

RESEARCH Measurement in child abuse research: A survey of researchers

—by Rochelle F. Hanson, Daniel W. Smith, Benjamin E. Saunders, Cynthia Cupit Swenson, and Lori Conrad

How well are child maltreatment researchers able to define and measure the phenomena that concern us?

Everyone agrees that good research is necessary to answer questions about such important issues as the causes and effects of child maltreatment and the efficacy of our attempts to intervene. But how well are child maltreatment researchers able to define and measure the phenomena that concern us? Among the most significant recent criticisms of child maltreatment research is that key constructs are poorly and/or inconsistently measured. To respond to this problem, the National Center on Child Abuse and Neglect (NCCAN) asked our research group to critically evaluate the current status of measurement technology in the broad area of child maltreatment. This article summarizes information we gathered as part of our effort to identify gaps in measurement knowledge about child maltreatment.

In order to maximize our ability to draw upon up-to-date knowledge in the diverse areas of child maltreatment research, we decided to survey active child abuse researchers and learn more about their opinions and experiences concerning several measurement issues. We developed a survey instrument that could be used with child maltreatment researchers from a variety of disciplines and research areas, and designed to inquire about important measurement and assessment issues in their own research.

The pool of surveyed researchers was derived from a variety of sources: a) nominations from members of our project's Advisory Board; b) a list of the Principal Investigators of federally funded child maltreatment research projects; c) self-nomination following a solicitation posted to the Child Maltreatment Research Listserv on the Internet; and d) first authors of recent child abuse research journal articles that included an identifiable measurement instrument. Attempts were made to select researchers from each of five broad child maltreatment research areas: sexual abuse, physical abuse, psychological abuse, neglect, and prevention. We recognized at the outset that the boundaries differentiating one area from another were somewhat blurred. However, we viewed this as a potential strength of the respondent pool, not a weakness, because it would be likely to increase the knowledge-base of the sample and provide more ideas about child abuse research measurement problems.

The survey instrument consisted of a variety of questions assessing respondents' main research interests, types of instruments employed in past and current research, use of standardized versus non-standardized measures, perceptions of strengths and weaknesses of existing instruments, and the creation of new instruments to address specific constructs. Respondents were also asked to identify constructs they believed were currently measured poorly, constructs they believed were adequately measured, and research areas that were understudied in child maltreatment research.

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Sample characteristics

Our search methods yielded 170 potential subjects. Numerous attempts were made to contact each potential subject to schedule a phone appointment. A total of 101 researchers (59.4% of the sample pool) completed the 30-minute telephone survey. Potential subjects who did not complete the survey either: a) could not be scheduled for an interview within the timeframe necessary to complete the study; b) stated that they had not conducted any child maltreatment research during the past five years; or c) refused to participate due to lack of time and/or compensation for participation. Of those who completed the survey, there were slightly more female (55) than male (46) respondents. The vast majority of respondents were White, and the average age was 44.9 (standard deviation = 8.1). In terms of their educational and occupational characteristics, most participants had doctoral degrees (85%), worked in university or medical school settings (80%), and identified research as their primary job duty (62%). With regard to the disciplines represented by respondents, Clinical Psychology was the most common, followed by Social Work, other areas of Psychology, and Sociology (see Table 1).

**Table 1
BREAKDOWN OF RESPONDENTS BY
PROFESSIONAL DISCIPLINE (N=101)**

Professional Discipline	Frequency
Clinical Psychology	38.6%
Social Work	18.8%
Developmental Psychology	9.9%
Other Area of Psychology	9.9%
Sociology	8.9%
Pediatrics	5.9%
Other*	4.0%
Psychiatry	2.0%
Counseling Psychology	1.0%
Nursing	1.0%

*Other = management consulting human services special education, and criminology

Researchers were classified by content area of child maltreatment research using two methods. First, participants were asked in which areas of child maltreatment they had conducted research during the past five years. Most respondents indicated that they had completed research in more than one area. As seen in Table 2, over three quarters of the participants reported having been engaged in some research activity with respect to Sexual Abuse, and more than half the sample also had conducted research on Physical Abuse and Neglect. Second, researchers were grouped according to their identified (i.e., by the authors) primary area of research. These groupings revealed that the Sexual Abuse group was the largest single group, followed by Physical Abuse, Prevention, Neglect, and Psychological Abuse, respectively.

continued on next page

Measurement in child abuse research

continued from page 7

Nearly one-third of researchers we surveyed indicated that they had created new measures in more than 50% of their research studies.

