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Prosecuting Child Sexual Abuse

The Importance of Evidence Type

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Corroborating evidence has been associated with a decrease in children's distress during the court process, yet few studies have empirically examined the impact of evidence type on prosecution rates. This study examined the types of evidence and whether charges were filed in a sample of child sexual abuse cases ($n = 329$). Cases with a child disclosure, a corroborating witness, an offender confession, or an additional report against the offender were more likely to have charges filed, controlling for case characteristics. When cases were lacking strong evidence (confession, physical evidence, eyewitness), cases with a corroborating witness were nearly twice as likely to be charged. Charged cases tended to have at least two types of evidence, regardless of whether there was a child disclosure or not.

Keywords: *child sexual abuse; criminal justice; evidence; prosecution*

Increasing prosecution rates in cases of child sexual abuse is a frequently stated goal of law enforcement, district attorneys, legislators, and multi-disciplinary investigation teams wishing to improve children's safety (Cross, Finkelhor, & Ormrod, 2005; Ells, 2000; National Center for Prosecution of Child Abuse, 2004). Successful convictions of sexual abuse offenders can provide victims with a sense of empowerment and safety, move offenders off the street and hold them accountable for their crimes. Success by the criminal justice system is also likely to encourage victims and their families to cooperate with prosecutors and view the criminal

justice system as a valuable resource. A recent qualitative study of families involved in child sexual abuse investigations found that a primary complaint by parents was the feeling that not enough was being done to prosecute the offenders (Jones, Atoro, et al., 2008).

Although prosecutors report that cases accepted for prosecution tend to have strong evidence (Freyd, 2003; Murphy, 2003) and although corroborating evidence has been associated with a decrease in child distress during the court process (Goodman et al., 1992; Lipovsky, 1994), only a handful of studies have empirically examined the impact of types of evidence on prosecution rates (Bradshaw & Marks, 1990; Brewer, Rowe, & Brewer, 1997; Cross, De Vos, & Whitcomb, 1994). This study examines the relationship between the amount of evidence and the types of evidence available in a sample of child sexual abuse cases and whether charges are filed in those cases. The results provide information about the decision to prosecute child sexual abuse, and they have implications for policies and programs wishing to increase prosecution in these cases.

The decision to prosecute child sexual abuse is a complicated process in part because of the special dynamics surrounding child abuse: The crime of sexual abuse is often committed in private; there are rarely eyewitnesses; and the child's testimony usually provides most of the information about the crime. When children are young, the quality of their testimony may be compromised by developmental limitations in memory and language. Furthermore, there are potential complications to sexual abuse cases: The child may have a preexisting close relationship with the offender, thereby increasing the chance of reluctant cooperation in the court process. In addition, the criminal court process can be extremely lengthy for sexual abuse cases (Walsh, Lippert, Cross, Maurice, & Davison, 2008), and caregivers

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may be concerned about the stress placed onto their children as a result of the process (Goodman, Quas, Bulkley, & Shapiro, 1999; Lipovsky, 1994; National Center for Prosecution of Child Abuse, 2004).

Child sexual abuse is distinct from other types of crimes because multiple forms of convincing evidence are often lacking (Myers, 2002). As such, prosecutors must rely heavily on children's reports of the crime. Although experienced prosecutors "realize that a conviction can be obtained based solely upon the credible statements and/or testimony of the child victim" (National Center for Prosecution of Child Abuse, 2004, p. 178), this is not always straightforward. Whether and how well children provide usable testimony depends on their understanding and memory of the abuse, their ability to verbally describe what happened, and their concerns about the consequences (Gilstrap & Ceci, 2005; Lippert, Cross, Jones, & Walsh, *in press*). Disclosures, for example, are more likely with older children than younger children (Lippert et al., *in press*). Disclosures also vary in quality, with older children generally providing more detailed disclosure (London, Bruck, Ceci, & Shuman, 2005).

