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Prevention in Schools: Examining School Personnel's Attitudes and Knowledge of Mandated Reporting

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PREVENTION IN SCHOOLS: EXAMINING

SCHOOL PERSONNEL'S ATTITUDES AND KNOWLEDGE OF

MANDATED REPORTING

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DISSERTATION APPROVAL

This is to certify that the thesis presented to us by __Aigner Allen_____

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requirements for the degree of Doctor of Psychology, has been examined and is

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ABSTRACT

This study examined the factors that may affect school personnel's implementation of mandated reporter procedures after student disclosure of child sexual abuse (CSA), with a focus on how school personnel think, reason, and act after a student discloses suspected CSA. Children spend most of their time in school, therefore, school personnel have significant roles in protecting children by being mandated reporters of child abuse. This study used a quantitative research design to examine school personnel's attitudes and knowledge regarding mandated reporting child sexual abuse after student disclosure. The study used a cross-sectional survey methodology that included a single survey instrument. A cross-sectional study was chosen because participants were selected based on the inclusion criteria of this study. One hundred school personnel who are currently employed by educational institutions serving students between kindergarten and 12th grade participated in this study by completing an online survey pertaining to this topic. Results indicate that teachers with training had more confidence recognizing indicators of abuse, were more knowledgeable about their reporting responsibilities, and were better prepared to follow reporting procedures. The majority of respondents also reported that their institutions had a child abuse reporting policy of which they were aware. This would suggest that educational institutions with a formal policy may impact school personnel's decision to report child sexual abuse, ensuring that they report child sexual abuse. Findings also suggest that school personnel's attitudes toward their commitment to the reporting role are closely aligned with mandated reporter standards and expectations.

CHAPTER 1: INTRODUCTION

Statement of the Problem

The experiences created during our childhood play an important role in how well we adapt to life. Childhood is a time that is crucial for a person's overall development. Successful achievement of developmental milestones and the development of healthy attachments aids children with establishing an excellent foundation for success in school and life. According to the Center for Disease Control (2021):

The early years of a child's life are very important for his or her health and development. Healthy development means that children of all abilities, including those with special health care needs, are able to grow up where their social, emotional and educational needs are met. Having a safe and loving home and spending time with family is very important. Proper nutrition, exercise, and sleep also can make a big difference.

(https://www.cdc.gov/ncbddd/childdevelopment/facts.html).

Child sexual abuse is a preventable problem however, children all over the world are victims of child maltreatment every day. According to Stoltenborgh et al., (2015), Child sexual abuse (CSA) is a major social concern and public health issue. UNICEF (2014) has estimated that well over 120 million children worldwide have experienced CSA. Stoltenborgh et al. (2011) found that girls are over twice as likely to experience CSA than boys. The findings reviewed in this study indicated that female children are at

significantly higher risk than male children for CSA victimization, although the

experiences of boys are likely to be under-represented.

Sexual abuse leaves scars that can last for a long time, however many cases are

never reported. It is estimated that the prevalence of sexual abuse is actually higher as

many cases go unreported largely because many children do not disclose the sexual abuse

until adulthood (Alaggia, 2010, 2005; London et al., 2005). The long-term emotional and

physical damage after sexual abuse can be devastating to the child. For those children

who do disclose the abuse, they run the risk of not being believed, blamed for the abuse,

or accused of tearing their family apart (McElvaney et al., 2014). Living with sexual

abuse or experiencing negative consequences from disclosure can have devastating and

long lasting psychological, physical, relational, educational, and social effects (Alaggia &

Kirshenbaum, 2005).

Purpose of the Study

Child sexual abuse is a complex problem which means that finding adequate

interventions is complicated due to the barriers of mandated reporting. The first step in

treatment is the identification of the problem. When children disclose abuse to adults and

adults do not respond, the situation remains hidden at a high cost to the child. Given the

prevalence of Child Sexual Abuse, the current study seeks to improve identification,

treatment, and prevention of child abuse by better understanding the barriers to mandated

reporting in child-serving institutions. School personnel should be equipped to utilize the

proper procedures when adolescents disclose information regarding sexual abuse. Results

from this study may provide leaders in education with insight to give teachers with

preservice and in-service professional development to equip them with the necessary

specialized skills to enable them to feel confident in fulfilling their role as mandated reporters.

Many primary prevention programs for CSA using educational interventions exist. Recent reviews of school-based CSA prevention programs reported positive outcomes for children, including increases in self-protective skills, disclosure of abuse, increased understanding of sexual abuse (such as appropriate and inappropriate touch), and emotional gains like increased self-esteem (Fry, 2016). School-based child abuse prevention programs were created to provide knowledge so that children can recognize abuse, teach skills that decrease children's risk for abuse, normalize the disclosure process, and provide a pathway for children who may be experiencing abuse to report the abuse (Blakey et, al., 2019).

In 2019, Blakey et al. conducted a study to explore the school and program factors that trainers in a school-based prevention program believed were associated with disclosure among youth from Kindergarten through 12th grade. This study was based on eighteen trainers and administrators who worked with the "Play it Safe!" school-based program in the Dallas-Fort Worth area. The results suggested that the school personnel-related factors were disengagement, ambiguity concerning abuse, prior history with children, and professionals' personal history of abuse. To date, there is a dearth of studies that explore the role that schools and school personnel play in the disclosure process (Blakey et al., 2019).

School personnel-related factors consisted of actions and beliefs held by professionals within the school that facilitated or hindered disclosure. School personnel were not always clear whether a reported incident was abuse. The trainers' advice to

school personnel was to report everything and let CPS determine. School personnel were

ambivalent about this approach and preferred more specific parameters. The trainers

observed that school personnel often were more hesitant to act unless the reported

incident was clear-cut. Examples of school personnel comments from experienced

trainers are as follows:

> According to (Blakey et al., 2019, p. 6) Baldwin stated: "Some teachers
> just freak out when there's a disclosure. "I don't know what to do," they will say.
> "Is this a lie? I don't know how to determine whether to report this or not." We
> would say, "It's okay. As long as there's suspicion, you can report it. You don't
> have to investigate." But even then, you get some people who are scared. "What if
> it didn't really happen? The parents are going to be mad at me." We tell them,
> "Well, if nothing really happened, then there should be nothing there." But I
> mean, you followed through on your end…. Still, some teachers just want to
> pretend it didn't happen.

> Caileen reported the difficulty associated with professionals who have a
> prior history with children: I went to talk to the counselor after a disclosure, and
> she says, "Well, I hope you didn't believe anything she said…because that girl is
> in trouble all the time. She's lying. She's stealing. She doesn't do her homework,
> and everything." And I'm thinking, well, maybe it's because she's got a real
> problem that she hasn't been able to get any help for. But because of her
> behavior, people just assumed that she was creating this kind of ruckus or that
> she's not believable" (Blakey et al., 2019, p. 6).

Based on the perception of the trainers, it is suggested that school personnel do not report when deemed necessary. It appears to be the credibility of the student that comes into question. Which is concerning since it is not a mandated reporter's job to investigate. Based on the findings in this study, an important implication for practice is the creation of trauma-informed schools. In these schools, all personnel should recognize and respond appropriately to children who have been impacted by trauma. By adopting a trauma informed framework, schools are committing to ensuring that school culture, practices, and policies are sensitive to the needs of children who have or may have experienced trauma (Chafouleas et al., 2016).

To help prevent child sexual abuse, School Psychologists can assist students with breaking through the stigma and shame that can accompany victimization. This research can encourage students, families, and school personnel to report child sexual abuse appropriately. Children already spend much time in schools, and thus programs in this context provide easier access for a more significant number of children in need of intervention (Madrid et al., 2020). Schools are also more likely to have personnel that can assist once disclosure occurs, as many school systems employ counselors and health specialists. Additionally, because child sexual abuse often happens within the home (Alaggia, 2010), school-based prevention programs have the additional benefit of providing a safe space for a child to disclose. With the push to implement sexual violence prevention and education in all public schools, it is increasingly important to consider how these programs can be taken to a scale of this magnitude, with an emphasis on who will be teaching this content to students and preparing them to do so effectively (Weingarten et al., 2018).

In summary, the goal of the current study is to improve identification, treatment, and prevention of child abuse by better understanding the barriers to mandated reporting in child-serving institutions. For the purpose of this study, school personnel are defined as employed within any school-based position, directly working with school age children 5 -18 years. We were also interested in exploring how school personnel think, reason, and act when the student discloses CSA.

Hypotheses and Research Questions

The primary research questions addressed by this study were:

1. How does mandated reporting training relate to school personnel perceptions around their competence in making a report of suspected child sexual abuse?

   a. H_1 = School personnel that received mandated reporter training will have a higher level of competence in regards to making a report of suspected child sexual abuse than those who have not had a training.

2. How does school policy impact school personnel's decision of making a child sexual abuse report.

   a. H_1 = School Policy will affect school personnel's decision of making an child sexual abuse report.

3. How school personnel's attitudes about reporting child sexual abuse may impact their decision of making a child sexual abuse report.

      a. H_1 = School personnel who have had a mandated reporter training will be more knowledgeable and have a more positive attitude towards reporting child sexual abuse than those who have not had a training.

4. How child abuse reporting may vary by professional roles within the school.

      a. H_1 = School personnel in student support positions will have a higher level of knowledge than personnel in teaching positions regarding reporting child sexual abuse.

CHAPTER 2: REVIEW OF LITERATURE

Stressful or traumatic events that occur during childhood or adolescence are called adverse childhood experiences (ACEs). The more ACEs a child experiences, the more likely that she/he is to suffer from social and emotional problems. Ports et al. (2016). Children exposed to early trauma, such as abuse and neglect, are at an increased risk for experiencing violence across their life span with accumulating risk for poor health and social outcomes (Wilkins et al., 2014). Sexual violence victimization at any age can increase chances of mental health consequences, but these chances are heightened if the victimization occurs during childhood (Weingarten et al., 2018). Children who have been sexually abused are at risk for various medical, psychological, behavioral, and social problems resulting in school failure, drug and alcohol abuse, and conflicts with the law (Fry & Blight, 2016).

Each stage of life depends on what has to come before it, and children certainly do not enter adolescence with a "blank slate." Amid physical, neurological, and psychological changes, adolescents undertake the intertwined tasks of social learning and identity development. Adolescents must also develop future-oriented, goal-directed skills that allow them to assume adult roles. Adolescence is a sensitive period, second only to infancy in its plasticity and its potential for positive or negative inflection points (Dahl et al., 2018). For this research, adolescence refers to the period marking the transition from childhood to adulthood. This transition typically spans from 12 to 18 years of age, roughly corresponding to the time from pubertal onset to custodial independence (Heckhausen et al., 2010). This period of adolescence comes with known and unknown matters that challenges their decision making ability. These are times when adolescents

must face change, independence and growth, but for some these are life-altering transformations.

While estimates vary widely, it is likely that around 1 in 4 girls and 1 in 13 boys experience child sexual abuse at some point in childhood (Centers for Disease Control, 2022. Sexual violence impacts need to be considered uniquely by gender. Females comprise 81% of reported victims of sexual abuse in their lifetime (National Sexual Violence Resource Center, 2012). Nearly two-thirds of the women who had been sexually abused prior to the age of 18 disclosed the abuse at or around the time it occured, but only one in four of the males did so (Cashmore & Shackel, 2014). According to the 2021 Center for Disease Control and Prevention data (CDC), "1 in 3 female rape victims experienced it for the first time between 11-17 years old." Due to the relatively small number of reported cases and low estimates of male sexual abuse from national data collection agencies, such as The National Crime Victimization Survey (NCVS), this research study will focus exclusively on female adolescent victims.

