, belief, and protection. As previously noted, there could be

socioeconomic and cultural explanations for this phenomenon. Alonzo-Proulx et al. (2016) explored the predictive associations with CSA characteristics and a child's propensity to disclose abuse. Researchers have submitted that a child's relationship with a CSA offender is the most vital for a child's willingness to report CSA (Goodman et al., 2003; Smith et al., 2000). The exploration by Alonzo-Proulx et al. included variables of relationship with the perpetrator, use of coercion, type of abuse, and maternal protective actions to determine if these variables influenced the number of details in a disclosure. The authors found that protection was an integral prerequisite for details during CSA disclosures. This finding supports the importance of NOC protection for CSA victim reporting and ensuing support.

In early research, Leifer et al. 2001 performed a chi-square analysis on data retrieved from 99 nonoffending African American participants and their sexually abused children (4–12 years old) and 52 related nonoffending grandmothers. Data obtained assessed maternal support and abuse characteristics entailing the child's relationship to the perpetrator. Results of the analysis indicated that unsupportive mothers were less likely to protect their child from the perpetrator if the offender was the father, stepfather, or boyfriend living in the home.

Consistent findings in the literature have been interpreted to reveal that NOC support is insufficient or nonexistent when abuse is perpetrated by a family member (Elliott & Carnes, 2001; Malloy & Lyon, 2006). Cyr et al. (2003) conducted a study with 120 adolescents that assessed the relationship of the perpetrator with the NOC and a NOC's support. The bivariate analysis suggested that a mother's relationship with the

offender, regardless of cohabitation, affected their level of support to their sexually abused child.

Schönbucher et al. (2014) examined the support perspectives and experiences of 26 CSA adolescent victims in a mixed methods study. Emergent themes included the CSA victims' lack of NOC support after a CSA disclosure when the perpetrator was intrafamilial. Withal, this association was found quantitatively in their research. The strength of this study was the reliability of a mixed methods design; however, the small sample size may not provide adequate generalizability and may have biased answers to support questions (Schönbucher et al., 2014).

Conversely, in a quantitative study with 106 mother and child pairs examining abuse-specific maternal support, an ANOVA revealed no significance between perpetrator relationship to the victim and NOC support (Rakow et al., 2011). Limitations of a study involving maternal reports of support included the potential subjective responses by the participants. For example, responses relying on perceptions of social desirability, such as positive maternal support, may deflect the realities (Rakow et al., 2011).

# Literature Review - Nonoffending Caregiver (NOC) Protection

NOC support refers to a nonoffending adult responsible for a child's well-being and ensuring the child is protected from further CSA victimization (Knott, 2012; UDCFS 2018). Understanding NOC support and subsequent protection is complex and dynamic (Bolen & Lamb, 2002; Elliott & Carnes, 2001). Several research studies conceptualizing NOC support and protection have been met with varying results due to methods used to measure support (Bolen & Lamb, 2002; Bolen et al., 2015; Smith et al., 2010; Smith et al., 2017).

Research study results have been interpreted that most NOC believe and support their children after a CSA disclosure (Bolen & Gergley, 2015; Cyr et al., 2013; Cyr et al., 2003; Elliott & Carnes, 2001; Knott, 2012; Reitsema & Grietens, 2016). However, disbelief, shame, and blaming responses by a NOC occur for a variety of reasons. Some researchers have suggested that NOCs may be reliant on the perpetrator for socioeconomic or emotional reasons (Rakovec-Felser & Vidovič, 2016; Reitsema & Grietens, 2016). Thus, they may feel compelled to not acknowledge or disbelieve their child's allegations of CSA. Others have argued that a NOC's support or belief is related to a mother's psychological distress or mental functioning (Rakow et al., 2011; Zajac et al., 2015).

Cyr et al. (2013) conducted a quantitative study with 226 nonoffending mothers of CSA victims. Cyr et al. found four distinct types of maternal responses to CSA disclosure: (a) resilient, (b) avoidant-coping, (c) traumatized, and (d) angry. Resilient responses included support and protection. Avoidant-coping mothers provided some level of emotional support; however, they suffered more PTSD symptomology that affected their responses. Traumatized mothers showed some levels of support, yet had greater levels of neuroticism (Cyr et al., 2013). Lastly, angry mothers believed their children but were angry at their children. The impact of an anger reaction may impact a child's sense of self-worth or self-esteem. Maternal support following CSA disclosures was measured by Zajac et al. (2015). The authors conducted a concurrent and longitudinal study with 118 mother-child pairs. The MSSQ (Smith et al., 2010) and the maternal support questionnaire-child report (Smith et al., 2017) were utilized in addition to other checklists for child behaviors. Data were collected initially and again 9-months later. Bivariate and multiple regression analyses were conducted. Maternal support dimensions were identified as emotional support, blame/doubt, vengeful arousal, and skepticism (Zajac et al., 2015). Zajac et al. found that maternal support was directly related to a child's postdisclosure functioning. Thus, maternal support rated by the mother was associated with lower levels of a child's internalizing and externalizing behaviors at Time 1 and lower levels of internalizing behaviors, and vengeful arousal elicited PTSD in children at Time 1.

Cyr et al. (2003) assessed four predictors of maternal support: (a) mother's psychosocial characteristics, (b) abuse characteristics, (c) victim characteristics, and (d) disclosure characteristics. A total of 120 adolescents between 12–17 years old completed questionnaires and interviews. Cyr et al. concluded that to whom the abuse was disclosed, guilty admissions by the abuser, and whether the mother lived with the offender had the greatest impact on a NOC's response to their child's disclosure.

Bolen et al. (2015) conducted a qualitative study assessing 17 NOCs' levels of support after their child's disclosure. Specifically, NOCs were asked about safety and protection of their children postdisclosure. Bolen et al. argued that NOC support is better conceptualized on a continuous or ordinal scale. Thus, NOCs may provide varying levels of support throughout the disclosure process and the aftermath.

Some NOCs may present supportive attitudes, such as belief, towards their child; however, fail to provide necessary protection (Alonzo-Proulx & Cyr, 2016; Collin-Vézina et al., 2013). Other NOCs may disbelieve, shame, or blame their child and fail to protect their CSA victim from further abuse by a perpetrator. Thus, NOC protection is defined as a NOC's actions that keep a child protected from further victimization by the perpetrator (Knott, 2012; Shadoin & Carnes, 2006; UDCFS, 2018, p. 12).

#### Summary

CSA occurs in every society and culture. While most NOCs provide the requisite protection of their children after their child's sexual abuse disclosure; others do not. There has been a multitudinous amount of research examining the negative etiology and sequelae after CSA perpetration, and whether a child has disclosed or chosen not to disclose. Moreover, studies have been conducted to assess maternal support after CSA incidents. Based on the research reviewed, I summarized the complex and oftentimes disparate findings concerning CSA and a NOC's protection subsequent to their child's sexual abuse disclosure. Further, the literature reviewed affirmed the paucity of research that specifically operationalizes NOC protection as a dichotomous variable. Therefore, this study was necessary for understanding a NOC's protective or FTP response after their child's sexual abuse disclosure and the possible predictors of such a response.

In Chapter 3, I explain the methodological considerations for this quantitative research study, which includes the research design, rationale, and analysis plan. A

presentation of the population for the study, data collection and coding procedures, and operationalization of constructs are elucidated. Reliability and validity concerns, as well as ethical procedures specific to this dissertation, are discussed.