Although sexual abuse investigations commonly center on testimony from the alleged victims, other evidence may be available in these cases (National Center for Prosecution of Child Abuse, 2004). Corroborating evidence (i.e., evidence that can confirm or add to a child's statement; Veith, 1999) can include developmentally unusual sexual behavior by the victim, unusual psychological symptoms (e.g., severe nightmares), medical evidence, eyewitnesses to the alleged crime, witnesses who can confirm some aspect of the victims' testimony, offender confessions, physical or material evidence, or an additional complaint against the offender that supports the victims' testimony (Lanning, 2002; Myers, 2005). Myers (2005) describes the difficulties for prosecutors when corroborative evidence is lacking:

Suppose further that the child demonstrates none of the developmentally unusual sexual behaviors that are related to sexual experience, that there is no corroborating evidence, and that the suspect kept his mouth shut. In such a case, the evidence of sexual abuse consists of non-sexual symptoms (e.g., nightmares), the child's out-of-court disclosure, and the child's testimony. Although one may place confidence in such evidence (depending on the strength of the child's words), the evidence is certainly less persuasive without the medical evidence, sexualized behavior, corroboration, and inculpatory statements. (p. 388)

A few previous studies confirm that evidence besides child disclosure improves the chance of successful prosecution. Most of the research in this area has focused on medical evidence, although such evidence of sexual

abuse is rare (Hegar, Ticson, Velasquez, & Bernier, 2002). One study found that medical evidence increased the likelihood of prosecution (Bradshaw & Marks, 1990), although another study did not (Cross et al., 1994; Whitcomb et al., 1994). Brewer et al. (1997) found that cases with medical evidence were more likely to be prosecuted than cases without such evidence only when serious abuse was involved.

Four other types of evidence have been associated with a greater likelihood of prosecution: offender confession (Bradshaw & Marks, 1990; Cross et al., 1994), the presence of physical evidence, an eyewitness to the abuse, and hearsay (Cross et al., 1994). When controlling for other variables, only physical and eyewitness evidence were associated with acceptance for prosecution (Cross et al., 1994). Bradshaw and Marks (1990) found that cases with offender confessions had a greater likelihood of being accepted for prosecution as well as leading to a conviction. It is important to note, however, that both of these studies examined cases already referred to prosecution. In contrast, the current study explores evidence available in reported child sexual abuse cases, not just those referred to prosecution, which previous research suggests differ from those not referred (Stroud, Martens, & Barker, 2000).

Experts in the field suggest that evidence besides child report could benefit children directly by reducing the stress of the court experience (Lipovsky, 1994). For example, corroborating evidence could decrease the likelihood that a child has to testify, by increasing the likelihood of a plea bargain. It could also reduce the harshness of cross-examination (Whitcomb et al., 1994). When a child's statement is the only evidence, defense attorneys can more easily argue that the child's allegation has been tainted by faulty memory and suggestibility (Goodman et al., 1992; Holmgren, 1997).

Current Study

For communities to focus their efforts to improve the prosecution of child sexual abuse, research is needed on the types of evidence available in sexual abuse cases and the effect on prosecution. In contrast to many studies, the current study examines the presence of evidence in all investigated cases of child sexual abuse, not only those referred to prosecution. The current study also includes additional categories of evidence not included in other studies—in particular, corroborative evidence supporting the credibility of the child victim, which experts such as Vieth (1999) and Lanning (2002) suggest is important.

As such, we explore whether some types of evidence are more prevalent for certain types of cases. We examine the extent to which case characteristics and types, as well as amount and level of evidence, help to predict whether charges are filed. We also examine reasons why charges were not filed and the relationship between evidence and conviction.

Method

Data for the current study were obtained from the Dallas Children's Advocacy Center (Texas), one of four sites participating in the Multi-Site Evaluation of Children's Advocacy Centers (for information about the evaluation, see Cross et al., in press; Cross, Jones, Walsh, Simone, & Kolko, 2007; Jones, Cross, Walsh, & Simone, 2007; Walsh, Cross, Jones, Simone, & Kolko, 2007). Because of the center's detailed and thorough collection of supplementary criminal justice data, only data from this site were used in the current study. In addition to cases from the center itself, cases were drawn from two cities in Dallas County, Garland and Irving, which did not have an established Children's Advocacy Center. All are served by the Dallas County district attorney. The University of New Hampshire Institutional Review Board for the Protection of Human Subjects in Research approved the informed consent procedures and protocols for protecting participants' rights for the research. Data were collected between December 2001 and December 2003. Cases were followed until early June 2005 to obtain criminal justice outcomes. Case file data were abstracted from agency files (Children's Advocacy Center, Child Protective Services, police, district attorney, and other agency records) by one of the authors.

