

Running head: ATTITUDES TOWARDS REPORTING CHILD SEXUAL ABUSE

# Gender differences in psychosocial predictors of attitudes towards reporting

# child sexual abuse

Rachel L. Humphries University of Chester, UK

Agata Debowska University of Chester, UK

Daniel Boduszek University of Huddersfield, UK SWPS University of Social Sciences and Humanities, Poland

> Michelle L. A. Mattison University of Chester, UK

Paper accepted for publication in *Journal of Child Sexual Abuse* 

#### Abstract

There is a dearth of research investigating psychosocial correlates of attitudes towards reporting child sexual abuse (CSA) in males and females, and a lack of such studies drawing on participants from the UK. Therefore, the main objective of this paper is to examine gender differences in social and psychological predictors of attitudes towards reporting CSA. Participants drawn from the UK general population were recruited via an opportunistic sampling method. Cross-sectional design using self-report questionnaire was utilized. Hierarchical multiple regression analyses revealed that social support, masculinity, and age form significant associations with attitudes towards reporting CSA in females (total variance explained by the model was 25%). In the male sample, the only significant predictor of attitudes towards reporting CSA was interpersonal manipulation (total variance explained by the model was 9%). This study provides an important insight into psychosocial barriers/facilitators to reporting CSA. Such knowledge is crucial for the early detection and prevention of abuse.

**Keywords:** Attitudes towards reporting child sexual abuse, Social support, Masculinity, Interpersonal manipulation, Gender differences

## Introduction

Child sexual abuse (CSA) is a global phenomenon, which occurs in all demographic groupings (Zeuthen & Hagelskjaer, 2013). Over 23,000 instances of sexual offences against children were recorded in the UK last year (Jütte, Bentley, Miller, & Jetha, 2014) and the annual cost of CSA has been estimated at £3.2 billion (Saied-Tessier, 2014). Official statistics do not, however, represent the true extent of CSA, as most instances of this offence are not formally disclosed or reported (Radford, Corral, Bradley, Fisher, Bassett, Howatt & Collishaw, 2011; Wekerle, 2013; Zeuthen & Hagelskjaer, 2013). Survey evidence from the UK revealed that one in five adults would report suspicions of CSA, but most would not (Jütte et al., 2014). This suggests that both victims and witnesses are reluctant to report abuse. In England, Wales, and Scotland there is currently no legal requirement for anyone working with children and young people to report suspicions of child abuse and neglect (CAN). Although mandatory reporting could be introduced under recent government proposals (Rowland, 2014), even in countries where law requires childcare professionals to report suspected CAN, under-reporting still remains a considerable problem (Matthews & Walsh, 2004).

Given the serious psychosocial consequences of sexual abuse, such as depression, aggression, low self-esteem, self-harming behaviour, educational underachievement, and inappropriate sexual behaviours (Jones, Trudinger, & Crawford, 2004; Kendall-Tackett, Williams, & Finkelhor, 1993; Lundberg-Love, Marmion, Ford, Geffner, & Peacock, 1992; Putnam, 2003), understanding the reasons why people fail to report suspected CSA is crucial for the early detection and prevention of abuse. Prior research indicated that reasons for not reporting include fear of making an inaccurate report, fear of causing harm to the child, and an absence

of physical indicators of abuse (Alvarez, Kenny, Donohue, & Carpin, 2004; Hansen et al., 1997; Kenny, 2001; Melton, 2005; Webster, O'Toole, O'Toole, & Lucal, 2005). The readiness to report may also be influenced by individuals' attitudes toward CAN and CSA (Crenshaw, Crenshaw, & Lichtenberg, 1995; Walsh, Mathews, Rassafiani, Farrell, & Butler, 2012). Background characteristics (such as age, gender, ethnicity, own history of childhood abuse, and being a parent) appear to be strong predictors of reporting both CAN and CSA (Ashton, 2004, 2010; Fraser, Mathews, Walsh, Chen, & Dunne, 2010; Hansen et al., 1997; Kenny, 2001; Pecnik & Brunnberg, 2005; Webster et al., 2005; Zellman & Bell, 1990). Some studies have suggested that females have stricter normative standards in judging child abuse than males (O'Toole, Webster, O'Toole, & Lucal, 1999), and a more negative attitude towards CSA (Hegna, Mossige, & Wichstrom, 2004; Tennfjord, 2006). Notably, it was argued that attitudes toward CSA in general may affect the reporting of sexual abuse (Maynard & Wiederman, 1997). This is line with the theory of planned behaviour (Ajzen, 1991), suggesting that personality traits and social attitudes are contributing factors in explaining behaviour. Therefore, although studies on attitudes toward CSA must be treated as distinct from studies examining attitudes toward *reporting* CSA, they may constitute an important theoretical foundation for the current investigation.

Özgülük (2010) demonstrated that younger age was significantly correlated with more negative attitudes towards child abuse. However, the generalizability of these particular findings appears limited due to the use of a small sample size (N = 65). Further, prior research found that empathy and normlessness (the belief that it is acceptable to break the rules) were best predictors of attitudes toward CSA in a sample drawn from Norwegian adult population, but gender differences in those correlates were not investigated (Tennfjord, 2006). In two other studies it was

evidenced that rapists and child molesters (Porter *et al.*, 2000) as well as juvenile male sex offenders (Caputo, Frick, & Brodsky, 1999) had elevated Factor 1 (affective/interpersonal) psychopathy scores. Callous affect was also established to be a significant correlate of rape myth acceptance (RMA; rape myths are stereotypical or false beliefs about the culpability of victims, the innocence of rapists, and the illegitimacy of rape as a serious crime) in a mixed-gender sample (Debowska, Boduszek, Dhingra, Kola, & Meller-Prunska, 2015). RMA scores were previously found to be positively associated with attitudes supportive of sexual contact with children (Briere, Henschel, & Smiljanich, 1992; Collings, 1997). It seems, therefore, that emotional and interpersonal deficits associated with psychopathy can act as cognitive disinhibitors for sexually aggressive attitudes and behaviour. Given that such traits may be differentially expressed across gender (Cale & Lilienfeld, 2002), their contribution to explaining sexually aggressive attitudes may also differ for males and females.

