INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps. Each original is also photographed in one exposure and is included in reduced form at the back of the book.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.
Factors utilized in screening and substantiation decisions of reports of maltreatment of children in out of home care

Murphy, Sara K., Ph.D.
The Ohio State University, 1994
FACTORS UTILIZED IN SCREENING AND SUBSTANTIATION DECISIONS
OF REPORTS OF MALTREATMENT OF CHILDREN IN OUT OF HOME CARE

DISSERTATION

Submitted in Partial fulfillment of the Requirements for the
Degree Doctor of Philosophy in the Graduate School of the
Ohio State University

By
Sara K. Murphy, B. S., M.S.W.

* * * * * *

The Ohio State University
1994

Dissertation Committee:
Denise Bronson
Nolan Rindfleisch, Chair
Elizabeth Segal

Approved by
Nolan Rindfleisch
Adviser
College of Social Work
To John and Lyrin Murphy
whose unending love and support made this effort possible
ACKNOWLEDGMENTS

An endeavor such as this dissertation can never be brought to completion without the support and assistance of colleagues, mentors, and friends. At the risk of being inconclusive, I would like to express my gratitude to a number of people who have supported, encouraged, and acted as a cheering section throughout this program.

First, I would like to thank the members of my dissertation committee. Each has helped in their own special way. Nolan Rindfleisch, as chair of the committee, generously gave of his time, energy, and patience. He has patiently walked with me through this learning process and has been a model of good social work practice. Liz Segal and Denise Bronson made me look at the research through the eyes of someone who had not lived this particular project as I was living it. They helped me clarify areas that I would never have seen on my own.

Jerry Bean provided a window into the world of statistics and SPSS and offered continuous support and consultation.

The staff of the children's services agencies gave their time and their expertise to develop the instrument and then graciously completed their task by being the respondents for the research.
Penny Wyman diligently edited the entire document.

I would like to thank my "cheering squad": Marge McMillin, the staff at Catholic Social Services, Eleanor Fox, Sue Ellen Eigle, and Hallie Walker. Their support, humor, and encouragement made the way much easier.

Finally, I would like to thank John and Lyrin Murphy whose belief in me and willingness to do whatever was necessary to make the way smoother for me made it possible to complete this course of study.
VITA

Date of Birth ................................................................. August 22, 1944

1971 .................................................................................. B.S., Bradley University
Peoria, Illinois

1979 .............................................................................................................. M.S.W.,
The Ohio State University,
Columbus, Ohio

1980 - 1987 ........................................................................ Executive Director,
Choices for Victims of Domestic Violence,
Columbus, Ohio

1987 - present ................................................................................ President,
Catholic Social Services,
Columbus, Ohio

FIELDS OF STUDY

Major field: Social Work

Studies in Social Work Administration and organizational
behavior, Dr. Nolan Rindfleisch, Adviser
TABLE OF CONTENTS

ACKNOWLEDGMENTS ........................................................................................................ iii

VITA .................................................................................................................................... v

LIST OF TABLES ........................................................................................................ viii

LIST OF FIGURES ........................................................................................................ ix

CHAPTER ....................................................................................................................... PAGE

I. INTRODUCTION

Purpose .......................................................................................................................... 1
Background of the Issue ............................................................................................... 1
  Reporting Trends of Child Maltreatment .................................................................. 7
  Screening in IntraFamilial Child Welfare ................................................................. 9
  Investigation and Substantiation of Reports ............................................................ 13
Problem Statement ...................................................................................................... 14
Definition of Terms ...................................................................................................... 15
Research Questions ...................................................................................................... 16

II. REVIEW OF RECENT LITERATURE

Overview ...................................................................................................................... 18
Child Welfare Decision Making: IntraFamilial ......................................................... 18
Studies of Screening and Substantiation Decisions ............................................... 23
Decision Making: Out of Home Maltreatment ....................................................... 25
Conceptual Frameworks .............................................................................................. 27
  Purposes of Maltreatment Definitions .................................................................. 28
  Theoretical Perspective .......................................................................................... 31
Judgment Modeling in Social Welfare Decision Making ....................................... 34
  Use of Vignettes in Judgment Modeling ............................................................... 38
Summary ...................................................................................................................... 42
# LIST OF TABLES

<table>
<thead>
<tr>
<th>TABLE</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cue Variables and Level of Each Variable</td>
<td>62</td>
</tr>
<tr>
<td>2. Descriptive Characteristics of Respondents</td>
<td>78</td>
</tr>
<tr>
<td>3. Distribution of Independent Variables</td>
<td>80</td>
</tr>
<tr>
<td>4. Frequency Distribution of Decision to Substantiate or Not Substantiate Maltreatment for All Respondents</td>
<td>84</td>
</tr>
<tr>
<td>5. Stem and Leaf Displays and Boxplots for Each Respondent In County A</td>
<td>85</td>
</tr>
<tr>
<td>6. Stem and Leaf Displays and Boxplots for Each Respondent In County B.</td>
<td>88</td>
</tr>
<tr>
<td>7. Stem and Leaf Displays and Boxplots for Each Respondent In County C.</td>
<td>90</td>
</tr>
<tr>
<td>8. Simultaneous Regression Models for County A</td>
<td>109</td>
</tr>
<tr>
<td>9. Simultaneous Regression Models for County B</td>
<td>110</td>
</tr>
<tr>
<td>10. Simultaneous Regression Models for County C</td>
<td>111</td>
</tr>
<tr>
<td>11. Screening Response for Each Respondent</td>
<td>113</td>
</tr>
<tr>
<td>13. Respondents Subjective Interpretation of Judgments</td>
<td>120</td>
</tr>
</tbody>
</table>
LIST OF FIGURES

FIGURE  PAGE

1. Brunswick Lens Model ..........................................................36
2. Dependent Variable Measurement Scale .................................54
3. Sample of Incident Profile with Response Format ...................59
4. Instrument Rating Subjective Importance of Cue Variables Used in Decision to Substantiate ........................................64
CHAPTER I
INTRODUCTION

Purpose

The purpose of this study is to increase the research knowledge base in the area of maltreatment of children residing in out-of-home care. Specifically, my purpose in undertaking the study was to ascertain the factors that influence child protective screening and substantiation decisions in reported instances of maltreatment in out-of-home care. The study focuses on the current practice in this area with the emphasis on data used in the screening and the investigation of these reports.

Background of the Issue

In 1974, the Congress of the United States passed the Child Abuse Prevention and Treatment Act (CAPTA) (PL 93–247). The CAPTA was heralded as the culmination of the second child-saving movement in the United States and focused on protective services as the primary service offered to families by the child welfare system (Hutchison, 1988). To implement the intent of CAPTA, state statutes and rules were adopted to provide for the reporting,
investigation, and treatment of child maltreatment according to federal standards.

However, much of this legislation and rule promulgation has focused on intrafamilial child maltreatment. Out-of-home protection has emerged only gradually since 1976 as an intervention on behalf of children and youth in out-of-home care.

Beginning in 1977, the National Center on Child Abuse and Neglect (NCCAN), through its rule-making authority, required states that were eligible for its basic grant program to investigate complaints of abuse and neglect of residents of out-of-home programs; extended the definition of "persons responsible for the welfare of a child" to include institutional employees; and provided that an independent investigation be conducted in those cases in which a child protective agency might have a conflict of interest (Schaefer & Swanson, 1988, pp. 272).

In 1978, NCCAN developed five categories of institutional maltreatment. These included: (a) physical abuse and neglect, which was defined as physical damage to a resident in an institution resulting from lack of care, physical maltreatment, medical or chemical abuse, lack of protection against injury or risk, excessive punishment, or inadequate food, clothing or shelter; (b) sexual abuse defined as providing or participating in involuntary sexual activity with or among unwilling residents; sexual activity including rape, attempted rape, fondling, voyeurism, exhibitionism; inadequate supervision or failure to provide adequate clothing by individuals unable to make a reasonable choice; (c) emotional or
intellectual damage, which was defined as lack of provision of emotional and or intellectual growth; (d) environmental neglect or abuse, which was defined as the failure of the institution to provide adequate protection for residents against dangers in the physical environment; (e) social damage or labeling where such a diagnosis could have the potential of abuse since the diagnosis may be socially repugnant.

Widely publicized discoveries in 1984 of sexual abuse in day care were a part of a lengthening series of horrendous events and conditions that date back 25 years to the period when child rights advocates and proponents of de-institutionalization began to highlight the problem of abuse and neglect in institutions (Schaefer & Swanson, 1988). In response to the discovery of child sexual abuse in day care, Congress enacted PL 98-473 in October, 1984. The law provided that $25 million of the Title XX appropriation be spent to address child abuse and neglect in day care. States were required to provide for employment history and to make background and criminal checks on new out-of-home care employees including those in day care. The law stated that:

Any state receiving an allotment under such title from the funds made available as a result of section (a) shall have in effect not later than September 30, 1985:

(i) procedures established by State law or regulations, to provide for employment history and background checks; and,
(ii) Provisions of State law enacted in accordance with the provisions of PL 92-544, requiring nationwide criminal record checks for all operators, staff or employees of child care facilities (including any facility or program having custody of children for 20 hours or more per week), juvenile detention, correction or treatment facilities, with the objective of protecting the children involved and promoting such children's safety and welfare while receiving service through such facilities or programs (Rindfleisch & Nunno, 1993).

Also in October, 1984, Congress extended and amended the Child Abuse Prevention and Treatment Act as PL 98-457. The amendment, which was relevant to out-of-home protection, provided that the definition of person responsible for the welfare of the child should include employees of a residential facility, foster parents, and staff persons providing out-of-home care (Rindfleisch & Nunno, 1993).

Two major out-of-home care protection projects were funded by the National Center for Child Abuse and Neglect in Ohio in the 1980s. One of the grantees was the Ohio Department of Human Services. The project focused on how to best implement an out-of-home protection program. Subsequently, definitions of out-of-home abuse and neglect were also incorporated into the Ohio Revised Code. These definitions of out-of-home maltreatment were added to the Administrative code where they continue to be in effect (Rindfleisch & Nunno, 1993).

The regulations provide guidelines for out-of-home protection. The state has to provide for the prompt initiation of an
appropriate investigation by a child protective agency or other "properly constituted authority" to substantiate the accuracy of all reports of known or suspected child abuse and neglect. A properly constituted authority was defined as a legally mandated public or private child protective agency or the police, the juvenile court, or any agency thereof.

As a part of the promulgation of rules, the State of Ohio, following the guidelines of the federal mandates, defined out-of-home care child neglect as:

a. Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition or other special needs of the child;

b. Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs which failure results in a child becoming a neglected child, abused child, dependent child, unruly child, or delinquent child.

c. Failure to develop a process for all of the following:

   i. Administration of prescription or psychotropic drugs for the child;
   ii. Assuring that the instructions of the licensed physician who prescribed a drug for the child are followed;
   iii. Reporting to the licensed physician who prescribed the drug all observable unfavorable or dangerous side effects from the use of the drug;
   iv. Failure to provide proper or necessary subsistence, education, medical care, or other individualized care necessary for the health or well-being of the child. (ORC 5101:2)
Out-of-home care child abuse means any of the following when committed by a person responsible for the care of a child in out-of-home care:

a. Engaging in sexual activity with a child in his care;

b. Denial to a child, as a means of punishment of proper or necessary subsistence, education, medical care, or other care necessary to a child for his health;

c. Use of inappropriate or improper restraint procedures on a child that cause injury or pain;

d. Administration of prescription drugs or psychotropic medication to the child without the written approval and ongoing supervision of a licensed physician;

e. Commission of any act other than by accidental means that results in any injury or death to the child in out-of-home care, or commission of any act by accidental means that results in any injury or death to the child in out-of-home care that is at a variance with the history given of the injury or death. (ORC 5101:2)

With the adoption of state regulations addressed and the experience in how to structure implementation of out-of-home protection programs, an ongoing issue involved the efficiency and effectiveness of its state-sponsored out-of-home protective services.

This next step involves an analysis of out-of-home care protective staff decision-making. Two decisions must be made. The first decision is whether to screen a complaint in or out for investigation, and the second is whether to substantiate a
complaint. Although risk assessment guides have been developed for use in evaluating intrafamilial and out-of-home maltreatment, such instruments need to be empirically validated.

**Reporting Trends in Child Maltreatment**

Nationally mandated reporting laws resulted in reports of child maltreatment increasing by 223% from 1976 through 1986. The rate of unsubstantiated reports has increased in the same period (Harris & Warner, 1988). Mandatory reporting laws alone are not sufficient to assure that the children in care will have the protection they need. Besharov (1987) reported that the percentage of unsubstantiated reports has increased from 35% to 65% in the same time period. This particular data relates to all areas of child abuse including intrafamilial as well as out-of-home care abuse.

Rosenthal, Motz, Edmonsen, and Groze (1991), in describing the characteristics of 290 reports of abuse and neglect in foster homes and other out-of-home care settings, found that at each type of setting physical abuse reports were most common, and neglect reports were the least common. Injuries occurred most frequently because of physical abuse; however, sexual abuse reports were most likely to be confirmed. There were prior allegations of abuse or neglect regarding the perpetrator in 27% of the reported cases. Foster homes and institutional reports were twice as likely to be substantiated as were reports from group homes and residential treatment centers. Females represented 60% of sexual abuse reports and 29% of physical abuse reports. For substantiated
reports, 60% of the perpetrators had had prior allegations. They noted that a significant portion of substantiated reports were of a serious nature. Thirty-three percent of serious cases were substantiated.

In 1982, a survey of 500 local children's protective services (CPS) agencies found that over 28,000 complaints alleging abuse and neglect of children in all forms of licensed out-of-home care were received annually. Only 2,500 of those reports involved children and youths in institutions. Most of the remainder of the reports originated in day care and foster family care. It appeared that the concept of the protection after placement should be enlarged from "institutional" child protection to protection in "out-of-home care" (Rindfleisch & Hicho, 1987).

After evaluation of the annual reports submitted by 21 states, Rindfleisch and Nunno (1993) report that if there is an assumption of 330,000 children and youths in licensed child care and an average of 1.35 minors per report, there were approximately 158 complaints per 1,000 children in out-of-home care reported during the period covered. Based on an average substantiation rate cited in the report, approximately 42 children per 1,000 in out-of-home care may be abused or neglected annually. This compares to the familial rate from 1986 of 16.3 per 1,000 children (Rindfleisch & Nunno, 1993). The increase in the numbers of child abuse reports has placed an additional burden on those charged with the task of investigating and substantiating reports of the maltreatment of

**Screening in Intra-familial Child Welfare Investigation**

It has been asserted that investigating reports that turn out to be unsubstantiated creates a burden on the time and energy of practitioners. They may lose their "due diligence" in protecting children which may serve to further endanger children (Besharov, 1985, 1987; Stein, 1984). Both under-reporting and over-reporting occur under current law. Under-reporting may present the more serious problem for child safety; nevertheless, the criticism of the system has focused on the costs (economic and emotional) of over-reporting (Besharov, 1985, 1987; Stein, 1984). Hutchison (1989) indicates that one response to the problems of reporting child endangering situations has been that some state child protective services have instituted screening policies and mechanisms to allow practitioners to screen out unfounded reports prior to investigation.

Screening units as a mechanism in child welfare are a relatively new phenomenon. Early state legislation did not permit screening and required that the CPS agencies investigate all reports of child maltreatment (Barone, Adams, Tooman, 1981; Hutchison, 1989). However, some screening of reports has occurred from the outset of the child reporting laws. Children who did not fit the age criteria were screened out. Conditions not covered by the law were also screened out. Barone et al. (1981) and Adams et
al. (1982) state that practitioners and researchers have recommended screening as a means of limiting the amount of unnecessary intrusion associated with the investigation of unsubstantiated reports of alleged maltreatment. With the reporting of child maltreatment increasing by 223% from 1976 to 1986 and the rate of substantiated reports declining in the same period, screening seemed to be an alternative to the pressures placed on the child welfare systems (Harris & Warner, 1988). Nunno and Motz (1988) have suggested that such screening and investigation be carried out by others than those associated with the particular child protective agency. Both Besharov (1987) and Brown (1987) recommend improved screening at intake as a most critical need of child protective services. They also reported that more than half of the states allow reports to be screened out before investigation occurs (Besharov, 1987; Hutchison, 1989; Wells, Downing, Fluke, & Stein, 1987).

This screening and investigation problem is exacerbated in cases of suspected maltreatment of the child in an out-of-home placement. The majority of children in out-of-home placements have as their legal guardian the legal entities who ordered their placement and who are providing the economic support for this placement. In short, the out-of-home placement is the custodial parent while the CPS agency is often time the legal guardian of the child (Thomas, 1980). The implications of this differential are that the child is in the custody of someone other than the legal guardian.
The custodian has the responsibility for the day-to-day care of the child, while the legal guardian has the overall legal responsibility for the child and has the ultimate say over the placement and care of the child. It is conceivable that there could be differences of opinion as to the care of the child.

There are possible consequences to children when allegations of maltreatment are screened out prior to investigation. These consequences may be exacerbated for children in out-of-home care. Children in out-of-home care situations have very often already experienced maltreatment at the hands of an adult caregiver and generally are in need of specialized care. What are the consequences for the child victims who may be maltreated if the allegation of such maltreatment is screened out prior to investigation? Conceivably, the consequences include:

- continuation of the maltreatment
- exacerbation of the maltreatment
- expectation of further maltreatment
- increased reluctance to trust or respond to treatment
- increased reluctance to trust or respond to caregivers
- retaliation to the maltreatment

The consequences of maltreatment produce further dysfunction and a perception by the perpetrators that such treatment is not really maltreatment and therefore is acceptable. Many victims, including residents in out-of-home care and those maltreated in intrafamilial environments, become the perpetrators
of maltreatment of children when they become adults (Gelles, 1983).

Screening is designed to "weed out" unfounded reports and thus reduce the burden on the system. Such policies have been designed to minimize the costs (economic and human resource) of unnecessary investigations. They are intended to decrease what are termed to be emotional costs in investigating unsubstantiated allegations. Although the original federal and state statutes did not provide for screening, Besharov reported that more than half of the states now allow reports to be screened out before investigation occurs (Besharov, 1987). Wells et al. (1989) also indicated that 33 states out of 45 have policies which refer to screening practices in managing the reports of maltreatment. Downing, Wells, and Fluke (1990) conducted a study to determine screening and risk assessment policies in child protective services. They reported that more than half of protective services screened out the reports where the perpetrator was not a caregiver and when no specific act of abuse or neglect was reported. Screening policies and mechanisms have been developed by states over the last decade.

Screening decisions, however, are not made in an atmosphere of certainty. Many of the state statutes concerning the definition of child maltreatment are global and non-specific. Nagi (1977) indicated that it was difficult to determine what constitutes maltreatment. Thomas (1980) has stated that it is assumed that the state, or any other institution functioning as parents, has as
great or greater responsibility than that of the parents to protect the child: This is not always the case in practice.

Investigation and Substantiation of Reports

Significant changes in investigative procedures have been implemented. Until 1978, most institutional abuse and neglect complaints were handled as violations of placement licensing standards rather than as child protective issues (Rindfleisch & Hicho, 1987). Since 1984, NCCAN by statute has required states participating in the basic grant program to handle such complaints as abuse and neglect matters (Rindfleisch & Hicho, 1987; Rosenthal et al., 1991).

A significant number of reports of abuse and neglect in out-of-home care represent serious incidents. The most commonly substantiated incidents are those of serious physical maltreatment or of sexual maltreatment. The less serious the incident, the more likely it is that the report will be unsubstantiated (Rosenthal et al., 1991).