Sample

Systematic sampling (e.g., taking every third case) was used to enroll research cases from the Children's Advocacy Center and from comparison community agencies (e.g., Child Protective Services, police). If there were multiple victims in the same family or multiple perpetrators per case, data collection focused on one randomly selected victim or perpetrator. The initial sample for this analysis included only child sexual abuse cases with adult offenders ($N = 360$). Five cases were missing information on whether charges were filed; thus, they were not included. In 26 cases, an offender could not be identified; the offender or family fled during the investigation; or the family was unwilling to press charges. Although the family does not

necessarily determine whether charges are filed, prosecutors generally consult with victims, families, and therapists before reaching a final charging decision (National Center for Prosecution of Child Abuse, 2004). The final sample included 329 cases.

The victims were primarily female (87%) and ethnically diverse: 26% White non-Hispanic; 33% Black non-Hispanic; 37% Hispanic; and 4% other. The ethnic makeup of the sample was similar to the demographics of Dallas County (U.S. Census, 2005). Approximately a third (36%) of the children were 7 years old or younger; 28% were between the ages of 8 and 11; and 36% were 12 to 17 years old. The offenders were primarily male (94%); 36% were between 18 and 29 years old; 34% were between 30 and 39 years old; and 30% were 40 years old or older. Most were family members or were intimate with the family (73%)—for example, offenders included other relatives (24%), biological parents (22%), parents' boyfriends/girlfriends (15%), and stepparents (12%). Penetration was alleged in about half the cases (49%). Nearly a third (31%) of the children had a forensic medical exam.

Variables

Dependent variables. Two criminal justice outcomes were examined: charges filed (i.e., whether charges were filed in an investigation of alleged sexual abuse) and conviction (i.e., whether a charged case ended by guilty plea or conviction at trial).

Independent variables. We collected data on several child, offender, and case characteristics from the case files to serve as covariates. Child characteristics included sex, race, and age. Some studies have found a bimodal relationship between child age and prosecution, with elementary school children most likely to have their cases prosecuted (Finkelhor, 1983; Tjaden & Thoennes, 1992) because very young children appear more vulnerable to an interviewer's misleading questions (Gilstrap & Ceci, 2005) and because adolescent victims are sometimes perceived as being less credible (Elstein & Davis, 1997; Lanning, 2002). Therefore, child age was coded into three categories: young child (2-7 years old), elementary school child (8-11 years old), and adolescent (12-17 years old). Offender characteristics included sex, relationship to child (intrafamilial or extrafamilial), and age. Case characteristics included the type of sexual abuse (penetration or not) and whether a forensic medical exam was conducted.

The following categories of evidence were coded: a disclosure from the victim, a corroborating witness (i.e., someone who could corroborate any part of the victim's statement; for example, if the child alleges that the abuse occurred during a fishing trip on a particular day, a corroborating witness would know that the victim and the offender went fishing on that day); an offender confession; an eyewitness; physical evidence (e.g., hotel receipt, photographs, or any objects that corroborate the victim's statement); additional child abuse report against the offender (i.e., other victims came forward or were discovered after the child's investigation); behavioral evidence (i.e., nightmares, bedwetting); medical evidence; psychological/psychiatric evidence; and an open-ended *other* category, which included such circumstances as the offender's having another sexual case pending, available polygraph results, and child pornography found on a computer.

The number of types of supporting evidence was also calculated. We did not include disclosure in the number of types of supporting evidence, because we were interested in exploring the degree to which supportive evidence itself encourages prosecution, aside from whether there was a child disclosure or not. Four categories were created: zero types of supporting evidence, one type, two types, and three or more types.