Another important psychological factor related to negative attitudes towards CSA appears to be masculinity. It has been proposed that men, compared with women, are more likely to sexually abuse children due to masculine socialization (i.e., socialization into traditionally male roles), which results in men assigning increased value to aspects of sex focused on competence and dominance (Finkelhor, 1982, 1994; Glaser & Frosh, 1988). Socialization into passive and nurturant feminine roles, in turn, constitutes a protective factor against engaging in CSA (Finkelhor, 1982; Finkelhor & Russell, 1984; Herman, 1981). This is in line with empirical studies which revealed a positive relationship between traditional gender role attitudes and domestic violence, rape, and CSA (Falchikov, 1996). Along similar lines, Tennfjord (2006) argued that having modern views about women was correlated with attitudes

not supportive of CSA. Interestingly, some aspects of masculinity, such as selfreliance, sexual prowess, negative attitudes towards homosexuality and victims, and the emphasis on heterosexuality as a key masculine trait, were associated with decreased likelihood of reporting own experiences of sexual abuse (O'Leary & Barber, 2008).

Values and attitudes may also be influenced by an individual's social environment (Douglas & Wildavsky, 1982). Further, Ajzen (1991) suggested that whether or not individuals take action is affected by the presence of others and their perception of what others think. Social support engenders a sense of self-worth and value, which increases the likelihood that support received is reciprocated (Friborg, Hjemdal, Rosenvinge, & Martinussen, 2003). Conversely, individuals who lack support and intimacy often have difficulty in supporting others (Cobb, 1976). Social support appears especially important for females, who have a wider social network from which they garner help and encouragement (Friborg et al., 2003; Friborg, Barlaug, Martinussen, Rosenvinge, & Hjendal, 2005). In keeping with the above, Kenny (2001) found that teachers diffused professional responsibility to report abuse if they considered they would not be supported. In a more recent study, Tennfjord (2006) found that higher social support was related to more positive attitudes towards CSA. Finally, social network variables were reported to be strong predictors of selfreported helping behaviour (Amato, 1990), indicating that social support may encourage pro-social actions.

# The current study

Research in the area of reporting CSA has been limited by methodological and conceptual weaknesses (Goebbels, Nicholson, Walsh, & De Vries, 2008). Although

studies on CSA reporting have been conducted among childcare professionals in the United States and Australia, surprisingly, the broader adult population is largely absent from such investigations. Importantly, there are no studies which have drawn on participants in the UK i.e., those who are not legally obliged to report suspected abuse to the police. Moreover, most cases of child sexual abuse and neglect are committed by family members and trusted family friends, meaning that victims themselves are less likely to report abuse (Radford et al., 2011). As such, reporting by others is vital. In light of the issues outlined, the lack of research examining the general UK population ought to be addressed. Little is also known about psychosocial predictors of reporting attitudes and behaviour. To date, no known studies have inquired into gender-specific predictors of attitudes towards reporting CSA. As such, research exploring attitudes to reporting and potential barriers/facilitators to reporting is warranted among the UK adult general population. Further, Tennfjord (2006) argued that individuals' attitudes to CSA are influenced by socio-cultural factors and personality traits. Given the paucity of similar studies in the area of CSA reporting and the assertion that attitudes towards CSA can be predictive of attitudes towards reporting CSA (Maynard & Wiederman, 1997), the objective of the current research is to examine whether similar social (family cohesion and social support) and psychological (callous affect, interpersonal manipulation, and masculinity) factors are significantly associated with attitudes towards reporting CSA in male and female samples.

#### Method

# **Participants**

The current study employed 252 participants from North West England (community sample) via an opportunistic sampling method. Participants were invited to take part in research looking at individual differences in attitudes towards reporting child sexual abuse, using Facebook and Twitter for a participant recruiting campaign. Participants were assured that the questions asked in the survey did not require any level of personal disclosure. Participants ranged in age from 21 to 76 years (M = 36.02; SD = 15.28). The sample consisted of 185 females and 67 males. There were 3 (1.1%) participants with no formal qualifications, 43 (16.4%) with Ordinary Level (O-Level)/General Certificate of Secondary Education (GCSE) as the highest level of education (these qualifications are generally undertaken in the 11<sup>th</sup> year of schooling, at 15-16 years of age), 79 (30.2%) educated to Advanced Level (A-Level; taken in year 13, at age 17-18 years; a prerequisite qualification for entry into university/higher education), 99 (37.8%) with an undergraduate degree, 21 (8%) with a postgraduate degree, and 1 (.4%) educated to doctoral level.

## Materials

*Resilience Scale for Adults* (RSA; Friborg *et al.*, 2005) is a 37-item scale consisting of five factors: personal competence, social competence, family cohesion, support structure, and personal structure. For the purpose of the current research, two subscales (family cohesion and support structure) of the RSA were used. The family cohesion subscale, containing seven items, pertains to mutual support between family members. Items are rated on a Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). In the present sample, Cronbach's alpha for the subscale was .91.