Overall, there is a low substantiation rate for reports in out-of-home care (Rindfleisch & Nunno, 1993; Rosenthal et al., 1991). There has been some speculation that the low rate may be a result of an increasing number of cases being forwarded for investigation, with some of those cases being unsubstantiated (Rosenthal et al., 1991). The substantiation rate for out-of-home complaints averages only 26%, with some states as low as 20%. Such percentages may stem from a wide range of standards for defining
investigations in the state practices, a widespread assignment of responsibility to local child protective agencies for investigating abuse and neglect complaints, and wide variation in the rates of substantiation of reports. The lack of consistency between states on investigation and reporting standards bespeaks the uncertainty over accountability for dealing with the issue (Rindfleisch & Nunno, 1993; Rosenthal et al, 1991)

Problem Statement

In 1979, Gil in Child Abuse and Violence identified three forms of abuse: system abuse, program abuse, and individual familial abuse. Included in Gil's broad definition of system abuse are the abuses of children that allow them to drift through many placements. Program abuse is abuse and neglect resulting from specific institutional policies or conditions. Individual nonfamilial abuse is maltreatment committed by an employee of an institution against a child in the institution (Gil, 1979).

Investigation and screening policies are intended to assist in the substantiation or nonsubstantiation of reports of maltreatment. Given the number of reports of maltreatment, the low rate of substantiation, and varying standards in use, a better understanding of the decision to substantiate is needed. The most serious or apparent reports of maltreatment are screened in for investigation. The most serious incidents, such as severe physical or sexual abuse, are also those most likely to be substantiated. Other
allegations are often screened out before investigation (Besharov, 1987; Hutchison, 1988; Rosenthal et al., 1991).

Research is needed to assist in determining the factors that lead to substantiation of the abuse of children in out-of-home situations. Such research should determine the criteria used; the efficacy of that criteria; the effectiveness of the criteria; and should, furthermore, provide a model for use in a screening process for maltreatment. The study at hand focuses on current practice in investigation and substantiation, with an emphasis on specific criteria or type of information used by those who investigate complaints.

Definition of Terms

Caregiver: The person responsible for the welfare of the child, including employees of a residential facility, foster caregivers, and staff persons providing out-of-home care.

Facility: Out-of-home care facility responsible for the twenty four hour care of a child.

Investigation: An intentional process, including the utilization of policy guidelines and professional judgment, of reviewing information and interviewing victims, perpetrators, and others to determine if maltreatment of a child has occurred.

Maltreatment: Nonaccidental physical attack or physical injury, including minimal as well as fatal injury, inflicted upon children by persons caring for them and/or nonaccidental failure on
the part of a caregiver to provide for the needs of a child in out-of-home care.

Out-of-home care: The residing of a child in a setting other than that of their parent which results from a determination that the child is "better cared for" outside of the familial setting.

Screening: The process of reviewing relevant available information regarding an allegation of maltreatment to determine whether that allegation of maltreatment should be investigated.

Substantiation: The affirmation of an incident of maltreatment against a minor child.

Victim: One who has had acts of intimidation, coercion, or physical or emotional harm inflicted upon them.

To examine some of the issues in out-of-home maltreatment of children, the following research questions are investigated. These questions are investigated using social judgment theory and judgment modeling. Social judgment theory is explained in chapters 2 and 3.

Research Questions

1. What factors do child welfare workers responsible for screening and investigating out-of-home maltreatment reports use in their decisions to substantiate or not substantiate maltreatment?

2. How consistent are these workers in their use of information in the substantiation decision?
3. Do the various workers use the same factors in their decision process?

4. Do the individual workers use the same kinds of judgment models in their decision-making?

5. Do the child welfare workers use information in the way they think they do in the substantiation decision?

6. Do the child welfare workers use the same information to screen reports in or out that they use in decision-making?

7. Do workers in one county unit use information in the same way that workers in another county unit use information?
CHAPTER II

REVIEW OF RECENT LITERATURE

Overview

This study was undertaken to better understand decision-making processes involved in screening and substantiating reported cases of out-of-home maltreatment of children. In this chapter, literature pertinent to the study is examined in four areas: child welfare decision research and results, child maltreatment/maltreatment in out-of-home care, conceptual frameworks, and social judgment theory.

Child Welfare Decision-Making: Intrafamilial

Scholars have used a variety of perspectives to develop explanations of how and why case decisions are made. A number of efforts have been undertaken specifically to examine the process of decision-making in child welfare. Social work became aware of the lack of understanding of decision-making through a National Association of Social Workers (NASW) conference in 1954 (Shyne, 1959). The goal of the conference was to gather experts in social science to review decision-making issues and to provide impetus for further research in this area. Research efforts focused on
research related to client and worker characteristics influencing worker decisions.

One of the first social workers to study the judgments of social workers was Scott Briar. In that early study, when the literature had identified social class as a determinant in the decision-making process, Briar gave first-year social work students case studies controlling for all variables other than social class. The study determined that social class did have an impact on the decision process of these social workers as the decisions were related to their clients' self concepts. His conclusion was that social class produced a negative bias upon the judgment of the workers. Thus, the lower the perceived social class of the client, the more likely it was that the worker would classify the client as having a low self-image (Briar, 1963).

Vail (1970) studied the same issue but added variables to social class. The variables were race of the client and the level of worker experience. This was an early study using factors other than those that were client related. She hypothesized that each of the variables had an impact on the decisions of the social workers in their interventions. She had hypothesized that the worker experience would also be a determining factor. Her results indicated that social workers viewed lower-class clients as having less potential for case work treatment than the middle-class client. Other factors did not have an impact in the Vail study (Vail, 1970).
In a review of decision-making literature Fischer and Miller (1973) stated that professionals seemed to make their decisions based on certain client characteristics. They determined that these characteristics—in this case race and social class—were biasing the formulation of decisions. Their review determined that the research had identified that the characteristics existed; however the previous research had not identified how race and class influenced the decisions.

Wells (1988) and Stein and Rzypnicki (1984) viewed decision-making as a three stage process. First, information must be gathered using criteria which enable the practitioner to sort data into categories. Then, decision is made to provide or not to provide services. Finally, there is consideration of the availability of resources (Stein & Rzepnicki, 1984).

Bean (1982) developed a model for predicting the decisions of child welfare workers to remove children from their parental homes. He used social judgment theory analysis to conduct the research. He developed a series of 120 vignettes and presented them to nine social welfare workers who were asked to make decisions of whether to separate children from their parents. The respondents were employed by a children's services board in a metropolitan area. He determined that information used in the decision to place children is variable among practitioners. Patterns of use indicated disagreement between respondents on the relative importance of factors to consider in the separation decision task. In this study, the results of a statistical comparison
of the agreement among respondents using Tucker's lens model equation indicated substantial variance in the extent to which the respondents agreed about the use of the cues. (The lens model will be described in the social judgment theory portion of this review.) The range of correlations was from .32 to .75 with a median of .55. When Bean combined the findings of highly consistent use of information by the respondents and low-to-moderate agreement about the use of the information, he concluded that the difference between the respondents indicated real disagreement about what was important to consider when child separation is considered. He also found in this study that practitioners tended to have minimal insight about their own use of information in the separation of children. Respondents, in a subjective ranking of the variables that they "thought" they used, did not, in fact, use that information in rating the vignettes. He found moderate correlation between the information used and the decisions made by the respondents.

Pion-Berlin (1989) utilized vignettes to assess gatekeepers' decisions in judging the seriousness of child sexual maltreatment. This research validated models grounded in attribution theory that explained the process of judging seriousness as depending upon: (a) determination of responsibility; (b) attribution of blame; (c) assessment of harm; and (d) application of the label child sexual maltreatment. She determined that comprehending the underlying social psychological processes of judging the seriousness of child sexual maltreatment can affirm consistent decision-making among key gatekeepers.
Investigations (Wells, 1987, 1988) have shown the fallibility of linear judgments and a lack of consistency in child welfare decision-making practices.

Gelles (1982) conducted a study to determine what factors mandated reporters used in deciding to report physical injury of a child. He mailed a questionnaire to professionals in seven occupations in Rhode Island. The 500 professionals surveyed included physicians, elementary school guidance counselors, elementary school principals, emergency room physicians, clinical social workers in private agencies, caseworkers in state agencies, and police officers. The respondents were asked to rate 13 items as to whether the condition was child maltreatment, was not child maltreatment, or if they were uncertain. He reported fairly high agreement among professionals as to the definition of maltreatment. Strong agreement was reported for willful nutritional neglect, sexual molestation, willfully inflicted trauma, and locking a child in a dark closet. He reported the greatest degree of ambiguity resulted in a case of an injury resulting from inadequate parental precautions. The most important factor influencing reporting was the physical condition of the child. The behavior of the caretaker and the ability to explain the condition were rated as second and third in importance. Previous injury to the child was also rated as an important factor.

In 1983 O'Toole, Turbett, and Nalepka conducted an investigation to determine the influence of socioeconomic status, race, and level of injury on physicians' and nurses' recognition of
maltreatment and the reporting of maltreatment. Vignettes were used in which the variables were manipulated. Physicians were more likely to judge that lower class and minority children were maltreated when the type of injury was kept constant. The judgment of nurses was affected by level of injury but not by race or socioeconomic status. O'Toole et al. concluded that as harm to the child becomes more ambiguous, social labeling becomes more obvious.

In general, the results of the research have indicated that there is agreement among workers when the incidents of maltreatment are very severe or very mild (Dingwall, Eckelaar, and Murray, 1983; Bean, 1982; Hutchison, 1988).

Studies of Screening and Substantiation Decisions

Di Leonardi (1980) studied factors that influence the intake decisions of child protection workers. The major questions were: (a) Was this a case of maltreatment or neglect serious enough to require service? and (b) if so, what services and provided by whom would be best? DiLeonardi found that services were more likely to be provided if at least one of six conditions were met: (a) if the child was removed from the home, (b) if more than one child was victimized, (c) if the mother was the perpetrator, (d) if the victim had fractures, (e) if the victim was a neglected infant, and (f) if the investigator perceived the child to be developing slowly.
Rosen (1981) investigated maltreatment of children. Six cues were manipulated in case summaries. Included were: injury to the child, history of injury to the child, vague explanations of injury, unusual behavior or characteristics of the child, environmental stress, and emotional disturbance in the parent. Following the summaries, the respondent (a CPS worker) was asked to answer two questions: (a) To what degree of certainty do you feel that this case indicated child maltreatment? (b) under ideal circumstances, what intervention, if any, would you recommend?

Of the six independent variables, only vague explanation of injury failed to have a statistically significant influence on the decision that child maltreatment existed. CPS workers were more likely to recommend court action rather than substantiation of maltreatment.

Hutchison (1988) studied the screening of complaints and the decision-making involved in the screening of reports prior to the investigatory phase, and developed a profile of decision factors for screening and investigating intrafamilial maltreatment. The profile showed that the most likely predictors of whether a report would be screened in and/or substantiated were, in descending order: severe physical maltreatment, sexual maltreatment, open case of the CPS agency, and report by nonperpetrating parent. She also found that the clustering of variables indicated that a nonmandated reporter as the source of the report and previous reports of maltreatment were likely to produce a decision to investigate. Reports of sexual maltreatment were most likely to be
screened in for investigation. Allegations of physical maltreatment more frequently tended to result in a decision to screen in but were less likely to result in a decision to screen in for investigation than sexual maltreatment allegations. Other less likely predictors included age of child and reports of neglect. These findings supported the hypothesis that factors other than the nature of the allegations have a statistically significant effect on screening decisions. The nature of the allegations was found to be statistically significant as well. The most common predictor variables were: source of complaint (nonperpetrating parent), case status (open or not), number of reports, physical maltreatment, neglect, and sexual maltreatment. She noted the lack of consistency in decision-making both within decision-makers' decisions, and among decision makers.

The findings of Bean (1982) in looking at the factors used by child welfare workers to decide if the child should be separated from his/her parents corresponds with that of Hutchison (1988) where she found that the investigators were most likely to substantiate maltreatment if there was sexual maltreatment.

Decision-Making: Out-of-Home Maltreatment

The field of out-of-home maltreatment is still small and relatively new although the problem of out-of-home maltreatment is neither small nor new. With nearly 400,000 children in out-of-home placement, there is significant responsibility for attending to
the safe care and treatment of these children (Rosenthal et al., 1991).

Townsend (1984) conducted a study of the potential of determining the propensity toward maltreatment by a staff member in out-of-home care. He determined that of the 59 subjects studied, 14 (24%), of the staff were found to be maltreaters. The 24% would seem to indicate that the potential for maltreatment of children in out-of-home care is high in this setting. The percentage indicates that the potential for maltreatment of children in out-of-home care may be higher than previously thought.

Rindfleisch and Bean (1988), using the vignette method of inquiry, conducted a decision analysis studying the willingness of institutions to report out-of-home maltreatment. They developed several sets of variables. The variable sets include: type of event (lock up, sex with minor, child ignored, beer available, push and fall, earache, double dose of medication, or sent out to fight); staff position (child care worker, supervisor, or social worker); vignette characteristics (including such items as report source, number of observers, frequency of parents visits, child's sex, behavior disturbance, time on job, parental status, race, age, sex, and staff/peer relations); deviance assessment (deviance and severity assessment); organizational support for reporting; and affiliation with residential care. In the study, 598 respondents were presented with one of eight events that depicted adverse acts or omissions of residential facility staff. The respondents were asked what action they would be most likely to take to deal with
the depicted event. The type of event, with sexual and physical maltreatment being the most important, was important in understanding the willingness to report. Staff commitment to residents was related to willingness to report. Perceived organizational support had a negligible effect on willingness to report, but commitment to residents' well-being was strongly and positively related to the willingness to report. Sexual and physical events were most likely to be acted upon.

Such recent studies have pointed to a need for a greater awareness of the nature and extent of institutional maltreatment, a stricter set of standards for investigation of institutional (e.g., out-of-home) maltreatment, and a better set of definitions of what constitutes out-of-home maltreatment (Nunno & Motz, 1988; Rindfleisch & Hicho, 1987; Rindfleisch & Nunno, 1993; Rindfleisch & Rabb, 1988; Rosenthal et al., 1991). The events most likely to be reported, screened-in for investigation, and investigated were: physical and sexual maltreatment, severe injury, well-being of the child, previous reports, status of reporter, and source of complaint.

Conceptual Frameworks

The first national Conference on Child Abuse and Neglect in 1976 noted that investigations were taking place yet questioned the efficacy of investigating incidences that lacked a definition. It was stated at the conference that the first order of business for child maltreatment practitioners should be to provide a cogent
definition of the maltreatment in order to provide a solid basis for investigating and thereby an ability to substantiate maltreatment (Zigler, 1977). Throughout the past decade, child welfare researchers and leaders have continued to stress the need for an acceptable definition of child maltreatment to facilitate intervention as well as investigation and substantiation (Gelles, 1982; Giovannoni & Becerra, 1979; Ross & Zigler, 1980). In 1983, Stein and Rzepnicki, under a project supported by the U. S. Children's Bureau, developed a practitioners' guide for decision-making at child welfare intake. They determined that the workers needed direction for making all of the decisions from the point of system entry through case termination. They further contended that the existing laws and guidelines were insufficient to provide guidance to child welfare workers and to judges as they make their decisions regarding child protection. Further, they state that "with regard to children in out-of-home care, limiting the range of problems is essential if we are to realize permanency goals within reasonable periods of time" (p.2).

**Purposes of Maltreatment Definitions**

Ross and Zeigler (1980) pointed out that there is no single definition which fulfills all of the functions that social scientists and social service professionals would like. There are numbers of definitions of child maltreatment that have been posited over the past decades. Definitions of child maltreatment have been developed to meet the various purposes of medicine, social policy...
and planning, legal standards, research, and case management (Gil, 1979).

The National Center on Child Maltreatment and Neglect defines child maltreatment as:

The physical or mental injury, sexual maltreatment, negligent treatment, or maltreatment of a child under the age of eighteen by a person who is responsible for the child's welfare under circumstances which indicate that the child's health or welfare is harmed or threatened thereby. (Public Law 93-247)

The Ohio Revised Code defines the abused child as any child who: is the victim of sexual activity; is endangered as defined in section 2919.22; exhibits evidence of any injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it.

The battered child syndrome was coined by Dr. C. Henry Kempe (1962) to draw attention to the physical aspects of nonaccidental harm. Gil (1968) chose to define child physical maltreatment as "nonaccidental physical attack or physical injury including minimal as well as fatal injury, inflicted upon children by persons caring for them."

In 1979, Gil identified three forms of maltreatment: system maltreatment, program maltreatment, and individual familial maltreatment. The forms of maltreatment are an elaboration of Gil's definition but are distinct and should not be confused with the
definition itself. Included in his broad definition of system maltreatment are the maltreatments of children which, according to Gil, allow them to drift through many placements. Program maltreatment is maltreatment and neglect resulting from specific institutional policies or conditions. In Gil's view, maltreatment is any act of commission or omission by a parent, an individual in an institution, or by society as a whole that deprives a child of equal rights and liberty and/or interferes with or constrains the child's ability to achieve his or her optimal developmental potential (Gil, 1981). Gil contended that in such settings acts and policies of commission or omission that inhibit or insufficiency promote the development of children, deprive children, or fail to provide them with the material, emotional, and symbolic means needed for their optimal development constitute abusive acts or conditions. Such acts or policies may originate with an individual employee of an institution such as a teacher, child care worker, judge, probation officer or social worker, or they may be implicit in the standard practices or policies of given agencies and institutions. As in the home, abusive acts and conditions in institutional settings may also result from supposedly constructive or from negative or hostile attitudes toward children, and they may be one-time or occasional events or regular patterns (Gil, 1979).

Helfer and Kempe (1987) define maltreatment as: "any interaction between family members which results in nonaccidental harm to the individual's physical and/or developmental states" (p. 61).
How child maltreatment is defined is important since the definition of a social problem determines intervention strategies and the range of solutions. Different perceptions of a problem will lead to very different approaches to problem resolution.

The problem of the definition of child maltreatment is exacerbated in the case of maltreatment/maltreatment of children in out-of-home care. Although the definitions of maltreatment are inexact in the case of the child who is maltreated in an intrafamilial situation, those definitions are more vague in the case of child maltreatment in an out-of-home situation. Thomas (1980) has articulated the difficulties in defining maltreatment in the out-of-home situation. His contention that the treatment of children in out-of-home care, by the definition of out-of-home care as being "better for the child", makes the identification and substantiation of maltreatment more difficult. The absence of well-organized and disinterested residential child protections services has resulted in substantial insecurity on the part of administrators of facilities; they are justifiably concerned that they do not know what to expect if they communicate to the designated protective agency the occurrence of an adverse event that they think warrants protective intervention (Rindfleisch, 1988).

Theoretical Perspective

Gelles (1979) advocated that researchers investigate the gatekeepers who provide the labels for child maltreatment and
investigate the standards and factors that are influential in the decisions made. While Gelles was primarily concerned with the labeling of intrafamilial maltreatment of children, such concern for the gatekeepers' labeling and examining of the factors influencing the decisions made in labeling and the consequences thereof are applicable to out-of-home maltreatment of children.

Labeling theory provides a frame of reference. The current study is not designed as a test of theory. The current study looks at the characteristics of those labeling the behavior and explores the factors which influence their decisions. Decision theory and the findings of child welfare decision-making, even though limited in its exploration of out-of-home maltreatment, provide a frame for the research questions and for examining the research findings.

In Becker's view of labeling as a perspective, the focus was on developing a set of variables that were to include the study of the deviance by making that perspective more inclusive, that is, to include the actions of those other than the deviant, (e.g, social control agents) (Becker, 1973). Labeling theory particularly scrutinizes rules that are used to explain deviance. Becker is concerned with how to transform labeling into an observable phenomenon. Becker states that the labeling process is a changing process in which the labels are constructed and altered to suit the will and power of the various participants (Becker, 1973, pp. 51-53). It has also been suggested that the definition of deviance is viewed in the context of continuous interaction and as a stage process with multiple decision points (Schur, 1971). Schur's
position seems to fit many forms of child maltreatment since he states that some forms of deviance tend to lend themselves more easily than others to analysis. He notes that types of deviation that are repeated and are elaborated upon lend themselves to labeling analysis. Labeling has no definitive point at which deviance begins; this is viewed as a continuum rather than a black and white dichotomy. According to Hawkins and Tiedeman (1975) the deviance will be expressed in terms of a continuum rather than as an absolute. The difficulty here is to develop a consensus of what constitutes the threshold of deviance. It can be assumed that there will be disagreement as to the nature and consistency of deviance, and there is an impossibility of covering all of the contingencies in any definitions as the definitions can never precisely reflect the absolute (Hawkins & Tiedeman, 1975).