An ordinal scale was developed to operationalize the strongest available evidence in a case. Using a similar classification system as that of Cross et al. (1994), Level 1 represents cases in which there is no evidence or only the victim's report. Level 2 includes evidence that requires a greater degree of inference or expertise: psychological, medical, or behavioral evidence; an additional child abuse report against the offender; or a corroborating witness. Level 3 comprises more tangible evidence, including physical or eyewitness evidence. Finally, Level 4 represents an offender confession (regardless of what other type of evidence is available).

Additional variables. Reasons why the case was not charged were recorded according to information in the case file. Categories include the following: insufficient evidence, lack of child disclosure, nonparticipation by the victim, statute of limitations, pretrial intervention, and an open-ended *other* category.

Analysis

To examine the association between case characteristics and type of evidence, Pearson correlations were calculated. To explore the association between case characteristics (including the type, amount, and level of

evidence) and charges filed, Pearson χ^2 and logistic regression analyses were conducted. We include Cramer's V to examine effect sizes, or the strength of the relationship between two variables. A moderate relationship between two variables occurs when Cramer's V equals .20.

One variable, offender confession, had 28% missing data. To increase the number of cases in the regression and to account for differences in cases with and without missing data, a series of orthogonal contrasts were created representing whether cases had valid or missing data for this variable, following the method described by Cohen and colleagues (Cohen, Cohen, West, & Aiken, 2003). Variables whose correlation with charging was statistically significant ($p < .05$) were included in the regression model. Because the outcome of charges filed was relatively common (>10%), we corrected the odds ratios to better represent the true relative risk, according to the method described by Zhang and Yu (1998). Frequency distributions were examined to understand reasons why charges were not filed, and Pearson χ^2 analyses were used to examine evidence and conviction.

Results

Types of Evidence

The majority of cases had a child disclosure (87%); nearly half the cases (46%) had a corroborating witness; and about one in five cases had the following forms of evidence: offender confession (22%), behavioral evidence (20%), and eyewitness account (18%). Other types of evidence each occurred in less than 15% of cases: physical evidence (14%), additional report (11%), medical evidence (9%), other evidence (8%), and psychological evidence (4%). The number of types of supporting evidence varied considerably (i.e., evidence aside from whether there was a child disclosure or not). About a quarter of cases (26%) had no supporting evidence; 35% had one type; 23% had two types; and 17% had three or more types.

Next, we examined the strongest available evidence. After Level 4 (offender confession), 21% of cases were classified as Level 3 (physical or eyewitness evidence); 36% of cases were classified as Level 2 (psychological, medical, behavioral evidence; an additional report; or a corroborating witness); and 27% were classified as Level 1 (child disclosure or none).

There was a strong effect size (Cramer's V = .65) for the association between the strongest available evidence and the number of types of supporting evidence, $\chi^2(9, n = 329) = 414.7, p < .001$. Just over half (57%) the Level 4 cases had at least three types of other evidence. Cases with Level 3 were

about as likely to have three types of evidence (31%) as they were to have one type of evidence (28%). The majority (70%) of cases with Level 2 had only one type of evidence. The majority (94%) of cases with Level 1 had no evidence. Only five cases had a child disclosure as the only type of evidence.

Few case characteristics were associated with particular types of evidence (see Table 1). Girls were less likely to have behavioral evidence; White non-Hispanic children were more likely to have psychological evidence; cases with older victims were more likely to include a child disclosure (see also Lippert et al., in press), a corroborating witness, offender confession, and physical evidence; and cases with younger victims were more likely to include behavioral evidence. Compared to cases with no alleged penetration, cases involving alleged penetration were more likely to include a corroborating witness, physical evidence, and medical evidence. Three case characteristics were associated with the level of evidence. Cases with older victims, an extrafamilial offender, and a forensic medical exam had a stronger level of evidence. Cases with alleged penetration and a forensic medical exam had more types of supporting evidence.

Charges Filed

Nearly two thirds (64%) of cases had charges filed against an alleged offender. As shown in Table 2, cases with older victims, male offenders, and alleged penetration were significantly more likely to have charges filed. All types of evidence except for two increased the likelihood that charges would be filed following an investigation: Cases that included behavioral evidence were significantly *less* likely to be charged, a finding likely related to the correlation between behavioral evidence and younger victims. The presence of psychological evidence did not, by itself, increase the likelihood that charges would be filed.