The support structure subscale has eight items assessing the level of social support (outside of the family). Items are rated on a Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Cronbach's alpha for this subscale was .88.

*Masculine Role Inventory* (MRI; Snell, 1986) was used to assess participants' levels of masculinity. The MRI is a 30-item scale which assesses participants' success preoccupation, restricted emotionality, and inhibited affection. Participants indicated their level of agreement with each item using a Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Cronbach's alpha for the total scale in this study was .92.

Self-Report Psychopathy Scale III – Short Form (SRP-SF; Paulhus, Neuman & Hare, in press). Psychopathy is characterized by a distinct cluster of interpersonal (e.g., deceitfulness and manipulation), affective (e.g., lack of empathy, remorse, or guilt), lifestyle (e.g., impulsivity, irresponsibility), and behavioral (e.g., social deviance, criminality) features (Hare & Neumann, 2008). The SRP-SF is a 29-item inventory assessing four psychopathy components: callous affect, interpersonal manipulation, erratic lifestyle, and antisocial behaviour. In the current study, two subscales measuring psychopathic personality traits (i.e., callous affect and interpersonal manipulation) as opposed to behavioural aspects of the disorder (i.e., erratic lifestyle and antisocial behaviour) were utilized. The callous affect subscale is made up of seven items concerning characteristics of low empathy, lack of remorse, emotional shallowness, and a failure to accept personal responsibility. Items are rated on a Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Cronbach's alpha for the measure was .75. The interpersonal manipulation subscale consists of seven items, measuring characteristics such as grandiosity, deceitfulness, and superficial charm. Responses are given on a Likert scale ranging from 1

("strongly disagree") to 5 ("strongly agree"). In the present sample, Cronbach's alpha for the measure was .81.

# *Teachers' Reporting Attitude Scale for Child Sexual Abuse* (TRAS-CSA; Walsh, Rassafiani, Mathews, Farrell, & Butler, 2010) was used to measure participants' attitudes towards reporting child sexual abuse. The measure consists of 21 items rated on a Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). The measure was originally devised to assess teachers' attitudes to reporting child sexual abuse and some of the scale items were worded specifically for this population. Therefore, for the purpose of the current study, those items were revised in order to account for participants derived from the general population. For example, original item "It is important for teachers to be involved in reporting child sexual abuse to prevent long-term consequences for children" was changed to "It is important to report child sexual abuse to prevent long-term consequences for children"; another item "I would consult with an administrator before I reported child sexual abuse" was changed to "I would consult with another person before I reported child sexual abuse". Cronbach's alpha for the scale in this study was .75.

## Procedure

The research protocol was reviewed and approved by the institutional ethics panel. Participants completed the study online using Formic - a Web module that allows for secure remote data collection through the distribution of anonymous secure links to the survey. Prior to accessing the survey, all participants were asked to read information detailing the study, what would be required of them, any associated risks, and where to access additional support or information. All participants were required to give an informed consent to take part in the study. Participation was voluntary,

without any form of reward. The completion of the survey took about 30 minutes. All participants were debriefed after completing the questionnaire. A detailed description of study objectives as well as contact details to appropriate advice, support, and guidance services were provided.

#### Results

## Descriptive statistics and *t*-tests

Descriptive statistics, including means (*M*) and standard deviations (*SD*), together with *t*-tests results are presented in Table 1. Compared to males, females scored significantly higher on social support, and significantly lower on callous affect and interpersonal manipulation. Results indicated no significant difference in scores between males and females for family cohesion, masculinity, and attitudes towards reporting CSA. Therefore, males and females do not differ on attitudes towards reporting CSA, but they do differ on factors which may have an effect on such attitudes. Consequently, in order to detect potential gender differences in the predictors of attitudes towards reporting CSA, further analyses were performed separately for male and female participants.

# Table 1

	Males		Females				
Variable	М	SD	М	SD	95% CI	t	Cohen's d
Age	41.60	16.06	34.09	14.61	3.24/11.78	3.47*	.49
Family cohesion	27.38	5.65	29.02	4.51	3.03/26	2.33	n/a
Social support	32.61	4.26	35.23	4.10	-3.81/-1.43	-4.34*	.63
Masculinity	64.07	16.43	63.36	18.30	-4.74/6.17	.26	n/a
CA	13.59	3.83	10.42	3.56	2.13/4.20	6.03*	.86
IPM	14.09	4.97	11.03	4.07	1.83/4.30	4.89*	.67
ATRCSA	78.38	7.02	77.33	8.40	-1.28/3.39	.89	n/a

Descriptive statistics and t-test results for males (n = 67) and females (n = 185)

*Note.* CA = Callous Affect; IPM = Interpersonal Manipulation; ATRCSA = Attitudes towards reporting child sexual abuse \*p < .007 (Bonferroni correction applied); Levene's test for equality of variances non-significant in all cases

## Univariate regression analyses

Univariate regression analyses were performed in order to assess whether age, family cohesion, social support, masculinity, callous affect, and interpersonal manipulation were significantly associated with attitudes towards reporting CSA (see Table 2).