Child Sexual Abuse

 The legal definition of child sexual abuse differs slightly from state to state, however, the definition can generally be considered to be the following:

> Child sexual abuse (CSA) is a form of child abuse that includes sexual activity with a minor. A child cannot consent to any form of sexual activity, period. When a perpetrator engages with a child this way, they commit a crime that can have lasting effects on the victim for years. Child sexual abuse can but does not need to

include physical contact between a perpetrator and a child. Some forms of child

sexual abuse include:

- Exhibitionism, or exposing oneself to a minor

- Fondling

- Intercourse

- Masturbation in the presence of a minor or forcing the minor to masturbate

- Obscene phone calls, text messages, or digital interaction

- Producing, owning, or sharing pornographic images or movies of children

- Sex of any kind with a minor, including vaginal, oral, or anal

- Sex trafficking

- Any other sexual conduct that is harmful to a child's mental, emotional, or physical

  welfare (Clayton et. al 2018).

Child Sexual Abuse (CSA) is very prevalent in the United States. The effects of

Child Sexual Abuse are variable, with up to half of children showing no symptoms and

others with long-standing severe consequences (Clayton et al., 2018). Data from the

National Comorbidity Survey indicated a relationship between CSA and the subsequent

onset of psychiatric disorder, and findings revealed that 78% of women and 82% of men

who reported CSA met diagnostic criteria for at least one lifetime psychiatric disorder

versus 49% and 51%, respectively, among those who did not report CSA (Maniglio,

2009). After controlling for other childhood adversities, CSA was found to be

significantly associated with mood, substance use, and anxiety disorders in both sexes

(Gilbert et al., 2009). In a recent meta-analysis that looked at 37 longitudinal studies from

across the world between 1980 and 2008 (20 cohort and 17 case-control studies) with over 3,160,000 participants, it was calculated that there was a statistically significant association between sexual abuse and a lifetime diagnosis of anxiety (OR: 3.09), depression (major depressive disorder [MDD]) (OR: 2.66), eating disorders (OR: 2.72), PTSD (OR: 2.34), sleep disorders, and suicide attempts (Stoltenborgh et al., 2011).

CSA is also associated with increased risk of suicide attempts nonsuicidal self-injury (Klonsky & Moyer 2008). In a co-twin study, the risk of suicide attempt was significantly higher among those with reported CSA history than among those without such history (Briere & Elliott 2003). Patients reporting a history of childhood sexual or physical abuse were significantly more likely to have attempted suicide than those with no such history (Claes et al., 2010). The range of consequences and responses that can result from childhood sexual abuse is extensive. The literature is rife with the view that sexual abuse triggers a myriad of intransigent and debilitating physical psychological or social impairment (Schwartz et al. 2019).

Sexual abuse experienced during childhood can have long-term adverse effects on physical and psychological well-being throughout individuals' lives (Jin et al., 2016). Due to the adverse outcomes associated with child sexual abuse, the prevention effort from health professionals rather than individual survivor efforts has become more critical to prevent further harm (Chae, 2016). Therefore, there is a need to strive for the prevention of CSA through education so that the safety and well-being of the children may be guaranteed (Jin et al., 2016).

How CSA Affects the Brain

Various factors such as violence and other stress-inducing experiences during childhood development can negatively impact and alter neuroplasticity and structural composition of the brain (Teicher et al., 2004). The cerebral cortex is responsible for higher cognitive functions such as language and information processing. It is composed of four lobes: (a) the frontal lobe, which is associated with reasoning, higher-level cognition, language expression, and motor movements; (b) the parietal lobe, which includes the somatosensory cortex, and is involved with processing sensory information; (c) the temporal lobe, which includes the hippocampus and is tied with memory and serves as an auditory interpreting center; and finally, (d) the occipital lobe, which is involved with the interpretation of visual stimuli (Sherwood, 2012). The lobes divide into structures that have shed light on neuronal differences associated with experiencing CSA (Blanco et al., 2015).

The prefrontal cortex, a significant part of the frontal lobe, is involved in understanding emotions, planning complex cognitive behaviors, and expressing social and personality characteristics (Dubin, 2001). Bremner et al. (1999) observed increased cerebral blood flow in the orbitofrontal cortex among CSA survivors with and without post-traumatic stress disorder (PTSD). As the blood flow in an area of the brain is linearly correlated with activity (Lee et al., 2005), decreased blood flow may disrupt optimal functioning. A decrease in blood flow within this neural region could lead to difficulty executing frontal lobe processes such as complex decision-making tasks (Dubin, 2001). Bremner et al. (1999) suggests that impairment within the medial prefrontal cortex may decrease the ability to minimize or eliminate fear responses and

pathological emotions among individuals diagnosed with PTSD. Furthermore, decreased

blood flow in the bilateral anterior front regions and left inferior frontal gyrus (Shin et al.,

1999) may lead to difficulty in the structures' functions such as decision-making,

weighing alternatives, and interpreting emotional meanings (Wilson, 2003).

The temporal lobe processes auditory, olfactory, and taste information. It provides

information about the form of objects that make up visual images and decodes images of

the human face (Dubin, 2001). CSA survivors with and without PTSD showed increased

cerebral blood flow and increased activity in the anterior temporal poles, although

increases were more significant among those with PTSD (Shin et al., 1999). The

differences may indicate that CSA survivors, especially those with PTSD, experience

heightened perceptions of their surroundings (Blanco et al., 2015).

The visual cortex of the occipital lobe receives and processes visual information

(Dubin, 2001). Gray matter, a significant component of the central nervous system, is

primarily neuronal cell bodies that work together to relay motor or sensory stimuli to

interneurons and elicit an appropriate response to the stimuli (Sherwood, 2012).

Significant differences in gray matter volume for female CSA survivors and non-

survivors were observed in a structural magnetic resonance imaging (MRI) study

(Tomoda et al., 2009). In this study, female CSA survivors were found to have 18.1%

less gray matter volume in the left visual cortex and 12.6% less volume in the right visual

cortex than women without a history of abuse. Further, changes in gray matter volume in

the left and right visual cortex were associated with the duration of CSA occurring before

the age of 12 (Tomoda et al., 2009). Tomoda et al. (2009) suggest that the duration of

abuse occurring before 12 years of age may have a more significant impact on the development of brain structure and concomitant function.

Individuals who have a history of childhood maltreatment, such as childhood sexual abuse (CSA), also show increased patterns of amygdala activation (Garrett et al., 2012; Hart and Rubia, 2012). However, studies examining the neurobiological mechanisms of childhood maltreatment are scarce, and many of the studies, including adolescents who experienced childhood maltreatment, do not focus on CSA (Van den Bulk et al., 2016). Research by Cisler et al. (2015), for example, showed that adolescent girls who experienced physical or sexual assault and who were referred for trauma-focused cognitive behavioral therapy reacted differently to treatment based on their pre-treatment level of amygdala activation in response to threatening emotional faces: adolescents with a more robust amygdala response to emotional faces pre-treatment, showed less symptom reduction.

According to Heim et al. (2013) structural and functional neuroimaging provides powerful tools to explore long-term effects of life experience on neurodevelopment. Cortical thinning was found to be present in the brain areas involved in the perception or processing of behaviors specific to the type of abuse experienced. Childhood sexual abuse was associated with cortical thinning in the genital representation field of the primary somatosensory cortex, whereas emotional abuse was associated with cortical thinning in regions linked to self-awareness and self-evaluation. These findings help us further understand the factors that lead to the different changes within our brain.

Experiencing CSA does not produce a distinctly identifiable syndrome but instead yields various symptomatic and pathological behaviors (Ross & O'Carroll, 2004).

Adverse outcomes stemming from CSA can affect cognitive, behavioral, and

psychological health (Bailey & McCloskey, 2005). Previous research has documented

deficits in attention, abstract reasoning, executive functioning, and increased impulsivity

among CSA survivors (Beers & De Bellis, 2002). More recent work has also documented

intellectual impairment, verbal deficiencies, and poor academic performance experienced

by CSA survivors (De Bellis et al., 2011). It is essential to understand the effects of

structural and functional dysfunction associated with CSA to determine the best course of

action and protocol to help minimize adverse outcomes (Blanco et al., 2015).

Childhood Sexual Abuse (CSA) Internalizing Symptoms

Childhood physical, emotional, and sexual abuse is also related to externalizing

and internalizing dimensions underlying psychiatric disorders (Keyes et al., 2012).

Childhood physical and sexual abuse is associated with increased prevalence of mood,

anxiety, and substance abuse disorders (Afifi et al., 2008). The experience of CSA is also

associated with increased risk of suicide attempts and non-suicidal self-injury (Klonsky

& Moyer, 2008). Evidence of a significant association between childhood abuse and

attempted suicide has also been reported in another primary care sample (Boudewyn &

Liem, 1995. In a co-twin study, the risk of suicide attempts was significantly higher

among those with reported CSA history than among those without such history (Briere &

Elliott, 2003). Patients reporting a history of childhood sexual or physical abuse were

significantly more likely to have attempted suicide than those with no such history

(Klonsky & Muehlenkamp, 2007).

Experiencing CSA can create feelings of powerlessness which leaves the child

with the perception of having little control over what happens (Lindert at al., 2014). A

feeling of powerlessness can lead to more internalizing behaviors, such as depression and

disordered eating (anorexia, bulimia, or obesity). Female adolescents with a history of

sexual abuse often resort to internalizing behaviors because of psychological and

emotional toll it carries. Delayed reporting of sexual abuse is common due to feelings of

embarrassment, fear and humiliation.

According to Nooner et al. (2012), those who have experienced trauma, sexual

abuse victims are the most vulnerable to the development of PTSD; indeed, 48% of this

group develop PTSD as adolescents, whereas only 3% of those experiencing natural/other

disasters meet criteria for PTSD. Early trauma, such as CSA, is thought to disrupt

adaptive coping mechanisms, making it difficult to recover from traumatic experiences,

potentially resulting in greater PTSD symptom severity throughout the lifespan

(Batchelder et al., 2021). PTSD is one of the most common sequelae of child sexual

abuse (Paolucci et al, 2001). Many children who have experienced CSA have developed

anxiety that stays with them into adulthood. According to the Hall and Hall (2011)

studies have shown that survivors of childhood sexual abuse exhibit similar levels of

stress and anxiety to war veterans.

Childhood Sexual Abuse (CSA) Externalizing Symptoms

In addition to internal psychological processes that may increase the risk that

youth exposed to CSA will develop pathological reactions to the trauma, the current

interpersonal environments of youth may also vary significantly as a function of their

attachment relationships with caregivers (Ensink et al., 2020). Bowlby suggested that

attachment behaviors such as proximity- seeking were adaptive responses to separation

from a much stronger primary attachment figure that provides care and protection. Of all

mammals, human children take the longest to gain a degree of independence and therefore those infants who were able to maintain proximity to an attachment figure via attachment behaviors would make it to maturity. Thus a motivational system gradually evolved through natural selection to regulate proximity to an attachment figure (Dresvina, 2020).

Child sexual abuse (CSA) is a significant and common threat to psychological well-being and behavioral health across the life course (Easton & Kong, 2017). It has been hypothesized that early trauma, mainly childhood maltreatment, may produce immediate aggressive responses and conduct problems such as atypical and violent behaviors (Widom, 1989). At the same time, approximately 25–30% of CSA victims do not develop mental health difficulties, suggesting that other risk and protective factors are involved (Ensink et. al, 2020). Emerging evidence suggests that secure attachment may be a protective factor in the context of CSA in adolescents (Jardin et. al 2017).

The prevalence of different types of attachment in middle childhood is broadly similar to that found in infants, with 66% of children manifesting secure attachment representations, 30% having organized-insecure representations, and 4% having disorganized attachment (see Privizzini, 2017, for a review). The association between attachment and psychological difficulties peaks in middle childhood and is especially evident when children self-report their distress symptoms (Madigan et al., 2013).

Child sexual abuse may lead to life-threatening behaviors such as suicide ideation and suicide attempts. As noted in epidemiological research, CSA is a large risk factor of future suicidal behavior (Bebbington et al., 2009). Adolescents who have attempted suicide or mutilated themselves are likely to have been subjected to sexual abuse than

their peers (Miller et al., 2013). In their literature review, Miller et al. found that overall, out of 28 cross-sectional studies of community samples, 27 demonstrated clear evidence of a general association between a history of sexual abuse and increased suicidal ideation and suicide attempts (Miller et al., 2013). Sexual abuse during childhood brings about an additional risk, either as a "distal" or indirect cause or as a "proximal" or direct cause (Maniglio, 2011).