Most notable is the strong effect size for the association between having a corroborating witness and charges being filed (Cramer's $V = .41$). Offender confession also had a relatively strong effect size (Cramer's $V = .28$). Four other types of evidence had a moderate effect size with charging (average Cramer's $V = .19$): child disclosure, eyewitness account, physical evidence, and an additional report against the offender.

Cases with charges filed had significantly more types of supporting evidence, and there was a strong effect size for this association (Cramer's $V = .38$). It is important to note that when this analysis was conducted for cases with and without a child disclosure, the pattern was similar, with charged cases having two or three types of evidence. In sum, 18 of the 43 cases with

Table 1
Pearson Correlations Among Case Characteristics and Evidence Type (n = 329)

Characteristics	CHLD DACL	CORR WTNS	OFFD CONF	BEHV	EYE- WTNS	PHYS	ANTH REP	MED	OTH	PSYC	TYPE EVID	STRG LVL
Female victim	-.02	.05	.06	-.16**	.02	-.02	.01	.09	.08	-.03	.03	.01
White non-Hispanic	-.08	-.06	.05	.09	-.05	.01	-.04	-.01	-.02	.16**	.01	.03
Black non-Hispanic	-.02	-.04	-.05	.01	-.01	.02	-.07	.01	-.01	-.02	-.04	-.04
Hispanic	.09	.11	.01	-.06	.04	-.10	.12*	-.04	.04	-.11	.05	.02
Other ethnicity	-.01	-.03	-.02	-.06	.04	-.04	-.02	.10	-.06	-.04	-.05	-.02
Child age	.19**	.16**	.13*	-.27**	-.05	.12*	.06	.01	.10	.01	.07	.12*
Male offender	.10	.12*	.10	-.18**	.09	-.03	.01	.03	.02	-.02	.02	.04
Offender age	-.12*	.04	-.12	.03	.01	.01	.10	-.07	.11*	.10	.05	-.02
Intrafamilial offender	-.08	.02	-.11	.09	-.01	-.25**	-.03	.09	.02	.05	-.04	-.14*
Penetration alleged	.09	.12*	.07	-.08	.01	.23**	-.07	.20**	.02	-.03	.12*	.11
Forensic medical exam	.06	.14*	.08	-.04	.11	.03	.01	.45**	.05	-.10	.21**	.15**

Note: CHLD DSCL = child disclosure; CORR WTNS = corroborating witness; OFFD CONF = offender confession; BEHV = behavior; EYE-WTNS = eye-witness; PHYS = physical; ANTH REP = another report; MED = medical; OTH = other; PSYC = psychological; TYPE EVID = no. of types of evidence; STRG LVL = strongest level.
 * $p < .05$. ** $p < .01$.

Table 2
Charging Rates by Predictor Variables (N = 329)

Variables	Charged (%)	χ^2	Cramer's V
Child sex		3.80	.11
Male	51		
Female	66		
Child ethnicity		7.27	.15
White, non-Hispanic	57		
Black, non-Hispanic	60		
Hispanic	73		
Other	54		
Child age		29.37***	.30***
7 and younger	46		
8 to 11	78		
12 to 17	73		
Offender sex		9.50**	.17**
Male	67		
Female	32		
Offender age		2.26	.08
18 to 29	60		
30 to 39	65		
40 to 75	69		
Offender relationship		0.22	.03
Intrafamilial	64		
Extrafamilial	67		
Penetration alleged ^a		23.78***	.28***
Yes	83		
No	57		
Forensic medical exam		4.03	.11 [†]
Yes	73		
No	61		
Evidence available at prosecution ^b			
Child disclosure	68 (No: 42)	11.00**	.18**
Corroborating witness	85 (No: 45)	51.76***	.41***
Offender confession ^a	91 (No: 59)	18.30***	.28***
Behavioral	42 (No: 68)	14.80***	.22***
Eyewitness account	82 (No: 59)	10.71**	.19**
Physical	86 (No: 59)	12.22***	.20***
Additional report	89 (No: 59)	11.43**	.19**
Medical evidence ^a	86 (No: 60)	7.20**	.15**
Other evidence	84 (No: 63)	4.52 [†]	.12 [†]
Psychological	83 (No: 62)	2.26	.09
No. of types of supporting evidence ^c		48.09***	0.38***
None	46		
One	53		
Two	80		
Three or more	95		
Strongest evidence ^d		36.76***	.33***
Level 1	47		
Level 2	57		
Level 3	79		
Level 4	91		

^aThe percentage of missing data is greater than 5%. The average percentage of missing data is 5%, except for offender confession, which had 28% missing data.