Analyses performed on the full sample revealed that all predictor variables formed statistically significant associations with the outcome variable; with masculinity ( $\beta = -.34$ , p < .001), age ( $\beta = .29$ , p < .001), and social support ( $\beta = .23$ , p< .001) being the strongest predictors of attitudes towards reporting CSA. When separate analyses were carried out for males and females, the pattern of associations has changed and differential correlations for the two genders were revealed. As for the male sample, only one predictor variable, interpersonal manipulation, formed a significant negative association with attitudes towards reporting CSA ( $\beta = -.20$ , p <.05). Interestingly, all predictor variables except for interpersonal manipulation correlated significantly with attitudes towards reporting CSA in the female sample. Specifically, masculinity ( $\beta = -.43$ ) and callous affect (-.34) formed significant negative associations, whereas age ( $\beta = .39$ ), social support ( $\beta = .37$ ), and family cohesion ( $\beta = .31$ ) formed significant positive associations with the outcome variable.

# Table 2

	Full sample		Males		Females	
	β (95% CI)	SE	β (95% CI)	SE	β (95% CI)	SE
Age	.29*** (.15/.42)	.07	.09 (14/.31)	.11	.39*** (.22/.56)	.09
Family cohesion	.19** (.06/.32)	.07	.05 (14/.25)	.10	.31*** (.13/.48)	.09
Social support	.23*** (.10/.36)	.07	.06 (16/.29)	.11	.37*** (.20/.54)	.09
Masculinity	34*** (47/21)	.07	07 (33/.20)	.13	43*** (58/27)	.08
CA	21** (36/08)	.07	08 (31/.14)	.11	34*** (51/17)	.09
IPM	15* (28/02)	.07	20* (40/02)	.10	16 (35/.02)	.09

Univariate regression analyses of factors predicting attitudes towards reporting child sexual abuse for the full sample and separately for males and females

Note. CA = Callous Affect; IPM = Interpersonal Manipulation\* p < .05, \*\* p < .01, \*\*\* p < .001

## Hierarchical multiple regression analyses

Hierarchical multiple regression analyses were performed in order to examine whether the same predictor variables would correlate significantly with attitudes towards reporting CSA when controlling for all factors in one model. The variables were entered in the regression model in the order suggested by Tennfjord (2006), i.e. age followed by social (family cohesion and social support) and psychological (masculinity, callous affect, and interpersonal manipulation) factors. As males and females scored differently in each of these variables and prior unadjusted regression analyses revealed different significant predictors of attitudes towards CSA for the two genders, the total sample was split by gender and regression models were compared (see Table 3; such an approach to data analysis was previously employed by Dhingra, Boduszek, & O'Connor, 2015). Preliminary analyses revealed no violation of the assumptions of normality, linearity, multicollinearity, and homoscedasticity.

In Step 1 of the analysis, age was entered. For the full sample, this model was statistically significant ( $F_{(1, 203)} = 18.13$ , p < .001) and explained 8% ( $R^2 = .08$ ) of variance in attitudes towards reporting CSA. Model 1 was also statistically significant for females ( $F_{(1, 142)} = 19.94$ , p < .001) and explained 12% ( $R^2 = .12$ ) of variance in the outcome variable, but it was non-significant for males ( $F_{(1, 52)} = .61$ , p = .44;  $R^2 = .01$ ).

After entering two social predictors, family cohesion and social support, in Step 2 of the analysis, the total variance explained by the model as a whole for the full sample was 13% ( $R^2 = .13$ ;  $F_{(3, 201)} = 10.13$ , p < .001); the introduction of social variables explained additional 5% ( $\Delta R^2 = .05$ , p < .01) of variance in the outcome variable. The best predictor of attitudes towards reporting CSA was age ( $\beta = .28$ , p <

.001), followed by social support ( $\beta = .20, p < .05$ ). As for the female sample, the model as a whole explained 21% ( $R^2 = .21$ ) of variance in the attitudes towards reporting CSA (an additional 9% [ $\Delta R^2 = .09, p < .01$ ] compared with Model 1) and was statistically significant ( $F_{(3, 140)} = 12.36, p < .001$ ). Model 2, however, was statistically non-significant for males ( $F_{(3, 50)} = .31, p = .82; R^2 = .02$ ).

In Step 3, psychological factors were entered. These were masculinity, callous affect, and interpersonal manipulation. The total variance explained by the model as a whole for the full sample increased to 17% ( $R^2 = .17$ ;  $\Delta R^2 = .04$ , p < .05;  $F_{(6, 198)} = 6.60$ , p < .001). In this final model, two out of six predictor variables were statistically significant; namely, masculinity ( $\beta = -.21$ , p < .01) and age ( $\beta = .20$ , p < .01). For the female sample, the total variance explained by the model as a whole amounted to 25% ( $R^2 = .25$ ;  $\Delta R^2 = .04$ , p = .07;  $F_{(6, 137)} = 7.51$ , p < .001). Significant predictors of attitudes towards reporting CSA were masculinity ( $\beta = -.23$ , p < .05), age ( $\beta = .22$ , p < .05), and social support ( $\beta = .21$ , p < .05). Although the final adjusted model was statistically non-significant for males ( $F_{(6, 47)} = .77$ , p = .60;  $R^2 = .09$ ), interpersonal manipulation was found to be a significant predictor of attitudes towards reporting CSA ( $\beta = -.28$ , p < .05) in this sample.