Childhood Sexual Abuse (CSA): Observed in the Classroom

Child sexual abuse (CSA) continues to be a significant problem with significant short and long-term consequences. Not all traumatic experiences are equal. What's traumatic for one person will not be the same for another. Adolescents with a history of sexual abuse can struggle with building healthy relationships as they age. Younger children may also experience difficulty in school and with behavior. Everyone has an alarm system in their body that is designed to keep them safe. When this alarm is activated, this system prepares the body to fight, freeze, or run away. The alarm can be activated at any perceived sign of trouble and leave some feeling scared, angry, irritable, or even withdrawn Lewis et al. (2016).

When being constantly hurt or neglected by individuals whose job it is to protect and care for them, they may eventually find it hard to trust others. So, when their teacher is constantly pointing out to the class that they are late to school again, this further damages their ability and need to trust. Female adolescent survivors of sexual abuse have the heavy burden of figuring out whom they can trust and managing their reactions to different situations. To school personnel and other helping professions, these students are labeled as the "frequent flyers" or "bad kids." These female adolescents may appear as

disrespectful, noncompliant, unmotivated, aggressive, rude. They may be identified as

"bullies," and are also at an increased risk for dropping out. They also may be identified

as kids who are sexually promiscuous; have risky or frequent sex with others, or who

dress or act in a sexually provocative way. However, a trained individual would know

that these behaviors could be symptoms of that female adolescent having a history of

sexual abuse, (Aideuis, 2007).

According to the National Child Traumatic Stress Network (2017, children whose

families and homes do not provide consistent safety, comfort, and protection may

develop ways of coping that allow them to survive and function day to day. Attachment,

emotional regulation, and sense of agency are integral in fostering a sense of mastery and

confidence in relation to the world children live in, (Aideuis, 2007). For instance, they

may be overly sensitive to the moods of others, always watching to figure out what the

adults around them are feeling and how they will behave. They may withhold their own

emotions from others, never letting them see when they are afraid, sad, or angry. Those

who have experienced complex trauma often have difficulty identifying, expressing, and

managing emotions, and may have limited language that appropriately expresses those

emotions. As a CSA victim grows up and encounters situations and relationships that are

safe, these adaptations are no longer helpful, and may in fact be counterproductive and

interfere with the capacity to live, love, and be loved.

The challenges associated with developing healthy, adaptive emotional and

behavioral responses to situations for children who have experienced maltreatment play a

role in their ability to perform at school. Child maltreatment negatively affects children's

academic achievement and educational outcomes as seen through academic performance,

emotional and behavioral responses in school, and attendance (Romano et al., 2015).

Maltreatment influences and disrupts many of the development processes that promote

learning and functioning in children, such as executive functioning, knowledge retention,

comprehension, and analysis, all of which play a role in academic performance, (De

Bellis & Zisk, 2014). Executive functioning influences a child's ability to manage

behaviourally and emotionally within structured educational environments, and to

process, understand, and retain learned information (Hong et al., 2018). Because of the

disruption of these core cognitive functions, children experiencing maltreatment are more

at risk for compromised academic outcomes, higher grade repeats, cognitive delays,

poorer performance on standardized measures, lower grade point averages, speech and

language impairments, lower IQ scores and lower reading scores that measure cognitive

complexity, special education interventions, and lower grades compared to those who

have not experienced maltreatment (Kiesel, et al., 2016).

Prevention Program Training for School Personnel

Existing programs have targeted students as young as kindergarten age, all the

way up through high school. Content and materials do vary by program and targeted age

groups. A review of the literature by Fryda and Hulme (2015) found that use of role play,

films, and group discussions were most often utilized across different sexual violence

prevention programs. The choice of using program evaluations were key to understanding

whether these programs would be effective or not. Therefore, many primary prevention

programs for CSA use educational interventions platforms.

Teachers and other school personnel are in an optimal position to prevent,

identify, and assist victims of child abuse and neglect because of their frequent contact

with students. Numerous studies have documented that schools have the critical primary function of providing essential education access to large populations of children on CSA prevention (Barron & Topping 2013). Recent reviews of schools-based CSA prevention programs reported positive outcomes for children, including increases in self-protective skills, disclosure of abuse, increased understanding of sexual abuse, and emotional gains like increased self-esteem (Fry, 2015). A program evaluation found that school-based sexual violence prevention programs increased the likelihood of disclosure in addition to preventing sexual violence (Topping & Barron 2009).

A search and review of the research on Child Abuse prevention programs found program evaluations employed to evaluate their efficacy. One of the main questions that arise is, who is implementing these programs and how are they being trained and supported. These questions are becoming increasingly important as more states have passed legislation to increase the implementation of prevention programs. One such piece of legislation is known as Erin's Law. Erin's law was named for Erin Merryn, an abuse survivor and activist against child sexual abuse who has advocated for similar laws. Erin's Law is intended to help children, teachers, and parents in New York State schools identify sexual abuse, and to provide awareness, assistance, referral, or resource information for children and families who are victims of child sexual abuse (Erin's Law, 2017).

According to Weingartene et al. (2018) teachers and other school personnel can be trained to deliver the sensitive material associated with sexual violence prevention. Evaluations of child abuse prevention programs have also shown that teachers trained on the curricula and implement them do so with fidelity (Weingartene et al., 2018).

However, a question remains as to what factors predict whether teachers or other school personnel who have been trained on the curricula implement it in their classrooms (Weingartene et al., 2018). Through program evaluations and then by means of survey studies, research has demonstrated that respondents were asked about needs for professionals (including support) and organizations. Professional and service needs and requirements for change fell into five sub-themes: a) training needs, b) development needs ('need to develop'), c) additional support for staff, d) listening to young people's views and needs, and e) procedural aspects (i.e., sharing information and following procedures (Hamilton-Giachritsis, et al., 2020). The need for more training and the support of the administrative team was a common thread through this literature review.

According to Blakey et al. (2019), trainers observed that school personnel often were more hesitant to act unless it was a clear-cut situation. Some teachers panicked when a student decided to disclose it to them. The school personnel factors that impeded disclosure was the teacher, counselors and other school staff's lack of clarity around what constituted abuse, particularly as it related to corporal punishment/spanking. Many of their comments were as follows, "I do not know what to do" and "Is this a lie?" I do not know how to determine whether to report this or not." Trainers responded to the school personnel with one response; "It is okay. As long as there is suspicion, you can report it" (Blakey et al., 2019, p. 6).

A common theme of the studies of school based sexual abuse programs demonstrate that when prevention programs are implemented along with continuing education courses and training for teacher has shown to be beneficial for students and their families. It has been argued that effective prevention initiatives require the

development and implementation of interventions at the primary, secondary, and tertiary levels (Knack et al., 2019).The school environment is well suited for educational programs designed to prevent CSA due to the accessibility of large numbers of children and expert staff representing a variety of disciplines (Fallon et al., 2002). Effective prevention initiatives will not only reduce the number of children being sexually victimized, but they will also significantly reduce the costs associated with sexually offending (Knack et al., 2019).

In 2009, more than 72% of all CSA cases were reported by the following professionals: educational personnel, legal and law enforcement, social services staff, medical and mental health practitioners, child day care workers, and foster care providers (Paranal et. al 2012). It is imperative that providers are properly trained to appropriately identify and report sexual abuse. The proper education of staff plays a major role in their ability to respond appropriately to disclosures, make reports to authorities, and identify children who may be experiencing abuse (Kenny et al., 2008).

Weingarten et al. (2018) examined whether teachers and other school personnel could be trained to deliver sensitive material associated with sexual violence prevention, and after the training, what factors predict whether they do, in fact, teach the topic to their students. When asked about their training experiences, participants reported that the most common structure of the training they received included a combination of presentation, discussion, and role-playing (69.8%), with the second most common structure endorsed as mostly presentation and some discussion (24.6%). When asked for suggestions regarding the structure of the training, many (n = 20) reported the role-plays were the most helpful aspect of training. One participant wrote: "Role playing is a good way to put

the ideas into practice." Another wrote: "I liked role-playing/practicing the lessons. I'd like to practice more to feel more ready to apply it to students" (Weingarten et al., 2018, p. 73). Results from the same study stated that, after the training, most (82.4%) respondents reported that the content covered in the training was either fully sufficient or mostly sufficient for them to teach sexual violence prevention to their students. Relatedly, most (70.1%) of the people completing the survey felt prepared to teach on the topic of sexual violence prevention after the training (Weingarten et al., 2018, p. 74).

The Teacher Reporting Attitude Scale: Child Sexual Abuse (TRAS-CSA)

In 2007, Australian researchers began to search for an existing research instrument in the form of a series of questionnaire items or a scale that could be used to measure teachers' attitudes toward reporting CSA (Walsh et al., 2010). According to their findings such a measure did not exist. Subsequently, a systematic literature review was conducted to identify problems in research relating to teachers' attitudes toward reporting child sexual abuse, which resulted in the original survey (Teacher Reporting Questionnaire) being shortened to develop a new scale (Walsh et al., 2010). The Teacher Reporting Questionnaire (TRQ) was pilot tested and refined in a five-stage process involving an expert review panel, structured focus group, cognitive interviews, and field testing with a convenience sample of 21 teachers from a Queensland non-government school (Walsh et al., 2010). Since then, multiple versions were developed to account for nuances in the reporting laws and organizational policies for different school systems in different jurisdictions in Australia.

The New South Wales Government Schools version of the Teachers' Reporting Attitude Scale for Child Sexual Abuse (TRAS-CSA) (2010), aimed to develop an

evidence based project to assess one main concern summarized by the question "what

practical and legal outcomes appear to be produced by different laws and policies

requiring teachers to report suspected child sexual abuse?" A cross-sectional self-report

teacher survey was conducted in the three states: New South Wales, Queensland and

Western Australia. The participating states were purposively selected for this study based

on their different legislative reporting obligations for teachers. Teachers in primary

schools educating 5-12 years old students were targeted because most sexual abuse is

perpetrated against children in this age group (Mathews et al., 2010).

     According to Mathews et al. (2010) results from this research may fill existing

gaps in knowledge, assist with future legislative reform, policy reform, and training

efforts to enhance teachers' attitudes and reporting effectiveness regarding child sexual

abuse. The research aimed to gather evidence concerning teachers' training about the

mandated reporting duties, their knowledge of the legislative and policy-based reporting

duties, their attitudes towards the responsibility to report, their past reporting practice and

anticipated future reporting practice, and future training requirements (Mathews et al.,

2010).

     The more specific aims included the generation of evidence concerning:

     (a) teachers' knowledge of the legislative reporting duty;

     (b) teachers' knowledge of the school policy-based reporting duty;

     (c) teachers' actual past reporting practice; and

     (d) teachers' anticipated future reporting practice (Mathews, et.al, 2010).

Present Study

Disclosure of abuse is intended to initiate a process that stops child maltreatment (Alaggia & Kirshenbaum, 2005). There are a plethora of studies that have identified factors that facilitate disclosure. Many of these studies have explored how child, familial, community, cultural, and societal factors influence the disclosure process (McElvaney et al., 2014). This study examined the factors that may affect school personnel's implementation of mandated reporter procedures after student disclosure of CSA, with a focus on how school personnel think, reason, and act after a student discloses suspected CSA.

Children spend most of their time in school. Therefore, school personnel have significant roles in protecting children by being mandated reporters. More than two-thirds (68.6%) of all reports of alleged child abuse or neglect were made by professionals. The term "professional" means that the person who was the source of the report had contact with the alleged child maltreatment victim as part of his or her job. The most common professional report sources were education personnel (21.0%), legal and law enforcement personnel (19.1%), medical personnel (11.0%), and social services staff (10.3%; Child Welfare Information Gateway, 2021). School personnel must possess the necessary training to be prepared to fulfill their professional role as mandated reporters. However, there are several factors that influence the effectiveness of school personnel's reporting practice. In light of these factors, it is necessary to know the current state of their training, knowledge, and confidence about child sexual abuse so that school authorities can determine whether training needs to be developed or enhanced (Mathews, 2011).