Attribution theory (Gelles, 1985) suggests that humans try to evaluate the causes and implications of events through the development of inferences about the attributes of the actors and the situations found. Attribution theory attempts to explain and investigate the same phenomenon of processing stereotypes of the labeling perspective.

Child welfare decision-making has sought to determine how child welfare practitioners make decisions. Stein and Rzepnicki (1984) state that research has attempted to develop normative approaches to decision-making.
Research in child welfare decision-making has generally utilized one of two methodological approaches to examine the factors that influence the formation of decisions. One approach has been the use of secondary case data to determine the decision points made by various gatekeepers. The other is the use of vignettes to examine the decision points and the key variables in the decision process. The vignette or judgment modeling technique utilizes the various factors to ask for judgments.

Vignette usage has the flexibility of providing a laboratory type approach to the research. The variables can be manipulated in a systematic fashion, and then the analysis can study the effects of the manipulation on the subsequent decisions. This method of research can allow the researcher to make more definitive statements about causation. The weakness in this type of research lies in the possible elimination or noninclusion of certain variables or important information which could be germane to the research effort.

The development of judgment theory is credited to Egon Brunswik (1935) in his studies of perceptual tasks. This model has since been modified and expanded upon by Tolman & Brunswik (1935); Hammond, Stewart, Brehmer, and Steinman, (1980); and Rossi and Nock (1982). Brunswik's interest grew from the difficulty in identifying the relative importance of cues in making visual perception judgments. Both Brunswik and Tolman stated that
knowledge of the environment was difficult to acquire because of causal ambiguity. They emphasized the fact that each organism in its environment must cope with numerous independent relations—some partly relevant, some irrelevant—to make any decisions (Hammond, 1980). Brunswik (1955) urged students to be "concerned with the "texture of the environment.""

This concept was described by what Brunswik termed a lens model. The model described a parallel set of concepts. For each concept on one side of the cues, there is a parallel or similar concept on the other side. The cues on the task side vary in terms of ecological validity and the cues on the other, or "organismic", side vary in utilization by the subject.
A visual description of the model can be shown as:

![Brunswik Lens Model Diagram]

**Figure 1**: Brunswik Lens Model

One side, therefore, identifies the criterion used in the decision-making. The middle area defines the cues used in making the decisions and the opposite side represents the utilization of cues in making the judgment.

Decision tasks can vary. The achievement is viewed as the match between the validity (left side) and the cue utilization (right side) (Hammond et al., 1980). The judgment task itself involves a separation between what is given and what is inferred. Surface data are given inferred depth conditions that require the judgment on the part of the decision-maker (Hammond et al., 1980). Without the surface and depth component, the decision would be mechanical.
Variation would then represent error as opposed to judgment. The separation between surface and depth data represents what Hammond et al. (1975) refer to as the zone of ambiguity. This area or zone is often the source of confusion when judgments between groups differ. Because a single effect may have several causes and a single cause may have several effects, the network of task relationships can be said to be entangled. This causal ambiguity is produced because: (a) surface data are less than perfectly related to depth variables, (b) functional relationships between surface and depth variables may have a variety of forms, and (c) knowledge of the environment is difficult to acquire because of causal ambiguity. There are many entanglements between the probabilities and ambiguities in human relationships.

Rossi and Nock (1982) considered life as a series of judgment tasks evaluating sets of alternatives that present themselves at every turn. They proposed using factorial surveys for uncovering the normative structure underlying the social judgments of humans. They combined the concepts of multivariate experimental designs with survey procedures. Initially, Rossi (1951) found the method to be unpromising because in full factorial designs, far too few characteristics would be rated (Rossi & Nock, 1982). It was determined that people's insights in areas of social judgment were a set of complex objects that varied on a variety of dimensions. To acquire an understanding of the process of judgments the process of social judgment needed exploration.
Rossi and Anderson (1982) described the development of an empirically based understanding of types of human judgments or evaluations. To evaluate or to judge means to place that object in an ordering. Rossi and Anderson (1982) further believe that most human judgments are structured and that a critical question for social scientists is how best to uncover the structures which underlie those judgments.

Judgments must have commonalties to the individuals being studied, that is, the causal component of judgments. High involvement judging, for example purchasing a house or car, may have a number of factors that are clearly weighed against each other; low involvement choices have fewer factors and may involve few clearly defined factors.

Use of Vignettes In Judgment Modeling

Utilizing a model that includes the use of vignettes in judgment modeling allows a laboratory approach which controls for repetitions in judgments (Rossi & Anderson, 1982). Ringwalt and Earp (1988) see the use of vignettes as a laboratory means of assessing factors in behavioral research. They used vignettes to study attribution of responsibility. Vignettes were given to child protective service workers for their judgment. They were seeking to discover which factors child protective workers perceived as directly contributing to the maltreatment. They developed a set of variables to determine that responsibility.
Legally mandated child maltreatment reporters' reporting behavior has been studied by Zellman (1990). The reporters utilized vignettes that briefly described a case of possible maltreatment delineating the seriousness of the incident, whether the incident qualified as maltreatment or neglect in the labeling, whether they were bound by the law in the reporting, and whether the child or family would benefit from such a report (Zellman, 1990).

Cooksey and Freebody (1986) utilized social judgment theory and cognitive feedback in education. They stated that it had value in externalizing covert judgment processes and in identifying the conflicts between policy parameters and outcomes. They believed it was useful in analyzing teacher judgments in reading performances, policies relating to selection of reading materials, and teacher identification of student problems.

Hammond (1966) used the lens model paradigm in studying cognitive conflict between people. He conducted a study in which two subjects were trained to think differently about a common set of problems and were then asked to give their judgment about the solution to the problems presented. Finally, they were to discuss with one another the judgments and come to a joint decision. Hammond et al. (1975) found that a compromise was reached more rapidly than would have been true without using the lens model. In each case there was a reduction of both overt conflict and covert conflict. There was also a general increase in cognitive change from trial to trial. The researchers did find, however, that the
more complex the subject the more likely the respondents were to adhere to their own training.

Ruble and Cosier (1990) investigated the effects of cognitive styles and decision-making on performance. They used the Myers-Briggs Type Indicator (MBTI) to assess cognitive styles of respondents and the Multiple-Cue Probability Learning Paradigm (MCPLP) to assess objective (environmental) and subjective (judgmental) elements in decision-making. The MCPLP is based on the Brunswik lens model. They examined task characteristics including number of cues, measurement of cues related to the perceptual style, and judgment style of the respondents. A four-factor repeated ANOVA was utilized to analyze the performance data. The researchers found no effects of cognitive style and speculate that the outcome may result from design and task effects or that the effects of cognitive style may not have been strong enough to produce an effect in their highly controlled effort.

Harmon and Rohrbaugh (1990) conducted a study using small groups to determine what aspects of cognitive feedback account for the level of performance on cognitive conflict tasks. They used 275 undergraduate students. One set of groups was given task-related instruction and cognitive feedback was fully exchanged among all groups; the other groups differed in the amount of cognitive feedback that was made available to them. Participants were asked to judge the finishing positions of horses. They were given cues of post position, jockeys' win record, median speed rating, yearly winnings, and handicap points. The task was presented as a
judgment problem. Multiple regression was used to analyze the judgments. Among the social judgment analysis group, the initial group $r_s$ ranged from .10 to .40 with an average of .26. Among the reduced feedback groups, the initial $r_s$ ranged from .06 to .41 with an average of .24. With the final $r_s$ they found that individual performance improved to an average of .30. They also found a reduction of group disagreement. Reduction of disagreement among policies was evaluated using a multivariate analysis of co-variance design. A significant multivariate effect of treatment was found.

Pion-Berlin (1989), using the factorial survey methodology of Rossi and Nock (1982), applied computer-generated vignettes to determine the judgment of seriousness in child sexual maltreatment for key gatekeepers. She used intake workers, police, judges and referees, and prosecuting attorneys. Her findings were that seriousness is dependent upon determinations of responsibility, attribution of blame, assessment of harm, and application of the label "child sexual maltreatment."

Judgment modeling as a theoretical frame has been used in social research as a method for determining the decision-making. This method allows for the development of a frame that will aid in the determination of the relevant and nonrelevant judgments utilized in the decision processes.

Social judgment modeling using the lens model for analysis has been applied in various settings including citizen participation in planning, modeling physicians' judgments, water resource planning, labor management negotiations, corporate policy
formation, child maltreatment, and community policy planning (Hammond, 1980; Rossi & Nock, 1982). It is a model with versatile utilization and provides a laboratory setting for studies thus enabling the control of some extraneous variables. This analysis model has been shown to be useful in a variety of settings and for many types of judgment tasks.

Summary

The current study is intended to investigate those factors that predict the important screening decisions in the Ohio child welfare system as they pertain to the decisions regarding child maltreatment in out-of-home care. Further, the study is designed to investigate those factors that predict the decisions in the Ohio child welfare system as they relate to the decisions regarding substantiation of child maltreatment in out-of-home care. The research will serve to transform the screening and substantiation process into observable phenomenon. This review of recent literature has focused on child welfare decision research and results, child maltreatment/maltreatment in out-of-home care, conceptual frameworks, and social judgment theory.

In the review of child welfare decision-making, it was determined that the decisions are at first based on very few factors and, in most recent years, decisions have been utilizing a broader array of factors many of which have broader social implications. A review of the literature in out-of-home
maltreatment decision-making determined that: (a) there is not a great deal of literature available investigating child protective decision-making and none on children's protective services in out-of-home care, (b) there have been a number of theoretical approaches to the definition of child maltreatment, (c) the variables utilized include and expand on those employed in determining intrafamilial maltreatment, (d) screening is becoming a means of addressing the influx of reports, and (e) there is no set frame for the decisions made to investigate and substantiate out-of-home maltreatment. Researchers have used items of socioeconomic status, race, level of injury, and physical injury such as hitting and burning. Six cues tended to appear including injury to the child, history of injury to the child, vague explanations of injury, unusual behavior characteristics of the child, environmental stress, and emotional disturbance in the parent (Rindfleisch & Hioco, 1987; Rindfleisch & Rabb, 1988; Rosenthal et al., 1991).

The review of the conceptual frameworks described the various approaches to definitions and the approaches to research and a review of social judgment modeling theory determined that social judgment theory could be an appropriate means of studying the research questions of whether to investigate and/or to substantiate maltreatment in out-of-home settings. The vignette model can be utilized and has been utilized to provide a laboratory approach to studying the decision-making process.
Early studies by Briar (1961) and Vail (1970) focused on the attitudes of the social worker toward a particular type of client and their impression of the possibility of successful intervention.

DiLeonardi (1980) studied the decision to provide services at intake. DiLeonardi found that services were most likely to be provided if certain factors existed. The factors were removal of the child, multiple children, the mother as the perpetrator of maltreatment, the existence of fractures, neglected infants, and developmental delay of children. Rosen (1981) and Bean (1982) studied the decisions of the child welfare worker to substantiate/not substantiate or to separate the children from their parents. Other studies (Gelles, 1982; O'Toole, 1983) were undertaken to assess and define the recognition by professionals of maltreatment and the decision to report that which was determined to be maltreatment. They were particularly studying instances of maltreatment in intrafamilial situations.

Thus far, Rindfleisch and Bean (1988) and Rindfleisch and Rabb (1985) have provided the most empirical studies on the issues of maltreatment of children in out-of-home care. The inquiry at hand builds on the work of those who have begun the study of the maltreatment of children.
Hammond reports that early in the 1930s Egon Brunswik developed a psychological theory and methodology. The use of this methodology in research has ebbed and flowed since that time. Edward Tolman of the University of California endorsed the Brunswikian theory and, as Tolman was a significant figure in American psychology, the endorsement was an important event in the recognition of the theory and methodology. The recognition of Tolman did not, however, mean that the theory was accepted, only that the method and theory were recognized. Brunswik unfortunately did not see real implementation of his ideas. The ideas of Brunswik have been discussed and accepted or rejected since that time. Since 1964 over 200 studies have been conducted using the Brunswikian framework (Hammond, 1980).

Brunswik has two main arguments in the development of his theory and methodology. First, he argued that psychology was on the wrong course. Psychology, according to Brunswik, was seeking general laws of behavior rather than seeking general descriptions of behavior. Second, Brunswik argued that psychological
methodology was wrong. He argued that experiments designed in
the conventional factorial design made the generalization of
results impossible. Each generalization would fall whenever the
generalization was applied to the world of nonorthogonal
dimensions or when the experimental conditions were changed.

Brunswik's methodological principles include the
representative rather than the systematic design of experiments
and the idiographic-statistical approach rather than a nomothetic
approach to study (Hammond, 1980).

Brunswik contrasted the systematic and the representative
design of experimentation. In systematic experiments, the
environment is taken apart in order to separate the various
potential causes of behavior. According to Brunswik, responders
cannot be taken apart. Statistical logic permits generalization to
organisms not included in the study. Systematic arrangement,
however, does not reference the situation toward which
generalization is intended on the environmental side.
Representative sampling has the statistical logic of inference to
safeguard generalization on the subject side. Brunswik contended
that to require logical defense for generalizations over subjects
but no logical defense for generalization over conditions was to
employ a double standard. His contention was that the research
must take into account the environment within which it is
conducted and the environment of the subjects (Hammond, 1980).

Further, Brunswik contended that each person's behavior
should meet a statistical test of regularity or dependability before
the behavioral data can be defined as a function of situational variables. The term idiographic is associated with the idea of uniqueness and implies that each person's behavior is unlike that of others. The term is opposite to nomothetic which implies generality. Idiographic-statistical means that significance tests should be applied to each subject's behavior. The important factor is that there are a sufficient number of situations or trials for statistical tests to be made, and, thus, the idiographic-statistical approach is directly tied to the representative design of experiments (Hammond, 1980).

There is a set of procedures to be followed in this type of idiographic research. Such procedures have been suggested by decision theorists as appropriate and necessary if the description of the decision behavior is to be as complete and accurate as possible (Hammond et al., 1975).

The study results, because this is an idiographic study, were not intended to generalize to a larger child welfare practitioner population but rather to this group.

The research employed here was developed by Hammond et al. (1975). Further, the format and design allow for a "laboratory" type of research and, as such, control for some extraneous factors. It is also useful for defining and describing decision models of individuals. This study has three main characteristics relevant to conduct an analysis of an individual's cognitive decision-making system. Such features include:
1. that it is intended to be relevant to current life situations;
2. that it is not law seeking, but rather is seeking to be
descriptive; and
3. that it is interested in helping people to understand the
judgment processes, and to improve on those judgments.

The approach identifies three sets of activities in order to
accomplish an analysis of an individual's cognitive decision system:
1. the identification of the judgment problem,
2. the analysis of the judgment problem, and
3. the exercise of the judgment.

These components are considered to have the advantage of making
judgment analysis a "good fit" with interpretive research (Hammond
et al., 1975).

Respondents

The respondents used in the study were child welfare
practitioners who were employed by three public county children's
services agencies in Ohio. These agencies are mandated by law to
be responsible for protective services for children in their
respective counties.

The study's results were drawn from an analysis of a
purposive sample as opposed to a random sample. It was necessary
to have a population which was familiar with the requirements of
screening and investigating maltreatment in out-of-home settings.

The selection of the respondents was important in relation to
the nature of the study and the questions of the research topic. Respondents were selected from three large child welfare agencies because in these counties a number of individuals have responsibility for screening and investigating out-of-home care situations. The selection of three counties comparable in size and population would allow the researcher to determine if there were differences between decision-making models among the different counties.

The 15 respondents were the staff responsible for screening and investigation decisions. There are only a few staff in each setting whose responsibility is that of screening and investigating incidents of maltreatment in out-of-home care. All eligible staff were solicited for the research. Of the total staff who conduct screening and investigation of out-of-home maltreatment of children for all of the counties, three declined to participate and one became ill before the study began and was therefore unable to participate.

Although these decisions might be reviewed at other levels, the decision to investigate and substantiate is made at the practitioner level in all three counties. All respondents had experience in screening and/or investigation and substantiation of allegations of maltreatment in out-of-home care.
Development of the Judgment Task

Instrumentation

The next task of the research was to determine the dimensions of information respondents used to make decisions when allegations of maltreatment were made. It was important to identify the various information components (dimensions) used by the respondents. While numbers of researchers (Stein, 1984; Hutchinson, 1988) have expended considerable effort in determining the dimensions of choice in child welfare decision-making, only a few (e.g. Rindfleisch & Bean, 1988; Rindfleisch & Rabb, 1984) have focused on the decision dimensions in out-of-home care situations.

To obtain this portion of the necessary information, a series of focus groups were held with the respondents. Hammond et al. (1975) have suggested that this process can involve extensive data gathering, multivariate analysis, or a simple guided interview designed to elicit cue variables from the individuals. Since the respondents are well versed in the dimensions they use and the laws of Ohio regarding investigations, the guided interview approach was used for this task.

The interviews were conducted by county. Each county group was interviewed separately. Due to scheduling difficulties, one county required two interviews. In the other two counties, the respondents were interviewed as a single group.
The interviews were moderately structured and were designed to glean the various types of information used for screening and investigation. Considerable discussion of the various cues was encouraged. Respondents were asked to prioritize the cues that they used. In four instances, the respondents were reluctant to prioritize information. In these instances, a forced choice was requested. Detailed notes and tapes were developed and analyzed to generate the cue variables which comprised the framework of the decision analysis. The items derived from the process became the primary independent variables (also termed "cue" variables) in this study. These variables were utilized in the construction of the case profiles of the study.

Table 1 contains the 12 cue variables identified by the respondents as those that they used in the screening and investigation process. The first seven of these variables relate to the criteria of level of risk to the child, the level of harm to the child, and the ability of the caregiver to protect the child. The respondents contended that the presence of one or more of these criteria could determine the decision to substantiate the maltreatment of the child. It was indicated that if the child were an infant, there would always be an investigation. Another factor considered to be very important was that of the abilities of the child (e.g. very small children cannot protect themselves, while adolescents could "run" to protect themselves).

The three variables concerning the perpetrator would be considered to assist in the determination of whether there was a
risk of further maltreatment to the child and the ability of the caregiver to protect the child. Important variables in the determination were: the story or history of the incident, the attitude of the perpetrator, and the cooperation of the perpetrator.

Variables regarding the site of caregiving, number of previous reports, and the reporter were considered to be less important by the respondents but necessary in the arena of screening and less important in the area of investigation. It was decided to include this information because Rossi and Nock (1982) and Hammond (1975) have indicated that people often make their decision on factors other than those they think they utilize.

Scaling

Measurement in social and behavioral sciences involves assignment of a number to a variable to indicate how much of the variable is present. Measurement levels are defined by how the "how much" question is answered.

During the interview process, the measurement (levels) of the items were addressed and discussed. Hammond et al. (1975) and Hammond (1980) indicate the need to find the properties of the cue variables that are going to be utilized. There were two components to the development of the variables. First, the scales (Table 1) were constructed by the researcher based on the information gleaned from the respondent interviews, which focused on the necessary factors, and the best means of portraying those
information components. Second, after the scales were developed, they were presented to the respondents for their review and comment. Revisions were made in the scales after the respondents had had an opportunity to critique and comment on each of the items. This activity was carried out to establish the face validity of the cue variables and their measurement scales.