# Table 3

Hierarchical multiple regression models of factors influencing attitudes towards reporting child sexual abuse for the full sample and separately for males and females

	Full sample		Males		Females	
	β (95% CI)	SE	β (95% CI)	SE	β (95% CI)	SE
Step 1						
Age	.29*** (.15/.42)	.07	.09 (14/.31)	.11	.39*** (.22/.56)	.09
Step 2						
Age	.28*** (.15/.41)	.07	.09 (14/.33)	.12	.33*** (.17/.50)	.08
Family cohesion	.04 (13/.20)	.08	01 (30/.29)	.15	.11 (10/.31)	.10
Social support	.20* (.04/.36)	.08	.07 (27/.42)	.17	.26* (.06/.46)	.10
Step 3						
Age	.20** (.06/.34)	.07	.10 (16/.35)	.13	.22* (.04/.41)	.09
Family cohesion	01 (17/.17)	.09	01 (31/.30)	.15	.04 (18/.26)	.11
Social support	.15 (02/.32)	.08	.07 (28/.42)	.17	.21* (.01/.41)	.10
Masculinity	21** (37/06)	.08	02 (-32/.29)	.15	23* (42/04)	.10
CA	.02 (18/.22)	.10	.19 (20/.57)	.19	08 (33/.17)	.13
IPM	05 (22/.13)	.09	28* (58/01)	.15	.04 (18/.25)	.11

*Note*. CA = Callous Affect; IPM = Interpersonal Manipulation

\* p < .05, \*\* p < .01, \*\*\* p < .001

#### Discussion

Very few quantitative studies with sound methodological designs have assessed psychosocial factors associated with attitudes towards reporting CSA. Additionally, there is a paucity of such research conducted among participants drawn from the general population, and a lack of studies focusing on samples from the UK. To date, no known studies have assessed gender-specific predictors of attitudes towards reporting CSA. Further, most previous research has been carried out in jurisdictions where mandatory reporting policy is in place, such as the United States and Australia. Therefore, those findings may not be directly applicable to countries where no such law exists. As such, research on attitudes towards CSA reporting in the UK was warranted. In light of the above, the objective of the present study was to examine which social (family cohesion and social support) and psychological (callous affect, interpersonal manipulation, and masculinity) factors are significantly correlated with attitudes towards reporting CSA. An additional aim was to examine gender differences in the above predictors.

Prior research has indicated that gender is a strong predictor of reporting both CAN and CSA, with females being more likely to report suspicions of child abuse than males (Ashton, 2004, 2010; Fraser *et al.*, 2010; Hansen *et al.*, 1997; Kenny, 2001; O'Leary & Barber, 2008; Pecnik & Brunnberg, 2005; Webster *et al.*, 2005; Zellman & Bell, 1990). Some other studies have also suggested that females have stricter normative standards in judging child abuse than males (O'Toole *et al.*, 1999), and more negative attitudes towards CSA in general (Hegna *et al.*, 2004; Tennfjord, 2006). In contrast to those previous findings, no gender differences in attitudes towards reporting CSA were detected in the current investigation. It appears,

therefore, that attitudes towards child abuse, attitudes towards *reporting* such abuse, and reporting behaviour should be explored as separate and distinct processes.

Even though males and females in the current study reported similar levels of attitudes towards reporting CSA, those attitudes were affected by different factors. For example, social support was found to form a positive significant association with attitudes towards reporting CSA for females, but not for males. This is supportive of previous research among a community sample which indicated that individuals receiving more social support showed less tolerance for CSA (Tennfjord, 2006). Therefore, strong positive bonds with other people may serve as a buffer against forming distorted views pertaining to child abuse. Additionally, in line with Amato's (1990) argument, intentions to engage in helping behaviour (i.e., reporting CSA) seem to be affected by an individual's perceived external support network. In light of prior research suggesting that women, compared with men, have a greater need to belong (e.g., Brown, Condor, Matthews, Wade, & Williams, 1986; Brown & Lohr, 1987; Kiesner, Cadinu, Poulin, & Bucci, 2002; Newman, Lohman, & Newman, 2007), and are more likely to garner help and encouragement from their social network (Friborg et al., 2003; Friborg, Barlaug, Martinussen, Rosenvinge, & Hjendal, 2005), the nonsignificant association between social support and attitudes towards reporting CSA in males was not entirely unexpected. Indeed, the current result indicates that women tend to rely on other people more than men and that the lack of appropriate support structure is detrimental to their self-reported helping behaviour in the context of child abuse.

Masculinity was a significant psychological predictor of attitudes towards reporting CSA in the female sample only. Specifically, it was found that women who scored higher on masculine traits were likely to hold more negative views about

reporting CSA. This result is partly congruent with prior research which revealed that traditional gender role attitudes are related with views supportive of CSA (Falchikov, 1996; Tennfjord, 2006); yet, those previous studies did not control for participants' gender. Our finding is also interesting when interpreted in light of O'Leary and Barber's (2008) earlier assertion. Specifically, the researchers contended that some aspects of masculinity were associated with decreased likelihood of reporting own experiences of CSA. It appears hence that increased levels of masculinity among women affect attitudes towards reporting CSA, regardless of whether or not they are directly affected by such abuse.

Only one of the assessed predictor variables, interpersonal manipulation, associated significantly with attitudes towards reporting CSA among males. Although past research reported elevated Factor 1 psychopathy scores among sexual offenders (Caputo *et al.*, 1999; Porter *et al.*, 2010), the current results provide evidence that attitudes towards reporting CSA are affected by interpersonal, rather than affective, psychopathic traits and that these two psychopathy facets should be treated as separate dimensions (see Debowska, Boduszek, Kola, & Hyland, 2014; Debowska, Mattison, & Boduszek, in press; Debowska & Zeyrek Rios, 2015). One possible explanation of this finding is that individuals with increased interpersonal manipulation scores tend to be dispositionally selfish and hence unlikely to engage in helping behaviour.