Child abuse laws exist on the federal, state, and local levels. The Child Abuse

Prevention and Treatment Act (CAPTA), passed by the federal government in 1974 and

reauthorized in 2010, is the largest body of legislation concerning the fair, ethical, and

legal treatment of children. It is intended to keep them free from all forms of abuse

including physical, sexual, emotional, and psychological (The CAPTA Reauthorization

Act of 2010). According to the Pennsylvania Department of Human Services, Act 126,

(2014) all school entities (a public school, charter school, cyber charter school, private

school, nonpublic school, intermediate unit, or area vocational-technical school) and

independent contractors of school entities provide child abuse recognition and reporting

training to all employees, including contracted substitute teachers who have direct contact

with children (Rizvi et al., 2021).

In Pennsylvania, additionally, on December 18, 2013, Governor Corbett signed

Act 120 of 2013 (SB 34), making significant changes to the Educator Discipline Act.

Those changes, which became effective February 18, 2014, include enhanced mandatory

reporting requirements. There have also been substantial changes to the Child Protective

Services Law (CPSL) that significantly impact mandated reporters. According to the

Department of Health and Human Services

(https://www.childwelfare.gov/topics/responding/reporting/mandated/), mandated

reporters are certain adults legally required to report suspected child abuse if they have

reasonable cause to suspect that a child is a victim of child abuse. School employees are

one of the many adults who are considered mandated reporters and are required to report

suspected child abuse if they have reasonable cause to suspect that a child is a victim of

child abuse. Failure to report is a Class B misdemeanor as a negligent party, and fines

may be associated with the offense. In many cases, a report of suspected abuse may be the only hope a student or family has to receive protection or help (Cruise, 2010).

However, school personnel are reluctant to report child abuse and neglect (Kenny, 2004). In one study, 84% of suspected abuse cases in the schools were never reported (Kesner & Robinson, 2002). According to (Cruise, 2010), school personnel may feel that they are insufficiently trained in detecting child maltreatment or lack sufficient knowledge about legal standards and reporting procedures. In South Australia, Hawkins and McCallum (2001) found that teachers with recent training had more confidence recognizing indicators of abuse, were more knowledgeable about their reporting responsibilities, and were better prepared to follow reporting procedures. Teachers without training or recent training were likely to have significant gaps in knowledge about their reporting duty. They were less likely to understand the nature and seriousness of child abuse. Studies in the United States have found inadequate levels of teacher training about indicators of abuse and reporting processes. A study found widespread views that teachers had not received adequate training about child abuse and reporting requirements (Kenny, 2001). Significant knowledge gaps were also found in a study of 200 teachers, including a lack of knowledge about making reports (Kenny, 2004).

According to the study (Cruise, 2010), a self-report survey examined the adequacy of pre-service or in-service training to identify indicators of sexual abuse and to follow reporting procedures, self-rated confidence in identifying indicators of child sexual abuse, and self-rated knowledge of indicators of sexual abuse. The survey was conducted with teachers in primary schools for children aged 5-12 years, as most sexual abuse is perpetrated against children in this age group (Finkelhor et al., 1990). The study

found that for the adequacy of in-service training to follow reporting processes, a

difference suggested more effective training at in-service than pre-service (Mathews,

2011). However, a significant proportion of respondents had not received any in-service

education. This finding may indicate that in-service training needs to pay more attention

to clearly explaining how a teacher makes a report after developing reasonable suspicion

of sexual abuse (Mathews, 2011).

   A few published state-based surveys have examined school personnel's training,

knowledge, and confidence. Some of these studies have assessed teachers' attitudes

towards reporting child sexual abuse. Studies identified numerous shortcomings, leading

to inadequate teachers' attitudes toward reporting CSA. Walsh et al. (2010) developed a

rating scale measure that was broad but sufficiently discriminating (Ajzen, 2005) and

sensitive enough to accurately measure the target construct (Krosnick et al., 2005),

defining teachers' attitudes toward reporting CSA. It measured the factors that affect

teachers' decisions not to report child abuse cases.

   Australian researchers developed the Teacher Reporting Attitudes Scale (TRAS)

through a systematic literature review, a 5-point validation, and a testing process (Walsh

et al., 2010). The 21-item scale includes items that assess teachers' concerns about

reporting consequences and knowledge of their duty to report CSA according to

educational authority policy or formal school policy, including reporting mechanisms at

their school and whether they had ever reported CSA (Madrid et al., 2020). This study

was conducted to improve the teachers' and students' knowledge, skills, and attitudes on

CSA disclosure, identification, and reporting (Madrid et al., 2020). This research was a

two-phase proof-of-concept cross-sectional study, where Teacher Reporting Attitudes

Scale for Child Sexual Abuse or TRAS – CSA, English version (Walsh et al., 2010) was

used in Phase I to measure teachers' knowledge of child abuse reporting processes,

knowledge of their duty to report, and attitudes toward reporting. The results suggested

significant changes in the teachers' attitudes towards reporting CSA when comparing

pre-test and post-test results. There was a general decrease in the teachers' apprehension

and fear of getting into trouble reporting CSA cases after the training. The training also

increased the confidence of teachers in identifying CSA. Before the training, only 25% of

the teachers reported being confident about identifying CSA (Madrid et al., 2020).

Permission to use and adapt this scale was granted on 12/08/2021 from Professor

Kerryann Walsh via email (see Appendix D).

CHAPTER 3: METHODS

This study used a quantitative research design to examine school personnel's attitudes and knowledge regarding mandated reporting child sexual abuse after student disclosure. The study used a cross-sectional survey methodology that included a single survey instrument. A cross-sectional study was chosen because participants were selected based on the inclusion criteria of this study.

Inclusion/Exclusion Criteria

In order to participate in the study, participants had to meet two main criteria. The first criterion was that respondents had to be at least 18 years of age or older and the second was that they needed to be currently employed by educational institutions serving students between Kindergarten and 12th grades. School personnel working in early childhood or post-secondary education were excluded from the study.

Participants

Participants were recruited via announcements to email lists and social media groups (Appendix A and Appendix B). The announcements were distributed to school personnel in the investigator's professional network, including an alumni listserv, and posted to special-interest groups on social media (e.g., Facebook and LinkedIn). The respondents were 100 school personnel who were currently employed by educational institutions serving students between Kindergarten and 12th grades. Table 1 provides demographic information on the respondents.

Table 1

Demographic Information of School Personnel

Demographic Variable		*N*	Percentage
Gender	Male	10	10%
	Female	89	89%
	Non-Binary	1	1%
	Rather not say	0	0
Age	18-24 years	1	1%
	25-34 years	40	40%
	35-44 years	35	35%
	44-54 years	12	12%
	55-64 years	11	11%
	Over 65 years	1	1%
Martial Status	Single	45	45%
	Married	51	51%
	Separated or divorced	3	3%
	Widowed	1	1%
Parent or Guardian	Yes	59	59%
	No	41	41%
Qualification	High School Diploma	8	8%
	Bachelor's Degree	7	7%
	Graduate Diploma	2	2%
	Master's Degree	58	58%
	Phd or Pro Doctorate	15	15%
	Other	10	10%
Occupation	Teacher	21	21%
	Administration	8	8%
	School Psychologist	40	40%
	School Nurse	1	1%
	School Counselor	8	8%

	Dean	1	1%
	Other	21	21%
Years in Current Position	<1	8	8%
	1-2 years	6	6%
	3-5 years	20	20%
	6-10 years	22	22%
	11+ years	44	44%
Years at Current School	<1	22	22%
	1-2 years	15	15%
	3-5 years	28	28%
	6-10 years	20	20%
	11+ years	15	15%

The hope in distributing the survey to various social networks and national groups was to get as wide and as diverse cross-sampling of respondents as possible. Finally, individuals who received the announcement and participants who completed the survey were encouraged to share information about the survey with other educators in their professional networks. All school personnel who participated in the survey did so on a strictly voluntary basis and were alerted that they were able to discontinue their participation at any time. No identifying information about individual participants, or the schools where they worked, was collected. Participants entered into a $25 gift card raffle after the completion of the survey if they wanted. The emails collected from the survey were kept separate from survey responses so that all responses could remain anonymous. There were two raffle winners and they were sent gift cards for $25 each on May 2nd, 2023.

Measures

Survey Instrument

The survey (Appendix C) included questions pertaining to demographic information, including the participant's gender, age, race, number of years in practice, and grade level of children with whom they work. In addition to the demographic data, the survey consisted of several Likert scales to assess each participants knowledge and attitudes towards reporting child sexual abuse after disclosure. Permission to use and adapt the TRAS scale was granted on 12/08/2021 from Professor Kerryann Walsh via email (see Appendix D).

Teacher Reporting Attitudes Scale for Child Sexual Abuse or TRAS-CSA

The Teacher Reporting Attitudes Scale for Child Sexual Abuse or TRAS-CSA is used to measure teachers' knowledge of child abuse reporting processes, knowledge of their duty to report, and attitudes toward reporting. It measures the factors that affect teachers' decisions not to report child abuse cases. This tool has been validated in Australian and Malaysian contexts (Choo et al., 2013; Walsh et al., 2010; Walsh & Rassafiani et al., 2012b). Developed by Australian researchers through a systematic literature review, a 5-point validation, and testing process (Walsh et al., 2010), the 21-item scale includes items that assess teachers' concerns about reporting consequences and knowledge of their duty to report CSA according to educational authority policy or formal school policy, including reporting mechanisms at their school, and whether they had ever reported CSA. Internal consistency reliability for the 23-item survey was moderate ($\alpha = .745$). Items 17 and 18 were found to correlate poorly with the target

constrict and were removed yielding a moderately high adjusted alpha coefficient of $\alpha =$ .81, also making the scale more reliable for use as a predictor variable.

The attitude scale (TRAS-CSA) was part of a longer survey used with teachers in Australia (known as the teacher reporting questionnaire; TRQ). These novel scales were developed to account for nuances in the reporting laws and organizational policies for different school systems in different jurisdictions in Australia. There have been several scholars who have used the TRQ and adapted it to fit their study. For the purposes of this study the author utilized the New South Wales Government Schools version. The broad aim of this study was to explore the outcomes produced by different legislative and policy contexts regarding teachers reporting of child sexual abuse, and to explore the extent and probable cause of both failure to report, and unnecessary reporting (Mathews et al., 2010). The TRQ has been used in empirical research in child sexual abuse, and in analysis of State legislation and school policies (Mathews et al., 2010).

The TRQ comprised eight sections: (i) teacher demographics, (ii) work-place role, (iii) education and training, (iv) CSA reporting history, (v) attitudes toward reporting CSA, (vi) knowledge of CSA reporting duty under policy, (vii) knowledge of CSA reporting duty under legislation, and (viii) six CSA scenarios. Due to the construct of the current study and suggested adaptations from an author, several items were removed from the TRQ survey (knowledge of CSA reporting duty under legislation, six scenarios concerning possible cases of CSA, and inquiries a and b from question number 11).

The New South Wales Government Schools reported their findings utilizing a descriptive summary statistic (frequencies and percentages) and inferential statistics (mean, standard deviations, and range of scores). They chose to organize their data

according to the key elements of the survey, training, actual past reporting practices, knowledge of the legislative reporting duty, knowledge of the policy based reporting duty, attitudes towards reporting child sexual abuse, and confidence (Mathews et al., 2010).

Procedures

A letter of introduction was sent to administrators of educational institutions for permission to conduct an online-based survey of school personnel (Appendix A). The letter included the purpose of the study. This letter included the length of time required to take the survey, the anonymity of participants, and participants' ability to opt out of the survey by not completing the survey.