The next measurement issue considered was that of the representativeness of the primary dependent variable of the study, in this case, the decision to substantiate or not substantiate the incident of maltreatment. It would have been possible to simply rate this as a simple "yes" or "no" to the question "Would you substantiate this as an incident of maltreatment?" Another alternative would have been to ask respondents to utilize a continuous scale with anchors at each end to provide meaning to the scale. Practically, the latter alternative proved to be more meaningful for the respondents. Further, in Ohio, there are three possible alternative decisions for the investigation/substantiation task, namely substantiated, indicated, and unsubstantiated. A 10-point scale would give more meaning to the decision task.

A Likert type scale ranging from 0.0 through 1.0 was used to measure the dependent variable "likely to substantiate". This scale of 10 points was appropriate for this study because the research purpose was to understand the cognitive systems of the respondents. A 10-point scale would be more sensitive to subtle differences in judgment than a 2-point scale. As a cognitive aid, the results of studies like the one reported here can help the
decision makers learn to make judgments that are more reliable and more consistent with their intentions. The use of multiple regression is widely referenced in reports of empirical studies using the lens model. However, a two-point "Yes-No" scale to measure the dependent variable could have been used and in that case a statistic other than multiple regression would have been indicated, such as logistic regression. It should be noted too that in real life, the respondents do not make solo decisions but rather present their recommendations to the group where a decision to substantiate or not is made.

Dependent variable measurement scale.

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not</td>
<td>Indicate</td>
<td>Definitely</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substantiate</td>
<td>Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 2: Dependent Variable Measurement Scale

Respondents were asked to assume that the case had already been screened in for investigation. After they had made their decision regarding the investigation results, they were asked to answer on a "yes" or "no" basis whether they would have screened the case in or out. Such an exercise would allow for the completion of the judgment task of whether they judged that the case was inappropriately screened in. This information request was based on
the "real world" experience of respondents. Occasionally, respondents were given cases that they did not think should have been investigated.

Independent Variables

The task for judgment consisted of the respondents' evaluations of profiles presented to them. The profiles contained information that the respondents agreed might be associated with the decision to substantiate or not-substantiate incidents of maltreatment of children in out-of-home care (the criterion).

Levels of each variable (type of information) were determined in the small group meetings with the respondents. The judgment task according to Hammond et al. (1975), Hammond (1980) and Rossi and Nock (1982) is to be grounded in the relevant life experience of the respondents. The researcher recycled possible decision criteria, consensus, and conclusions back through the respondent groups. This method constituted a member check in that respondents were offered the opportunity to critique conceptualizations of the researcher regarding the variables and levels. Through this iterative process, the strongly held views of the respondents were identified. This recognition resulted in the decision that the variable "race" not be included. Half of the respondents were members of minority groups. The group meetings with the respondents provided grounds for claiming face validity.
for the variables and assured that the levels of each variable were in fact a part of the real world experience of the respondents.

The respondents, composed of child welfare staff from three urban county agencies, identified 12 types of information they thought they used in assessing incidents of alleged out-of-home maltreatment. These 12 types of information and level of measurement are:

1. age of the child (interval)
2. sex of the child (nominal)
3. consequences to the child (ordinal)
4. reporter of the incident (ordinal)
5. child behavioral status (ordinal)
6. responsibility for the injury (nominal)
7. cooperation of the perpetrator (ordinal)
8. attitude of the perpetrator (ordinal)
9. role of the perpetrator (ordinal)
10. previous reports regarding the placement/facility (ordinal)
11. child to caregiver ratio (interval)
12. response of the child (ordinal)

These variables and the levels of each are presented on page 62 in Table 1. Clarification of some of these scales is indicated. It should be noted, however, that the levels used were understood by the respondents who sanctioned their use in the study.

Consequence is scaled on a continuum from no consequence to the most serious consequence, namely sexual injury. Reporter of
maltreatment is scaled on a continuum from less credible source to more credible source based on degree of knowledge. Attitude of the perpetrator is scaled on a continuum from acceptance of involvement in the incident to no awareness of involvement in the incident. Role of the perpetrator is scaled on a continuum of lower to higher status in the delivery system. Response of the child is scaled on a continuum from less visibly reactive to maltreatment to more visibly reactive.

The involvement of respondents in the process helped to establish the face validity in that the researcher would recycle descriptive data, emerging analysis and conclusions through the respondents. The data collected in the interviews was used to construct a series of 130 profiles. Each profile was determined to present the respondent with a different set of choices for a judgment determination. Each would require that the respondent give a separate recommendation. The profiles needed to be representative of real world situations. To do this, each profile needed to be: (a) credible to the respondent, and (b) have scale values that reflect a reasonable number of levels.

These notions are representative of the Brunswik probability approach. Brunswik considered that behavior is a constant function, that variables should be functionally relevant, and that there must be representative sampling of situations (Brunswik, 1955).

To further validate the instrument, studies using judgment models were reviewed. This review suggested that the types of
formats used were extremely varied and seemed to be constrained only by the vision of the researcher. Using the suggestion of Bean (1982) and Roose and Doherty (1978), it was decided to have the respondents indicate their preference for the final format. This process further assured that the face validity of the profiles was representative of the actual situations. Respondents agreed on the format, although the final format was slightly different from those that they used in their individual investigations as each county uses a slightly different format for gathering information. The nature of the information is essentially the same across counties.

Case information is gathered using a form which presents questions with spaces for short answers and impressions. This format allows the representation of short indicators of information and impressions or answers to the queries.
Age of child: 17 years
Sex of child: Male
Consequences to child: No observable consequences
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 4:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0.1.2.3.4.5.6.7.8.9.10
Definitely Indicate Definitely not Substantiate Substantiate

Figure 3: Sample of Incident Profile with Response Format

The full set of profiles is found in the Appendix. The construction of the profiles followed the suggestions of Brunswik (1955), Hammond et al. (1975), and Rossi and Nock (1982).

Brunswik (1955) indicated that:

As we cannot possibly hope to encompass the entire population in research, but must sample representatively, and must sample instances in the study of functional achievement, there will be a limited range and a characteristic distribution of conditions and condition combinations. (pp. 198-199)
Rossi (1982) recommends that the appropriate strategy is to present each respondent with a fair sample of the universe of all possible combinations (p. 32). No attempt was made to present the respondents with all of the possible combinations of the levels of the 12 independent variables. To do so would have given an unmanageable length of instrument. The profiles were constructed by randomly assigning levels of each independent variable to each profile through the use of special computer software.

The only other restriction was that, in some cases, the combination of variables would not have been credible for a respondent and would have presented a situation that would have been a violation of the validity assumption of the study.

Cohen and Cohen (1975) propose that another issue to be determined was that of the number of profiles presented to each respondent. This was a considerable struggle with the respondents as they felt that all of the variables initially considered in the development of the variables list were important in the making of the decision, even though McClelland (1989), Rossi (1982), and Rossi and Nock (1982) have indicated that an increased number of variables does not necessarily enhance the ability of the respondent to make a quality decision and that individuals do not usually utilize all of the information presented. It has been suggested that the stability of the regression coefficients is compromised by a very low number of cases to respondent variable ratio (Bean, 1982; Cohen & Cohen, 1975). The recommended ratio is a 10:1 ratio. A 10:1 ratio would have required that each respondent rate 120
profiles. Fewer than 120 profiles were selected for use in measurement to minimize the risk of error due to fatigue and boredom of the respondents.

The next task was to ascertain the subjective perceptions of the cue variables used in decision making. Utilizing Bean's (1982) adaptation of the method of Cook and Stewart (1975), a table was constructed with the 12 independent variables in order to gain the subjective perceptions of the respondents regarding the variables they thought they used for decision making. This method employed a 100-point scale to denote the importance of a particular cue variable in comparison to the other cue variables. The request was simple. Each respondent was asked as a final task to rate, that is assign, a number from 1-100 to each cue variable as his/her perception of the relative importance of that variable to his/her decision-making. A particular value could be used more than once. In other words, the same value could be placed on more than one cue variable indicating that the cue variable carried equal importance to the respondent as a part of the decision-making process. A listing of the cue variables was constructed with a request that the respondent rate each cue variable as to its importance in the decision process of the respondent. Table 1 includes the variable list.
### Table 1: Cue variables and levels of each variable

<table>
<thead>
<tr>
<th>Variables</th>
<th>Levels</th>
</tr>
</thead>
</table>
| **Age of child**               | 1. 6 months  
                              | 2. 3 years  
                              | 3. 7 years  
                              | 4. 11 years  
                              | 5. 13 years  
                              | 6. 17 years                                                                 |
| **Sex of child**               | 1. Female  
                              | 2. Male                                                                 |
| **Consequences to child**      | 1. No observable consequences  
                              | 2. Child's condition worsened due to lack of medical care  
                              | 3. Child injured while caregiver not present  
                              | 4. Observable signs of physical injury  
                              | 5. Observable signs of sexual injury                                                                 |
| **Reporter**                   | 1. Neighbor  
                              | 2. Child  
                              | 3. Medical doctor                                                                 |
| **Child Behavioral Status**    | 1. Age appropriate behaviors  
                              | 2. Mild behavior disorder  
                              | 3. Severe behavior disorder                                                                 |
| **Responsibility for injury**  | 1. Could not have been accidental  
                              | 2. Could have been accidental                                                                 |
| **Cooperation of Perpetrator** | 1. Resistant  
                              | 2. Mildly Cooperative  
                              | 3. Highly Cooperative                                                                 |
Table 1: Cue variables and levels of each variable (continued)

Attitude of perpetrator
1. Remorseful
2. Angry
3. Unaware of problem

Role of perpetrator
1. Foster parent
2. Direct care giver
3. Professional staff/institutional

Previous reports regarding placement
1. None
2. Some
3. Several

Child to caregiver ratio
1. 2:1
2. 3:1
3. 4:1
4. 6:1
5. 10:1

Response of child
1. Withdrawn
2. Complacent
3. Angry
As a final task, please do the following. The items listed have been indicated as being important in the consideration of the decision to substantiate or not substantiate a reported incident of out-of-home abuse. For each item, please assign a number from 1-100 which would indicate how important this factor is to your decision to substantiate or not substantiate. The assignment of a number would be that one hundred (100) would be the most important, and one (1) would be the least important. You may rate more than one item as equally important.

_____ Age of child
_____ Sex of child
_____ Consequences to child
_____ Reporter of maltreatment
_____ Child behavioral status
_____ Responsibility for injury
_____ Cooperation of perpetrator
_____ Attitude of perpetrator toward what happened
_____ Role of perpetrator
_____ Previous reports regarding placement/facility
_____ Child/caretaker ratio
_____ Response of child

Figure 4: Instrument for rating subjective importance of cue variables used in the decision to substantiate
A particular responsibility of the respondents is the decision to substantiate or not substantiate instances of out-of-home maltreatment of children. As such, an important question asked of the respondents was the source of their information as it relates to their decision-making duties. All of the respondents indicated in the interviews that the primary source of their information and their subsequent training in this area is the Ohio Reporting Law (ORC 2151.421; 2151.99). The rules promulgated from this law delineate the persons who are required to report alleged child abuse and neglect and the penalties for failure to report. Ohio Department of Human Services Rules on investigation of abuse and maltreatment amplify the Ohio Reporting Law (ORC 2151.429; ORC 2151.99).

Each of the particular counties has produced a synopsis of this legal mandate for reporting and investigating for the particular unit. Each of the respondents indicated that they had received training in the investigation and substantiation of maltreatment in out-of-home care. All staff are expected to utilize this information in their investigation and substantiation decisions.

Reliability and Validity

Reliability

Intrajudge reliability gives attention to the consistency of a single judge in the utilization of the information in his/her
Judgment task. Interjudge reliability relates to the extent to which two or more judges agree in their given responses on the same judgment task.

Hammond et al., (1975) suggest that intrajudge reliability can be estimated from the multiple correlation coefficient (R) obtained in a simultaneous regression analysis of an individual judge using all the independent variables under study. This coefficient is a measure of association between the dependent variable and an optimally weighted combination of the independent variables. A high multiple R, which indicates a strong relationship between the dependent and independent variables, also suggests that the judge demonstrated consistency in the use of information in the judgment task. Inconsistent or unreliable information use would tend to reduce the value of the multiple R. (Bean, 1982, p. 66)

In interjudge reliability the correlation is determined by associating the responses of pairs of judges on a rating task. The use of Pearson's r or Tucker's r_a can be viewed as a measure of the consistency or reliability demonstrated between two respondents as they rate the same task (Bean, 1982,).

Sellitz, Wrightsman, and Cook (1976) note that reliability in observational research is the degree to which two or more observers agree on their observations. Hoffman et al. (1960) studied nine radiologists. They were rating a series of x-rays. They were fairly reliable in the use of information on the tasks (reliability ranged from .60 to .92); however, interjudge reliability tended to be low (.83 to -.11). The researchers concluded that low reliability between respondents was a result of differences in the
approach to the task and not completely to individual inconsistency or unreliability. These researchers indicated that a good fit between independent and dependent variables in the judges' models allows for a better detection of difference between respondent models.

Validity

Validity is concerned with the extent to which an instrument measures what one thinks it is measuring. In this endeavor, and in decision analysis, measurement scales are argued to be face valid (Hammond et al., 1975; McClelland, 1991; Rossi & Nock, 1982). In this judgment modeling study, the dimensions in the scales have been defined and therefore "grounded" by the respondents themselves through a number of iterations. A definitive effort to assure validity was made in this study by actively including respondents in the construction of the measurement tool. This was an interactive process that involved interviews, follow-up contact, legal documents for criteria, and the iterations of the document. The completed tool is a representation of what could be considered to be "expert opinion" of the task.

Data Collection

Individual interviews with respondents were begun in May, 1993, with group interviews beginning in July, 1993. The collective interviews were conducted with various groups and respondents
regarding the validity of the items in the forms and the format of the profiles.

Instruments were administered in August, 1993. Each respondent was given a complete set of profiles and the form for the subjective determination of the importance of each cue variable. They were asked not to complete the profiles in one sitting but rather to spread the task out over several sessions to reduce the fatigue that attended the task. This information is shown in Appendix A as a part of the instructions to the respondents. This was done to reduce the impact of fatigue on the task. Respondents were given several days to complete the task. Questionnaires were hand delivered and collected. All questionnaires were completed and returned in August, 1993.

Data Analysis

Returned questionnaires were coded. Data were analyzed using SPSS and hand calculation. The stem and leaf system was used to examine responses to presented profiles. Stem and leaf is a visual representation of the decisions of the respondents and is shown in Chapter IV. It is a means of representing data that shows the range and configuration of the decisions of the respondents.
Multiple Regression as the Statistical Model
for a Social Judgment Problem

Social researchers have found that a dependent variable is affected simultaneously by several independent variables. Social judgment theory analysis seeks to examine such situations. A number of analytical approaches have been developed to capture and therefore explain the judgment policies used by respondents. Most prominently used of these is the linear model (Slovic & Lichtenstein, 1971). This approach to analysis in judgment modeling has been used by others in examining decisions of human services workers (Bean, 1982; Pion-Berlin, 1989).

The linear model is represented in the form of an equation by Hammond et al. (1975).
In this analysis, a straight-line function is fitted to the set of data in such a way that the vertical distances between the points and the line are minimized.

The linear regression equation is represented as:

2. \[ Y = a + bX \]

- \( Y \) is the predicted value of the dependent variable
- \( X \) is the independent variable
- \( a \) is the \( Y \)-intercept or regression constant
- \( b \) is the regression coefficient (weight) or slope

In multiple linear regression, the equation is expanded to include:

3. \[ Y = a + b_1 X_1 + b_2 X_2 + b_3 X_3 \ldots \]

In regression, the regression coefficient or weight represents the impact of each independent variable \((x_1, x_2, x_3)\) while all other variables in the equation are held constant. The regression weights will tell how accurately the respondent's judgment can be predicted from knowing the independent cue value while holding other variables constant. In social judgment analysis, the regression weight for each cue is interpreted as an indicator of the importance of that information to the judgment task at hand (Hammond, 1980).
Multiple linear regression analysis is a method to measure the effects of several factors concurrently. Multiple regression analysis is identical to that of simple regression analysis with the exception that two or more independent variables are used simultaneously to explain variations in the dependent variable. In the case of the study, multiple regression is used to determine how much variance in the dependent variable is accounted for by the 12 independent variables (Table 1, p. 67) taken together. Simultaneous linear multiple regression is used to examine the use of the independent variables by the respondents in their ratings. The regression coefficients (weights) between the cues and the judgment reveal the relative dependence on the various information cues presented (Hammond et al., 1975).

Slovic and Lichtenstein (1971) state that in research in which the investigator is primarily interested in the respondent's weighting of the cues, the cues are made explicit and levels vary systematically. It is conceivable that some degree of realism may be lost in the process. The responses of the judges are conceptualized as a linear combination of the cues available (Slovic & Lichtenstein, 1971).

The regression coefficients obtained indicate how influential the information cues are in predicting the respondents' judgments. The standardized regression coefficient indicates the amount of standardized change in the dependent variable based on one standard unit change in the independent variable. This makes the values of
the various information cues directly comparable to each other within each respondent's model but not between respondents.

In social judgment analysis, the multiple correlation coefficient (R) is considered as a measure of the cognitive control over the judgment task (Hammond, 1980). The multiple correlation coefficient refers to the fit of the linear regression model. This is an indicator of how accurately the judgments of the respondent can be predicted by the use of all of the cues at once.

According to Hammond et al. (1975) and Slovic and Lichtenstein (1971) studies with R values in the .70 and above for real world situations indicate that the linear model has done a fairly good job of predicting judgments.

How well the information cues account for the variance in the judgments made is then indicated by the coefficient of determination (R²). If the fit is less than 1.00 something may have been left out or the relationship is in another form other than linear (Bean, 1982; Hammond et al., 1975; Slovic & Lichtenstein, 1971).

A statistically significant level of \( p < .05 \) was selected as being sufficiently conservative given the real world nature of the task.

The judgment models were idiographic respondent models (policies) which were made explicit. They provided insight into the utilization of various cues under hypothetical/simulated conditions and are analogous to the normal investigation process. The analysis also addressed the question of whether the various workers use the same factors in their decision process.
Whole model analysis was considered to be sufficient to provide the information necessary for a comparative picture of the decision process in the three counties out-of-home investigation teams. This whole model analysis provided explicit information as to each individual respondent's judgment policies in contrast to others in his/her own county and in the other counties. It also provided data for a comparison.

Summary

Social judgment analysis as described by Hammond et al. (1975) was used as the framework for the conduct of the research. This approach identifies three sets of activities to accomplish an analysis of the cognitive decision system of an individual. These activities include: the identification of the judgment problem, the analysis of the judgment problem, and the exercising of the judgment. The approach employs a representative design of experiments and uses an idiographic-statistical analysis wherein significance tests are applied to each respondent's behavior. A sufficient number of situations or trials for statistical testing is required. Thus, the idiographic-statistical approach is directly tied to representative design. Social judgment analysis requires that the information in the cues be representative of the real world of the respondents and be grounded in the experience of the respondents. The real world nature of the study is emphasized because of its importance in this type of study.
Responses are subjected to simultaneous multiple regression analysis for each respondent variable. The analysis strategy indicates the extent the ratings can be predicted from information cues taken together.

The respondents were 15 social work practitioners from three metropolitan counties in Ohio. These respondents are employed by the Children's Services Boards in each of the counties. The construction of the instrument was grounded in the experience of the respondents and included 105 profiles of cases utilizing the 12-cue variables determined to be important by the respondents. A subjective rating of the important variables was asked for from each of the respondents.

The analysis of the data was conducted using stem and leaf displays, box plots, and multiple regression analysis. Results of the analysis are presented in Chapter IV.
CHAPTER IV

RESULTS

The results chapter of this study is divided into six sections. The first contains a description of the characteristics of the respondents and their communities. The second and third sections of the chapter contain the description of the independent and dependent variables which have been used in the study. The fourth section contains the decision models of the respondents with discussion; it also advances the regression approach described by Hammond et al. (1975) for an examination of the unique models of the respondents. Section five examines the judgment of the respondents using the lens model equation, as well as the group judgments of the respondents by county. Section seven evaluates the assessments of the respondents' subjective interpretations of their judgment of the presented profiles.