#### Chapter 3: Research Method

# Introduction

The purpose of this quantitative study was to examine the variables of child demographics, type of sex offense, and the perpetrator's relationship to the CSA victim to predict a NOC's protection or FTP response after their child's sexual abuse disclosure. The extracted archival data for this study were from a child protection governmental agency that records specific criteria associated with each variable. In this chapter, I describe the quantitative design used, rationale, data sources and collection methods, as well as the approach to analyzing the data. Ethical procedures of this research are also explained

## **Research Design and Rationale**

I employed a quantitative, nonexperimental design using a binary logistic regression for analysis in this study. Archived data related to CSA victim age, sex, and race/ethnicity; contact or noncontact type of CSA; familial or extrafamilial perpetrator relationships; and NOC protection or FTP were extracted from government child welfare agency reports in a western state from 2015–2017. The outcome variable of a NOC's protection or FTP their child was recorded based on determinations made by child welfare professionals. A binary logistic regression was the most appropriate analysis because there were only two possible outcomes (protection or FTP) for the dependent variable (see Field, 2013; Warner, 2013).

The research variables were consistent with those of previous studies examining maternal or NOC support and CSA characteristics after learning of their child's sexual

abuse victimization (see Alonzo-Proulx & Cyr, 2016; Cyr et al., 2003; Feiring et al., 2001; Foynes et al., 2009; Knott, 2012; Leach et al., 2017; McGuire & London, 2017; Mustaine et al., 2014; Priebe & Svedin, 2008; Wamser-Nanney, 2017, 2018; Wamser-Nanney & Sager, 2018; Yancey & Hansen, 2010; Zajac et al., 2015). However, this study provided a different exploration of the variables due to the unique and objective reporting of government child welfare agencies. Therefore, the extracted data were based on mandatory assessments by caseworkers about a NOC's protection or FTP their child from further trauma, victimization, and contact with the perpetrator.

Demographic and CSA characteristics are important components in assessing a NOC's protection. Based on the archival data retrieved, there were no time constraints or risks of data change. The next sections explain the methods for this study.

## Methodology

# **Population**

The population of this study included child protective services agency CSA substantiated reports from 2015–2017 in a western state. The specific size of the population was undetermined initially due to the unknown number of reports generated with child protective services. Regardless, the DCFS is mandated to record all germane data in a case file pertaining to CSA disclosures and the protection outcome. Based on child abuse statistics in this state (and stated in Chapter 2), I anticipated that there would be a sufficient population to conduct a quantitative analysis with a binary logistic regression.

# Sampling

A sample size for a binary logistic regression should be roughly 10 times the number of independent variables (see Warner, 2013). For this study, a sample size of 50 was deemed as appropriate; however, a larger sample size might be needed for greater statistical power (see Warner, 2013). A more accurate method for calculating sample size is the use of the G\*Power program 2014 (Faul, Erdfelder, Buchner, & Lang, 2009). The sample size for a binary logistic regression using the parameters of a two-tailed test with an error probability of  $\alpha$  = .05 and a confidence interval of .95 would be 35 (Faul et al., 2009). Importantly, the error probability and confidence levels are commonly used criteria for reducing Type I and Type 2 errors in quantitative research studies (Frankfort-Nachmias & Leon-Guerrero, 2015). Setting the alpha level below .05 can increase the likelihood of a Type 2 error (Frankfort-Nachmias & Leon-Guerrero, 2015).

The archived data for this research study exceeded the suggested sample size of 35–50 due to the number of CSA cases reported to the DCFS and subsequently substantiated. The number of CSA reports to the state's child welfare organization are roughly 26% of all child maltreatment cases, which averaged over 9,000 per year for 2015–2017 (UDCFS, 2018). Therefore, the number of CSA reports anticipated for this statistical analysis were close to 7,000.

### **Procedures for Archival Data Collection**

I made the requests for archival data from the DCFS, a government child protection agency in the western state under study responsible for recording information about CSA cases, via ethical and procedural channels. Preliminary agreement for the government data release was obtained via e-mail (see Appendix A). The data solicited contained child demographics (i.e., age, sex, and race/ethnicity); type of abuse (i.e., contact or noncontact); perpetrator relationship to the CSA victim (i.e., familial or extrafamilial); and a determination of a NOC's protection (i.e., protected or FTP). Specific data were to be extracted from the reports by the government child welfare agency. Further, data were fixed and static; therefore, opportunities for data change or manipulation were nonexistent.

# **Data Collection**

I received a password-protected data file from UDHS on 03/20/2019 after being granted Walden University Institutional Review Board (IRB) approval on 03/15/2019 (Approval No. 03-15-19-0555773). The file contained 6,805 cases of substantiated CSA reported to the UDCFS from 2015–2017. The data file contained the age, gender, and race/ethnicity of the victim; type of sexual abuse; relationship of the perpetrator to the CSA victim; gender of the perpetrator; and findings of FTP. No notation of FTP indicated that the child was protected based on the standards articulated in the NOC protection definitions in Chapter 1. The cases, victim identification, and perpetrator identification were assigned encrypted numbers by UDCFS.

Notably, if a case had more than one allegation, perpetrator, victim associated with the case, or a finding of FTP, that case number assigned was repeated by UDCFS. Perpetrator identifications were encoded with random numbers by UDCFS with the same number repeated throughout the data if the perpetrator committed more than one sexual offense. A caregiver failing to protect their child was considered a perpetrator by UDCFS for the purpose of the data. UDCFS indicated the gender of the perpetrator in a column next to the random perpetrator identification number. I removed the gender of the perpetrator because it was not integral to this study, and I was concerned with exploring variable categories associated with the victim in this study, not the perpetrator.

Lastly, victim identifications were encoded by UDCFS with random numbers and were repeated if the victim was abused more than one time. Therefore, victims may have been coded as a victim in different encrypted case numbers or within the same case number if there was more than one allegation type, more than one perpetrator, or subsequent CSA offenses committed against that victim within the same case. No dates, locations, or other identifying information were provided.

### **Data Coding**

Data were coded and cases excluded with the final total cases for analysis equal to 6,560 cases. Cases excluded from analysis were those that did not provide variable information, such as no race/ethnicity classification or gender "unknown." I removed 89 cases for missing data. If a FTP was noted for siblings of the CSA victim and no allegation of sexual abuse against the sibling, those rows were excluded. Rows in the data that indicated FTP was substantiated were removed, and the FTP was included in a separate column indicating FTP (or protection if no FTP was recorded) within the row of CSA characteristics. For example, an encrypted case number may have two (or more) row entries for the same case. The multiple row entries may be due to CSA allegations of more than one child or more than one substantiated sexual abuse allegation against one victim. Furthermore, the same case number and an allegation of FTP for that victim (or

multiple victims within the same case) were reported in an additional row for that case. I removed 156 rows based on the above criteria. If more than one NOC failed to protect a child, those were coded as two cases of FTP for the same victim. Therefore, the final data coded represented substantiated CSA allegations with a recording of protection or FTP. A total of 6,560 cases remained.

Importantly, cases recorded as "sexual abuse" referred to contact sexual abuse cases or any sexual violations that included touching. If a CSA case was not a contact offense, the case violation type was identified as "lewdness," "exploitation," or "trafficking." I considered these offenses noncontact offenses for the purpose of coding. Familial relationships were parent(s), sibling(s), stepparent(s), step-sibling(s), aunt/uncle, cousin, grandparent, niece/nephew, adoptive parent, guardian, foster parent(s), parent's "paramour" (i.e., significant other), or other related. Extrafamilial relationships were friend, childcare/babysitter, school professional, neighbor, cohabitant, residential facility staff, medical professional, DCFS staff, legal professional, law enforcement, victim's "paramour," or other nonrelated.