CHAPTER 4: RESULTS

The survey questions from the Examining School Personnel's Attitudes and

Knowledge of Mandated Reporting Survey (Appendix C) are presented below.

Research Question 1: Perceptions of Competence in Reporting

The first research question in the present study targeted the difference in

mandated reporting training related to school personnel's perceptions around their

competence in making a report of suspected child sexual abuse. It was hypothesized that

school personnel that received mandated reporter training would have a higher level of

competence regarding making a report of suspected child sexual abuse compared to

those who have not had training. Descriptive statistics were used to analyze questions 9,

12, and 15 on the TRAS-CSA in order to answer this question.

Respondents were asked if they had any pre-service education related to child

sexual abuse. If participants answered "No" to this question, they were then directed to

question number 12. Questions 10 and 11 asked respondents for necessary information

regarding their sexual abuse training. Therefore, if the respondents did not receive child

abuse training, they were not required to answer these questions. Of the 100 participants

who responded to this question, the majority (72%, $n = 72$) responded that they had, and

fewer respondents (28%, $n = 28$) responded that they did not have any preservice child

abuse education.

Participants were asked if they had any formal in-service training related to child

sexual abuse. Of the 97 who responded, the majority (74.23%, $n = 72$) endorsed that they

had formal child abuse training during their employment, and fewer responded that they

had not (25.77%, $n = 25$). If participants answered "no" to this question, they were then

directed to question number 15. Questions 13 and 14 asked respondents for necessary

information regarding school personnel's attitudes toward how adequately their in-

service training prepared them to identify and report an incidence of child sexual abuse.

Therefore, if the respondents did not receive child abuse training, they were not required

to answer the questions.

Table 2

Percentage of Respondents Who Answered Both Questions of Having Pre and/or In

Service Training Related to Child Abuse

Answers	Percentage
Yes to preservice training / yes to in-service training	49% ($n = 49$)
Yes to preservice training / no to in-service training	20% ($n = 20$)
No to preservice training / yes to in-service training	23% ($n = 23$)
No to preservice training / no to in-service training	5% ($n = 5$)
Yes to preservice training / n/a	3% ($n = 3$)

Research Question 2: School Policy and Personnel's Decision

The second research question in the present study examined whether or not school policy impacts school personnel's decision to report child sexual abuse. It was hypothesized that school policy would affect school personnel's decision to make a child sexual abuse report.

Table 3

Percentage of Respondents Who Answered Section (F) Knowledge of Mandate Reporters Duties to Report Child Sexual Abuse Under Educational Policy or Formal School Policy?

Answers	Percentage
Yes	84.52% ($n = 71$)
No	2.38% ($n = 2$)
Not Sure	13.10% ($n = 11$)
Skipped Question	0% ($n = 16$)

Table 4

Do You Think That You are Familiar Enough with Reporting Duty Under Your Educational Institution Policy in Which You Are Employed to Answer Questions About It?

Response	Percentage
Yes	87.32% (*n* = 62)
No	12.68% (*n* = 9)
Not Sure	0% (*n* = 29)

Table 5

Attitude and Knowledge Towards Educational Institution Policies

Under the policy, I must report:	Percentage
All reasonable suspicion of child sexual abuse, no matter who the suspected perpetrator is	97% (*n* = 60)
Only reasonable suspicions of child sexual abuse.	2% (*n* = 1)
I am unsure	2% (*n* = 1)

Under the policy, I must report:	Percentage
Only when I am certain that the child has been or is being sexually abused	4.8% (*n* = 3)
Whenever I have reasonable suspicions that a child has been or is being sexually abused.	95.2% (*n* = 59)
I am unsure	0% (*n* = 0)

Under the policy, I must report child sexual abuse:	Percentage
Only when I think that the child is suffering (or at the risk of suffering)	7.7% (*n* = 11)
Even when I think the harm to the child is insignificant or there is no apparent harm at all.	5.8% (*n* = 47)
I am unsure	6.5% (*n* = 4)

Under the policy, I must report child sexual abuse:	Percentage

Only when I think it has already happened.	19.4% ($n = 12$)
When I think it has already happened, or, when I think it is likely to occur in the future.	75.8% ($n = 47$)
I am unsure	4.8% ($n = 4$)

Under the policy, I should generally report to:	Percentage
School administration (Principle, Superintendent)	3.2% ($n = 2$)
Designated mandated statewide child protective services program	25.8% ($n = 16$)
Both of the above answers	69.4% ($n = 43$)
I am unsure	1.6% ($n = 1$)

Under the policy, if I make a report in good faith, my identity as the reporter. *is protected from disclosure:*	Percentage
Yes	77.4% ($n = 48$)
No	13% ($n = 8$)
I am unsure	9.6% ($n = 6$)

Research Question 3: Mandated Reporter Training and Knowledge

The third research question in the present study targeted how school personnel's attitudes about reporting child sexual abuse may impact their decision to make a child sexual abuse report.

It was hypothesized that school personnel who have had mandated reporter training would be more knowledgeable and have a more positive attitude towards reporting child sexual abuse than those who have not had training.

Table 6

Percentage of Respondents of School Personnel Who Had Mandated Reporter Training and Attitudes

Attitude Component: Commitment to the Reporting Role				
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	*n*	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I plan to report child sexual abuse when I suspect it.	81	1.2%	3.8%	95%
It is important for teachers to be involved in reporting child sexual abuse to prevent long-term consequences for children.	81	3.7%	7.4%	88.9%
I would like to fulfill my professional responsibility by reporting suspected cases of child sexual abuse.	81	3%	7%	90.%
Reporting child sexual abuse is necessary for the safety of children.	81	2.5%	2.5%	95%
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	*n*	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
Reporting child sexual abuse can enable services to be made available to children and families.	81	11.1 %	9.9%	79%
Child sexual abuse reporting guidelines are necessary for teachers.	81	3.7%	2.5%	93.8%

The procedures for reporting child sexual abuse are familiar to me.	81	4.9%	13.6%	81.5%
I feel emotionally overwhelmed by the thought of reporting child sexual abuse.	81	43%	30%	27%

Table 7

Percentage of Respondents of School Personnel Who Had Mandated Reporter Training

Attitude Component: Confidence in the System's Effective Response to Reports				
In relation to reporting. child sexual abuse, to what extent do you agree or disagree with the following statements?	n	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I lack confidence in the authorities to respond effectively to reports of child sexual abuse.	81	40%	37%	23%
It is a waste of time to report child sexual abuse because no one will follow up on the report.	81	83%	15%	2%
I will consult with an administrator before I report child sexual abuse.	81	17%	15%	68%

Table 8

Percentage of Respondents of School Personnel Who Had Mandated Reporter Training

Attitude Component: Concerns About the Consequences of Reporting				
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	*N*	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I would find it difficult to report child sexual abuse because it is hard to gather enough evidence.	80	75%	15%	10%
I would still report child sexual abuse even if my school administration disagreed with me.	81	5%	10%	85%
I would be apprehensive to report child sexual abuse for fear of family/community retaliation.	81	80.2%	6.2%	13.6%
I would be reluctant to report a case of child sexual abuse because of what parents will do to the child if he/she is reported.	81	74.1%	8.6%	17.3%
Teachers who report child sexual abuse that is unsubstantiated can get into trouble.	81	72%	16%	12%

In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	N	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I would consider not reporting child sexual abuse because of the possibility of being sued.	81	86.5%	8.6%	4.9.%
I believe that the current system for reporting child sexual abuse is effective in addressing the problem.	80	31.2%	42.5%	26.3%
I would not report child sexual abuse if I knew the child would be removed from their home/family.	80	96.3%	1.2%	2.5%
A child sexual abuse report can cause a parent to become more abusive toward the child.	81	10%	46%	44%
There is a lot of sensitivity associated with reporting child sexual abuse.	81	5%	11%	84%

Table 9

Percentage of Respondents of School Personnel Who Did Not Have Mandated Reporter Training

Attitude Component: Commitment to the Reporting Role

In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	n	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I plan to report child sexual abuse when I suspect it	3	0%	0%	100%
It is important for teachers to be involved in reporting child sexual abuse to prevent long-term consequences for children.	3	0%	0%	100%
I would like to fulfill my professional responsibility by reporting suspected cases of child sexual abuse.	3	0%	0%	100%
Reporting child sexual abuse is necessary for the safety of children.	3	0%	0%	100%
Reporting child sexual abuse can enable services to be made available to children and families.	3	0%	0%	100%

In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	n	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
The procedures for reporting child sexual abuse are familiar to me.	3	33%	67%	0%
I feel emotionally overwhelmed by the thought of reporting child sexual abuse.	3	33.3%	33.3%	33.3%

Table 10

Percentage of Respondents of School Personnel Who Did Not Have Mandated Reporter Training

Attitude Component: Confidence in the System's Effective Response to Reports				
In relation to reporting. child sexual abuse, to what extent do you agree or disagree with the following statements?	*n*	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I lack confidence in the authorities to respond effectively to reports of child sexual abuse.	3	67%	0%	33%
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	*n*	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
It is a waste of time to report child sexual abuse because no one will follow up on the report.	3	67%	0%	33%
I will consult with an administrator before I report child sexual abuse.	3	0%	0%	100%

Table 11

Percentage of Respondents of School Personnel Who Did Not Have Mandated Reporter Training

Attitude Component: Concerns About the Consequences of Reporting				
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	N	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I would find it difficult to report child sexual abuse because it is hard to gather enough evidence.	3	33.3%	33.3%	33.3%
In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	N	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
I would be apprehensive to report child sexual abuse for fear of family/community retaliation.	3	33.3%	33.3%	33.3%
I would be reluctant to report a case of child sexual abuse because of what parents will do to the child if he/she is reported.	3	67%	0%	33%
Teachers who report child sexual abuse that is unsubstantiated can get into trouble.	3	33%	33%	33%

I would consider not reporting child sexual abuse because of the possibility of being sued.	3	67%	0%	33%
I would not report child sexual abuse if I knew the child would be removed from their home/family.	3	67%	0%	33%

In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements?	N	Strongly Disagree/ Disagree	Neutral	Strongly Agree/ Agree
There is a lot of sensitivity associated with reporting child sexual abuse.	3	0%	0%	100%
I believe that the current system for reporting child sexual abuse is effective in addressing the problem.	3	67%	0%	33%

Research Question 4: Student Support Positions vs. Teaching Positions

       The fourth research question in the present study targeted how child abuse reporting may vary by professional roles within the school. It was hypothesized that school personnel in student support positions would have a higher level of knowledge than personnel in teaching positions regarding reporting child sexual abuse.

Table 12

Have You Ever Reported Child Sexual Abuse – Sorted by Role

Roles	No	Yes
Adminstration	33.3% ($n = 9$)	66.7% ($n = 9$)
School Counelsor	14.3% ($n = 7$)	85.7% ($n = 7$)
School Psychologist	60.5% ($n = 38$)	39.5% ($n = 38$)
Teacher	80% ($n = 20$)	20% ($n = 20$)
Other	77.8% ($n = 18$)	22.2% ($n = 18$)

Table 13

Have You Ever Suspected Child Sexual Abuse but Decided Not to Report It?

n	No	Yes	No Answer
93	88	5	7

Table 14

Participants Who Endorsed That They Suspected Child Sexual Abuse but Decided Not to Report

Gender	Highest qualification	Current position	How many years have you worked as a staff member?	Have you had any pre-service education related to child sexual abuse?	How adequately did your pre-education prepare you?	Have you had any in-service training related to child sexual abuse?	How adequately did your in-service training prepare you?
Female	Master's	Teacher	6-10 years	No	N/A	Yes	Most adequately
Female	Master's	Other	3-5 years	No	N/A	Yes	Neutral
Female	PhD or professional Degree	School Psychologist	3-5 years	Yes	Most adequately	Yes	Most adequately
Non-Binary	Graduate Degree	School Nurse	3-5 years	Yes	Inadequately	No	N/A
Female	Master's	School Psychologist	1-2 years	Yes	Neutral	No	N/A

CHAPTER 5: DISCUSSION

The current study aimed to improve the identification, treatment, and prevention of child sexual abuse by better understanding the barriers to mandated reporting in child-serving institutions. This aim was researched using the Teacher Reporting Attitude Scale: Child Sexual Abuse (TRAS-CSA). The study's data was obtained from school personnel defined as employees who directly work with school-age students in the K-12 grades. In addition, this study wanted to examine school personnel's competence in making suspected child abuse report and school personnel's attitudes about reporting suspected child abuse. The goal was to explore how school personnel think, reason, and act when students disclose CSA. This study examined the difference in reporting between professional roles within a school. A total of 100 school personnel responded to the survey detailing their answers. The following sections discuss the findings of this study as they relate to the current research questions and hypothesis, the limitations of this study, clinical implications, and direction for future research.