Description of the Respondents

All of the respondents in the study were employed by one of three Children's Services Boards in the State of Ohio. All of the chosen counties were large metropolitan areas. In two of the counties, there are specialized units that only screen and
investigate out-of-home maltreatment. The 15 respondent were selected because they were either currently engaged in screening and/or investigating out-of-home maltreatment of children, or had, within the last 18 months, been involved in investigation and screening. In two of the counties, the supervisor conducts the preliminary screening, and the investigators then conduct the investigation and make their recommendation regarding substantiation of the maltreatment.

All of the respondents signed Human Subject Consent Forms agreeing that their participation was voluntary and that they could decline to respond to any profile if they so chose. They were also informed that they could drop out of the process at any time they chose. None, however, chose to drop out of the process.

All of the participants were experienced in child welfare and in public children's services in particular. The average total number of years in child welfare for the whole group was 12.4. The respondents had been employed in their screening and/or investigation position for from 1.2 to 13 years. The average years of employment in investigation and screening positions was 4.55 years. Three of the respondents had been employed between 2 and 6.4 years (20%). Five had been employed for between 6.5 and 10.8 years (33.3%). One had been employed within the range of 10.9 and 15.2 years (6.66%). Two had been employed between 15.3 and 19.6 years (13.3%), and four had been employed for between 19.7 and 24 years (26.6%). Overall, this was an experienced group of child welfare workers.
The respondents' educational levels included three having master's degrees in either Social Work or Family Relations. Ten, or two-thirds, held bachelor's degrees with four in Psychology, one in Political Science, one in Education, and four in Social Work. One had a two-year degree in social service, and one was non-degreed. The two supervisors hold master's degrees in Social Work.

There were 11 females, comprising 73% of the group, and 4 males, comprising 27% of the group. Seven of the respondents were Caucasian (47% of the group), 7 African-Americans (47% of the group), and 1 respondent was Hispanic (6% of the group). The average age of the respondents was 39.6 years, with the youngest being 28 and the most senior being 53.
Table 2: Descriptive Characteristics of Respondents

<table>
<thead>
<tr>
<th>County</th>
<th>Position</th>
<th>Years in Present Position</th>
<th>Years in Child Welfare</th>
<th>Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Supervisor</td>
<td>2.5</td>
<td>20</td>
<td>MSW</td>
</tr>
<tr>
<td>A</td>
<td>Direct Service</td>
<td>4</td>
<td>16</td>
<td>BA</td>
</tr>
<tr>
<td>A</td>
<td>Direct Service</td>
<td>2</td>
<td>5</td>
<td>BS</td>
</tr>
<tr>
<td>A</td>
<td>Direct Service</td>
<td>2</td>
<td>10</td>
<td>BA</td>
</tr>
<tr>
<td>A</td>
<td>Direct Service</td>
<td>1.2</td>
<td>2</td>
<td>BS</td>
</tr>
<tr>
<td>B</td>
<td>Supervisor</td>
<td>4.5</td>
<td>23</td>
<td>MSSA</td>
</tr>
<tr>
<td>B</td>
<td>Direct Service</td>
<td>3.5</td>
<td>9</td>
<td>BASW</td>
</tr>
<tr>
<td>B</td>
<td>Direct Service</td>
<td>10.5</td>
<td>10.5</td>
<td>BS</td>
</tr>
<tr>
<td>B</td>
<td>Direct Service</td>
<td>4</td>
<td>6</td>
<td>BS</td>
</tr>
<tr>
<td>B</td>
<td>Direct Service</td>
<td>3.5</td>
<td>14</td>
<td>BA</td>
</tr>
<tr>
<td>C</td>
<td>Direct Service</td>
<td>N/A</td>
<td>23</td>
<td>AA</td>
</tr>
<tr>
<td>C</td>
<td>Direct Service</td>
<td>2</td>
<td>7.5</td>
<td>BA</td>
</tr>
<tr>
<td>C</td>
<td>Direct Service</td>
<td>13</td>
<td>23</td>
<td>ND</td>
</tr>
<tr>
<td>C</td>
<td>Direct Service</td>
<td>7.2</td>
<td>7.2</td>
<td>BSSW</td>
</tr>
<tr>
<td>C</td>
<td>Direct Service</td>
<td>4.5</td>
<td>16</td>
<td>MS</td>
</tr>
</tbody>
</table>

\[ \bar{x} = 4.55 \quad \bar{x} = 12.4 \]
Analysis of Decision to Substantiate

Independent Variables of the Study

In this study, the independent variables are those dimensions of information that have been used by the respondents to determine their decision to substantiate or not substantiate reports of maltreatment of children in out-of-home care. These same variables are used as the factors influencing the decision to screen the report of maltreatment in or out for investigation. The factors, or information dimensions, used were identified through a series of focus groups with the respondents. This process is described in Chapter 3.

The independent variables are described in Table 3. Included and randomly generated are the measurement scales used in the case profiles. Age, sex, child behavioral status, and response of the child represent the general characteristics of the child. Consequences to the child, reporter of maltreatment, responsibility for injury, attitude of perpetrator toward the incident, and cooperation of perpetrator represent the factors of the risk to the child. Role of the perpetrator, previous reports regarding placement/facility, and child/caretaker ratio represent characteristics of the out-of-home caregivers.
Table 3: Distribution of Independent Variables  
Total Number of Respondents for Number of Profiles = 1575

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>180</td>
<td>11.4</td>
<td>180</td>
<td>11.4</td>
</tr>
<tr>
<td>2</td>
<td>285</td>
<td>18.1</td>
<td>465</td>
<td>29.4</td>
</tr>
<tr>
<td>3</td>
<td>195</td>
<td>12.4</td>
<td>660</td>
<td>41.9</td>
</tr>
<tr>
<td>4</td>
<td>360</td>
<td>22.9</td>
<td>1020</td>
<td>64.8</td>
</tr>
<tr>
<td>5</td>
<td>240</td>
<td>15.2</td>
<td>1260</td>
<td>80.0</td>
</tr>
<tr>
<td>6</td>
<td>315</td>
<td>20.0</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Child Sex</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>735</td>
<td>46.7</td>
<td>735</td>
<td>46.7</td>
</tr>
<tr>
<td>2</td>
<td>840</td>
<td>53.3</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Consequences to Child</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>225</td>
<td>14.3</td>
<td>225</td>
<td>14.3</td>
</tr>
<tr>
<td>2</td>
<td>450</td>
<td>28.6</td>
<td>675</td>
<td>42.9</td>
</tr>
<tr>
<td>3</td>
<td>270</td>
<td>17.1</td>
<td>945</td>
<td>60.0</td>
</tr>
<tr>
<td>4</td>
<td>330</td>
<td>21.0</td>
<td>1275</td>
<td>81.0</td>
</tr>
<tr>
<td>5</td>
<td>300</td>
<td>19.0</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Reporter of Maltreatment</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>615</td>
<td>39.0</td>
<td>615</td>
<td>39.0</td>
</tr>
<tr>
<td>2</td>
<td>360</td>
<td>22.9</td>
<td>975</td>
<td>61.9</td>
</tr>
<tr>
<td>3</td>
<td>600</td>
<td>38.1</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Behavioral Status of Child</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>435</td>
<td>27.6</td>
<td>435</td>
<td>27.6</td>
</tr>
<tr>
<td>2</td>
<td>585</td>
<td>37.1</td>
<td>1020</td>
<td>64.8</td>
</tr>
<tr>
<td>3</td>
<td>555</td>
<td>35.2</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Responsibility for Injury</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>780</td>
<td>49.5</td>
<td>780</td>
<td>49.5</td>
</tr>
<tr>
<td>2</td>
<td>795</td>
<td>50.5</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Cooperation of Perpetrator</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>525</td>
<td>33.3</td>
<td>525</td>
<td>33.3</td>
</tr>
<tr>
<td>2</td>
<td>600</td>
<td>38.8</td>
<td>1125</td>
<td>71.4</td>
</tr>
<tr>
<td>3</td>
<td>450</td>
<td>28.6</td>
<td>1575</td>
<td>100.0</td>
</tr>
</tbody>
</table>
Table 3: Distribution of Independent Variables (continued)
Total Number of Respondents for Number of Profiles = 1575

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitude of Perpetrator</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>570</td>
<td>36.2</td>
<td>525</td>
<td>33.3</td>
</tr>
<tr>
<td>2</td>
<td>600</td>
<td>38.8</td>
<td>1125</td>
<td>71.4</td>
</tr>
<tr>
<td>3</td>
<td>420</td>
<td>26.7</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td>Role of Perpetrator</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>480</td>
<td>30.5</td>
<td>480</td>
<td>30.5</td>
</tr>
<tr>
<td>2</td>
<td>585</td>
<td>33.3</td>
<td>1005</td>
<td>63.8</td>
</tr>
<tr>
<td>3</td>
<td>570</td>
<td>36.2</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td>Previous Reports on Facility</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>570</td>
<td>36.2</td>
<td>570</td>
<td>36.2</td>
</tr>
<tr>
<td>2</td>
<td>540</td>
<td>34.3</td>
<td>1110</td>
<td>70.5</td>
</tr>
<tr>
<td>3</td>
<td>465</td>
<td>29.5</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td>Child/Caretaker Ratio</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>450</td>
<td>28.6</td>
<td>450</td>
<td>28.6</td>
</tr>
<tr>
<td>2</td>
<td>180</td>
<td>11.4</td>
<td>630</td>
<td>40.0</td>
</tr>
<tr>
<td>3</td>
<td>210</td>
<td>13.3</td>
<td>840</td>
<td>53.3</td>
</tr>
<tr>
<td>4</td>
<td>450</td>
<td>28.6</td>
<td>1290</td>
<td>81.9</td>
</tr>
<tr>
<td>5</td>
<td>285</td>
<td>18.1</td>
<td>1575</td>
<td>100.0</td>
</tr>
<tr>
<td>Response of Child</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>465</td>
<td>29.5</td>
<td>465</td>
<td>29.5</td>
</tr>
<tr>
<td>2</td>
<td>495</td>
<td>31.4</td>
<td>960</td>
<td>61.0</td>
</tr>
<tr>
<td>3</td>
<td>615</td>
<td>39.0</td>
<td>1575</td>
<td>100.0</td>
</tr>
</tbody>
</table>
The scale levels of the variables were randomly assigned. It was expected that each level of each variable would be represented equally within the study. Those profiles which were implausible were discarded. For example, the victim, a six-month old child, who self-reported the maltreatment was removed from the study as being implausible in real life. Because the study was conducted to assure that the respondent's own views were incorporated, implausible profiles needed to be removed to assure that the real life character of the profiles was maintained. A total of 16 profiles were removed for this reason. To adjust for this, a total of 130 profiles were generated to assure randomness and an N size of 100 or more. Then 9 additional profiles were randomly removed leaving a total of 105 profiles available for rating.

**Dependent Variable**

The dependent variable was devised to measure the decision to substantiate or not-substantiate a reported incident of maltreatment of a child. The decision was analyzed through the use of exploratory data analysis as described in Hartwig and Dearing (1979). The primary assumption of exploratory data analysis is that the more one knows about the data, the more effectively data can be used to develop, test, and refine theory. The approach seeks to maximize what is learned from the data. Hartwig and Dearing (1979) posit that data be approached in a flexible, data-centered approach which is open to alternative models of relationships and
alternative scales for expressing variables and which emphasizes visual representations of data and resistant statistics.

They seek to display the observed values based on three major tenets of exploratory approaches:

1. The shape of a distribution is at least as important as the location and spread.

2. Visual representations are superior to purely numeric representations for discovering the characteristic shape of a distribution.

3. The choice of summary statistics to describe the data for a single variable should be dependent upon the appropriateness of the statistics for the shape of the distribution. (p.15)

One way to provide a display of the data is to arrange and list the observed values in either ascending or descending order. The stem and leaf display and the box plot are useful to graphically display the data. Both of these techniques are used in the examination of one variable and combine the use of rank ordering, histograms, and order statistics to present the form and distribution of the variable (Bean, 1982).
Table 4 describes the decision made by the respondents as a group. The designation 1.0 is to definitely substantiate; .5 means that maltreatment is indicated, but not substantiated; and 0.0 means that maltreatment is definitely not substantiated.

Table 4:  
Frequency distribution of decision to substantiate or not substantiate maltreatment for all respondents

<table>
<thead>
<tr>
<th>Decision</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0</td>
<td>92</td>
<td>5.9</td>
<td>92</td>
<td>5.9</td>
</tr>
<tr>
<td>0.1</td>
<td>52</td>
<td>3.3</td>
<td>144</td>
<td>9.2</td>
</tr>
<tr>
<td>0.2</td>
<td>84</td>
<td>5.3</td>
<td>183</td>
<td>11.5</td>
</tr>
<tr>
<td>0.3</td>
<td>63</td>
<td>4.0</td>
<td>207</td>
<td>13.2</td>
</tr>
<tr>
<td>0.4</td>
<td>72</td>
<td>4.6</td>
<td>363</td>
<td>23.1</td>
</tr>
<tr>
<td>0.5</td>
<td>175</td>
<td>11.1</td>
<td>538</td>
<td>34.2</td>
</tr>
<tr>
<td>0.6</td>
<td>110</td>
<td>7.0</td>
<td>648</td>
<td>41.2</td>
</tr>
<tr>
<td>0.7</td>
<td>135</td>
<td>8.6</td>
<td>783</td>
<td>49.8</td>
</tr>
<tr>
<td>0.8</td>
<td>218</td>
<td>13.9</td>
<td>1001</td>
<td>63.7</td>
</tr>
<tr>
<td>0.9</td>
<td>218</td>
<td>13.9</td>
<td>1219</td>
<td>77.5</td>
</tr>
<tr>
<td>1.0</td>
<td>353</td>
<td>22.5</td>
<td>1572</td>
<td>100.0</td>
</tr>
</tbody>
</table>

(three cases were missing)

N = 1572
85
The following tables (5-7) present stem and leaf and box plot
displays of the case profiles.

Table 5: Stem and Leaf Displays and Box Plots for Each Respondent
in County A
Respondent I
1.0
.9
.8
.7
.6
.5
.4
.3
.2
.1
0.0

00000
00000000000000000000000000
000000000000000000000000
000000000
0000
0000000
0
00000000000
00000
000000000000
0
Min. = 0.0

Q1 = .3

Median = .8

5
26
24
9
4
7
1
11
5
12
1
Q3 = .9

Max. = 1.0

Respondent 2
1.0
.9
.8
.7
.6
.5
.4
.3
.2
.1
0.0

00000000000000000000000000000000
0000000000000

0
0
2
0

00
00000000000000000000000000000000
0
0000000000

000000000000000
Min. = 0.0

45

Q1 = .5

Median = .5

Q3 = 1.0

33
10
0
0
0
15
Max. = 1.0


Table 5: Stem and Leaf Displays and Box Plots for Each Respondent in County A (continued)

Respondent 3

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0</td>
<td>000000000000000000000000000 56</td>
<td></td>
</tr>
<tr>
<td>0.9</td>
<td>000</td>
<td>6</td>
</tr>
<tr>
<td>0.8</td>
<td>00000000000000000000000000000000 13</td>
<td></td>
</tr>
<tr>
<td>0.7</td>
<td>000</td>
<td>4</td>
</tr>
<tr>
<td>0.6</td>
<td>00</td>
<td>2</td>
</tr>
<tr>
<td>0.5</td>
<td>000</td>
<td>0</td>
</tr>
<tr>
<td>0.4</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>0.3</td>
<td>00000000000000000000000000000000 5</td>
<td></td>
</tr>
<tr>
<td>0.2</td>
<td>000</td>
<td>3</td>
</tr>
<tr>
<td>0.1</td>
<td>00000000000000000000000000000000 0</td>
<td></td>
</tr>
<tr>
<td>0.0</td>
<td>00000000000000000000000000000000 15</td>
<td></td>
</tr>
</tbody>
</table>

Min. = 0.0 Median = 1.0 Q1. = .7 Q3. = 1.0 Max. = 1.0

Respondent 4

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0</td>
<td>00000000000000000000000000000000 49</td>
<td></td>
</tr>
<tr>
<td>0.9</td>
<td>00</td>
<td>2</td>
</tr>
<tr>
<td>0.8</td>
<td>00000000000000000000000000000000 14</td>
<td></td>
</tr>
<tr>
<td>0.7</td>
<td>00000000000000000000000000000000 9</td>
<td></td>
</tr>
<tr>
<td>0.6</td>
<td>000</td>
<td>3</td>
</tr>
<tr>
<td>0.5</td>
<td>00000000000000000000000000000000 11</td>
<td></td>
</tr>
<tr>
<td>0.4</td>
<td>00</td>
<td>2</td>
</tr>
<tr>
<td>0.3</td>
<td>00</td>
<td>0</td>
</tr>
<tr>
<td>0.2</td>
<td>00</td>
<td>0</td>
</tr>
<tr>
<td>0.1</td>
<td>00000000000000000000000000000000 0</td>
<td></td>
</tr>
<tr>
<td>0.0</td>
<td>00000000000000000000000000000000 13</td>
<td></td>
</tr>
</tbody>
</table>

Min. = 0.0 Median = .8 Q1. = .5 Q3. = 1.0 Max. = 1.0

Two questions not answered
Table 5: Stem and Leaf Displays and Box Plots for Each Respondent in County A (continued)

**Respondent 5**

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Box Plot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>19</td>
<td><img src="image" alt="Box Plot" /></td>
</tr>
<tr>
<td>.9</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>.8</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>.7</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>.6</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>.5</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>.4</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>.3</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>.2</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>.1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>0.0</td>
<td>13</td>
<td></td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .5  Median = .8  Q3. = .9  Max. = 1.0
Table 6: Stem and Leaf Displays and Box Plots for Each Respondent in County B.

**Respondent 6**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0000000000000000</td>
<td>14</td>
</tr>
<tr>
<td>.9</td>
<td>0000000000000000</td>
<td>22</td>
</tr>
<tr>
<td>.8</td>
<td>0000000000000000</td>
<td>20</td>
</tr>
<tr>
<td>.7</td>
<td>00000</td>
<td>5</td>
</tr>
<tr>
<td>.6</td>
<td>0000</td>
<td>4</td>
</tr>
<tr>
<td>.5</td>
<td>0000000000000000</td>
<td>12</td>
</tr>
<tr>
<td>.4</td>
<td>0000</td>
<td>3</td>
</tr>
<tr>
<td>.3</td>
<td>0000000000000000</td>
<td>8</td>
</tr>
<tr>
<td>.2</td>
<td>0000000000000000</td>
<td>9</td>
</tr>
<tr>
<td>.1</td>
<td>0000000000000000</td>
<td>8</td>
</tr>
<tr>
<td>0.0</td>
<td>0000000000000000</td>
<td>0</td>
</tr>
</tbody>
</table>

Min. = .1  Q1. = .4  Median = .8  Q3. = .9  Max. = 1.0

**Respondent 7**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0000000000000000</td>
<td>14</td>
</tr>
<tr>
<td>.9</td>
<td>0000000000000000</td>
<td>31</td>
</tr>
<tr>
<td>.8</td>
<td>0000000000000000</td>
<td>10</td>
</tr>
<tr>
<td>.7</td>
<td>0000000000000000</td>
<td>12</td>
</tr>
<tr>
<td>.6</td>
<td>0000000000000000</td>
<td>10</td>
</tr>
<tr>
<td>.5</td>
<td>0000000000000000</td>
<td>10</td>
</tr>
<tr>
<td>.4</td>
<td>0000</td>
<td>3</td>
</tr>
<tr>
<td>.3</td>
<td>0000000000000000</td>
<td>6</td>
</tr>
<tr>
<td>.2</td>
<td>0000000000000000</td>
<td>2</td>
</tr>
<tr>
<td>.1</td>
<td>0000000000000000</td>
<td>2</td>
</tr>
<tr>
<td>0.0</td>
<td>0000000000000000</td>
<td>5</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .5  Median = .8  Q3. = .9  Max. = 1.0

**Respondent 8**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0000000000000000</td>
<td>10</td>
</tr>
<tr>
<td>.9</td>
<td>0000000000000000</td>
<td>23</td>
</tr>
<tr>
<td>.8</td>
<td>0000000000000000</td>
<td>13</td>
</tr>
<tr>
<td>.7</td>
<td>0000000000000000</td>
<td>13</td>
</tr>
<tr>
<td>.6</td>
<td>0000000000000000</td>
<td>15</td>
</tr>
<tr>
<td>.5</td>
<td>0000000000000000</td>
<td>7</td>
</tr>
<tr>
<td>.4</td>
<td>0000000000000000</td>
<td>15</td>
</tr>
<tr>
<td>.3</td>
<td>0000</td>
<td>2</td>
</tr>
<tr>
<td>.2</td>
<td>0000000000000000</td>
<td>3</td>
</tr>
<tr>
<td>.1</td>
<td>0000000000000000</td>
<td>3</td>
</tr>
<tr>
<td>0.0</td>
<td>0000000000000000</td>
<td>1</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .5  Median = .7  Q3. = .9  Max. = 1.0
Table 6: Stem and Leaf Displays and Box Plots for Each Respondent in County B. (continued)

**Respondent 9**

| 1.0 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 17 |
| .9  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 7  |
| .8  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 12 |
| .7  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 14 |
| .6  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 8  |
| .5  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 17 |
| .4  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 3  |
| .3  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 15 |
| .2  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 3  |
| .1  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 6  |
| 0.0 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 3  |

Min. = 0.0  Q1. = .3  Median = .6  Q3. = .8  Max. = 1.0

**Respondent 10**

| 1.0 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 6  |
| .9  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 8  |
| .8  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 9  |
| .7  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 22 |
| .6  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 10 |
| .5  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 20 |
| .4  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 13 |
| .3  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 11 |
| .2  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 4  |
| .1  | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 2  |
| 0.0 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 0  |

Min. = .1  Q1. = .4  Median = .6  Q3. = .7  Max. = 1.0
Table 7: Stem and Leaf Displays and Box Plots for Each Respondent in County C.