The following represent the coding schema that I used for the independent or predictor variables:

- Age was coded as 0-10 = 0 and 11-17 = 1.
- Sex was coded as Female = 0, Male = 1.
- Race/ethnicity was coded as White = 0, Hispanic = 1, and Other = 2.
- Offense type was coded as Contact Sexual Abuse Offenses = 0, Noncontact Sexual Abuse Offenses (i.e., Lewdness, Exploitation, Human Trafficking) = 1.

• Relationship of the perpetrator to the CSA victim was coded as Familial = 0 and Extrafamilial = 1.

The binary outcome variable of protection (as indicated by no finding of FTP) was coded as 0 and FTP was coded as 1.

# **Operationalization of Constructs**

**Child sexual abuse (CSA).** CSA details are documented in this western state's governmental child protection organization referrals. Reports of CSA are cross reported between law enforcement agencies and the DCFS. Child maltreatment reports that violate criminal statutes of CSA are mandated for dual reporting. Data collected and maintained with DCFS included demographics, CSA characteristics, perpetrator relationships, and protection findings.

**Child demographics.** The age, sex, and race/ethnicity of the CSA victim is documented in the DCFS reports. I anticipated needing to recode ordinal age data into specific values. For this study, age was categorized into two dichotomous groups: 0–10 years old and 11–17 years old. Sex was the reported gender of the child, male or female, and was codified as such. Race/ethnicity was operationalized to include White, Hispanic, and Other based on the demographics of this state, with 78% of the population categorized as White, 14% identified as Hispanic (U.S. Census Bureau, 2018). I coded any race/ethnic identities that were not categorized as White or Hispanic as Other.

**Type of offense.** Archived data contained the CSA offense (i.e., sexual abuse). These data were extracted from the individual reports and recoded as binary contact or noncontact sexual abuse. Noncontact offenses were reported in the data as lewdness, exploitation, or trafficking. I coded contact offenses as all CSA allegations that did not report lewdness, exploitation, or trafficking as the type of CSA offense.

**Perpetrator relationship.** Relationship to the perpetrator was recorded in the DCFS reports. Most documentation subsumed the precise blood or marriage familial relationship, which was coded as familial. All potential caregiver's, including a parent, stepparent, NOC's paramour, adoptive parent, guardian, or foster care parent, were deemed familial. The relationship of the perpetrator as friend, acquaintance, or other known to the victim indicated the relationship of the perpetrator to the victim was extrafamilial.

**Nonoffending caregiver protection.** The DCFS documents the outcome in each DCFS report. A FTP finding referred to a NOC's unprotective response to their child's CSA disclosure. In many instances, this finding related to a NOC who did not provide adequate protection from the perpetrator or subsequent abuse. No FTP documentation assumed the NOC protected the child from the perspective of the government child welfare caseworker. Therefore, I operationalized NOC protections as binary, protective, or FTP.

# **Research Question and Hypotheses**

Quantitative research methods and analyses were used to answer the following question of whether CSA demographics, type of abuse, and the perpetrator's relationship to the victim predict a NOCs protective or FTP response in reported and substantiated cases of CSA:

Research Question: Does CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) predict a NOC's response to their child's sexual disclosure as measured by protection in government child welfare agency reports?

 $H_0$ : CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do not predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

*H*<sub>1</sub>: CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

#### **Data Analysis Plan**

To determine if child demographics, type of CSA, and perpetrator relationship to the victim predicted a NOC's protective or unprotective reaction, I coded the discrete independent variables into dummy categorical variables. In the child demographics category, age was dummy coded as 0–10 years of age = 0, 11–17 years of age = 1. Sex was dummy coded as female = 0, male = 1. Race/ethnicity was dummy coded into three values of White = 0, Hispanic = 1, and Other = 2. Type of CSA was dummy coded as contact = 0, noncontact = 1. Relationship of the perpetrator to the CSA victim was dummy coded as familial = 0, extrafamilial = 1. Finally, the outcome variable was coded as protect = 0, FTP = 1. A binary logistic regression was most appropriate for this study as the outcome variable was binary with only two possible outcomes (Warner, 2013).

Statistical Package for the Social Sciences (SPSS) Version 25 software was used to categorize and conduct an analysis of the data. Necessary assumptions for a binominal logistic regression were met. First, the outcome variable was dichotomous. Second, the predictor variables were nominal and in mutually exhaustive membership categories. Lastly, there were more than the minimum number of cases per variable, which was previously identified as a total of 35–50 (Faul et al., 2009; Warner, 2013). Preliminary chi-square tests were conducted for exploratory analysis and to ensure there was adequate cell frequency (see Warner, 2013).

#### Threats to Reliability and Validity

The archived data were based on government child protection caseworkers' assessment of the associated variables. Thus, the reliability of the data entered was dependent on the caseworker responsible for entering the facts associated with a CSA report. Due to mandated reporting standards in the state and supervisory approval of reports, data were entered according to details witnessed firsthand by the caseworkers. Threats to reliability consisted of the potential bias of a caseworker in coding a NOC as protective or failing to protect their child after a CSA disclosure; however, these findings were subjected to child welfare organizational compliance. The data requested for this study were subjected to review by the Walden University Dissertation Committee, University Research Reviewer, and IRB.

External validity is concerned with the generalizability of the findings to population groups (Warner, 2013). The sample population in this study was relegated to all substantiated CSA reports in this western state from 2015–2017. The data being tested did not include experimentation, manipulation, and were not artificial but based on mandated reporting by a government child protection agency. Regardless, generalizability to other states may be limited due to lack of ethnic and racial diversity among this state's population based on U.S. Census Bureau reports.

The archived data were fixed and static, which improves test and retest capabilities. However, internal validity may be impacted by the time span of data and not fully represent future statistics. Therefore, the findings of this study may not reflect CSA accurately and NOC protection in future studies, as rates of CSA may change.

# **Ethical Procedures**

Verbal and written confirmation were received to obtain DCFS child abuse data in this western state (see Appendix A). To protect the anonymity of the participants, the data received did not include any identifying information such as name or address. Relevant demographics and CSA characteristics for this study were extracted as identified in earlier sections.

The data recorded by the government child welfare agency were not collected on behalf of this proposed study. Such data are required by the governmental agency procedures. As noted previously, I am a child abuse investigator familiar with the government child protection agency. The request for data was submitted in accordance with policy and procedure.

Lastly, this study did not involve the use of participants in a protected or vulnerable population. Although the DCFS reports record information about child characteristics, the identities of the children and families remained confidential and unavailable to me. I was the only party with access to the data beyond the governmental child protection agency. All data and analyses remain private, confidential, and protected by me

### Summary

I outlined the quantitative methods approach used for this study in Chapter 3. The design aligned the operationalization of the variables and methodology explored previously in Chapter 2. The population, data collection, threats to reliability and validity, and ethical procedures were examined. Data were not obtained or analyzed until approval of this proposal from my Dissertation Committee, University Research Review, and IRB. Approval was granted by the Walden University IRB, 03-15-19-0555773.

In Chapter 4, I report the findings of the statistical analyses. I present relevant frequency and descriptive statistics and pertinent Tables in Chapter 4. Finally, I summarize this study with conclusions, interpretations, recommendations, limitations, and implications for social change in Chapter 5.