Summary of Findings

Research Question 1: Perceptions of Competence in Reporting

The first research question examined the difference in mandated reporting training related to school personnel's perceptions of their competence in reporting suspected child sexual abuse. It was hypothesized that school personnel that received mandated reporter training would have a higher level of competence regarding making a report of suspected child sexual abuse than those who have not had any training. This study found that the majority of respondents (95%) received training around mandatory reporting, either pre-service or in-service, or some combination of one or both. Only 5% of respondents

reported having neither pre-service nor in-service training, which suggests that most of the sample had training on mandatory child abuse reporting.

Survey results indicated that of the respondents who endorsed having mandated reporter training related to reporting suspected child sexual abuse ($n = 95$), only half had pre-and in-service training ($n = 49$). Furthermore, under a quarter of the school personnel had pre-service ($n = 20$), and about another quarter had only in-service mandated reporter training related to reporting suspected child sexual abuse ($n = 23$). Some school personnel omitted ($n = 3$) their answers regarding if they had in-service training, and another small number did not have any pre-or in-service training ($n = 5$). This research aligns with the results from Hawkins and McCallum (2001), which suggest that "teachers with training had more confidence recognizing indicators of abuse, were more knowledgeable about their reporting responsibilities, and were better prepared to follow reporting procedures. Teachers without training or recent training were likely to have significant gaps in knowledge about their reporting duty. They were less likely to understand the nature and seriousness of child abuse." (p. 311).

When comparing data between school personnel who had training to those who had not, more than half (73.9%) of the participants who received mandated reporter training endorsed that they had "some" confidence in their ability to identify indicators of child sexual abuse. By contrast, only 5.7% of school personnel endorsed having "little to no" confidence in identifying indicators of child sexual abuse. The majority of the participants (80%) who had not received any mandated reporting training endorsed that they felt "neutral" when asked about their confidence regarding their ability to identify indicators of child sexual abuse. The majority of respondents (73.9 %) reported having

some to a lot of confidence in their ability to report child abuse. Since the overwhelming

majority also reported having some training, this supports the idea that having training

may also be associated with having more confidence in making reports. This suggested

that school personnel who received mandated reporter training may have a higher level of

competence regarding making a report of suspected child sexual abuse than those who

have not had any training. Consistent with the current study, Hawkins ans McCallum's

(2001) research on mandatory notification training for suspected child abuse and neglect

found that relative to untrained respondents, trained respondents were more confident in

their ability to recognize the indicators of abuse and neglect.

Research Question 2: School Policy and Personnel's Decision

The present study's second research question examined whether school policy

impacts school personnel's decision to report child sexual abuse. It was hypothesized that

school policy would effect school personnel's decision to make a child sexual abuse

report. This study found that the majority of school personnel indicated that the

educational institution in which they are employed has a formal policy under which

school personnel must report suspected child sexual abuse. Additionally, around a tenth

of school personnel ($n = 11$) indicated they were "unsure" if their educational institution

had a formal policy. The least common answer indicated was that school personnel's

educational institution did not have a formal policy ($n = 2$) under which school personnel

must report suspected child sexual abuse. When assessing whether school personnel

indicated they were familiar enough with the reporting duty under their educational

institution policy, the majority indicated that they were familiar enough to answer

questions ($n = 62$). The majority of respondents also reported that their institutions had a

child abuse reporting policy of which they were aware. This would suggest that educational institutions with a formal policy impact school personnel's decision to report child sexual abuse, ensuring that they report child sexual abuse.

This study also found that at least 75% or more of school personnel demonstrated sufficient knowledge in their understanding of educational institution policy of making a child sexual abuse report. Most participants answered correctly, indicating that school personnel are familiar with identifying and reporting suspected cases of child sexual abuse. These results are a hopeful indicator, given that teachers and other school personnel are in an optimal position to prevent, identify, and assist child abuse and neglect victims because of their frequent contact with students. Numerous studies have documented that schools have the critical primary function of providing essential education access to large populations of children on CSA prevention (Barron & Topping, 2013). Furthermore, Barron and Topping (2013) noted that if educational institutions have a formal policy under which school personnel must report suspected child sexual abuse, school personnel may be more familiar with the process. This will ensure that providers are adequately trained to identify and report sexual abuse appropriately. Kenny et al. (2008) indicated that the proper education of staff plays a significant role in their ability to respond appropriately to disclosures, make reports to authorities, and identify children who may be experiencing abuse.

When respondents were asked about their understanding and attitudes regarding their identity being held confidential, respondents noted the following statements: "Some state workers have released that info to parents. School administration don't disclose that info in my experience, but untrained or undertrained social workers have," "I believe

some agencies have shared with parents details that let them know who," "I want to say no because I am pretty sure a fellow teacher who reported neglect or physical abuse was identified to the family." These comments may suggest that even though educational institutions may have formal policies for reporting child sexual abuse, school personnel may be reluctant to report it due to concerns about a potential breach of confidentiality of their identity to the victim's family or alleged perpetrator.

Research Question 3: Mandated Reporter Training and Knowledge

The third research question in the present study examined how school personnel's attitudes about reporting child sexual abuse may impact their decision to make a child sexual abuse report. It was hypothesized that school personnel who have had mandated reporter training would be more knowledgeable and have a more positive attitude towards reporting child sexual abuse than those who have not had training. To examine how school personnel's attitudes about reporting child sexual abuse may impact their decision to make a child sexual abuse report, the teacher attitude rating scale was taken from the teacher attitude rating scale (TRSA), which consists of three distinct attitude components: commitment to the reporting role, confidence in the system's effective response to reports, and concerns about the consequences of reporting. Respondents were provided with a 21-item scale designed to assess teachers' attitudes toward reporting suspected child sexual abuse. Response choices consist of a 5-point Likert-type format ranging from 1 (strongly agree) to 5 (strongly disagree), with a neutral midpoint. For this scale, items were both positively and negatively worded.

Commitment to the Reporting Role

The current study's findings show that school personnel's attitudes toward their commitment to the reporting role are closely aligned with mandated reporter standards and expectations. In regard to the respondents who had mandated reporter training related to child sexual abuse, the majority of school personnel indicated that they would report child sexual abuse when they suspected it. The respondents who did not have mandated reporter training related to child sexual abuse all indicated that they would report child sexual abuse when suspected.

Based on the information provided by the survey, among the respondents who had mandated reporter training related to child sexual abuse, the majority indicated agreement with the statements "the importance for teachers to be involved in reporting child sexual abuse to prevent long-term consequences for children, I will fulfill my professional responsibility by reporting suspected cases of child sexual abuse, reporting child sexual abuse is necessary for the safety of the child, reporting child sexual abuse can enable services to be made available to children and families, and that child sexual abuse reporting guidelines are necessary for teachers." All respondents who did not have any training all agreed to the above statements.

Subsequently, when respondents who had training were asked about their familiarity with reporting, the majority (81.5%) indicated agreement with the statement, "The procedures for reporting child sexual abuse are familiar to me." However, most of the respondents (67%) who did not have any training (n = 3), indicated that they were neutral towards the statement.

Of the three respondents who did not have the training, no one disagreed that "The procedures for reporting child sexual abuse are familiar to me." Lastly, the majority of the respondents who had training indicated that they disagreed with the statement, "I feel emotionally overwhelmed by the thought of reporting child sexual abuse." Out of the three respondents who did not have the training, there was no consistent answer.

Confidence in the System's Effective Response to Reports

The current study's findings show that the respondents who had training indicated a split between disagreeing and being neutral when providing their attitude towards the statement, "I lack confidence in authorities to respond effectively to reports of child sexual abuse." The majority of the respondents who did not have mandated reporter training related to child sexual abuse indicated that they disagreed with the statement, suggesting that they did feel confident in reporting suspected child abuse to authorities. When asked about their attitude towards the statement, "It is a waste of time to report child sexual abuse because no one will follow up on the report," the majority of the respondents who had training disagreed with the statement. The majority of the respondents who did not have mandated reporter training related to child sexual abuse indicated that they disagreed with the statement as well.

Lastly, in regard to the statement, "I will consult with the administrator before I report child sexual abuse," all of the respondents who did not have mandated reporter training agreed with the statement, while the majority (68%) but not all, of the respondents who had training agreed with the statement. These findings support the findings of Hamilton-Giachritsis et al., (2020) who found that "the support of the administrative team was a common thread."

Additionally, Blakey et al. (2019) noted, "Another program-related factor that affected disclosures were the procedures that the school followed when children reported abuse. Procedures included the notification of school counselors, assistant principals/principals, and/or school nurses. This was particularly troubling when child protection workers decided not to investigate the abuse, and the school professionals still notified parents that their children disclose abuse" (p. 9). While most respondents in the current survey endorsed that they would contact their school administration first, some may not due to fear of their identity being disclosed. For example, in reference to the question, "Under the policy, if I make a report in good faith, my identity as the reporter is protected from disclosure" a participant of this study noted, "I want to say no because I'm pretty sure a fellow teacher who reported neglect or physical abuse was identified to the family."

Concerns About the Consequences of Reporting

The majority of those who had received mandated reporting training (75%) endorsed attitudes and opinions consistent with best practices in the concerns about the consequences of reporting. Since the number of respondents who reported not receiving training ($n = 3$) was so low, no significant conclusions could be drawn about this group and the impact of their not having training.

The majority of respondents who had training (85%) agreed with the statement, "I would still report child sexual abuse even if my school administration disagreed with me." Of the three respondents who did not endorse having any training, two of those respondents indicated that they felt neutral with the statement. These results support the finding from this study that the school personnel who responded generally fulfill their

responsibility by reporting suspected cases of child sexual abuse as necessary for the child's safety and in accordance with local reporting guidelines. Additionally, school personnel appear to be abiding by Act 120 of 2013 (SB 34), legally requiring mandated reporters to report suspected child abuse if they have reasonable cause to suspect that a child is a victim of child abuse.

Research Question 4: Student Support Positions vs. Reaching Positions

The fourth research question in the present study examined how child abuse reporting may vary by professional roles within educational institutions. It was hypothesized that school personnel in student support positions would have a higher level of knowledge than personnel in teaching positions regarding reporting child sexual abuse. To test this hypothesis, a chi-square test was initially considered to be conducted to compare the level of knowledge of child abuse reporting of school personnel in student support positions and personnel in teaching positions.

However, a chi-square could not be done due to having only five respondents in one of the comparison groups. While in one previous study, 84% of suspected abuse cases in schools were never reported (Kesner & Robinson, 2002), similarly in the current study the overwhelming majority of respondents endorsed that they have not reported child abuse (62%). A closer look at the demographics and characteristics of the five respondents who endorsed that they did not report an incident of suspected child sexual abuse that they were aware of revealed a mix of professional roles, years of experience, and educational degrees (Table 1).