**Respondent 11**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>.9</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>.8</td>
<td>0</td>
<td>30</td>
</tr>
<tr>
<td>.7</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>.6</td>
<td>0</td>
<td>16</td>
</tr>
<tr>
<td>.5</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>.4</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>.3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>.2</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>.1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>0.0</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .6  Median = .8  Q3. = .9  Max. = 1.0

**Respondent 12**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>.9</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>.8</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>.7</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>.6</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>.5</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>.4</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>.3</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>.2</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>.1</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>0.0</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .4  Median = .6  Q3. = .8  Max. = 1.0
Table 7: Stem and Leaf Displays and Box Plots for Each Respondent in County C. (continued)

**Respondent 13**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0</td>
<td>53</td>
</tr>
<tr>
<td>0.9</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>0.8</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>0.7</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>0.6</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0.5</td>
<td>0</td>
<td>23</td>
</tr>
<tr>
<td>0.4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0.3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0.2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0.1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0.0</td>
<td>0</td>
<td>6</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .5  Median = 1.0  Q3. = 1.0  Max. = 1.0

**Respondent 14**

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaf</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0</td>
<td>29</td>
</tr>
<tr>
<td>0.9</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>0.8</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>0.7</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>0.6</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>0.5</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>0.4</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>0.3</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>0.2</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>0.1</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>0.0</td>
<td>0</td>
<td>18</td>
</tr>
</tbody>
</table>

Min. = 0.0  Q1. = .2  Median = .7  Q3. = 1.0  Max. = 1.0
Table 7: Stem and Leaf Displays and Box Plots for Each Respondent in County C (continued)

Respondent 15

<table>
<thead>
<tr>
<th>Stem</th>
<th>Leaves</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>0</td>
<td>19</td>
</tr>
<tr>
<td>.9</td>
<td>0</td>
<td>19</td>
</tr>
<tr>
<td>.8</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>.7</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>.6</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>.5</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>.4</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>.3</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>.2</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>.1</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>0.0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Min. = .1  Q1. = .4  Median = .7  Q3. = .9  Max. = 1.0
The number in the left column of the stem and leaf display is the rating given by the respondent. The Qs are an occurrence of a specific rating. The number on the right is the total number of the rating level.

The box plot is a different representation of respondent ratings. The box represents the preponderance of the ratings. The horizontal line in the box denotes the median. The + denotes the mean. Whiskers show the first and fourth quartile.

The use of a stem and leaf and box plots provides a visual representation of each respondent's decision model. Both representations of the data graphically describe the distribution of each of the respondent's decisions. The stem and leaf displays are useful for looking at distributions of the decisions of each of the respondents. According to Hartwig and Dearing (1979), the stem and leaf display encourages the initial exploration of the data. The stem and leaf also provides a view of the range of decision-making of the respondents in visual form.

The box and whisker plot, which was also developed by Tukey (1977), adds to the perception of the major characteristics of the distributions. This technique, according to Hartwig and Dearing (1979), is often most useful when one or both of the tails of a distribution contain large or small values (pp. 23).

The box plot is defined by the statistics which are listed for each of the respondents. These are the minimum, Q1, median, Q3, and maximum. If one views the box as it is printed, that is vertically, the bottom horizontal line represents the first quartile
(Q1), and the top horizontal line represents the third quartile (Q3). The line within the box itself represents the median value of the distribution. Thus, the box portion of the box plot represents the middle fifty percent of the responses to the dependent variable. The lines extending from either end of the box, which are referred to as whiskers, represent the uppermost 25% of the responses and the lower 25% of the responses to the dependent variable. It is possible, therefore, to utilize the stem and leaf and the box plots to visualize the responses of each of the respondents to the presented profiles.

With the dependent scale as the reference point for visualizing the stem and leaf and box plots, a picture of each participant's responses to the profiles is apparent.

If respondent 1 in County A is used as an example, it can be seen that this person used the extreme values of the scale more than the middle, a representation that has a skewness of -.67. The respondent had a .8 median value and clustered around the high end of the scale. The range exhibited by Respondent 1 had an elongated box plot with a long whisker at the bottom. One could surmise that this person is fairly certain about the decision to substantiate.

Respondent 2, however, presents an entirely different picture. This respondent primarily used the high and middle areas of the scale and did not use values 6 through 9 at all, nor did Respondent 2 use value 1 through 3. Seventy six percent of the responses of this respondent fell between the median of .5 through the highest value of 1.0. Respondent 2 presents an elongated box plot with no upper
whisker and an elongated lower whisker. This could be interpreted as an expression of certainty.

Respondent 3 also presents a very different picture, presenting 77% of the responses above the mid-point (indicated maltreatment). The mean of the respondent was .746. The box plot for this representation is a shortened box plot with a very elongated bottom whisker with two outlying representations. The median for Respondent 3 was 10.

Respondent 4 also used the high end of the scale with a median of .8, and a mean of .741. The box plot for this display is again elongated with a long whisker at the lower end. However, there is less of a willingness to make the recommendation to substantiate.

Respondent 5 used the entire scale for decision-making but also clustered responses at the high end of the scale. The mean for this respondent was .69 with a median of .8. The representation presents a "U" shape. The box plot for this display shows a shortened whisker at the high end and an elongated whisker at the lower end, showing a willingness to substantiate with only 15 responses ranked at .3 or lower for non-substantiation.

Respondent 6, on the other hand, used the entire response scale with a mean of .647. The box plot for this respondent shows an elongated first quartile with a longer whisker. It could be interpreted that Respondent 6 was more reluctant to substantiate.

Respondent 7 also used the entire response scale with a mean of .694 and a skewness of -1.00. Seventy-seven, or 73% of the
responses, were at the mean or above. The box plot shows a shortened top whisker and an elongated bottom whisker. This person showed a willingness to substantiate.

Respondent 8 again used most of the scale but did not show as definitive a willingness to substantiate as had respondent 7. The mean for Respondent 8 was .668, with a skewness of -0.60. The box plot for Respondent 8 shows an elongated lower whisker with a longer central box and a shortened top whisker.

Respondent 9 had a mean of .599 and used the entire scale for the decisions with a skewness of -0.25. This shows an elongated central box with nearly equal whiskers. Only 17 of the decisions were to definitely substantiate.

As had Respondent 9, Respondent 10 used the entire scale, and the stem and leaf shows a nearly normal curve. Whiskers on the box plot are nearly equal with a shortened central box, suggesting that this person is less willing to definitively substantiate or not substantiate.

Respondent 11 tended to use the upper end of the scale with a mean of .714. Eighty-two percent of the decisions were at .6 or higher with only 17% at indicated or lower. The box plot shows an elongated lower whisker, a shortened top whisker, and a short central box between .8 and .6.

Respondent 12 used the entire scale with a mean of .585 and a skewness of -0.39. This person clustered most of the decisions between .4 and .8 on the scale. The box plot shows the cluster of the responses between .4 and .8 with an elongated lower whisker.
Therefore, most of the decisions were in the indicated range of the decision-making.

Respondent 13 used only the upper end of the scale with a mean of .797 and a skewness of -1.43. The box plot shows an elongated central box with a long lower whisker and no upper whisker. Respondent 13 definitely substantiated 53 of the profiles with only 6 at 0.0, or definitely not substantiated.

Respondent 14 used the entire scale for decisions with a mean of .576. In this case, the mean does not show the form of the decisions. Twenty-nine, or 27%, of the decisions were to definitely substantiate, and 18, or 17%, of the decisions were to definitely not substantiate. The skewness was -.34. This person's responses create a nearly perfect "U" distribution. The box plot shows a large central box with no upper whisker and a short lower whisker.

Respondent 15 used the entire scale for decision-making. The mean was .650 with a skewness of -.43. The decisions are distributed throughout the scale with 51, or 48%, falling between .3 and .8 on the scale. The box plot shows a large central box with a short upper whisker and an only slightly shorter lower whisker.
The Regression Model

The decision to substantiate or not to substantiate is the next area of analysis. The simultaneous multiple linear regression technique is the technique used to examine the use of the independent variables by the respondents in their ratings. In this instance, the independent variables are treated simultaneously.

By way of review, decision analysis framework is an appropriate means of interpreting the statistical results of simultaneous regression. The framework uses the principle of least squares. The principle of least squares states that the best value of a quantity to take from a set of measurements is that which makes the sum of the squares of the deviations from the value a minimum. The raw regression coefficients are the optimal weights for each independent variable. A decision analysis framework is interpreted as a unique measure of the relationship between the stated independent variable and the dependent variable, controlling for all the other variables.

The multiple correlation coefficient, R, is a means of establishing how much information about the dependent variable is contained in the combination of at least two of the independent variables (Sprinthall, 1987). When conducting decision analysis, Hammond et al. (1975) and Hammond (1980) state that the R is considered to be a measure of the control a decision-maker has over the judgments. Control, according to Hammond, refers to the similarity between an individual's judgments and predictions based
on a specific model. Consistency refers to the similarity between repeated judgments of identical profiles. Control is measured by estimating the variation of judgments of a set of profiles about predictions produced by a model. The multiple correlation $R$ measures the correspondence between an individual's judgments and predictions from the specific model (Hammond et al., 1975). For an individual to have perfect control, the $R$ value would be 1.00, and a total lack of control would result in a value of 0.00.

The proportion of the dependent variable's variance shared with the variance of the weighted independent variables is expressed by the square of the multiple correlation coefficient or $R^2$. This value can be expressed as a proportion of explained variance ranging from 1.00 to 0.00 or as a percentage of 1 to 100.

Hammond et al. (1975) state that within the framework of decision analysis, the $R^2$ becomes a measure of how well the independent variables explain or account for the variance in the dependent variable. Perfect fit would be a value of 1.00, and an $R^2$ of less than 1.00 indicates that important variables which would aid in explanation of the decision could have been omitted from consideration or that the relationship between the dependent variables has another form other than linear. They note that an important consideration is whether the linear representation is a good fit.

The following tables, Tables 8, 9, and 10, show the results of the simultaneous regression analysis for each respondent by county. The column for each respondent contains all of the relevant
information for the judgment model of that respondent. The raw score regression coefficients are for each of the independent variables of the study. Below the listing of the independent variables are the R and R² for each respondent. These statistics are useful as indicators of how well the respondents used the information dimensions in completing their judgment task. The R and R² also are useful in showing how well the information cues account for the variance in the judgment.

The x represents the mean of the dependent variable based on the 105 profiles utilized. The intercept is provided because the regression coefficients are expressed in raw form. The asterisks indicate that a particular coefficient is statistically significant at the .05 level. The statistical significance is a guide to interpretation and the pattern of regression coefficients which are significant and indicate how each respondent used the information cues.

Respondents 1 through 5 represent County A and are shown in Table 8. Respondent 1 used Age of Child, Consequences to the Child, and Responsibility for Injury as the most important in the decision task. The mean was .626 and the R was .59 with an R² of .35.

Respondent 2 used Sex of the Child, Consequences to the Child, and Responsibility for the Injury. As can be seen in the table, Responsibility for the Injury was the most important to this respondent. Respondent 2 had an R of .79 and an R² of .63.
Respondent 3 used Consequences to the Child, Responsibility for the Injury, and Role of the Perpetrator as the most important factors with an $R$ of .59 and an $R^2$ of .35.

Respondent 4 used Consequences to the Child; Responsibility for the Injury, and Role of the Perpetrator as the most important factors, with an $R$ of .72 and an $R^2$ of .53.

Respondent 5 used Consequences to the Child, Responsibility for the Injury, Cooperation of the Perpetrator, and Role of the Perpetrator as the most important factors. This person had an $R$ of .67 and an $R^2$ of .44.

All of the respondents in County A saw Consequences to the Child and Responsibility for the Injury as important cues for their decisions. Three of the respondents (3, 4, and 5) saw Role of the Perpetrator as important. Only Respondent 1 used Age of the Child. Only Respondent 2 used Sex of the Child and only Respondent 5 used Cooperation of the Perpetrator.

Respondents 6 through 10 represent County B and are shown in Table 9. Respondent 6 found that Consequences to the Child, Responsibility for the Injury, and Role of the Perpetrator to be important factors in the decision task. The $R$ is .60 and the $R^2$ is .37.

Respondent 7 used Age of the Child, Consequences to the Child, and Responsibility for the Injury as the most important cues in the decision-making. This respondent had an $R$ of .84 and an $R^2$ of .72.
Respondent 8 used Age of the Child, Consequences to Child, and Responsibility for the Injury as the most important cues for the decision task. This respondent had an R of .84 and an $R^2$ of .72.

Respondent 9 used the cues of Age of the Child, Consequences to Child, and Responsibility for Injury as the most important cues for the decision task. This respondent had an R of .72 and an $R^2$ of .52.

Respondent 10 used Age of the Child, Consequences to the Child, and Responsibility for the Injury as the most important cues for the decision task. This respondent had an R of .74 and an $R^2$ of .56.

All of the respondents from County B used Consequences to the Child and Responsibility for Injury as important cues for the decision task. Only Respondent 6 used Role of the Perpetrator as an important cue. The Rs ranged from .60 to .85 (.60, .74, .85, .73, .75), and the $R^2$s ranged from .37 to .72 (.37, .54, .72, .52, .56).

Respondents 11 through 15 represent County C and are shown in Table 10. Respondent 11 used Age of the Child, Consequences to the Child, Behavioral Status of the Child, Responsibility for the Injury, Cooperation of the Perpetrator, Role of the Perpetrator, and Previous Reports on the Facility as important cues in the decision task. This respondent had an R of .68 and an $R^2$ of .46.

Respondent 12 used Consequences to the Child, Responsibility for the Injury, Cooperation of the Perpetrator, Attitude of the Perpetrator, and Previous Reports on the Facility as important cues. This respondent had an R of .56 and an $R^2$ of .31.
Respondent 13 used Consequences to Child, Responsibility for Injury, Cooperation of Perpetrator, Role of Perpetrator, and Previous Reports on Facility as the most important cues in the decision task. This person had an R of .67 and an R² of .45.

Respondent 14 used Consequences to the Child, Responsibility for the Injury, Cooperation of the Perpetrator, and Role of the Perpetrator as the most important cues in the task. This person had an R of .76 and an R² of .58.

Respondent 15 used Consequences to the Child, Responsibility for Injury, Cooperation of the Perpetrator, Role of the Perpetrator, Previous Reports on the Facility, and Child/Caretaker Ratio as important cues in the decision task. This respondent had an R of .78 and an R² of .60.

All of the respondents in County C used Consequences to the Child, Responsibility for the Injury, and Cooperation of the Perpetrator as important cues. Respondent 11 was the only respondent who used Age of the Child and Behavioral Status of the Child. Respondents 11, 13, 14, and 15 utilized Role of the Perpetrator. Respondent 12 was the only respondent who used Attitude of the Perpetrator, and only Respondent 15 used Child/Caretaker Ratio. Respondents 11, 13, 14, and 15 used Role of the Perpetrator and Respondents 11, 12, 13, and 15 used Previous Reports on the Facility as important cues.

The R values ranged from .55 through .78 (.68, .55, .67, .76, .78). The R² values ranged from .31, to .60. (.46, .31, .45, .58, .60).
Looking at all three counties together, all of the respondents considered that the Consequences to the Child and the Responsibility for the Injury were important. Only Respondent 2 considered the Sex of the Child to be important to the decision task. Six of the respondents agreed that Cooperation of the Perpetrator was important.

In interpreting the R and $R^2$ values for the respondents in County A, it appears that the greatest amount of control was exercised by Respondent 2, although Respondents 3 and 4 exercised high control (.79, .59, and .73). The information dimensions accounted for over .60 of the variance in the optimally weighted independent variables for Respondent 2 but for only .35 for Respondent one.

Interpretations for County B are somewhat different (see Table 9). All of the respondents considered the Consequences to the Child and the Responsibility for the Injury to be important with four of the five respondents considering the Age of the Child to be significant. Only one respondent, Respondent 6, considered the Role of the Perpetrator to be important. All of the respondents exercised considerable control in making their judgments (R = .60, .74, .85, .73, .75). However, the information dimensions included in the models accounted for a considerable portion of the variance only in the case of Respondent 8. For Respondent 6, the information dimensions contained only .37 of the accounted for variance in the dependent variables. The $R^2$ for respondents in County B was quite varied, ranging from .37 to .72 (.37, 54, .72, .52, .56). The .72 $R^2$ of
Respondent 8 showed that a considerable portion of the variance was accounted for by the variables in the study, while Respondent 6 had accounted for a much lower amount of variance. Table 10, which indicates the results for County C, showed that all respondents considered the Consequences to the Child and the Responsibility for the Injury to be of paramount importance. Respondent 11 was the only one to utilize Age of the Child as an important information dimension. Respondent 11 also indicated that the Behavioral Status of the Child was important, whereas the other respondents did not consider this information dimension to be important. Respondent 12 considered the Attitude of the Perpetrator to be an important information dimension, whereas none of the other four respondents considered this dimension to be important. All respondents except Respondent 14 considered Previous Reports on the Facility to be important.

As a group, the respondents from County C had a greater number of variables that were statistically significant (7, 5, 4, and 6, respectively). As a group, these respondents evidenced a moderate amount of control with R values of .68, .56, .67, .76, and .78 respectively. The respondents showed a substantial amount of control when making their independent judgments regarding the dependent variable. The R² values of .46, .31, .45, .58, and .60 indicate that, for most, the information dimensions account for a moderate proportion of the explained variance in the dependent variable. For Respondent 12, however, with an R² of .31, other factors must account for a substantial portion of the variance.
Several conclusions can be drawn from the results of this simultaneous regression analysis. First, not all of the information dimensions noted by the respondents as important were in fact utilized by the respondents for the judgment task. If it is remembered that an R of 1.00 indicates perfect control over the use of the information, a mean R value of .72 found in this study indicates that the respondents had a high degree of control over the usage of the information dimensions in their judgments.