# Chapter 4: Results

## Introduction

Walden University IRB granted approval for this study, using archived and extracted data (2015–2017) from the UDHS (Walden University IRB Approval No. 03-15-19-0555773). I received an encrypted and password-protected file from UDHS containing substantiated CSA reports on over 6,800 cases. I recoded those cases systematically and removed cases with missing data. There were 6,560 cases used for statistical analysis to answer the research question in this study.

#### **Sample Demographics**

I coded the data and entered them in SPSS. An initial analysis included frequency tables and descriptive statistics. There were no missing case data. Three percent of NOCs were found to fail to protect their dependent child in CSA substantiated cases, while 97% of NOCs were found to protect their dependent child in CSA substantiated cases. Females (80.5%) were more likely than males to be CSA victims. Children aged 11–17 represented the larger age range of CSA victims (67.8%). White CSA victims were predominant (74.5%, Hispanic 18.2%, Other 7.3%). Contact sexual abuse offenses were 88%, and extrafamilial perpetrator relationship to the victim was slightly higher than familial relationships at 53.7%. Notably, the victim race/ethnicity data were relatively consistent with census data related to race/ethnicity in this state with 78% White, 14 % Hispanic, and 8% Other (see U.S. Census Bureau, 2018). Table 1 includes the frequency distribution for the predictor and outcome variables.

# Table 1

Frequency Statistics for Predictor Variables: Age, Sex, and Race/Ethnicity; Type of CSA; and Perpetrator Relationship; and Outcome Variable (i.e., Protection)

		Victim Age						
	Frequency	%	Valid %	Cumulative %				
0–10	2,110	32.2	32.2	32.2				
11–17	4,450	67.8	67.8	100.0				
Total	6,560	100.0	100.0					
		S	Sex					
	Frequency	%	Valid %	Cumulative %				
Female	5,282	80.5	80.5	80.5				
Male	1,278	19.5	19.5	100.0				
Total	6,560	100.0	100.0					
		Race/Ethnicity						
	Frequency	%	Valid %	Cumulative %				
White	4,886	74.5	74.5	74.5				
Hispanic	1,195	18.2	18.2	92.7				
Other	479	7.3	7.3	100.0				
Total	6,560	100.0	100.0					
	Type of CSA							
	Frequency	%	Valid %	Cumulative %				
Contact CSA	5,773	88.0	88.0	88.0				
Noncontact CSA	787	12.0	12.0	100.0				
Total	6,560	100.0	100.0					
		Perpetrator	Relationship	)				
	Frequency	%	Valid %	Cumulative %				
Familial	3,037	46.3	46.3	46.3				
Extrafamilial	3,523	53.7	53.7	100.0				
Total	6,560	100.0	100.0					
		Prot	ection					
	Frequency	%	Valid %	Cumulative %				
Protection	6,365	97.0	97.0	97.0				
Fail to protect	195	3.0	3.0	100.0				
Total	6,560	100.0	100.0					

*Note*. CSA = child sexual abuse.

Appendix B includes sample demographics by predictor and outcome variables. The tables include the specific number of cases for age groups, sex categories, race/ethnicity identifications, type of CSA, perpetrator relationship to the CSA victim, and NOC protection. Females, White, aged 11–17 years old, suffering contact CSA at the hands of a familial association had the most cases of FTP (i.e., less than 1% of the total sample). The same group of females received the most protection when the perpetrator was extrafamilial, 25% of the total sample. See Appendix B for further details.

# **Descriptive Statistics**

A total of 6,560 cases of CSA were included in this study. Descriptive statistics for the predictor variables and outcome variable are presented in Table 2. The standard deviations were: age = .47, sex = .40, race = .61, type of CSA = .33, perpetrator relationship to the victim = .50, and protection = .17. Additional descriptive statistics are presented in Appendix B.

Table 2

Descriptive Statistics for Predictor Variables and Outcome Variable

	Minimum	Maximum	М	SD
Victim age	0	1	.68	.467
Sex	0	1	.19	.396
Race	0	2	.33	.605
Type of CSA	0	1	.12	.325
Perp. relationship	0	1	.54	.499
Protect FTP	0	1	.03	.170

*Note.* N = 6,560; CSA = child sexual abuse; Perp. relationship = perpetrator relationship.

### **Test of the Assumptions**

Initial assumptions for binary logistic regression were met; hence, the outcome variable was dichotomous, the predictor or independent variables were nominal, and the binary outcome variable and predictor variables were mutually exclusive and exhaustive. The minimum cases for binary logistic regression were met and superseded. Due to the nature of categorical or nominal independent variables, a Box-Tidwell test for linearity was not necessary.

## **Research Question and Hypotheses**

Research Question: Does CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports?

*H*<sub>0</sub>: CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do not predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

*H*<sub>1</sub>: CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do predict a NOC's response to their child's

sexual abuse disclosure as measured by protection in government child welfare agency reports.

## Results

I entered a binary logistic regression command in SPSS Version 25 to determine the predictive quality of age, sex, and race/ethnicity; type of CSA; and perpetrator relationship to the child victim on a NOC's subsequent protection. The results reflected analyses with the first categorical variable as the reference group. For example, the binary logistic regression was analyzed with the variables coded as 0 as the reference group. Therefore, the coefficients in the binary logistic regression can be interpreted as the comparative odds of NOC protection after a CSA disclosure for victim age 11–17 compared to age 0–10, males compared with females, Other and Hispanic victims compared with White victims, noncontact sexual abuse compared with contact sexual abuse, and extrafamilial perpetrator relationship to the CSA victim compared with familial perpetrator relationship to the CSA victim.

I compared the null model or constant only model to the full model, and I found it to be statistically significant, p < .05,  $\exp(B_0) = .03$ . The binary logistic regression full model was statistically significant,  $\chi^2(6) = 74.22$ , p < .05. The model explained 4.8 % of the variance in protection (Nagelkerke  $R^2$ ). The confidence intervals set at .95 ranged between .29–3.17 for all the independent or predictor variables.

The results of the binary logistic regression are represented in Table 3. The  $exp(B_0)$  indicated that the odds of FTP were .04 based on all the predictor or independent

variables. Victim age was not statistically significant for predicting NOC protection, p > .05.

Race/ethnicity categorized by Other was not statistically significant for predicting NOC protection, p > .05. The independent variables (i.e., sex, race/ethnicity of White and Hispanic, CSA type, and perpetrator relationship to the CSA victim) were statistically significant. Therefore, the odds of protection for CSA victims were: .50 for males and two times more likely for females, 1.68 for Hispanic CSA victims compared to .60 for White CSA victims, 2.22 times more likely for noncontact CSA than contact CSA (.45), and .40 if the perpetrator was extrafamilial compared to 2.5 for familial.

Table 3

Results of Binary Logistic Regression Analysis with Age, Sex, and Race/Ethnicity; Type of CSA; and Perpetrator Relationship to the Victim as Predictor Variables of NOC Protection

							95%	OC.I.
	В	S.E.	Wald	df	Sig.	Exp(B)	Lower	Upper
Constant	-3.142	.139	509.038	1	.000	.043		
Victim age(1)	154	.159	.943	1	.331	.857	.628	1.170
Sex(1)	696	.225	9.611	1	.002	.499	.321	.774
Race			9.460	2	.009			
Race(1)	.517	.170	9.252	1	.002	1.676	1.202	2.339
Race(2)	.270	.272	.987	1	.321	1.310	.769	2.231
Type of CSA(1)	.795	.182	18.993	1	.000	2.215	1.549	3.167
Perp. relationship(1)	929	.164	32.069	1	.000	.395	.286	.545

*Note*. CSA = *child sexual abuse;* Perp. relationship = perpetrator relationship.