Use of standardized measures

As noted above, the dearth of standardized measures is an oft-cited criticism of child maltreatment research. Research on child maltreatment is a relatively young area, and little time has been devoted to instrument development. As a consequence, few measures specific to child abuse research have been adequately tested for reliability, validity, and other critical psychometric properties. In addition, researchers investigating the different forms of maltreatment (e.g., sexual vs. physical abuse) have functioned independently, with each group of investigators developing its own measures and research methods. Further, the types of issues addressed across disciplines often vary, resulting in discipline-specific constructs that require unique measures. For example, physical abuse researchers have focused primarily on parental behavior and developmental outcomes, whereas sexual abuse researchers primarily address the mental health impact of sexual abuse. Because of these differing emphases, there is often a lack of collaboration in instrument development across different areas of the child maltreatment field.

To obtain information concerning these issues, survey respondents were asked how frequently they used standardized measures in their research (see Table 3). Approximately half the sample indicated that they used standardized measures to assess the constructs of interest in at least 50% of their research projects. The converse of this is, of course, that virtually all researchers used unstandardized instruments at least occasionally, and it was not uncommon for nearly 50% of the sample to measure important constructs with unstandardized instruments. When asked about their reasons for choosing unstandardized measures, the large majority of respondents indicated that standardized measures did not exist for the construct they were studying. Not surprisingly, many researchers opted to develop their own instruments. Nearly one-third (31.4%) of researchers we surveyed indicated that they had created new measures in more than 50% of their research studies. Most of these researchers indicated that these newly developed measures had never been used by others investigating similar types of phenomena. One unintended consequence of this practice is an overabundance of measures for which the psychometric properties are either unknown or inadequate. Thus, it appears that many of the criticisms leveled at measurement in child maltreatment research are valid. Increased collaboration among researchers and increased attention to instrument development and validation are necessary to increase the credibility of child maltreatment research.

Construct measurement

In order to obtain more information concern-

ing the use and existence of standardized measures, we asked researchers their opinions concerning the assessment of constructs of interest, such as depression, sexualized behavior, PTSD, aggression, and the like. Respondents were asked to identify both constructs that have adequate measures, and those for which there is no adequate measure available. Each respondent was asked to identify three well-measured and three poorly-measured constructs. The lists generated by respondents included many examples of similar types of constructs. Therefore, for reasons of clarity, we have organized the responses into broad categories. These categories do not include each individual response, but are instead a compilation of the majority of responses.

**Table 2
PERCENTAGE OF EXPERTS COMPLETING RESEARCH IN EACH BROAD AREA OF CAN (IN PAST 5 YEARS)**

Area of CAN	Proportion of Respondents
Sexual Abuse	75.5%
Physical Abuse	70.6%
Neglect	62.7%
Emotional Abuse	49.0%
Other	28.4%

Interestingly, the construct most commonly mentioned by child maltreatment researchers for which good measures currently exist was Adult Symptoms of Psychopathology. Included under this heading were measures of adult anxiety, depression, and generalized distress. Other constructs that were also frequently nominated by respondents were Cognitive/Intellectual Functioning (such as IQ tests), General Child Behavior Problems, PTSD/Trauma Symptoms (such as symptom checklists), and Child Internalizing Symptoms, such as depression, anxiety, and fear. A small but noteworthy percentage of respondents stated that they believed

**Table 3
FREQUENCY OF USE OF STANDARDIZED MEASURES**

Frequency of Use	Proportion of Sample
0%	5.9%
<10%	10.8%
10-50%	28.4%
>50%	51.0%

that Child Sexual Behavior Problems were well-measured by parent report measures. Finally, several researchers mentioned constructs that fell under the general heading of Family-Parental Functioning. Included in this group are such constructs as parental abuse potential, family environment, and

continued on next page

Measurement in child abuse research

continued from page 8

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parenting effectiveness. Although these well-measured areas include important aspects of psychosocial functioning, only two, PTSD/Trauma Symptoms and Child Sexual Behavior Problems, might be considered uniquely of interest to child maltreatment researchers.