Looking more closely at the five respondents who endorsed that they ever suspected child sexual abuse but decided not to report it, four respondents identified as

females, and one identified as non-binary. This group consisted of two school

psychologists, one nurse, one teacher, and one respondent who categorized their role as

"other." All five respondents obtained a master's degree or higher in their respective

fields of education. With the exclusion of one of the school psychologists, each

respondent worked in their current role for three to ten years. Over half of the group had

pre- or in-service training on reporting child sexual abuse. However, only one respondent

had pre- and in-service training related to reporting child sexual abuse. Despite laws

stating that all school personnel are mandated reporters, in this study, there did appear to

be a very small group ($n = 5$, 5.4%) who reported that there was a situation where they

learned of abuse but did not report it. Because this group was so small and varied by

profession, it is not possible to draw conclusions about what may have differentiated

them from the majority of the respondents who stated that they had never decide to not

report suspected child abuse.

According to Mathews (2011), "there are several factors that influence the

effectiveness of school personnel's reporting practice. In light of these factors, it is

necessary to know the current state of the training, knowledge, and confidence about

child sexual abuse so that school authorities can determine whether training needs to be

developed or enhanced for staff" (p. 9). Additionally, Cruise (2010) noted that "School

personnel may feel that they are insufficiently trained in detecting child maltreatment or

lack sufficient knowledge about legal standards and reporting procedures" (p. 14). In

South Australia, Hawkins and McCallum (2001) found that teachers with recent training

had more confidence in recognizing indicators of abuse, were more knowledgeable about

their reporting responsibilities, and were better prepared to follow reporting procedures.

As school psychologists, we can help with seeking to improve the identification, treatment, and prevention of child abuse by better understanding the barriers to mandated reporting in child-serving institutions.

Given the prevalence of Child Sexual Abuse, school personnel should be equipped to utilize the proper procedures when students disclose information regarding suspected sexual abuse or give indications that they may be at risk of maltreatment, harm, or exploitation. The research done by Blakey et al. (2019) further supports the finding that school personnel-related factors consisted of actions and beliefs held by professionals within the school that facilitated or hindered disclosure. Findings from the current research study note that the five respondents indicated they suspected child sexual abuse but decided not to report it. When looking at how adequately in-service training prepared them, two respondents did not respond, one indicated they felt neutral, and two felt that their training prepared them to report child sexual abuse.

According to the Blakey et al. (2019) study, school personnel were not always clear whether a reported incident was abuse. Researchers advised school personnel to report anything meeting criteria for local reporting laws and let their respective state-mandated reporting organization determine whether or not the allegation was substantiated. Additionally, Blakey et al. (2019) found that school personnel were ambivalent about this approach and preferred more specific parameters. The researchers observed that school personnel often were more hesitant to act unless the reported incident was clear-cut. This raises the question of if the state-required one-time year-mandated training is adequate when training school personnel in specific procedures to make referrals to child protective services. Ideally, teachers and other school personnel

are in an optimal position to prevent, identify, and assist child abuse and neglect victims because of their frequent contact with students, and a more specific, step-by-step approach may be beneficial. A common theme of the studies of school-based sexual abuse programs was that when prevention programs are implemented along with continuing education courses and training for teachers, it is beneficial for students and their families.

Clinical Implications

Results from this study indicated that overall school personnel who responded to the study demonstrated sufficient knowledge in their understanding of educational institution policy and the law of making a child sexual abuse report, according to their self-reports. This suggests that school personnel may be familiar with identifying and reporting suspected cases of child sexual abuse. Adopting a trauma-informed school approach such as the National Child Traumatic Stress Initiative (NCTSI; 2022), can assist educators with understanding that the prevalence of adverse and traumatic childhood experiences happens more than many might believe. According to SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, "In a trauma-informed approach, all people at all levels of the organization or system have a basic realization about trauma and understand how trauma can affect families, groups, organizations, and communities as well as individuals" (p. 9).

Child Sexual Abuse (CSA) is very prevalent in the United States. According to a 2003 National Institute of Justice report, 3 out of 4 adolescents who have been sexually assaulted were victimized by someone they knew well. The effects of Child Sexual Abuse are variable, with up to half of children showing no symptoms and others with

long-standing severe consequences (Clayton et al., 2018). As previously stated,

educational institutions can adopt systems and policies that will better equip them with

providing school personnel with the training and education that will provide them with

the knowledge and skills to support students who disclose child sexual abuse. This

standard practice benefits all stakeholders, as many barriers prevent the disclosure and

reporting of child sexual abuse. Removing these barriers puts educators one step closer to

identifying the problem and improving the identification, treatment, and prevention of

child abuse by better understanding the barriers to mandated reporting in child-serving

institutions.

As found in this current study, a very small minority of respondents ($n = 5$)

decided not to report suspected child sexual abuse. The majority of the respondents who

suspected child sexual abuse reported the abuse. Therefore, while child abuse appears to

be a problem and is generally underreported, schools may still be where students have the

most chance of an adult reporting, as has been reported previously in the research. In

2009, more than 72% of all CSA cases were reported by the following professionals:

educational personnel, legal and law enforcement, social services staff, medical and

mental health practitioners, child daycare workers, and foster care providers (Paranal et

al., 2012). Providers must be adequately trained to identify and report sexual abuse

appropriately. Child abuse reporting decreased sharply when educational institutions shut

down three years ago due to the COVID-19 pandemic after school personnel no longer

had in person contact with students and families.

The findings suggest that overall, school personnel feel confident in making a

report of suspected child sexual abuse. Similarly, school personnel who demonstrated

sufficient knowledge in their understanding of their educational institution's policy indicated a familiarity with how to identify and report suspected cases of child sexual abuse.

Limitations

This study had several significant limitations. The first limitation of this study relates to the generalizability of the results. Regarding gender, only 10 of the 100 respondents identified as males, which suggests that this group was underrepresented in the sample. This limitation likely exists due to the demographics of the field of education overall. The ratio of women to men represented in the field of education is large, as there is a considerable gender gap. Higher percentages of public primary school teachers (89%) and principals (67%) than of public middle or high school educators are female (Merlin, 2022).

Another limitation of this study was that the results were recorded from a self-report survey. With self-report surveys, the accuracy and objectivity of responses may be difficult to gauge, as is how they interpret the questions and the meaning of the Likert scales. According to Rosenman et al. (2011), "Respondents are often biased when they report on their own experiences. Social norms and expectations either consciously or unconsciously influence respondents, as respondents are more likely to report experiences that are considered to be socially acceptable or preferred. When it comes to Likert scales, they can be subject to an individual inclination to give an extreme or middle response to all questions" (p. 8). Additionally, selection bi/as may have also occurred in that those staff who feel most comfortable around this topic are more likely to respond, and staff who are less comfortable are less likely to respond and complete the

survey. It is also possible that the topic is triggering for some staff who have had their own experiences of abuse or exposure to trauma, and this group may have also been dissuaded from responding. Therefore, possibly resulting in a barrier to honest self-disclosure by respondents that may have been fearful of potential legal consequences, since in all jurisdictions, failure to fulfill mandate reporting duties carries with it various penalties and fines.

Another limitation of this study is that this attitude scale was initially designed to assess primary school teachers' reporting of child sexual abuse in New South Wales, Queensland, and Western Australia. Therefore, the scale's items have been adapted to fit the scope of this study, which is being used in a different cultural context, the United States. It should also be noted that conducting such a study in a school environment may prompt school personnel to think about or reflect on the core construct, discuss it or research it, and perhaps even change their attitudes toward it.

The final limitation of this study was the small sample size and possibly insufficient depth regarding survey questions and data collection due to recruitment problems. Therefore, it was difficult to determine the difference in effect size between groups who responded differently. Ideally, the best solution to gain more depth and understanding of participant responses would be to combine information from several sources and methods, including gathering more qualitative responses in addition to some of the responses provided by participants, which might paint a more accurate picture of attitudes and behavior around mandated reporting. Additionally, due to the small sample size of those who did not get trained or did not report if they were trained made it more difficult to get a clear picture of the barriers.

Future Directions

This project examined school personnel's attitudes and knowledge of mandated reporting. As research suggests, child sexual abuse is a complex problem which means that finding adequate interventions may also be complex. However, no intervention for a victim of child sexual abuse can occur without first identifying victims or potential victims and so it is important to consider the barriers to mandated reporting. This study suggests that researchers may utilize the TRSA along with qualitative interviews to get a fuller picture of the barriers to reporting child sexual abuse as school personnel. By adding qualitative interviews, research may learn more specific information about what situations might make school personnel less inclined to report and why.

Additionally, future research may want to examine the potential differences in state regulations regarding mandating reporting. Researchers may want to examine school personnel's attitudes and knowledge on mandated reporting and compare state regulations as it may provide greater insight and provide a more represented sample size. Examining the state regulations differences between states may show insight into how states may have similar laws but may diverge in some ways. Results from this analysis may provide law makers and school administration with data on how to best train and educate school personnel on accurately and efficiently reporting child sexual abuse.

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APPENDIX A

Recruitment Materials

Dear Principal/Head of School:

My name is Aigner Allen. I am a doctoral student in the school psychology program at Philadelphia College of Osteopathic Medicine in Philadelphia. I am conducting a survey called School Personnel's Attitudes and Knowledge of Mandated Reporting. I would like to give **ALL** your staff the opportunity to participate in this study. Surveys are anonymous. This survey may help us understand the barriers to mandated reporting in schools.

To participate your staff must be:

- Over the age of 18, AND
- currently employed in your school/district (K-12).

Risks and Benefits
The risk and possible benefits with this study are minimal. Participants may end the survey at any time.

By completing the survey, you are giving permission for your responses to be used in this research. If you are interested in participating, or would like more information, please click the link below.

Please feel free to contact me by phone at 215-359-7034 or by email at aa8266@pcom.edu.You may also contact Meredith Weber, PhD, NCSP, dissertation chair, at
meredithwe@pcom.edu.

The survey should take about 15-20 minutes to complete. Participants who complete the survey will enter a drawing to win a $25 gift card.

Thank you!
Aigner Allen, MS, LBS
Philadelphia College of Osteopathic Medicine
Psy.D. Doctoral Candidate

APPENDIX B

Recruitment Materials—Announcement for Social Media

Seeking Participants
Are you willing to complete a survey about knowledge and attitude around mandated reporting?

Study Description:
My name is Aigner Allen. I am a doctoral student in the school psychology program at Philadelphia College of Osteopathic Medicine in Philadelphia. I am conducting a survey called School Personnel's Attitudes and Knowledge of Mandated Reporting. I would like to you an opportunity to participate in this study. Surveys are anonymous. This survey may help us understand the barriers to mandated reporting in schools.

To participate you must be:
● Over the age of 18, AND
● currently employed at a school (K-12).

<u>Risks and Benefits</u>
The risk and possible benefits with this study are minimal. You may end the survey at any time.

By completing the survey, you are giving permission for your responses to be used in this research. If you are interested in participating, or would like more information, please click the link below.

The survey should take about 15-20 minutes to complete. Participants who complete the survey will enter a drawing to win a $25 gift card.

Feel free to share this with your flyer.

Please feel free to contact me by email at aa8266@pcom.edu.You may also contact Meredith Weber, PhD, NCSP, dissertation chair, at meredithwe@pcom.edu.

Thank you!,
Aigner Allen, MS, LBS
Philadelphia College of Osteopathic Medicine
Psy.D. Doctoral Candidate

APPENDIX C

Survey

Introduction to the survey:

My name is Aigner Allen. I am a doctoral student in the School Psychology program at Philadelphia College of Osteopathic Medicine. I am conducting a study called School Personnel's Attitudes and Knowledge of Mandated Reporting. I would like to give you the opportunity to participate in this study. Surveys are anonymous. This survey is for **ALL** school personnel. This survey may help us understand the barriers to mandated reporting in schools.

The survey should take approximately 15-20 minutes to complete. If you have any questions please feel free to contact me by email at aa8266@pcom.edu.You may also contact Meredith Weber, PhD, NCSP, dissertation chair, at meredithwe@pcom.edu.

The Institutional Review Board (IRB) at the Philadelphia College of Osteopathic Medicine has approved this study (#H22-031X). If you have additional questions or concerns regarding the rights of research participants you can call the PCOM office of Research Compliance at (215) 871-6783. Your participation is appreciated.