^bMultiple responses possible.

^cExcluding child disclosure.

^dLevel 1 = no evidence or only child disclosure. Level 2 = psychological, medical, behavioral evidence; additional child abuse report against the offender; or a corroborating witness. Level 3 = physical or eye-witness evidence. Level 4 = offender confession.

[†] $p < .05$. ** $p < .01$. *** $p < .001$.

no child disclosure were charged, and the majority (77%) went forward with either two or three types of evidence. There also was a large effect size (Cramer's $V = .33$) for the association between the strongest available evidence and charging.

Next, we conducted a logistic regression to examine the predictors of charges being filed. As shown in Table 3, cases including a young victim or an adolescent were less likely to have charges filed when compared to cases with a elementary school child. More cases with penetration had charges filed, controlling for other variables. Several types of evidence uniquely predicted charges being filed. More cases had charges filed when they included a child disclosure, a corroborating witness, an offender confession, or an additional report. More cases had charges filed with a valid offender confession than without.

A second regression (not presented here) showed that more cases with Level 4 evidence (confession) had charges filed (relative risk [RR] = 1.55, confidence intervals [CI] = 1.34–1.63, $p < .001$), and more cases with Level 3 (physical or eyewitness evidence) had charges filed (RR = 1.42, CI = 1.21–1.54, $p < .01$) as compared to the reference group, Level 1. Level 2 cases were not more likely to have charges filed as compared to Level 1 cases, controlling for other variables.

Because most cases (63%) were classified as either Level 1 or Level 2, we examined which types of evidence were predictive of charges filed for these cases lacking stronger levels of evidence. This regression (not presented here) showed that more cases had charges filed when accompanied with a child disclosure (RR = 4.08, CI = 2.02–4.83, $p < .01$), with additional reports against the offender (i.e., more victims; RR = 2.00, CI = 1.27–2.10, $p < .05$), or with a corroborating witness (RR = 1.89, CI = 1.33–2.29, $p < .01$), controlling for other variables.

Next we examined reasons why charges were not filed. The most common reasons included insufficient evidence (81%) or a vague or incomplete child disclosure (48%). Other reasons included nonparticipation by the victim (3%) and pretrial intervention (2%). Twenty-six percent of cases had other reasons, such as the offender's passing a polygraph, the suspected coaching of a child, the offender's subsequent arrest for other offense, child recantation, or suspected custody issues.

Conviction

Of those charged, 80% of offenders were convicted, with the majority (82%) convicted via a guilty plea versus going to trial. Of those convicted,

Table 3
Logistic Regression Predicting Charges Filed ($n = 262$)

Predictor	Relative Risk ^a	95% Confidence Interval
Young child (7 and younger) ^b	0.68*	0.41–0.94
Adolescent (12 and older) ^b	0.65*	0.34–0.99
Male offender	1.76	0.57–2.73
Penetration alleged	1.33*	1.09–1.50
Child disclosure	1.98**	1.47–2.24
Corroborating witness	1.70***	1.39–1.93
Offender confession (valid vs. missing)	1.14*	1.03–1.24
Offender confession (vs. no)	1.27*	1.06–1.43
Eyewitness	1.24	0.87–1.48
Physical	1.30	0.85–1.55
Additional report	1.53*	1.14–1.65
Behavioral	0.78	0.48–1.07
Medical evidence	1.41	0.91–1.61
Other evidence	1.29	0.84–1.50

a. Corrected odds ratios.

b. Reference is elementary school child (8–11 years old).

* $p < .05$. ** $p < .01$. *** $p < .001$.