The R^2 value for all respondents with a mean of .49 indicates that less than one-half of the amount of variance in the dependent variable is accounted for by the identified variables. However, this also indicates that .51 of the variance is not accounted for in the variance in the dependent variable.

The examination of the regression coefficients that were statistically significant points up the fact that respondents' models vary in terms of the importance attached to each of the information dimensions of the task. Some of the respondents, Respondent 11 for example, utilize a fairly complex model in making the judgment decision (7 cue variables), while Respondent 7 uses a much simplified model. Respondent 15 uses a model that is more complex in the use of information but also shows good control with an R of .78 and moderate consistency with an R^2 of .60.

The differences in the judgment models imply that there is disagreement among the respondents as to which information should be weighed more heavily in the decision task to substantiate
maltreatment. In the development of the information dimensions, all of the respondents considered that the Response of the Child to the maltreatment was important, but none of the respondents utilized this dimension such that it was statistically significant at the .05 level. Other dimensions that were considered to be important in discussion and formulation of dimensions but were less important in utilization were Behavioral Status of the Child, Child/Caretaker Ratio, and Reporter of the Maltreatment.

In summary, several conclusions are indicated by the results of the simultaneous regression analysis. First, the information dimensions that were noted as important to the respondents are used for the decision task. The median R value of .72 suggests more than average control over the use of the information dimensions in the decision task.

The $R^2$ value for the respondents of .49 indicates that the 12 information cues accounted for less than one-half of the variance of the dependent variables. This could be interpreted to mean that the information that is thought to be used is, in fact, not all that is used in the judgment task and would tend to support Hammond et al. (1975) and Slovic and Lichtenstein (1971) that individuals tend not to utilize information that they think they use in decision tasks.

Third, the statistically significant regression coefficients point up the fact that the respondents models vary in terms of how important each of the information cues are to the decision task. The differences in the models implies that the respondents approach the decision task with disagreement about which
information cues should be considered most heavily when making a judgment. Some cues were used consistently, yet others were not used at all.
<table>
<thead>
<tr>
<th>IV</th>
<th>Respondent 1</th>
<th>Respondent 2</th>
<th>Respondent 3</th>
<th>Respondent 4</th>
<th>Respondent 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of Child</td>
<td>-.43*</td>
<td>.19</td>
<td>-.31</td>
<td>-.064</td>
<td>-.023</td>
</tr>
<tr>
<td>Sex of Child</td>
<td>.74</td>
<td>1.07*</td>
<td>.74</td>
<td>.78</td>
<td>.66</td>
</tr>
<tr>
<td>Conseq. to Child</td>
<td>.42*</td>
<td>1.41*</td>
<td>1.43*</td>
<td>1.58*</td>
<td>1.39*</td>
</tr>
<tr>
<td>Reporter of Maltreatment</td>
<td>.23</td>
<td>.17</td>
<td>.21</td>
<td>.029</td>
<td>.21</td>
</tr>
<tr>
<td>Behavioral Status of Child</td>
<td>-.50</td>
<td>-.45</td>
<td>-.34</td>
<td>.27</td>
<td>-.21</td>
</tr>
<tr>
<td>Responsibility for Injury</td>
<td>-2.93*</td>
<td>-4.65*</td>
<td>-1.84*</td>
<td>-2.59*</td>
<td>-2.10*</td>
</tr>
<tr>
<td>Cooperation of Perpetrator</td>
<td>-.31</td>
<td>-.50</td>
<td>-.44</td>
<td>-.59</td>
<td>-.73*</td>
</tr>
<tr>
<td>Attitude of Perpetrator</td>
<td>-.54</td>
<td>-.36</td>
<td>-.36</td>
<td>.25</td>
<td>.24</td>
</tr>
<tr>
<td>Role of Perpetrator</td>
<td>.52</td>
<td>-.50</td>
<td>-.76*</td>
<td>-.84*</td>
<td>-.90*</td>
</tr>
<tr>
<td>Previous Reports on Facility</td>
<td>.17</td>
<td>.09</td>
<td>-.10</td>
<td>.083</td>
<td>.09</td>
</tr>
<tr>
<td>Child to Caregiver Ratio</td>
<td>-.05</td>
<td>-.21</td>
<td>-.29</td>
<td>-.30</td>
<td>-.17</td>
</tr>
<tr>
<td>Response of Child</td>
<td>.05</td>
<td>.31</td>
<td>.13</td>
<td>.46</td>
<td>.19</td>
</tr>
<tr>
<td>R</td>
<td>.59</td>
<td>.79</td>
<td>.59</td>
<td>.73</td>
<td>.67</td>
</tr>
<tr>
<td>R²</td>
<td>.35</td>
<td>.63</td>
<td>.35</td>
<td>.53</td>
<td>.44</td>
</tr>
<tr>
<td>x</td>
<td>.626</td>
<td>.637</td>
<td>.746</td>
<td>.741</td>
<td>.690</td>
</tr>
<tr>
<td>Intercept</td>
<td>12.84</td>
<td>9.88</td>
<td>10.12</td>
<td>9.27</td>
<td>9.76</td>
</tr>
</tbody>
</table>

*indicates alpha level of .05 or less
Table 9: Simultaneous Regression Models for County B

<table>
<thead>
<tr>
<th>IV</th>
<th>Respondent 6</th>
<th>Respondent 7</th>
<th>Respondent 8</th>
<th>Respondent 9</th>
<th>Respondent 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of Child</td>
<td>-.42*</td>
<td>-.10</td>
<td>-.42*</td>
<td>-.39*</td>
<td>-.55*</td>
</tr>
<tr>
<td>Sex of Child</td>
<td>.034</td>
<td>.48</td>
<td>.026</td>
<td>-.36</td>
<td>.12</td>
</tr>
<tr>
<td>Consequences to Child</td>
<td>.87*</td>
<td>1.34*</td>
<td>1.32*</td>
<td>1.14*</td>
<td>.91*</td>
</tr>
<tr>
<td>Reporter of Maltreatment</td>
<td>.15</td>
<td>.40</td>
<td>.21</td>
<td>.42</td>
<td>-.04</td>
</tr>
<tr>
<td>Behavioral Status of Child</td>
<td>.07</td>
<td>.35</td>
<td>.08</td>
<td>.40</td>
<td>.08</td>
</tr>
<tr>
<td>Responsibility for Injury</td>
<td>-2.11*</td>
<td>-2.41*</td>
<td>-3.05*</td>
<td>-2.77*</td>
<td>-1.42*</td>
</tr>
<tr>
<td>Cooperation of Perpetrator</td>
<td>.61</td>
<td>.35</td>
<td>.26</td>
<td>.10</td>
<td>.07</td>
</tr>
<tr>
<td>Attitude of Perpetrator</td>
<td>.16</td>
<td>.43</td>
<td>.14</td>
<td>.12</td>
<td>.03</td>
</tr>
<tr>
<td>Role of Perpetrator</td>
<td>-.95*</td>
<td>.32</td>
<td>.48</td>
<td>.35</td>
<td>.06</td>
</tr>
<tr>
<td>Previous Reports on Facility</td>
<td>.13</td>
<td>.09</td>
<td>.16</td>
<td>.17</td>
<td>.06</td>
</tr>
<tr>
<td>Child to Caretaker Ratio</td>
<td>.21</td>
<td>.23</td>
<td>.15</td>
<td>.10</td>
<td>.003</td>
</tr>
<tr>
<td>Response of Child</td>
<td>.16</td>
<td>.20</td>
<td>.11</td>
<td>.22</td>
<td>-.18</td>
</tr>
<tr>
<td>R</td>
<td>.60</td>
<td>.74</td>
<td>.65</td>
<td>.73</td>
<td>.75</td>
</tr>
<tr>
<td>$R^2$</td>
<td>.37</td>
<td>.54</td>
<td>.72</td>
<td>.52</td>
<td>.56</td>
</tr>
<tr>
<td>$x$</td>
<td>.646</td>
<td>.694</td>
<td>.668</td>
<td>.599</td>
<td>.583</td>
</tr>
<tr>
<td>Intercept</td>
<td>11.57</td>
<td>8.53</td>
<td>11.89</td>
<td>8.87</td>
<td>7.36</td>
</tr>
</tbody>
</table>

*indicates alpha level of .05 or less
Table 10: Simultaneous Regression Models for County C

<table>
<thead>
<tr>
<th>IV</th>
<th>Respondent 11</th>
<th>Respondent 12</th>
<th>Respondent 13</th>
<th>Respondent 14</th>
<th>Respondent 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of Child</td>
<td>-0.41*</td>
<td>.20</td>
<td>-0.13</td>
<td>-0.07</td>
<td>.07</td>
</tr>
<tr>
<td>Sex of Child</td>
<td>.66</td>
<td>.34</td>
<td>.55</td>
<td>.69</td>
<td>.46</td>
</tr>
<tr>
<td>Consequences to Child</td>
<td>.36*</td>
<td>.61*</td>
<td>.85*</td>
<td>1.03*</td>
<td>1.06*</td>
</tr>
<tr>
<td>Reporter of Maltreatment</td>
<td>.22</td>
<td>-0.08</td>
<td>.008</td>
<td>.028</td>
<td>-0.35</td>
</tr>
<tr>
<td>Behavioral Status of Child</td>
<td>-1.28*</td>
<td>.08</td>
<td>.045</td>
<td>-0.53</td>
<td>-0.37</td>
</tr>
<tr>
<td>Responsibility for Injury</td>
<td>-1.41*</td>
<td>-1.96*</td>
<td>-2.15*</td>
<td>-3.08*</td>
<td>-5.57*</td>
</tr>
<tr>
<td>Cooperation of Perpetrator</td>
<td>-0.66*</td>
<td>-0.70*</td>
<td>-0.67*</td>
<td>-0.84*</td>
<td>-0.67*</td>
</tr>
<tr>
<td>Attitude of Perpetrator</td>
<td>-0.37</td>
<td>-0.63*</td>
<td>-0.29</td>
<td>-0.56</td>
<td>-0.49</td>
</tr>
<tr>
<td>Role of Perpetrator</td>
<td>-0.55*</td>
<td>-0.15</td>
<td>-0.60*</td>
<td>-0.90*</td>
<td>-0.51*</td>
</tr>
<tr>
<td>Previous Reports on Facility</td>
<td>.82*</td>
<td>.65*</td>
<td>.91*</td>
<td>.32</td>
<td>.48*</td>
</tr>
<tr>
<td>Child/Caretaker Ratio</td>
<td>-0.12</td>
<td>.16</td>
<td>-.005</td>
<td>.22</td>
<td>-0.25*</td>
</tr>
<tr>
<td>Response of Child</td>
<td>.05</td>
<td>-0.16</td>
<td>-0.29</td>
<td>-0.15</td>
<td>-0.009</td>
</tr>
<tr>
<td>R</td>
<td>.67</td>
<td>.55</td>
<td>.67</td>
<td>.76</td>
<td>.78</td>
</tr>
<tr>
<td>R²</td>
<td>.46</td>
<td>.31</td>
<td>.45</td>
<td>.58</td>
<td>.60</td>
</tr>
<tr>
<td>x</td>
<td>.714</td>
<td>.585</td>
<td>.797</td>
<td>.576</td>
<td>.650</td>
</tr>
<tr>
<td>Intercept</td>
<td>12.65</td>
<td>7.48</td>
<td>11.52</td>
<td>16.20</td>
<td>12.16</td>
</tr>
</tbody>
</table>

*indicates alpha level of .05 or less
Screening Decisions

Respondents were asked if they would have screened the profiles presented in or out if they had been the primary screener for that profile. The question posed in the instrument was:

"If you were the person screening this report would you have screened it in for investigation?" (Check space by your response)

____ Yes ______ No

Respondents were asked to consider the same cue variables in their screening decision as was used in the substantiation decision. Table 11 indicates the screening question, the frequency of the response of the respondent, the percent, cumulative frequency, and the cumulative percent.
Table 11: Screening response for each respondent

<table>
<thead>
<tr>
<th>Respondent</th>
<th>Screened</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Y</td>
<td>99</td>
<td>94.3</td>
<td>99</td>
<td>94.3</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>6</td>
<td>5.7</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>2</td>
<td>Y</td>
<td>91</td>
<td>86.7</td>
<td>91</td>
<td>86.7</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>14</td>
<td>13.3</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>3</td>
<td>Y</td>
<td>89</td>
<td>85.6</td>
<td>89</td>
<td>85.6</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>15</td>
<td>14.4</td>
<td>104*</td>
<td>100.0</td>
</tr>
<tr>
<td>4</td>
<td>Y</td>
<td>90</td>
<td>85.7</td>
<td>90</td>
<td>85.7</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>15</td>
<td>4.3</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>5</td>
<td>Y</td>
<td>92</td>
<td>87.6</td>
<td>92</td>
<td>87.6</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>13</td>
<td>12.4</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>6</td>
<td>Y</td>
<td>91</td>
<td>85.7</td>
<td>91</td>
<td>85.7</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>14</td>
<td>13.3</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>7</td>
<td>Y</td>
<td>99</td>
<td>94.3</td>
<td>99</td>
<td>94.3</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>6</td>
<td>5.7</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>8</td>
<td>Y</td>
<td>101</td>
<td>96.2</td>
<td>101</td>
<td>96.2</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>4</td>
<td>3.8</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>9</td>
<td>Y</td>
<td>97</td>
<td>92.4</td>
<td>97</td>
<td>92.4</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>8</td>
<td>7.6</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>10</td>
<td>Y</td>
<td>105</td>
<td>105</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11</td>
<td>Y</td>
<td>100</td>
<td>95.2</td>
<td>100</td>
<td>95.2</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>5</td>
<td>4.8</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>12</td>
<td>Y</td>
<td>96</td>
<td>92.3</td>
<td>96</td>
<td>92.3</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>8</td>
<td>7.7</td>
<td>104*</td>
<td>99.0</td>
</tr>
<tr>
<td>13</td>
<td>Y</td>
<td>99</td>
<td>94.3</td>
<td>99</td>
<td>94.3</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>5</td>
<td>5.7</td>
<td>104*</td>
<td>100.0</td>
</tr>
<tr>
<td>14</td>
<td>Y</td>
<td>100</td>
<td>95.2</td>
<td>100</td>
<td>95.2</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>5</td>
<td>5.7</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>15</td>
<td>Y</td>
<td>98</td>
<td>93.3</td>
<td>98</td>
<td>93.3</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>7</td>
<td>6.7</td>
<td>105</td>
<td>100.0</td>
</tr>
</tbody>
</table>

*indicates missing data
Respondents would have screened in 92.32% of the profiles and would have screened out only 7.68% of the profiles. One respondent would have screened in all 105 of the profiles for investigation. This result would serve to strengthen the validity of the profiles.

Judgment Model Comparison

Thusfar, it is clear that the respondents differ both in the shape and form of distributions of judgment decisions. Their responses to the profiles differ in the stem and leaf and box plot displays, representations that highlighted those differences. There has been a moderate amount of agreement in the information used in the decision to substantiate, as well as a high amount of agreement in the information used to screen the report in for investigation.

The next question to be analyzed concerned the extent to which respondents agreed on which profiles should have been substantiated for maltreatment. Profiles were rated differently as is demonstrated by the stem and leaf displays and the box plot displays, suggesting a disparity among the respondents about the recommendation to substantiate maltreatment.

In order to evaluate the problem of substantiation, the lens model developed by Brunswik (1936) and elucidated by Hammond (1980) was used. The formula developed by Tucker (1964) and used by Bean (1982) and McClelland (1991) was also used in the study.
The correlation represents the relationship between two respondent models.

Table 11 depicts the correlations between each pair of judgment models. Thus far, each of the analyses undertaken has shown that the respondents vary in their responses, both in the form of the responses and in the information used in making the individual judgments.

The question to be addressed in this section concerns the level of agreement in recommending substantiation. A means of analyzing the agreement between respondents is the lens model equation based on Brunswik's lens model of behavior. The most widely used model is that formula as modified by Tucker (1964).

The Tucker equation is:

\[ r_a = GR_1R_2 + C \sqrt{1-R_1^2} \sqrt{1-R_2^2} \]

The correlation coefficient which expresses the relationship between two models is \( r_a \). The correlation between the predicted scores of each model is \( G \). \( R_1 \) and \( R_2 \) represent the multiple correlation coefficients for each model. The correlation between the residual scores represented by Hammond (1980) states that the formula takes into account the components of each model in the calculation. For some of the research questions, the location, spread, and shape of the distribution is sufficient. For the lens model, however, the relationship between two or more respondents is important. Relationships between two or more respondents have
three important characteristics: shape, strength, and direction. These components can be determined by the extent to which the observed values of one respondent correspond to the data points of another respondent. The direction of the relationship is in reference to whether high values of one respondent are associated with high or low values of another respondent. The shape of the relationship refers to the way in which the respondents' decisions are related to each other (Deering & Hartwig, 1979).

The range of correlations is .192 to .976. This range of correlations tends to support the earlier exploratory data analyses (Dearing & Hartwig, 1979), which have indicated that there is often considerable difference among models.

The range in correlations within County A is .664 to .916 representing a range of .252. The range in correlations for County B is .382 to .807 representing a range of .425. The range in correlations for county C is .292 to .785 representing a range of .493. The respondents in County A show a substantial amount of agreement among themselves. Counties B and C represent a much greater area of disagreement with County C having the largest disagreement.

The range of differences for County C is much different than that for each of the other counties within the county group and between counties as well.

These ranges indicates that the workers use information differently and that such differences are real.
Respondents' Subjective Interpretation of Their Judgments

As a final task in the study, respondents were asked to review a list of the variables presented in the study though without the scales attached to those variables. The variable list was considered to have been important in the consideration of the decision to substantiate or not substantiate a reported incident of out-of-home abuse. Respondents were asked to assign a number from 1-100 to each of the variables to indicate how important this factor is to their decision process to substantiate or not substantiate a report of maltreatment. The rating scale was anchored by 1 was the least important, and 100 was the most important. Any rating can be used more than once in the subjective rating of the variables. The rating scale employs the method of Cook and Stewart (1975). Although they described and compared seven methods for obtaining and evaluating subjective descriptions of judgment models, they found that the results were essentially the same and suggested that method utilized be based on the research objectives.