# **Supplemental Tests**

I computed a secondary binary logistic regression with the age variable entered in SPSS in a step-by-step process. For example, age, with a reference of 0 (0-10 year olds) had statistical significance when entered alone. The logistic regression full model was

statistically significant,  $\chi^2(1) = 5.46$ , p < .05. The exp( $B_0$ ) = .04, indicating small odds for FTP. The comparative odds of protection were .7 for the age group of 11–17 compared to the 0–11 age group (1.43). The Nagelkerke  $R^2$  = .004, illustrating a miniscule variance in protection. The confidence interval at 95% was .53–.94. Table 4 represents the binary logistic regression using age alone as a predictor of protection.

Table 4

*Results of Binary Logistic Regression Analysis with Age as a Predictor Variable of NOC Protection* 

							95% C.I.	
	В	S.E.	Wald	df	Sig.	Exp(B)	Lower	Upper
Constant	-3.260	.115	798.342	1	.000	.038		
Victim age(1)	352	.149	5.602	1	.018	.703	.526	.941

Table 5 includes the results of the binary logistic regression analysis with age, sex, race/ethnicity, and type of CSA as predictors of protection. There was statistical significance for the binary logistic regression of the full model with age, sex, race/ethnicity, and type of CSA,  $\chi^2$  (5) = 40.21, p < .05. The exp( $B_0$ ) was .04, suggesting the odds of FTP were low for all variables entered in the equation. The comparison odds demonstrated that the 11–17 age group received protection roughly .63 times compared to the 0–10 age group (1.59), with the combined predictor variables of sex, race/ethnicity, and type of CSA. The model explained 2.6% of the variance in protection (Nagelkerke  $R^2$ ). The confidence intervals at 95% ranged from .32–3.01. When perpetrator relationship to the victim was added to age and with all the other variables, age was not statistically significant.

# Table 5

							95%	o C.I.
	В	S.E.	Wald	df	Sig.	Exp(B)	Lower	Upper
Constant	-3.343	.138	590.877	1	.000	.035		
Victim age(1)	459	.151	9.212	1	.002	.632	.470	.850
Sex(1)	693	.224	9.549	1	.002	.500	.322	.776
Race			10.794	2	.005			
Race(1)	.551	.169	10.657	1	.001	1.735	1.246	2.416
Race(2)	.256	.271	.897	1	.344	1.292	.760	2.197
Type of CSA(1)	.746	.181	16.920	1	.000	2.108	1.478	3.008

Results of Binary Logistic Regression Analysis with Age, Sex, and Race/Ethnicity; and CSA Type as Predictors of NOC Protection

*Note*. CSA = child sexual abuse

I performed a subsequent binary logistic regression combining two of the race/ethnicity variables, Hispanic and Other, for a sample size of 1,647 for a non-White category. A new coding schema was formed with White = 0 and Hispanic/Other (or non-White) = 1. The results are represented in Table 6. The null model compared to the full model was statistically significant, p < .05,  $B_0 = .03$ . The binary logistic regression model was assessed and determined to be statistically significant with similar results to the original binary logistic regression,  $\chi^2(5)$ , 73.49, p < .05. Nagelkerke  $R^2$  was 4.8% for variance in protection. The odds of FTP were .04 based on the exp(*B*). Confidence intervals for the variables at .95 ranged from .29–3.15. With the coding change, race/ethnicity was statistically significant as a predictor of protection with the odds of protection 1.57 times more likely for Hispanic/Other (non-White) CSA victims compared to White CSA victims.

# Table 6

Results of Binary Logistic Regression Analysis with Race/Ethnicity Recoded White and non-White as Predictors of NOC Protection

							95% C.I.	
	В	S.E.	Wald	df	Sig.	Exp(B)	Lower	Upper
Constant	-3.142	.139	508.917	1	.000	.043		
Victim age(1)	150	.159	.899	1	.343	.860	.630	1.174
Sex(1)	697	.225	9.644	1	.002	.498	.321	.773
Race(1)	.452	.155	8.563	1	.003	1.572	1.161	2.129
Type of CSA(1)	.791	.182	18.810	1	.000	2.205	1.543	3.152
Perp. relationship(1)	933	.164	32.374	1	.000	.393	.285	.542

*Note:* CSA = child sexual abuse; Perp. relationship = perpetrator relationship.

# Summary

The archived and extracted data from 2015–2017 used for this study provided insight into the predictability of age, sex, and race/ethnicity; type of CSA; and the relationship of the perpetrator to the victim on a NOC's protection after their child's sexual abuse disclosure. As anticipated, most NOCs offer protection to their child after their child's CSA allegation; however, others do not. Importantly, unprotected children may be vulnerable to subsequent abuse.

Based on the findings, the null hypothesis that CSA victim age, sex and race/ethnicity; CSA type (i.e., contact or noncontact offenses); and the perpetrator's relationship to the CSA victim do not predict a NOC's responses to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports was partially rejected, and the alternative hypothesis was accepted. Notably, age was not statistically significant in the full model binary logistic regression. As reported, age was statistically significant in a model utilizing age alone, or age combined with all the other predictor variables except the relationship of the perpetrator to the victim. In the full model binary logistic regression, Other race/ethnicity was not statistically significant; however, combining Hispanic and Other into one non-White category did yield statistically significant results for race/ethnicity as a predictor of protection in a full model analysis. The lack of statistical significance of the Other race/ethnicity category may be the result of a small sample population identifying as Other.

Understanding the variables associated with a NOC's FTP are critical for prevention, intervention, and social change. Child protection teams, including law enforcement, therapists, community groups, and stakeholders in child welfare can utilize these research findings for recognizing variables that predict a NOC's FTP. Additionally, these findings can be incorporated into educational programs and training discourses for adults working with children.

In Chapter 5, I will explain how the results of this study contribute to the current literature regarding CSA and NOC protection. Furthermore, my interpretation of the results, relevance to theory, and limitations to this study will be discussed. Lastly, recommendations for future research and social changes implications will be revealed. Chapter 5: Discussion, Conclusions, and Recommendations

# Introduction

The purpose of this study was to examine the predictability of CSA victim demographics (i.e., age, sex, and race/ethnicity); type of CSA (i.e., contact or noncontact offense); and perpetrator relationship to the victim (i.e., familial or extrafamilial) on a NOC's protection or FTP their child after their child's sexual abuse disclosure. CSA is a global issue, and many children face further trauma after their disclosure due to a NOC's negative response (see Aydin et al., 2016; Hornor, 2010; Hornor & Fischer, 2016; Leclerc, Smallbone, et al., 2015; McElvaney et al., 2014; Melville et al., 2014; Palo & Gilbert, 2015; Rakow et al., 2011; Zajac et al., 2015). Therefore, in this study, I explored variables that may predict a NOC's protection.

The target population was CSA victims with substantiated findings of CSA based on reports by a governmental child welfare agency tasked with documenting CSA characteristics and protection. NOC protection was demarcated by a FTP recording by a child welfare agency caseworker. No notation indicated there was not a substantiated finding of FTP.