70% had incarceration imposed. Cases with more types of supporting evidence were significantly more likely to be convicted and to be so by a guilty plea. For cases in which charges were filed, convictions were obtained in 61% of cases with no evidence supporting a child's disclosure, in 87% of cases with one type of supporting evidence, in 82% of cases with two types of supporting evidence, and in 84% of cases with three types of supporting evidence, $\chi^2(3, n = 143) = 8.1, p < .05$. There was a moderate effect size between conviction and number of types of evidence, Cramer's $V = .24, p < .05$. Among cases with no supporting evidence, 59% were convicted via a guilty plea; among those with one type, 91%; among those with two types, 81%; among those with three types, 84%, $\chi^2(3, n = 114) = 8.05, p < .05$. There was a moderate effect size between guilty plea and number of types of supporting evidence, Cramer's $V = .27, p < .05$.

Convictions were also more likely when there was a stronger level of evidence, Cramer's $V = .24, p < .05$. The majority of Level 4 cases were convicted, at 91%; Level 3, 86%; Level 2, 78%; and Level 1, 63%, $\chi^2(3, n = 143) = 8.4, p < .05$.

Discussion

The study found that four types of evidence uniquely predicted whether charges were filed following an investigation of child sexual abuse: a victim disclosure, a corroborating witness, an offender confession, or an additional report against the offender (i.e., additional victims). Nearly half the cases had corroborating witnesses, and this type of evidence had the strongest relationship to the likelihood that charges would be filed. Even when cases lacked stronger levels of evidence—such as a confession, physical evidence, or an eyewitness—cases with a corroborating witness were nearly twice as likely to be charged. Communities wishing to improve prosecution in sexual abuse cases may want to look toward increasing efforts by police to obtain statements from corroborating witnesses.

Because cases referred to prosecutors' offices tend to differ from those not referred (Stroud et al., 2000), a strength of the current study is the ability to assess the type of evidence before any filtering of the criminal justice system. Rather than examine all investigated child sexual abuse cases, as the current study did, most studies on the prosecution of child sexual abuse use cases already referred to prosecutors' offices (Cross, Walsh, Simone, & Jones, 2003). As such, the majority of cases had child disclosures; about half had corroborating witnesses; and about one in five had an offender confession, behavioral evidence, or an eyewitness account. The other types of evidence occurred in less than 15% of cases. In one of the few other studies to explore types of evidence (but in a sample of cases already referred to prosecution), about a third of cases had offender confessions, medical evidence, or psychological evidence, and about 15% of cases had new reports against the offender or eyewitnesses (Cross et al., 1994; Whitcomb et al., 1994). Thus, both these studies suggest that various types of evidence generally exist in a minority of cases. Notable exceptions include a child disclosure and a corroborating witness, which occurred much more frequently.

Not only did particular types of evidence uniquely predict whether charges were filed, but more types of supporting evidence and stronger levels of evidence increased the likelihood of charging. Cases with children's disclosures were not more likely to have more types of other evidence. Of those lacking a disclosure yet charged, the majority had at least two types of evidence. This should increase investigators' incentive to search for more evidence, even when children cannot talk about the sexual abuse. Cases with more types of supporting evidence and with stronger evidence were also more likely to be convicted, usually by a guilty plea.

A number of implications emerge from this analysis. First, from a criminal justice perspective and a child advocacy perspective, it is heartening

that only a minority of charged cases were limited to the child's disclosure as evidence. Charged cases tended to have at least two types of evidence. This suggests that the notion that child sexual abuse cases "come down to the child's word against the offender's" is an overstatement. Evidence was often available to support child victims, although we cannot fully assess the quality of the evidence. Older victims tended to have a disclosure, a corroborating witness, an offender confession, and physical evidence, suggesting that evidence collection for younger victims may be more difficult or may require more rigorous pursuit. There was no difference, however, in the overall number of types of evidence by child age.