In contrast, many of the constructs nominated as having no adequate measures are central to the field of child maltreatment. For example, the two most frequently mentioned constructs that respondents indicated lacked adequate measurement were Defining Abuse/Trauma and Abuse Characteristics. The central issue that fell under the heading of Defining Abuse/Trauma was differentiation between children who were or were not victims of maltreatment.

Respondents indicated that they need some type of instrument that could aid in determining whether or not certain events experienced by a given child (or in the case of neglect, not experienced) ought to place that child in the abused/neglected group in their research studies. Many researchers mentioned the lack of adequate screening tools to assess prior victimization, which we also included under this heading. The Abuse Characteristics heading includes constructs used to differentiate among children who are identified as maltreated. Several respondents said they needed better measures

for such constructs as abuse severity, abuse duration, and disclosure variables (including assessment of interview quality and statement validity).

Researchers also nominated a variety of Effects on the Child as lacking adequate measurement, including attributional/cognitive effects, self-esteem, and shame. In addition, several respondents said they need better measures for Family/Relationship Issues, such as parent-child interaction quality and non-infant attachment; Parental/Social Support, especially that of non-offending parents; and Offender Attributes, particularly risk for reabuse. Only one respondent mentioned needing better measures for Ethnic/Cultural Issues in assessment.

As seen from these findings, according to those individuals who are actively doing research to improve our understanding of child maltreatment and its sequelae, a significant number of constructs that are central to child maltreatment still lack adequate measurement instruments. Further, probably the most important construct, the definition of abuse and trauma, was identified as one of the constructs for which adequate measurement is lacking. This failure to define abuse and trauma is particularly problematic in the child abuse field because of the multiple types of events being examined. There is often a lack of consensus in definitions for sexual and physical abuse, the most studied areas, and researchers would agree that there is virtually no consensus for defining neglect and

psychological abuse. Achieving consensus in definitions for these constructs would go a long way toward increasing collaboration among researchers and improving the overall quality of child maltreatment research.

Subjects were also asked to identify major issues or areas in child maltreatment that they felt were currently understudied due to poor measurement strategies. Again, because the answers given were so diverse, we have collapsed answers into broad categories. Researchers identified the following areas as being understudied: Gender Issues, including sex differences in response to maltreatment; Ethnic/Cultural Issues in both defining and responding to maltreatment, and Treatment Outcome for victims and offenders. Several researchers also identified Dissociation, Neglect, and Emotional Abuse as constructs that were poorly studied because adequate measures were unavailable. Also two areas outside the unique domain of child maltreatment were nominated frequently: Normal Sexual Development, and Resiliency. Not surprisingly, there was considerable overlap between areas identified as being understudied and constructs lacking adequate measurement strategies.

Future directions

These findings reflect an overabundance of idiosyncratic measures and overall dissatisfaction with existing measures, underscoring the need for further measurement development. Nearly three-quarters (73.5%) of the researchers we surveyed stated that they would support a federally funded research initiative aimed at the development of measurement tools, even if such an initiative would preclude another research topic from being considered for funding. However, focusing on instrument development before improving construct conceptualization would be putting the cart before the horse. Instrument development would readily follow the clear conceptualization and precise definition of constructs of interest.