I received Walden University IRB approval to collect archived data for substantiated cases of CSA from the UDHS. The data extracted included child abuse victim demographics, type of abuse, and the perpetrator's relationship to the CSA victim. Cases recorded FTP if it was determined a NOC failed to protect their child from further abuse or trauma. Data were coded into categorical variables, and no identifying information was provided. After removing case rows without data and combining necessary rows as described in Chapter 4, the case data for analysis totaled 6,560.

### Summary of the Findings

The research question and the corresponding hypotheses were as follows: Research Question: Does CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports?

 $H_0$ : CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do not predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

 $H_1$ : CSA victim age, sex, and race/ethnicity; CSA type (i.e., contact or noncontact offense); and the perpetrator's relationship to the CSA victim (i.e., familial or extrafamilial) do predict a NOC's response to their child's sexual abuse disclosure as measured by protection in government child welfare agency reports.

Most of the CSA victims were female (80.5%) and White (74.5%). Hispanic and Other comprised 18.2% and 7.3% of CSA victims, respectively. The predominant age group was 11–17 (67.8%), and contact abuse was most prevalent (88%). Familial and

extrafamilial relationships of the perpetrator to the victim were 46.3% for perpetrators identified as family and 53.7% as extrafamilial. Lastly, most NOCs protect their children, with 3% failing to protect their child after a CSA disclosure.

I performed a binary logistic regression in SPSS Version 25 to determine the comparison odds of protection occurring between groups of categories. Descriptive and frequency analyses were conducted to assess membership numbers in each categorical variable. A chi-square test was run for preliminary assessment of statistical significance for the fit of the model. The results of the binary logistic regression were statistically significant for the model of predicting NOC protection.

The variables of sex, race/ethnicity, type of CSA, and relationship of the perpetrator to the CSA victim predicted a NOC's protective response. Interestingly, age was not a statistically significant predictor when entered in the full model. Age entered without perpetrator relationship proved to be statistically significant. Race/ethnicity coded as Other was not statistically significant; however, when Hispanic and Other were combined, race/ethnicity equivalent to "non-White" was statistically significant. Therefore, females, non-White, with noncontact CSA by a family association (as defined) were at greater odds for being protected after their CSA disclosure.

The findings suggested that most NOCs protect their children after a CSA disclosure based on the criteria set forth for FTP determinations by a governmental child protection agency (i.e., the UDCFS). Regardless, a number of NOCs do not protect their children after CSA. Such unprotected victims may be forsaken and at risk for further trauma.

### **Interpretation of the Findings**

With this study, I aimed to provide insights into the predictive odds of a NOC's protection after their child's sexual abuse disclosure based on child demographics, type of abuse, and the perpetrator's relationship to the child. While many studies assessed NOC protection through qualitative studies (see Bolen et al., 2015; McElvaney et al., 2014; Schönbucher et al., 2014), in this study I examined protection quantitatively, consistent with similar methodological considerations regarding CSA and NOC protection or support (see Coohey & O'Leary, 2008; Cyr et al., 2013; Everson et al., 1989; Knott, 2012; Pintello & Zuravin, 2001; Rakow et al., 2011; Wamser-Nanney & Sager, 2018; Zajac et al., 2015). Importantly, the results confirmed that most NOCs protect their children after a disclosure.

My interpretation of the analyses using the independent variables as predictors of NOC protection revealed females, Hispanic/Other (non-White) victimized by noncontact CSA at the hands of a family member garnered more NOC protection. Interestingly, the study results indicated that age was not a significant predictor of NOC protection when a full model was performed in SPSS. This finding was consistent with a study by Cyr et al. (2013). Conclusions cited in other studies were mixed with some reporting greater protection for younger CSA children (see Elliott & Carnes, 2001; Knott, 2012; Pintello & Zuravin, 2001; Schönbucher et al., 2014; Walsh et al., 2012) and alternatively, increased protection for older CSA victims (see Wamser-Nanney & Sager, 2018). When age was entered in the model alone or with sex, race/ethnicity, and type of abuse, age was a predictor of protection, with younger children more likely to receive protection than the

older age group. The resultant findings of younger age as receiving more protection complement those of previous studies (see Elliott & Carnes, 2001; Knott, 2012; Pintello & Zuravin, 2001; Schönbucher et al., 2014; Walsh et al., 2012).

The finding of sex (namely females) as a predictor of NOC protection contradicted a few studies (see Cyr et al., 2003; Elliott & Carnes, 2001); however, was concordant with the conclusions of other research (see Wamser-Nanney & Sager, 2018). Based on the statistical analysis, most child victims reporting CSA in this western state were females (80.5%). Therefore, it is not unreasonable to infer that females would receive more NOC protection based on the unequal distribution of female victims reporting CSA compared to male victims disclosing CSA.

Non-White race/ethnicity as a predictor of protection was consistent with a study supporting findings that non-White CSA victims garner more protection (see Feiring et al., 2001) and were disparate with other research conclusions (see Walsh et al., 2012; Wamser-Nanney, 2018). Furthermore, the findings of the present study coincided with those of studies about cultural differences, perceptions of CSA, and protection (see Feiring et al., 2001; Fontes et al., 2001; Fontes & Plummer, 2010). Namely, cultural doctrines and beliefs may impact NOC responses (see Feiring et al., 2001; Fontes et al., 2010).

Children victimized by noncontact CSA were more likely to have protection from their NOC. Hershkowitz et al. (2007) made congruous inferences. However, Coohey and O'Leary (2008) did not find a correlation between severity or type of abuse and NOC protection or support. In more recent research, Wamser-Nanney and Sager (2018) had results analogous to Coohey and O'Leary when support was measured.

In this study, familial relationship was found to predict NOC protection, with the odds of protection 2.5 times greater for a child abused by a family member. Rakow et al. (2011) did not find a relationship between perpetrator relationship to the CSA victim and a NOC's support. The findings in this study regarding familial relationship of the perpetrator and NOC protection were discordant with work by other researchers as well (see Cyr et al., 2003; Elliott & Carnes, 2001; Leifer et al., 2001; Malloy & Lyon, 2006, Schönbucher et al., 2014).

### **Theoretical Implications**

Cognitive dissonance theory (Festinger, 1957) and neutralization theory (Sykes & Matza, 1957) were vital for understanding NOC FTP. Based on the archived data, most children were abused by someone known to them (i.e., more than 90% based on raw data) and implied to be known to the NOC. Therefore, NOCs are presumably faced with conflicts between protecting their children and preserving relationships or friendships with the perpetrator. Those NOCs protecting (and conversely failing to protect) their child was impacted by victim sex, race/ethnicity, type of abuse, and perpetrator relationship to the CSA victim. Justifying reactions and responses incongruent with beliefs, values, and attitudes about CSA could reduce dissonance and account for a NOC's FTP.

# **Cognitive Dissonance Theory**

Cognitive dissonance theory posits that individuals will change their attitudes, beliefs, or behaviors to minimize or neutralize dissonance with their values or moral standards (see Festinger, 1957). Therefore, a person or NOC may hold the opinion and moral conviction that CSA is reprehensible and unlawful; however, when faced with protection of their child may seek consonance for their actions deemed unsupportive or lacking protection of their child. For example, a NOC may present that CSA is harmful and heinous; yet, when the abuse occurs at the hands of a spouse, coparent, lover, paramour, or other revered relationship or acquaintance, they may not protect their child from further harm, justifying or rationalizing their response based on the circumstances. This reduction of dissonance is a phenomenon that occurs when faced with challenging decisions or responsibility for ensuing behavior; therefore, cognitive dissonance theory was a viable and justified theoretical framework underpinning this research.