Inclusion criteria: Please indicate "yes" or "no" to the following questions:
1. Are you at least 18 years of age?
2. Are you currently employed by an educational institution serving students between Kindergarten and 12th grade?

The risk and possible benefits with this study are minimal. You may end this study at any time.

Survey Questions

Section A: Demographic Information

1. What is your gender?   ☐1 Male
                                            ☐2 Female

2. How old are you?   ☐1 18-24 years
                                            ☐2 25-34 years
                                            ☐3 35-44 years
                                            ☐4 44-54 years
                                            ☐5 over 65 years

3. What is your marital status?   ☐1 Single
                                                    ☐2 Married
                                                    ☐3 Separated or divorced
                                                    ☐4 Widowed

4. Are you a parent/guardian?   ☐1 Yes
                                                    ☐2 No

5. What is your highest qualification?   ☐1 High School Diploma/ GED
                                                    ☐2 Bachelor
                                                    ☐3 Graduate Diploma
                                                    ☐4 Masters
                                                    ☐5 PhD or Prof. Doctorate
                                                    ☐6 Other (please specify)

Section B: Work Information

6. Which of the following best   ☐ Teacher
describes the main part of   ☐Administration
your current job?   ☐ School Psychologist
                                                    ☐ School Nurse
                                                    ☐ School Counselor
                                                    ☐ Dean
                                                    ☐ Other (please specify)

Section B: Work Information

7. Including this school year, how many years have < 1year
you worked as a staff member?   ☐ 2-5 years
                                                    ☐ 6 -10 years
                                                    ☐ 11+ years

8. Of these years, how long have you worked in   < 1year
Your current school as school staff member?   ☐ 2-5 years
                                                    ☐ 6 -10 years
                                                    ☐ 11+ years

Section C: Education/Training Information

9. Have you had any pre-service education
related to child sexual abuse?   ☐1 Yes 2 No

If Yes, please answer Question a) and b)
If No, please go directly to Question 10

a) How adequately did your pre-service education prepare you to identify
indicators of child sexual abuse?

Inadequately Most adequately
□1 □2 □3 □4 □5

b) How adequately did your pre-service education prepare you to follow
reporting processes for child sexual abuse?

Inadequately Most adequately
□1 □2 □3 □4 □5

10. Have you had any formal in-service training related to child abuse?
□1 Yes □2 No

If Yes, please answer a) and b)
If No, please go directly to Question 11?

a) How adequately did your in-service training prepare you to identify
indicators of child sexual abuse?   Inadequately Most adequately
□1 □2 □3 □4 □5

b) How adequately did your in-service training prepare you to follow
reporting processes for child sexual abuse?

Inadequately Most adequately
□1 □2 □3 □4 □5

11. How much confidence do you have in your
ability to identify indicators of child sexual
abuse?

No confidence A great deal of
confidence
□1 □2 □3 □4 □5

12. How much knowledge do you have about
the indicators of child sexual abuse?

No knowledge A great deal of
knowledge
□1 □2 □3 □4 □5

Section D: Reporting Information

In this section, the term "reporting" refers to formal reports you have made to the school
principal, child protection authorities, police etc.

13. Is there an informed or knowledgeable staff member at your school with whom you can discuss your concerns about cases of child sexual abuse?

☐ 1 Yes
☐ 2 No

These questions are about your experience of reporting child sexual abuse as a staff member at a primary school.

14. Have you ever reported child sexual abuse?

☐ 1 Yes
☐ 2 No

15. Have you ever suspected child sexual abuse but decided not to report it?

☐ 1Yes
☐ 2 No -Survey directed Section E
(Attitudes about Reporting Child Sexual
Abuse)

16. If legislation at the time required you to report these cases, would you have reported them?

☐ 1 Yes
☐ 2 No

17. If educational authority policy or formal school policy at the time required you to report these cases, would you have reported them?

☐1 Yes
☐2 No

18. Generally, how important were the following factors in your decision(s) not to report these cases?
(Please mark one box ☐ per statement)

Very Important Important	Important	Somewhat Important	Not at All
4	3	2	1

a) I feared being sued for making an unsubstantiated report ☐4 ☐3 ☐2 ☐1
b) I feared retaliation by parent(s)/community members ☐4 ☐3 ☐2 ☐1
c) I feared reporting would cause more harm to the child than good ☐4 ☐3 ☐2 ☐1
d) I feared the child may be removed from his or her family ☐4 ☐3 ☐2 ☐1
e) I was concerned about possible damage to the school's relationship with the child/child's parents ☐4 ☐3 ☐2 ☐1
f) I did not know how to report ☐4 ☐3 ☐2 ☐1
g) I thought that child protective services were unlikely to provide effective help ☐4 ☐3 ☐2 ☐1
h) I did not have enough evidence to be sure abuse actually, happened ☐4 ☐3 ☐2 ☐1

i) I thought it was better to work through the issue with the family first ☐4 ☐3 ☐2 ☐1
j) Other reason (please specify) ………………………☐4 ☐3 ☐2 ☐1

Section E: Attitudes about Reporting Child Sexual Abuse

19. In relation to reporting child sexual abuse, to what extent do you agree or disagree with the following statements? (Please mark one box ☐ per statement)

Strongly Agree Disagree	Agree	Neutral	Disagree	Strongly
1	2	3	4	5

a) I plan to report child sexual abuse when suspect it. ☐1 ☐2 ☐3 ☐4 ☐5
b) I would be apprehensive to report child sexual abuse for fear of family/community retaliation. ☐1 ☐2 ☐3 ☐4 ☐5
c) I would be reluctant to report a case of child sexual abuse because of what parents will do to the child if he/she is reported. ☐1 ☐2 ☐3 ☐4 ☐5
d) The procedures for reporting child sexual abuse are familiar to me. ☐1 ☐2 ☐3 ☐4 ☐5
e) I would like to fulfil my professional responsibility by reporting suspected cases of child sexual abuse.
☐1 ☐2 ☐3 ☐4 ☐5
f) Reporting child sexual abuse is necessary for the safety of children. ☐1 ☐2 ☐3 ☐4 ☐5
g) I feel emotionally overwhelmed by the thought of reporting child sexual abuse. ☐1 ☐2 ☐3 ☐4 ☐5
h) I would not report child sexual abuse if I knew the child would be removed from their home/family.
☐1 ☐2 ☐3 ☐4 ☐5
i) Reporting child sexual abuse can enable services to be made available to children and families. ☐1 ☐2 ☐3 ☐4 ☐5
j) I would consider not reporting child sexual abuse because of the possibility of being sued. ☐1 ☐2 ☐3 ☐4 ☐5
k) There is a lot of sensitivity associated with reporting child sexual abuse. ☐1 ☐2 ☐3 ☐4 ☐5
l) Child sexual abuse reporting guidelines are necessary for teachers. ☐1 ☐2 ☐3 ☐4 ☐5
m) It is important for teachers to be involved in reporting child sexual abuse to prevent long-term consequences for children. ☐1 ☐2 ☐3 ☐4 ☐5
n) I believe that the current system for reporting child sexual abuse is effective in addressing
the problem.   ☐1 ☐2 ☐3 ☐4 ☐5
o) Teachers who report child sexual abuse that is unsubstantiated can get into trouble. ☐1 ☐2 ☐3 ☐4 ☐5
p) It is a waste of time to report child sexual abuse because no one will follow up on the report. ☐1 ☐2 ☐3 ☐4 ☐5
q) I would still report child sexual abuse even if my school administration disagreed with me. ☐1 ☐2 ☐3 ☐4 ☐5

r) I lack confidence in the authorities to respond effectively to reports of child sexual abuse. ☐1 ☐2 ☐3 ☐4 ☐5

s) I will consult with an administrator before I report child sexual abuse. ☐1 ☐2 ☐3 ☐4 ☐5

t) I would find it difficult to report child sexual abuse because it is hard to gather enough evidence. ☐1 ☐2 ☐3 ☐4 ☐5

u) A child sexual abuse report can cause a parent to become more abusive toward the child. ☐1 ☐2 ☐3 ☐4 ☐5

Section F: Knowledge of Teachers' Duties to Report Child Sexual Abuse under EDUCATIONAL AUTHORITY POLICY or FORMAL SCHOOL POLICY

Please answer to the best of your memory. Your answers will assist in preparing future training. Please mark one box ☐ per question.

20. The educational institution in which you are employed has a formal policy under which school personnel must report suspected child sexual abuse.

☐ 1 Yes – survey will proceed to Question 21
☐ 2 No – Survey will end here.
☐ 3 Not sure- Survey will end here.

21. Do you think that you are familiar enough with reporting duty under your educational institution in which you are employed to answer questions about it?

☐ 1 Yes – survey will proceed to Question 22
☐ 2 No – Survey will end here.

22. Under the policy, I must report:

☐1 All reasonable suspicions of child sexual abuse, no matter who the suspected perpetrator is
☐2 Only reasonable suspicions of child sexual abuse.
☐3 I am unsure

23. Under the policy, I must report:

☐1 Only when I am certain that the child has been or is being sexually abused
☐2 Whenever I have reasonable suspicions that a child has been or is being sexually abused.
☐3 I am unsure

24. Under the policy, I must report child sexual abuse:

☐1 Only when I think that the child is suffering (or at the risk of suffering)

☐2 <u>Even</u> when I think the harm to the child is insignificant or there is no apparent harm at all.
☐3 I am unsure

25. Under the policy, I must report child sexual abuse:
☐ Only when I think it has already happened.
☐ When I think it has already happened, or, when I think it is likely to occur in the future.
☐ I am unsure

26. Under the policy, I should generally report to:
☐1 School administration (Principle, Superintendent)
☐2 Designated mandated statewide child protective services program
☐3 I am unsure

28. Under the policy, if I make a report in good faith, my identity as the reporter is protected from disclosure:
☐1 Yes
☐2 No
☐3 I am unsure

Thank you for taking the time to complete the survey.

Thank you for participating in this survey. If you have any questions please feel free to contact me at (215) 359-7034 or by email at aa8266@pcom.edu.You may also contact Meredith Weber, PhD, NCSP, dissertation chair, at meredithwe@pcom.edu. If you have additional questions or concerns regarding the rights of research participants you can call the PCOM office of Research Compliance at (215) 871-6783. Your participation is appreciated.

APPENDIX D

Author Permission

Permission to use the (TRQ) was provided by co-author Professor Kerryann Walsh, on

Dec 8, 2021, 9:00 PM via email. The email is as follows:

"Hi Aigner,

The attitude scale (TRAS-CSA) was part of a longer survey we used with teachers in Australia (known as the TRQ).

You can access the various versions of the TRQ here: https://eprints.qut.edu.au/view/person/Mathews,_Ben.html (scroll down to 2009). You will see there are 5 versions. These were developed to account for nuances in the reporting laws and organisational policies for different school systems in different jurisdictions in Australia. Perhaps start with the New South Wales Government Schools version here: https://eprints.qut.edu.au/48563/ as it is most likely to resemble your context, but may differ in some respects.

In retrospect, there are some things we might do differently – I have attached a TRQ file with some of these ideas annotated.

You mentioned one of our papers in your email. There were several papers published based on data from this study. I have attached these for you. Two of the papers relate to the development of an attitude scale. This has since been used by many researchers in many countries. I have attached another document containing the different scale versions and scoring.

Yes, I do think you can apply the survey and/or attitude scale to a wider range of school personnel/staff. You might want to consult with a legal academic to ensure you have interpreted the Pennsylvania law correctly and applied it as relevant to adapting survey or scale items. Of course, feel free to adapt or use any of these materials in your study. We only ask for citations as would be the usual process.

There is a group in Pennsylvania who I have worked with over time. They have been developing measures for knowledge and attitudes for use with childcare personnel to assess attributes before and after training. The lead researcher is Prof Benjamin Levi. I have attached a zip file with these papers. Prof Ben Mathews and I worked with Prof Levi in the early days of designing these instruments.

I hope this is helpful, Aigner. Good luck with your research.

Best wishes
Kerryann"