Lest all of the above sound too negative, we want to stress that we are optimistic about the direction in which the field is headed. As a relatively young research area, it is to be expected that we would be in the early stages of measurement development. Each new field must struggle to define the relevant constructs and then design instruments that will measure them. The survey pointed out that many researchers are actively engaging in these pursuits. The final step in the process is the collaboration and sharing of measures across the different disciplines in the child maltreatment field. Among the many goals of this project were to produce a monograph reviewing measurement practices that are typically employed in child maltreatment research, to develop a searchable computerized database of measurement instruments commonly used, and to identify gaps in knowledge about measure-

continued on next page

Measurement in child abuse research

continued from page 9

ment as they pertain to child maltreatment. The review monograph and computer database are currently under development and should be available in several months. We hope that these products will significantly advance the effort to define constructs and develop measures so critical to the child abuse field at this time.

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PROFESSIONAL EXCHANGE:

The Role of Child Interview Specialists

—by Paul Stern, and
Bill Walsh

In the following exchange, two experienced professionals take opposing views on the role of child interview specialists in sexual abuse investigations.

USING THE CHILD INTERVIEW SPECIALIST TO ACHIEVE THE MOST PROFESSIONAL INTERVIEW

—by Paul Stern

Effectively interviewing a child suspected of being a victim of sexual abuse is a difficult task that requires special skills and sensitivity. This author believes that in criminal investigations the primary investigative interview should be conducted by a specially trained Child Interview Specialist (CIS).

Purpose of the interview

The purpose of the investigative interview is to gather as much reliable and accurate information as possible from a child about an allegation of sexual abuse (Toth, Whalen, and Dinsmore, 1987). It is the first opportunity law enforcement has to obtain the specifics of the abuse allegations firsthand. The

interviewer must simultaneously make introductions, build rapport and trust, be supportive, ascertain the language skills of the child, and empower the child to say "I don't know," "That's wrong," or "I don't want to talk." The interviewer must solicit detailed information about the abuse, obtain specific facts to satisfy statutory requirements, and fully document all that is said. To accomplish all this, an interviewer must be familiar with such issues as the dynamics of child abuse (Conte and Schuerman, 1987), children's developmental skills (Saywitz, 1990) and linguistic capabilities (Richardson, 1990), and the importance of avoiding unnecessarily leading or sug-

gestive questions (Goodman and Clarke-Stewart, 1991). The interviewer should be prepared for dealing with unresponsive children (MacFarlane and Krebs, 1986), recantation (Summit, 1983), avoidant children (Davies and Montegna, 1990), and the potential need for interview aids such as anatomical dolls (Everson and Boat, 1990). The interviewer must stay current with the research regarding children's disclosures of abuse and interview processes.

The Child Interview Specialist (CIS) combines the best of both disciplines: an interviewer trained in the best techniques for talking with child victims and a professional familiar with the needs of law enforcement.

Who should perform the interview?

Traditionally, police officers have been responsible for conducting child interviews. Police officers who possess the knowledge and skills outlined above can do an outstanding job in obtaining reliable disclosures (Spaulding, 1987). However, line officers often lack the specialized training, skills, or focus to conduct the most proficient interview possible. As the investigation of child sexual abuse becomes more specialized, so should the professionalism of those responsible for each of the investigative steps. Some have argued that rather than shift the burden of interviewing away from law enforcement, we should "be upgrading these investigatory systems so that investigators can do their job in the most skilled and professional manner possible" (Saunders, 1993). While that might be true, the reality of police agency budgetary constraints and competing criminal justice priorities makes such upgrading and ongoing training for multiple police officers unlikely.

Some have suggested that children suspected of being victims of child sexual abuse should be interviewed by mental health professionals (e.g., Lippmann, 1993). However, many mental health professionals lack expertise in the needs of the law enforcement community, a requirement for anyone conducting investigative interviews.

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One example of the CIS system

In 1987, Snohomish County, Washington, began to use CISs to conduct primary investigative interviews with children suspected of being victims of sexual abuse. These specialists are employees of the local hospital-based sexual assault center, which provides training, supervision, and funding, and handles all administrative responsibilities. In 1993, the two full-time and three part-time CISs performed over 700 interviews with children. The most experienced of our CIS's has conducted more than 2,500 interviews.

Allegations of sexual abuse are first routinely investigated by a patrol officer. He or she will take a minimal amount of information from the child, to

continued on next page