In spite of the fact that affective deficits were previously associated with more negative attitudes towards CSA (Tennfjord, 2006) and increased levels of rape myth acceptance (Debowska *et al.*, 2014), the current results indicate that reduced empathic engagement with others is not a significant correlate of attitudes towards *reporting* CSA. It may be that empathy towards victims can predict more negative views on

sexual aggression, but not the intention to partake in helping behaviours associated with such views. Therefore, attitudes towards constructs, and attitudes towards related actions, may be guided by distinct processes and may hence form differential correlations with external variables. Worthy of note, callous affect was a significant negative predictor of attitudes towards reporting CSA among females, but only when the analysis did not control for additional factors. Although speculative at this stage, it appears that the effect of this psychological variable, when unadjusted for other variables, is weak or not sufficient to explain attitudes towards reporting CSA. Given the preliminary nature of these findings, it is suggested that future studies further investigate the above premises.

Finally, we found a significant positive correlation between age and attitudes towards CSA reporting for females, but not for males. This is in contrast with previous findings, which reported a significant yet negative association between age and attitudes towards child abuse in general (Özgülük, 2010). Nonetheless, the latter study was conducted among participants recruited in Turkey and hence its findings may not be generalizable to Western societies. Studies inquiring directly into attitudes towards reporting CSA and reporting behaviour, on the other hand, revealed no effect of age (e.g., Ashton, 2004; Kenny, 2001). This prior research, however, employed samples of childcare professionals, mostly from jurisdictions with a legal requirement to report suspicions of CSA. Therefore, it is likely that those individuals received specialist training, which facilitates subsequent identification of indicators of abuse, and which elucidates the procedures for reporting suspicions of abuse. It may be thus that such training neutralizes the effect of age. Another possible explanation of the current finding is that older individuals are more likely to have children themselves and it was previously noted that being a parent is a strong predictor of reporting

(Fraser *et al.*, 2010). Further, older people may also have more awareness and experience of the child protection system and the legal system, and hence are more likely to get involved in the safeguarding of children. The gender disparity reported here is not entirely clear and hence future studies among more diverse populations ought to address this aspect.

The present study is not free from limitations. First, the use of self-report data may have introduced several well-known limitations, such as response bias. Second, the present research utilized a cross-sectional design and hence causality could not be inferred. Third, the current study did not control for participants' occupation or exposure to child protection training. Therefore, it may be that some participants had a greater awareness of reporting procedures, which could have influenced their attitudes towards reporting CSA. Finally, it is possible that, due to the small male sample size, some important predictors of attitudes towards CSA among men were not detected. Given that the model as a whole was non-significant for the male sample, future research among more diverse and numerous samples should further explore gender-specific correlates of attitudes towards reporting CSA. However, despite the aforementioned limitations, the results of the present study represent a significant contribution to the existing literature through the use of a sample of participants drawn from the UK general population. Additionally, this research was the first to explore gender-specific psychosocial predictors of attitudes towards reporting CSA.

The results of the present study have important practical implications. According to the theory of planned behaviour (Ajzen, 1991), intentions to undertake certain actions can be accurately predicted from attitudes towards those actions. Accordingly, the findings of the present investigation may contribute to the

development of effective child protection media campaigns, aimed at increasing awareness and understanding of CSA reporting, as well as promoting the welfare of children. Here, it may be possible to address and minimize the effects of age and gender differences by tailoring campaigns to audiences of young men and young women, as is observed in previous campaigns led by *Stop It Now!* and *Young Minds*, who regularly target specific groups. Similarly, the findings of this study may also assist with the development of safeguarding awareness and training programmes for persons who care for and/or work with children and young people (in line with the Children Act 2004). Such training programmes could incorporate data concerning psychosocial factors that predict the reporting of sexual abuse. Given that attitudes towards reporting CSA are associated with different factors for males and females, it is suggested that those gender differences are addressed in such programmes. For example, females may benefit from having social support provisions highlighted during training. The practical implications outlined, could subsequently facilitate the prevention and detection of CSA.

Overall, findings of the current research provide a substantial contribution to the understanding of the predictors of attitudes towards reporting CSA. It has been demonstrated that psychosocial factors, such as social support and masculinity, may serve to predict women's attitudes towards CSA reporting. Similar attitudes among men were found to be predicted by interpersonal manipulation only.

#### References

- Ajzen, I. (1991). The theory of planned behaviour. Organisational Behavior and Human Decision Processes, 50(2), 179-211.
- Alvarez, K. M., Kenny, M. C., Donohue, B., & Carpin, K. M. (2004). Why are professionals failing to initiate mandated reports of child maltreatment, and are there any empirically based training programs to assist professionals in the reporting process?. *Aggression and Violent Behavior*, 9(5), 563-578.
- Amato, P. R. (1990). Personality and social network involvement as predictors of helping behavior in everyday life. *Social Psychology Quarterly*, *53*(1), 31-43.
- Ashton, V. (2004). The effect of personal characteristics on reporting child maltreatment. *Child Abuse & Neglect*, 28(9), 985-997.
- Ashton, V. (2010). Does ethnicity matter? Social workers' personal attitudes and professional behaviors in reporting child maltreatment. *Advances in Social Work*, *11*(2), 129-143.
- Briere, J., Henschel, D., & Smiljanich, K. (1992). Attitudes toward sexual abuse: Sex differences and construct validity. *Journal of Research in Personality*, 26(4), 398-406.
- Brown, B.B., & Lohr, M.J. (1987). Peer group affiliation and adolescent self-esteem:
  An integration of ego identity and symbolic interaction theories. *Journal of Personality and Social Psychology*, 52(1), 47-55.
- Brown, R., Condor, S., Matthews, A., Wade, G., & Williams, J. (1986). Explaining intergroup differentiation in an industrial organization. *Journal of Occupational Psychology*, 59(4), 273-286.