Second, it is encouraging that a child disclosure and a corroborating witness were common and were significant predictors, because there has been considerable training on obtaining valid and reliable child disclosures. A number of specialized child forensic training programs have been developed to help increase interviewers' skills and sensitivity with children. These include basic, advanced, and Spanish-speaking forensic interviewing workshops at the National Children's Advocacy Center (see <http://www.nationalcac.org>), the CornerHouse Forensic Interview training (see <http://www.cornerhousemn.org>), and the Forensic Interview Clinics of the American Professional Society on the Abuse of Children (<http://www.apsac.org>). There has also been training by the National Center for Prosecution of Child Abuse, such as Equal Justice for Children: Investigation and Prosecution of Child Abuse (see http://www.ndaa.org/education/apri/equal_justice_2008.html) and two important practice publications on obtaining corroborating evidence (Lanning, 2002; Veith, 1999). Furthermore, research shows that corroborating evidence, in addition to a child disclosure, may lessen children's distress during the court process (Lipovsky, 1994).

A corroborating witness is one type of corroborating evidence that needs much more research for practitioners to better understand how this type of evidence is helpful. Unlike other types of evidence, such as medical evidence and physical evidence, a corroborating witness might exist for a range of cases, given solid investigative work. When considering the few statistical relationships that we found between type of evidence and specific case characteristics, there do not appear to be case profiles that are more likely to have particular types of evidence. When we limited the regression to cases without stronger levels of evidence, cases with a corroborating witness were nearly twice as likely to be charged. This shows that even in the absence of an offender confession, physical evidence, or an eyewitness, having a corroborating witness is a powerful predictor of charging.

Third, it is important to recognize the complex and extenuating circumstances that may make prosecution unlikely or not possible, even in cases

with many types of evidence. In this sample, 7% of the cases were not charged, because either the offender and/or family could not be located or the family refused to press charges. It is important to point out that for cases without the goal of prosecution, enhancing evidence may help encourage a just response to child sexual abuse. Evidence, for example, could encourage an offender to seek treatment, or it may be used to bolster children's certainty about their perceptions of the abuse in psychotherapy.

Fourth, given the paucity of research about policies and programs that enhance child sexual abuse prosecution, there is a need for more criminal justice data on this issue. The Dallas Children's Advocacy Center, for example, made a commitment to the Multi-Site Evaluation of Children's Advocacy Centers by collecting the data, offering its leadership, and providing resources. Given the many connections that Children's Advocacy Centers have to district attorney offices, they could play a pivotal role in understanding which policies and programs will improve the criminal justice system's response to child sexual abuse.

Given the wave of policies that increase the severity of sanctions for child sexual offenders—such as civil commitments, mandatory tracking devices, sex offender registrations, and community notification programs (Broderick, 2005; Broderick, 2006; Levenson & Cotter, 2005; McPherson, 2007; Tewksbury, 2005)—it is important to recognize that these policies affect only a small subset of all sexual abuse offenders. As such, a more nuanced understanding is needed about the charging decision and what types of cases are actually charged.

There are several limitations to note regarding the current study. First, because the present analysis included only one county, the generalizability of these findings is limited. Charging rates in this study, however, are consistent with those of other studies (Cross et al., 2003). Future research should explore how the types of evidence included in this study improve prosecution at other locations. Second, we did not have a measure of the quality of evidence. Such quality is likely to vary and to play an important role in the charging decision. It would also be important for future research to gather information on the relationship of the corroborating witness to the victim. Third, a number of potentially important variables were not included in this study. These include a defendant's prior criminal record, a defendant's economic status (i.e., ability to post bond and attain a private attorney), and whether the reporting of abuse was delayed. All of these are likely to affect the types and amount of available evidence, and they should be included in future research.

These results serve as a useful counterweight to publications that have discussed the obstacles to prosecution, the mistakes of prosecutors, and the

overzealousness of district attorneys on given cases (see Dziech & Schudson, 1989; Wright, 1995). Certainly, prosecution of child sexual abuse, like all complex human endeavors, needs continual improvement, but these results suggest that police and prosecutors are indeed finding evidence in many cases and that evidence has a bearing on the decision to file charges and on the conviction rate of offenders. Moreover, attention to types of useful evidence in child sexual abuse cases, such as corroborative evidence to support children's credibility, appears to have an impact. A process of continually working to improve evidence collection, aided by empirical research, can help increase the effectiveness of criminal justice and child advocacy efforts even further.

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