### **Neutralization Theory**

Neutralization theory argues that people will justify their actions, reactions, or behaviors to neutralize opposing feelings, attitudes, beliefs, or opinions about a situation (Sykes & Matza, 1957). As with cognitive dissonance theory, individuals may hold strong values and moral stances about a topic or occurrence; however, they may act, respond, or behave counterintuitively to their viewpoints. Most sexually abused children are abused by someone they know through intrafamilial or extrafamilial relationships (Craven et al., 2006; Elliott & Carnes, 2001; Glaser, 1998; Jewkes & Wykes, 2012; Lalor & McElvlaney, 2010; McAlinden, 2006, 2014; Myers, 2008; NCVC, 2012; Ullman, 2007). A NOC failing to offer protection from a perpetrator may justify their insufficient protection through several neutralization methods. A NOC may deny responsibility, deny a victim is injured, deny the victim was abused sexually, condemn those investigating or accusing the perpetrator, or refrain from severing loyalties to a perpetrator or multicultural doctrines ascribing to patriarchal or other roles. A NOC may seek the path of least resistance and neutralize responsibility for protecting their sexually abused child.

As a theoretical framework, neutralization theory provides a theoretical underpinning for a NOC's FTP their CSA victim. Rationalizations or arguments for a particular reaction to CSA phenomena could form a basis for a NOC's FTP. Hence, a NOC may use a neutralization technique to explain their behavior that they believe justifies their nonoptimal response to their child's sexual abuse disclosure.

# Limitations of this Study

Although this study yielded statistically significant results when predicting the odds of protection for child demographics (i.e., sex and race/ethnicity), type of abuse (i.e., contact or noncontact), and relationship of the perpetrator to the child (i.e., familial or extrafamilial), I must acknowledge several limitations. First, the population of the western state in this study lacks significant diversification; the population is predominately White. Therefore, the findings should be interpreted with caution when generalizing to other states or community CSA populations.

Another limitation was that some researchers have suggested that protection by a NOC occurs on a continuum rather than dichotomously (see Bolen et al., 2015; Bolen &

Lamb, 2007a; Coohey, 2006; Malloy & Lyon, 2006). In this study, I utilized protection as a dichotomous variable due to the requirements of government child welfare organization reporting mandates. The government child welfare organization substantiates a finding of FTP if a NOC does not "take reasonable action to remedy or prevent child abuse..." and "fails to report the abuse...or the alleged perpetrator's identity" (UDCFS, 2018, p. 12). Further, the CAPTA definition included "... failure to act which represents imminent risk of harm;" (USHHS, 2017, p. 6). I defined NOC protection in this study as the responsibility of the NOC to protect their child from sexual abuse, including separation from the alleged perpetrator. Therefore, a NOC that shames, blames, guilts, ridicules, or otherwise treats a child with indifference or emotional cruelty after their CSA disclosure was not determined to have failed to protect if they offered the necessary "physical" protection.

A third limitation was that many NOCs may comply initially with requirements that a CSA victim has no contact with the perpetrator. A NOC may renege on this obligation after time and allow a perpetrator approximation with the CSA victim, leaving the child unprotected and potentially subjected to further CSA. Therefore, protection may be withdrawn completely or to varying degrees, with possible CSA victim exposure to the perpetrator.

A subsequent limitation identified was that this study used data from substantiated CSA reports. The data did not reflect reports of unsubstantiated cases in which CSA may have occurred and a NOC failed to protect or protected their child. Furthermore, many children do not report CSA for a myriad of complex reasons (see Martin & Silverstone,

2013; Swingle et al., 2016). Therefore, the sample did not reflect children abused sexually who remain silent.

### **Recommendations for Future Research**

The encrypted identification numbers remained constant throughout the data providing the opportunity to assess more than one victimization or a perpetrator committing sexual violations on more than one occasion. Determining the number of CSA victims experiencing repetitive victimization could be useful for understanding CSA dynamics. A research project that examined perpetrators who sexually abuse a child on more than one occasion or have of recurring CSA offenses with different victims might promulgate information about the variables that predict repeated victimization or the chicanery and grooming processes that allow offenders to victimize children persistently. Data could include all reported CSA cases whether substantiated, unsubstantiated, prosecuted or not prosecuted.

Although the sex of the perpetrator was included with the archived data, analysis of perpetrator sex was not included due to the anticipated limited number of female perpetrators. Moreover, for the purpose of this study, the variables used represented demographics and case categories related to the child, not the perpetrator. Future studies exploring the relationship, correlation, or predictability of perpetrator sex on a NOC's protection could be beneficial to assess if there is a difference in protection based on the perpetrator's sex.

Research that assesses the reasons why a NOC protects or fails to protect their child would provide the child welfare field with valuable knowledge about other

variables that contribute to a NOC's protection. A qualitative study using a sample of NOC's identified as failing to protect their child could furnish researchers with worthwhile data. For example, exploring socioeconomic, religious, and multicultural factors, and NOC abuse trauma experiences may yield rich information about why a NOC failed to protect their child. Learnings from a study of these factors and experiences could provide social, governmental, ecclesiastical, religious, and cultural organizations with insight that could be integrated into intervention methods and educational resources for families affected by CSA.

Lastly, the data received may have had multiple victims of FTP, although those victims were not victims of CSA. For example, one child may have been abused sexually, and a determination was made that the NOC failed to protect that victim in addition to siblings not abused sexually yet involved in that same case. Thus, a NOC may have allowed the perpetrator access to the siblings of CSA victims, leaving them vulnerable to possible abuse. A prospective study that examined the impact of secondary trauma to those children not abused sexually but affected by the familial reactions is warranted to ensure an understanding of collective emotional and psychological injury.

### **Implications for Social Change**

Social change involves the ability to unequivocally affect communities, societies, and populations on a global scale. This research study fosters social change by examining the variables that may predict a NOC's protection after their child's sexual abuse disclosure. CSA affects children and families worldwide. Therefore, the findings of this study contribute to positive social change by analyzing data related to variables that predict NOC's responses. As discussed, children victimized by CSA may be at greater risks for further traumatization and adverse behavioral manifestations. A NOC's lack of protection may contribute to the child's functioning in the aftermath of CSA.

Awareness of community issues begins with research-based findings that encourage stakeholders in child protection to expand their services and bring knowledge to families about child protection. In many instances, a NOC with a finding of FTP could be held accountable criminally through state statutes prohibiting neglect of a child, as not protecting a child could be deemed neglect. Therefore, recognizing the basic variables that predict a NOC response can guide child welfare teams to identify and enlighten families and communities about children most susceptible to lack of protection while helping those NOCs who may fail to protect their child. Moreover, these apperceptions may aid child workers target children reluctant to disclose CSA due to fear and apprehension about a NOC's reaction.

Ultimately, understanding the variables that predict a NOC's protection can assist scholars, academics, students, professional organizations, child welfare teams, counselors, schools, and community members assess the potential for a child to remain unprotected and provide education about CSA and prevention to all communities in the nation and internationally. Training programs for professionals working with children can edify CSA dynamics and trends. The potential to encourage children to report CSA begins with a professional's awareness of the factors that may impede a child's sexual abuse disclosure and the NOC's response that compels a child to disclose or remain silent.