- Cale, E. M., & Lilienfeld, S. O. (2002). Sex differences in psychopathy and antisocial personality disorder: A review and integration. *Clinical Psychology Review*, 22(8), 1179-1207.
- Caputo, A. A., Frick, P. J., & Brodsky, S. L. (1999). Family violence and juvenile sex offending the potential mediating role of psychopathic traits and negative attitudes toward women. *Criminal Justice and Behavior*, *26*(3), 338-356.

Children Act 2004 (c.31). London: HMSO.

- Cobb, S. (1976). Social support as a moderator of life stress. *Psychosomatic Medicine*, *38*(5), 300-314.
- Collings, S. J. (1997). Development, reliability, and validity of the child sexual abuse myth scale. *Journal of Interpersonal Violence*, *12*(5), 665-674.
- Crenshaw, W. B., Crenshaw, L. M., & Lichtenberg, J. W. (1995). When educators confront child abuse: An analysis of the decision to report. *Child Abuse & Neglect*, *19*(9), 1095-1113.
- Debowska, A., Boduszek, D., Dhingra, K., Kola, S., & Meller-Prunska, A. (2015). The role of psychopathy and exposure to violence in rape myth acceptance. *Journal of Interpersonal Violence*, *30*(15), 2751-2770.
- Debowska, A., Boduszek, D., Kola, S., & Hyland, P. (2014). A bifactor model of the Polish version of the Hare Self-Report Psychopathy Scale. *Personality and Individual Differences*, 69, 231-237.
- Debowska, A., Mattison, M.L.A., & Boduszek, D. (in press b). Gender differences in the correlates of reactive aggression. *Polish Psychological Bulletin*.
- Debowska, A., & Zeyrek Rios, E.Y. (2015). The role of psychopathy factors in reactive aggression within a sample of prisoners. *Journal of Criminal Psychology*, 5(1), 25-33.

- Dhingra, K., Boduszek, D., O'Connor, R. C. (2015). Differentiating suicide attempters from suicide ideators using the Integrated-Volitional model of suicidal behaviour. *Journal of Affective Disorders*, *186*, 211-218.
- Douglas, M., & Wildavsky, A. (1982). How can we know the risks we face? Why risk selection is a social process. *Risk Analysis*, 2(2), 49-58.
- Falchikov, N. (1996). Adolescent attitudes to abuse of women: Are wives and nonmarital partners viewed differently?. *Journal of Interpersonal Violence*, *11*(3), 391-409.
- Finkelhor, D. (1982). Sexual abuse: A sociological perspective. *Child Abuse & Neglect*, *6*(1), 95-102.
- Finkelhor, D. (1994). The international epidemiology of child sexual abuse. *Child Abuse & Neglect*, 18(5), 409-417.
- Finkelhor, D., & Russell, D. (1984). Women as perpetrators. In D. Finkelhor (Ed.), *Child sexual abuse: New theory and research* (171-187). New York: Free Press.
- Fraser, J. A., Mathews, B., Walsh, K., Chen, L., & Dunne, M. (2010). Factors influencing child abuse and neglect recognition and reporting by nurses: A multivariate analysis. *International Journal of Nursing Studies*, 47(2), 146-153.
- Friborg, O., Barlaug, D., Martinussen, M., Rosenvinge, J.H. & Hjendal, O. (2005).
  Resilience in relation to personality and intelligence. *International Journal of Methods in Psychiatric Research*, 14(11), 29-42.
- Friborg, O., Hjemdal, O. Rosenvinge, J.H. & Martinussen, M. (2003). A new rating scale for adult resilience: What are the central protective resources behind

healthy adjustment. International Journal of Methods in Psychiatric Research, 12(2), 65-76.

Glaser, D., & Frosh, S. (1988). Child sexual abuse. London: Macmillan Education.

- Goebbels, A. F. G., Nicholson, J. M., Walsh, K., & De Vries, H. (2008). Teachers' reporting of suspected child abuse and neglect: behaviour and determinants. *Health Education Research*, 23(6), 941-951.
- Hansen, D. J., Bumby, K. M., Lundquist, L. M., Chandler, R. M., Le, P. T., & Futa,
  K. T. (1997). The influence of case and professional variables on the
  identification and reporting of child maltreatment: A study of licensed
  psychologists and certified masters social workers. *Journal of Family Violence*, *12*(3), 313-332.
- Hare, R. D., & Neumann, C. S. (2008). Psychopathy as a clinical and empirical construct. *The Annual Review of Clinical Psychology*, *4*, 217-246.
- Hegna, K., Mossige, S., & Wichstrom, L. (2004). Older adolescents' positive attitudes toward younger adolescents as sexual partners. *Adolescence*, *39*(156), 627-651.
- Herman, J. (1981). Father-daughter incest. Professional Psychology, 12(1), 76.
- Jones, D. A., Trudinger, P., & Crawford, M. (2004). Intelligence and achievement of children referred following sexual abuse. *Journal of Paediatrics and Child Health*, 40(8), 455-460.