# Conclusions

Regardless of the large number of NOCs protecting their children based on criteria set forth in the government child welfare organization reports (UDCFS), a small population of children are not protected. The interpreted study results revealed that females, non-White, experiencing noncontact sexual abuse by a family member were at the greatest odds for protection by a NOC. Regardless, stakeholders in child protection are encouraged to have collaborative discourses with colleagues about the realities of CSA and NOC protection. FTP a child after their CSA disclosure can have devastating effects that can cause further trauma to the victims. Therefore, examining variables that predicted protection by a NOC can aid researchers, academics, child protection teams, law enforcement, schools, therapists, and communities to better serve this vulnerable population through prevention, intervention, and education.

This study was unique in that I sought to explore the predictability of child demographics, type of CSA, and perpetrator relationship to the child on a NOC's protection after their child's sexual abuse disclosure. The findings revealed that the odds of protection differ for sex, race/ethnicity, type of abuse, and perpetrator relationship to the child. The interpretation of the findings affirms the need for the development of prevention and intervention methods for CSA victims and their families to promote protection.

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#### Appendix A: Letters Regarding Data

From: XXXX Subject: Data for Research

## Dear XXXXXXXX,

I am so grateful to have spoken with you yesterday. Thank you!

I am undertaking a research project for my PhD. In addition to my academic endeavors, this research will provide valuable information for those working in the field. I have been in law enforcement for over 30 years, and as you know, I am a criminal investigator, specializing in child abuse investigations, particularly child sexual abuse. Notably, my interests are understanding caregiver responses to child sexual abuse disclosures.

My research questions are assessing whether child demographics, type of sexual abuse, and perpetrator relationship portend a caregiver's response to abuse allegations.

The data requested includes archival data from 2015-2017 which includes demographics, type of abuse, relationship of the perpetrator, and caregiver protection. There will be no direct contact with anyone served through DCFS or DHS. Additionally, no individual will be identified (thus, race variables will be operationalized into broad categories and no identifying information will be used).

I am honored by this opportunity to contribute to the field. Please let me know how to proceed. If I am able to obtain this data, please confirm via email.

#### Subject: Re: FW: DCFS Data

XXXX, we haven't forgotten about you! We still have this on our near radar and will get to it as soon as possible. Pre-Legislative sessions and during the session is crazy around here, but we do have it on the active list. We'll get it back ASAP!

Hi,

Thank you so much for your email. I am sorry to bother you while you are out. If you have a chance to respond that would be great. We can speak in more detail next week. I am hoping to access data that includes demographics of victims of sex abuse (age, sex, race), type of sexual abuse (contact or noncontact) and relationship to the perpetrator as it may predict the level of nonoffending caregiver support (protection or failure to protect). I am not sure if race is recorded on DCFS reports. Also, I would like data for the state from 2015-2017. Alternatively, data from XXXXXXXX from 2012-2017 would work as well, just more difficult to generalize. Obviously I do not need names or any identifying information. I can make a formal request, just let me know. I think the study and analysis will be helpful.

Warmest Regards,

Hello, XXXX. I'm out of the office until next week, but am happy to speak to you at that time. Or, if you want to send an email with what you need I can respond a bit more quickly with a timeframe for completion. We're a bit backed up with priority internal requests, but should be able to assist.

Appendix B: Sample Demographics Before Recoding Into Categorical Variables

# Table B1

Descriptive Statistics for 0–10-Year-Old Females by Race/Ethnicity, Type of CSA, Perpetrator Relationship, and NOC Protection

				Perpetrator	Protection	
Age	Sex	Race	Type CSA	Relationship	Status	п
0–10	Female	White	Contact	Familial	Protection	740
					FTP	19
				Extrafamilial	Protection	265
					FTP	5
			Non-Contact	Familial	Protection	67
					FTP	7
				Extrafamilial	Protection	38
					FTP	1
		Hispanic	Contact	Familial	Protection	136
					FTP	11
				Extrafamilial	Protection	61
					FTP	1
			Non-Contact	Familial	Protection	14
					FTP	6
				Extrafamilial	Protection	11
					FTP	0
		Other	Contact	Familial	Protection	51
					FTP	4
				Extrafamilial	Protection	20
					FTP	4
			Non-Contact	Familial	Protection	10
					FTP	1
				Extrafamilial	Protection	6
					FTP	0

*Note.* n = 1478 for all groups; CSA = child sexual abuse; FTP = failure to protect.

### Table B2

Descriptive Statistics for 0–10-Year-Old Males by Race/Ethnicity, Type of CSA, Perpetrator Relationship, and NOC Protection

				Perpetrator	Protection	
Age	Sex	Race	Type CSA	Relationship	Status	n
0–10	Male	White	Contact	Familial	Protection	289
					FTP	7
				Extrafamilial	Protection	125
					FTP	3
			Non-Contact	Familial	Protection	54
					FTP	3
				Extrafamilial	Protection	25
					FTP	1
		Hispanic	Contact	Familial	Protection	40
					FTP	2
				Extrafamilial	Protection	19
					FTP	0
			Non-Contact	Familial	Protection	7
					FTP	1
				Extrafamilial	Protection	9
					FTP	0
		Other	Contact	Familial	Protection	20
					FTP	0
				Extrafamilial	Protection	17
					FTP	0
			Non-Contact	Familial	Protection	2
					FTP	2
				Extrafamilial	Protection	6
					FTP	0

*Note.* n = 632 for all groups; CSA = child sexual abuse; FTP = failure to protect.

Table B3

Descriptive Statistics for 11–17-Year-Old Females by Race/Ethnicity, Type of CSA, Perpetrator Relationship, and NOC Protection

	~	_	_ ~~	Perpetrator	Protection	
Age	Sex	Race	Type CSA	Relationship	Status	n
11–17	Female	White	Contact	Familial	Protection	746
					FTP	33
				Extrafamilial	Protection	1629
					FTP	29
			Non-Contact	Familial	Protection	91
					FTP	10
				Extrafamilial	Protection	208
					FTP	4
		Hispanic	Contact	Familial	Protection	280
		-			FTP	18
				Extrafamilial	Protection	388
					FTP	11
			Non-Contact	Familial	Protection	18
					FTP	2
				Extrafamilial	Protection	48
					FTP	0
		Other	Contact	Familial	Protection	93
					FTP	4
				Extrafamilial	Protection	160
					FTP	0
			Non-Contact	Familial	Protection	7
					FTP	1
				Extrafamilial	Protection	24
					FTP	0

*Note.* n = 3804 for all groups; CSA = child sexual abuse; FTP = failure to protect.

Table B4

Descriptive Statistics for 11–17-Year-Old Males by Race/Ethnicity, Type of CSA, Perpetrator Relationship, and NOC Protection

				Perpetrator	Protection	
Age	Sex	Race	Type CSA	Relationship	Status	n
11–17	Male	White	Contact	Familial	Protection	144
					FTP	0
				Extrafamilial	Protection	254
					FTP	3
			Non-Contact	Familial	Protection	37
					FTP	2
				Extrafamilial	Protection	47
					FTP	0
		Hispanic	Contact	Familial	Protection	42
					FTP	0
				Extrafamilial	Protection	57
					FTP	0
			Non-Contact	Familial	Protection	5
					FTP	0
				Extrafamilial	Protection	8
					FTP	0
		Other	Contact	Familial	Protection	10
					FTP	0
				Extrafamilial	Protection	33
					FTP	0
			Non-Contact	Familial	Protection	1
					FTP	0
				Extrafamilial	Protection	3
					FTP	0

*Note.* n = 646 for all groups; CSA = child sexual abuse; FTP = failure to protect.