Jütte, S., Bentley, H., Miller, P., Jetha, N. (2014). How safe are our children? Retrieved from NSPCC website: http://www.nspcc.org.uk/globalassets/documents/research-reports/how-safechildren-2014-report.pdf

- Kendall-Tackett, K. A., Williams, L. M., & Finkelhor, D. (1993). Impact of sexual abuse on children: a review and synthesis of recent empirical studies. *Psychological Bulletin*, 113(1), 164.
- Kenny, M. C. (2001). Child abuse reporting: Teachers' perceived deterrents. *Child Abuse & Neglect*, 25(1), 81-92.
- Kiesner, J., Cadinu, M., Poulin, F., & Bucci, M. (2002). Group identification in early adolescence: Its relation with peer adjustment and its moderator effect on peer influence. *Child Development*, 73(1), 196-208
- Lundberg-Love, P. K., Marmion, S., Ford, K., Geffner, R., & Peacock, L. (1992). The long-term consequences of childhood incestuous victimization upon adult women's psychological symptomatology. *Journal of Child Sexual Abuse*, 1(1), 81-102.
- Maletzky, B. M. (1998). The paraphilias: Research and treatment. In P. E. Nathan, &J. M. Gorman (Eds.), *A guide to treatments that work* (pp. 472–500). NewYork: Oxford University Press.
- Mathews, B., & Walsh, K. (2004). Queensland teachers' new legal obligation to report child sexual abuse. *Australia and New Zealand Journal of Law and Education*, 9(1), 25-40.
- Maynard, C., & Wiederman, M. (1997). Undergraduate students' perceptions of child sexual abuse: Effects of age, sex, and gender-role attitudes. *Child Abuse & Neglect*, 21(9), 833-844.
- Melton, G. B. (2005). Treating children like people: A framework for research and advocacy. *Journal of Clinical Child and Adolescent Psychology*, *34*(4), 646-657.

- Newman, B.M., Lohman, B.J., & Newman, P.R. (2007). Peer group membership and a sense of belonging: their relationship to adolescent behavior problems. *Adolescence*, *42*(166), 241-263
- O'Leary, P. J., & Barber, J. (2008). Gender differences in silencing following childhood sexual abuse. *Journal of Child Sexual Abuse*, *17*(2), 133-143.
- O'Toole, R., Webster, S. W., O'Toole, A. W., & Lucal, B. (1999). Teachers' recognition and reporting of child abuse: A factorial survey. *Child Abuse & Neglect*, 23(11), 1083-1101.
- Özgülük, S. B. (2010). Prediction of attitudes towards child abuse by gender, age, income and education. *Procedia-Social and Behavioral Sciences*, *5*, 515-519.
- Paulus, D.L., Neuman, C.S. & Hare, R.D. (in press). *Manual for the self-report psychopathy scale*. Toronto: Multi Health Systems.
- Pecnik, N., & Brunnberg, E. (2006). Professionals' characteristics, victim's gender, and case assessments as predictors of professional judgments in child protection. *Review of Psychology*, 12(2), 133-146.
- Porter, S., Fairweather, D., Drugge, J., Herve, H., Birt, A., & Boer, D. P. (2000).
  Profiles of psychopathy in incarcerated sexual offenders. *Criminal Justice and Behavior*, 27(2), 216-233.
- Putnam, F. W. (2003). Ten-year research update review: Child sexual abuse. *Journal* of the American Academy of Child & Adolescent Psychiatry, 42(3), 269-278.
- Radford, L., Corral, S., Bradley, C., Fisher, H., Bassett, C., Howat, N., Collishaw, S. (2011). *Child abuse and neglect in the UK today*. Retrieved from NSPCC website: http://www.nspcc.org.uk/globalassets/documents/researchreports/child-abuse-neglect-uk-today-research-report.pdf

Rowland, A. G. (2014). *Living on a railway line*. Retrieved from the Winston Churchill Memorial Trust website: http://www.wcmt.org.uk/sites/default/files/reportdocuments/Professor%20Rowland%20Andrew%20Executive%20Summary% 20FINAL%202014.pdf

Saied-Tessier, A. (2014). Estimating the costs of child sexual abuse in the UK. Retrieved from NSPCC website: http://www.nspcc.org.uk/globalassets/documents/research-reports/estimating-

costs-child-sexual-abuse-uk.pdf

- Snell, W. (1986). The masculine role inventory: Components and correlates. *Sex Roles, 15*(7), 443-455.
- Tennfjord, O. S. (2006). Prediction of attitudes towards child sexual abuse among three different Norwegian samples. *Journal of Sexual Aggression*, 12(3), 245-263.
- Walsh, K., Mathews, B., Rassafiani, M., Farrell, A., & Butler, D. (2012).
  Understanding teachers' reporting of child sexual abuse: Measurement methods matter. *Children and Youth Services Review*, *34*(9), 1937-1946.
- Walsh, K., Rassafiani, M., Mathews, B., Farrell, A. & Butler. D. (2010). Teachers' attitudes toward reporting child sexual abuse: Problems with existing research leading to new scale development. *Journal of Child Sexual Abuse*, *19*(3), 310-336.
- Webster, S. W., O'Toole, R., O'Toole, A. W., & Lucal, B. (2005). Overreporting and underreporting of child abuse: Teachers' use of professional discretion. *Child Abuse & Neglect*, 29(11), 1281-1296.

- Wekerle, C. (2013). Resilience in the context of child maltreatment: Connections to the practice of mandatory reporting. *Child Abuse and Neglect*, *37*(2), 93-101.
- Zellman, G. L., & Bell, R. M. (1990). The role of professional background, case characteristics, and protective agency response in mandated child abuse reporting. Santa Monica, CA: Rand Corporation.
- Zeuthen K., & Hagelskjaer, M. (2013). Prevention of child sexual abuse: Analysis and discussion of the field. *Journal of Child Sexual Abuse*, 22(6), 742-760.