Cook and Stewart (1975) also indicated that evidence showed that judges are frequently in error when the subjective models of behavior are compared to their actual judgment models. Slovic and Lichtenstein (1971) also found that the subjective models of judgment often differed from the actual models employed by the judges. Slovic and Lichtenstein (1971) indicated that judges "strongly over estimate their reliance on minor cues, and
underestimate their reliance on a few major variables" (p.684). Table 13 indicates that the respondents generally placed a high value on a certain number of cues presented while considering other cues at a much lower level. The subjective ranking focuses on how well respondent understand the information they employ in the judgment task.
### Table 12:
Correlations Between Each Pair of Judgment Models for Each Respondent
Using Tucker's Lens Model

<table>
<thead>
<tr>
<th>Res. 1</th>
<th>Res. 2</th>
<th>Res. 3</th>
<th>Res. 4</th>
<th>Res. 5</th>
<th>Res. 6</th>
<th>Res. 7</th>
<th>Res. 8</th>
<th>Res. 9</th>
<th>Res. 10</th>
<th>Res. 11</th>
<th>Res. 12</th>
<th>Res. 13</th>
<th>Res. 14</th>
<th>Res. 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>·</td>
<td>0.664</td>
<td>0.691</td>
<td>0.639</td>
<td>0.718</td>
<td>0.594</td>
<td>0.581</td>
<td>0.601</td>
<td>0.551</td>
<td>0.296</td>
<td>0.719</td>
<td>0.222</td>
<td>0.545</td>
<td>0.679</td>
</tr>
<tr>
<td>2</td>
<td>·</td>
<td>·</td>
<td>0.757</td>
<td>0.862</td>
<td>0.809</td>
<td>0.636</td>
<td>0.821</td>
<td>0.773</td>
<td>0.692</td>
<td>0.405</td>
<td>0.400</td>
<td>0.381</td>
<td>0.675</td>
<td>0.650</td>
</tr>
<tr>
<td>3</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.866</td>
<td>0.916</td>
<td>0.702</td>
<td>0.762</td>
<td>0.708</td>
<td>0.694</td>
<td>0.395</td>
<td>0.454</td>
<td>0.192</td>
<td>0.621</td>
<td>0.648</td>
</tr>
<tr>
<td>4</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.883</td>
<td>0.708</td>
<td>0.749</td>
<td>0.742</td>
<td>0.693</td>
<td>0.369</td>
<td>0.431</td>
<td>0.243</td>
<td>0.816</td>
<td>0.688</td>
</tr>
<tr>
<td>5</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.778</td>
<td>0.769</td>
<td>0.741</td>
<td>0.738</td>
<td>0.483</td>
<td>0.454</td>
<td>0.295</td>
<td>0.663</td>
<td>0.719</td>
</tr>
<tr>
<td>6</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.665</td>
<td>0.680</td>
<td>0.689</td>
<td>0.382</td>
<td>0.504</td>
<td>0.303</td>
<td>0.590</td>
<td>0.630</td>
</tr>
<tr>
<td>7</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.715</td>
<td>0.866</td>
<td>0.467</td>
<td>0.514</td>
<td>0.374</td>
<td>0.591</td>
<td>0.700</td>
</tr>
<tr>
<td>8</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.807</td>
<td>0.630</td>
<td>0.478</td>
<td>0.316</td>
<td>0.685</td>
<td>0.712</td>
</tr>
<tr>
<td>9</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.597</td>
<td>0.348</td>
<td>0.372</td>
<td>0.570</td>
<td>0.592</td>
</tr>
<tr>
<td>10</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.334</td>
<td>0.204</td>
<td>0.428</td>
<td>0.454</td>
</tr>
<tr>
<td>11</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.292</td>
<td>0.621</td>
<td>0.545</td>
</tr>
<tr>
<td>12</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.454</td>
<td>0.396</td>
</tr>
<tr>
<td>13</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>0.687</td>
</tr>
<tr>
<td>14</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
<td>·</td>
</tr>
</tbody>
</table>
Table 13: Respondent Subjective Interpretation of Judgments

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>100</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>50</td>
<td>50</td>
<td>10</td>
<td>10</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>1</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>100</td>
<td>100</td>
<td>10</td>
<td>10</td>
<td>50</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>1</td>
<td>20</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>80</td>
<td>1</td>
<td>100</td>
<td>5</td>
<td>10</td>
<td>100</td>
<td>10</td>
<td>50</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>80</td>
<td>1</td>
<td>100</td>
<td>70</td>
<td>50</td>
<td>90</td>
<td>30</td>
<td>20</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>7</td>
<td>100</td>
<td>10</td>
<td>100</td>
<td>80</td>
<td>50</td>
<td>95</td>
<td>45</td>
<td>40</td>
<td>90</td>
<td>50</td>
</tr>
<tr>
<td>8</td>
<td>100</td>
<td>10</td>
<td>100</td>
<td>75</td>
<td>50</td>
<td>95</td>
<td>25</td>
<td>20</td>
<td>90</td>
<td>50</td>
</tr>
<tr>
<td>9</td>
<td>20</td>
<td>12</td>
<td>1</td>
<td>50</td>
<td>60</td>
<td>30</td>
<td>10</td>
<td>9</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>10</td>
<td>95</td>
<td>80</td>
<td>90</td>
<td>70</td>
<td>65</td>
<td>85</td>
<td>50</td>
<td>45</td>
<td>75</td>
<td>60</td>
</tr>
<tr>
<td>11</td>
<td>100</td>
<td>1</td>
<td>90</td>
<td>80</td>
<td>70</td>
<td>30</td>
<td>10</td>
<td>20</td>
<td>40</td>
<td>60</td>
</tr>
<tr>
<td>12</td>
<td>100</td>
<td>1</td>
<td>70</td>
<td>20</td>
<td>50</td>
<td>20</td>
<td>30</td>
<td>40</td>
<td>10</td>
<td>60</td>
</tr>
<tr>
<td>13</td>
<td>85</td>
<td>10</td>
<td>100</td>
<td>15</td>
<td>50</td>
<td>100</td>
<td>90</td>
<td>94</td>
<td>98</td>
<td>80</td>
</tr>
<tr>
<td>14</td>
<td>100</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>15</td>
<td>80</td>
<td>1</td>
<td>95</td>
<td>10</td>
<td>20</td>
<td>95</td>
<td>40</td>
<td>50</td>
<td>75</td>
<td>30</td>
</tr>
</tbody>
</table>
This table shows the weight that each of the respondents gave to importance of each of the variables. The variables are listed across the top of the table with the respondents listed by number along vertical axis.

The variable considered most important by the respondents is that of the Consequences to the Child. The variable considered least important by the respondents is the Sex of the Child.

The most important cues ranked in the subjective models were Age of Child, Consequences to the Child, Responsibility for the Injury (accidental or not accidental injury), Child Behavioral Status, and the Response of the Child to the alleged maltreatment. The least important were the Sex of the Child, Cooperation of the perpetrator, Child/Caretaker Ratio, and Previous Reports of Maltreatment on the Facility.

Within each of the variables, there was considerable variation. Age of the child had a mean of 69.5 with a minimum of 1 and a maximum of 100.

The Consequences to the Child cue elicited a range from 100 to 1. The mean of importance on this cue was 89.

Responsibility for the Injury showed a mean of 73.33 with a minimum of 10 and a maximum of 100. Ten of the judges ranked the cue Responsibility for Injury as very important with five considering that this cue was less important in their decision process. In the actual decision process, all of the respondents used Responsibility for Injury as an important cue.
Child Behavioral Status had a mean of 37.7 with a range of 1 to 100. Five of the respondents considered that the child's behavioral status was not important in the policy judgment process while ten of the judges considered that the Child's Behavioral Status was important as a consideration in the decision-making process. Ten of the respondents rated the cue Behavioral Status of the Child above 50, but no one respondent actually used this cue in their decision process.

The cue Sex of the Child was considered as a low priority of policy judgment cue. This cue, however, had a mean of 9.357 but indicated a range of from 1 to 80. Thus, there was at least one respondent who considered the Sex of the Child to be an important cue. Most of the respondents, however, did not consider Sex of the Child to be important in their policy judgment. In this instance, the respondents judged as they felt they would.

Cooperation of the Perpetrator was considered by the respondents to be a moderately important cue. The cue had a mean of 23.6 with a minimum of 1 and a maximum of 90 and a range of 89. However, in actual use, six of the respondents used this cue in their decision. Respondents were mixed in their perception of their use of this cue. Only Respondent 13 rated the cue as 90 on the subjective interpretation of the cues. Respondent 13 did, however, use this cue in the decision to substantiate.

Role of the Perpetrator was another of the cues that was considered important by the respondents for inclusion in the study. Nine of the respondents used this cue in their decision-making. The
cue had a mean of 41.333 with a range of 97 between 1 and 98. Five of the respondents who thought they used this cue did, in fact, use the cue.

For the cue Response of the Child, eight of the respondents rated the cue at 50 or above in their subjective view of their decision-making. However, no respondent actually used this cue in the decision to substantiate. The mean was 41.4 with a range of 79 and a minimum of 1 and a maximum of 80.

These differences will be discussed in Chapter V of the study.

Summary

This chapter has been concerned with the results of the decision task as undertaken by the respondents. This chapter contained six separate sections including a description of the characteristics of respondents, descriptions of dependent and independent variables, the individual decision models of each respondent including stem and leaf and box plot displays in keeping with an exploratory approach to data analysis as described by Hartwig and Dearing (1979), and the regression approach as described by Hammond et al. (1975). The lens model equation was used to describe the judgment of the respondents correlated between pairs.

The final section describes the subjective interpretations of the judgment of the respondents to the task. Similarities and
differences between respondents were identified and will be discussed in Chapter V.
This study was undertaken for the purpose of examining the decision-making processes of child welfare practitioners who are engaged in the screening and investigation of reports of maltreatment of children in out-of-home care. The practice problem was chosen for examination for several reasons. First, there is little information on maltreatment of children in out-of-home care, and second, there is less information on the decision-making processes of practitioners who are engaged in the practice of evaluating and determining the maltreatment of children in out-of-home situations. Third, the relatively low substantiation rate for investigations of maltreatment of children in out-of-home care should be studied from several approaches.

Thomas (1980) was one of the early authors to draw attention to the probable maltreatment of children in such situations. He stated that the history and practice of out-of-home care essentially ignored the ironic possibility that children could be victims of maltreatment after they had been removed from familial situations as a result of maltreatment. He contended that out-of-home care should be held to a higher standard than intrafamilial care. The research of Rindfleisch and Rabb (1982), Rindfleisch and

Six specific research questions were identified as relevant to the central question of what factors are used by practitioners to determine screening and substantiation of allegations of maltreatment of children in out-of-home care:

1. What factors do child welfare workers, responsible for screening and investigating out-of-home maltreatment reports, use in their decision to substantiate or not substantiate maltreatment?

2. How consistent are these workers in their use of this information in the substantiation decision?

3. Do the various workers use the same factors in their decision process?

4. Do the individual workers use the same kinds of judgment models in their decision-making?

5. Do the child welfare workers use information in the way they think they do in the substantiation decision?

6. Do the child welfare workers use the same information to screen reports in or out that they use in decision-making?

7. Do workers in one county unit use information in the same way that workers in another county unit use information?

In this study, 15 social work practitioners from three major counties in Ohio judged 105 profiles. Each of these profiles presented a potential problem of maltreatment of a child in out-of-
home care. The responses of these practitioners to the presented profiles were the focus of the analysis of the study.

Social judgment analysis was employed as the primary analysis technique. Using social judgment analysis, it is possible to look at the cues that practitioners find important in making the decisions to screen a report of maltreatment in or out for investigation and to substantiate or not substantiate a report of maltreatment. Theoretically, social judgment analysis is grounded in the lens model of behavior posited by Egon Brunswik in 1936. Brunswik's model utilizes multiple regression statistics to model individual decision-making.

A number of statistical tools were utilized to examine the research questions. Among these were a simultaneous regression analysis, the comparison of the various judgment models using the lens model, and an analysis of the subjective models. The models were all within the framework of social judgment analysis. Part of the analysis involved the utilization of the stem and leaf and box plot techniques which are grounded in exploratory data analysis. The stem and leaf and box plot provided a visual representation of the primary dependent variable.
Summary of Results

The following will summarize the findings of each question.

Question I: What factors do child welfare workers, responsible for screening and investigating out-of-home maltreatment reports, use in their decision to substantiate or not substantiate maltreatment?

The data obtained did not verify that all of the information dimensions were used in the judgment task. Several of the dimensions were not used by any of the respondents although each of the dimensions had been indicated as being important to the task.

The dimensions of Consequences to the Child and Responsibility for the Injury were used by all of the respondents. Age of the Child and Cooperation of the Perpetrator were used by many of the respondents.

Response of the Child, although indicated by the respondents to be important in the interviews, was not used by any respondent in the judgment task.

The mean $R^2$ for the 15 respondents suggests that the information cues account for less than one-half of their decisions. The information cues did not account for all of the decision behavior. Information cues were used differentially by the respondents.

All of the respondents simplified the task, a result that reflects Slovik and Lichtenstein's (1971) research which has found
that only three variables are likely to be major contributors to the judgment.

**Question 2: How consistent are these workers in their use of this information in the substantiation decision?**

This question was addressed in the simultaneous analyses of the respondent models. The respondents were relatively consistent in their use of the information in their task. The estimate of the consistency is inferred from the multiple correlation coefficient $R$ which was obtained in the simultaneous regression analysis. This $R$ is a measure of the association between a dependent variable and a weighted combination of independent variables. The mean $R$ value of .72 indicates substantial reliability of information use.

Of the respondents, nine used three or fewer cues in their decision task. Two respondents used four cues in their decision task, and four used six or more cues in their decision task. The use of "simplifying rules" was evident in the use of cues by the respondents who used three or fewer cues. For the nine respondents who used three or fewer cues, all used Consequences to the Child and Responsibility for the Incident as their primary cues.

In the detailed statistical comparison of the extent to which the respondents were in agreement about the rating of the profiles, there was considerable variance in the decision to substantiate. The variance ranged from .191 to .976. Respondent 1, for example, had variances of between .222 and .976. The agreement with
Respondent 12 was .222 and the agreement with Respondent 15 was .976.

An interpretation of these correlations suggests low-to-moderate agreement about the decision to substantiate. By combining the findings of fairly consistent information use by respondents and low-to-moderate agreement on the decisions made, it is concluded that there is disagreement about the implications of cues in recommending substantiation. Differences are apparent with specific information cues. While all respondents used Consequences to the Child and Responsibility for the Injury, only one used Child-to-Caretaker ratio.

Question 3: Do the various workers use the same factors in their decision process?

Clearly, while all of the respondents used two of the information dimensions and nine of the workers used three or fewer information cues in their decision process, there was considerable divergence in the factors that are used by the individual respondents in their decision process. Some of the respondents, especially those in County C, used much more complicated models in their decision process. The respondents in County C used more complicated models and used a greater number of factors than either County A or County B respondents. This, too, is consistent with Hammond et al. (1975) and Slovic and Lichtenstein (1971).
Question 4: Do the individual workers use the same kinds of judgment models in their decision-making?

This question was concerned with the consistency in decision practices between the individual child welfare practitioners. There is considerable divergence evidenced in the judgment models of the workers. The workers approached the decision task in different ways. The individual patterns of the decisions of the workers indicate differences in the willingness to substantiate maltreatment and in the certainty with which they approached the judgment task. Some respondents used the entire scale for decision-making. Other respondents used either the high or low end of the scale.

The simultaneous models suggested that different models existed in the decision to substantiate. These models indicated differences existed in the use of identified information cues. Some of the respondents were very willing to make a decision to substantiate or not substantiate. Conversely, others were extremely reluctant to do so. Some of the respondents' responses are clustered around the "indicated" portion of the scale; others have their responses clustered at one end of the scale. Still others evidenced a "U" form to responses, indicating a willingness to make a definitive decision either to substantiate or not substantiate.

The information cues of Consequences to the Child and Responsibility for the Injury were used by all respondents, but the regression coefficients indicated differences in agreement on the use of this information. For nine of the respondents, "simplifying
rules" were used in the decision. For these respondents, the areas of Consequences to the Child and Responsibility for Injury were the primary information cues used. This finding is in keeping with one perspective in child welfare decision-making that states that the most important factors in child maltreatment investigation are those that concern themselves with the risk to the child and the ability to prevent further risk to the child. Such decision-making on the part of child welfare workers strongly suggests a general focus by those workers on the condition of the child, or the consequences to the child, and the further risk to the child in the instance of the potential for further maltreatment. Slovic and Lichtenstein (1971) emphasized similar findings indicating that judges tend to feel more confident with additional sources of information but that having more information does not produce any increased quality in the decisions made. While there was agreement as to what general categories were to be used in the judgment decision, nevertheless, specific information cues indicated disagreement in cue utilization.

Question 5: Do the child welfare workers use information in the way they think they do in the substantiation decision?

The concern here is with an examination of the extent to which respondents have insight into their own decision-making behavior. Rossi and Nock (1982), Hammond et al. (1975), Hammond (1980) and others have indicated that decision-makers are often incorrect in their perceptions of their decision-making behavior.
As this was a well-trained, experienced population of child welfare workers, it might be assumed that they would have considerable insight into their decision-making behaviors. Respondents were asked to make subjective assignment weights to each of the 12 decision dimensions. The weights were expressions of the respondents' decisions. The results indicated that some of the respondents had moderate insight into their own decision behavior. Although all of the respondents' models included Consequences to the Child and Responsibility for the Injury, there was considerable divergence in the other factors in the decision behavior. The most meaningful indications of the decision behavior were the actual decision models rather than the perceptions the respondents had into their own decision behavior. These policy decisions indicate divergence in the decisions made. The lens model analysis and the stem and leaf and box plot representations show a measurable difference in the decisions made.

Question 6: Do the child welfare workers use the same information to screen reports in or out that they use in the substantiation decision?

Each respondent was asked to screen each profile in or out, based on the information dimensions given. The respondents indicated that they would have screened in 92.32% of the profiles. One of the respondents would have screened in all 105 of the profiles for investigation.
The range for screening in profiles for investigation ranged from 85.7 to 100 percent. The conclusion drawn here is that, while there are differences in the investigation decisions, the respondents would screen in most of the cases for investigation. The profiles were considered to be serious enough to investigate.

Question 7: Do workers in one county use information in the same way that workers in another county unit use information?

There are differences between the respondents and the counties usage of cues. The ranges between County A and County B using the lens model are fairly consistent with a correlation range of .296 to .916 or a range in decision-making of .620, which is a wide divergence. The ranges between County A and County C show correlations between .192 and .976 for a range in decision-making of .784. Such a finding implies that the two counties did not agree on their decision policies. The correlation range between County B and County C was between .204 and .785, or .581. Again, there is a wide divergence between respondents and would indicate differences in decision-making between the counties in the study.

The correlation coefficient of Respondent 1 and Respondent 15 was .976 an indication that the two respondents were in almost complete agreement on decision-making. Between Respondent 3 and Respondent 12, however, the agreement was only .192, indicating that there was little agreement between these two respondents. Although there was agreement on some of the factors used in the decision-making, respondents—both individually and between
counties—arrived at different decisions using the same information.

The results of the study indicate that a child in one county might be treated very differently than a child in another county.

Limitations of the Study

The chief aim of the study at hand was to identify the idiographic models of a selected group of decision makers in child welfare. As an idiographic study, the generalizability is limited to the participants. Although an effort has been made to establish face validity of the study, any extension of the findings to a broader audience must be undertaken with the knowledge that this is a unique product and must be viewed as such. The study was also limited to respondents who conduct their practice in large metropolitan areas. The case load for investigation may be much larger for metropolitan counties than that in smaller counties.

The variable race was not used in this study. While this variable would ordinarily and ideally be included in a model for these decisions, the researcher was also aware of the sensitivity of the inclusion of variables including race. One implication of inclusion would be possible identification of racist attitudes in the behavior of the respondents.

Within the social judgment paradigm, there are several cautions which must be noted. There are several other analytical techniques besides the full model analysis used in this study that
could be employed for evaluation. The other analytical methods include hierarchical regression, ANOVA, Bayesian analysis, conjoint measurement, and integration theory (Slovic & Lichtenstein, 1971). The whole model analysis that was used here assumes linearity.

There are a number of questions that could be addressed for additional information. Possible questions are: Is there an overt or covert policy for substantiation of maltreatment reports? Is there organizational pressure to reduce the number of open cases for the CPS? Is there organizational pressure to increase the number of open CPS cases? This study does not answer these organizational questions which could influence the tendency to substantiate or not substantiate or cause the investigators to limit the number of substantiated or not substantiated investigations of maltreatment.

Implications for Practice for Social Workers in Child Protective Investigation

The problem issue in this study addressed the low substantiation rates of incidences of maltreatment of children in out-of-home care. One of the questions asked whether children in out-of-home care should receive a higher standard of safety than children in their own homes.

Given the data gathered in this study, what are the choices when it is clear that there are differences in the decision-making practices of CPS workers? Is there a better way to investigate out-of-home maltreatment reports?
It has been suggested (Besharov, 1990; Nunno & Motz, 1988) that investigation and screening of maltreatment reports be conducted by an independent body that is not fettered by the organization that may be the supporter of the out-of-home placement. This may be a valid solution to some of the problems facing screening and investigation teams. Team members would be freed from some of the organizational and "political" situations faced when the investigation and screening units are in the same arena as the funders and supporters of many of the facilities.

A more intensive training mechanism should be employed for investigators of out-of-home reports of maltreatment. Whereas there is no desire to "educate out" the practice experience, there needs to be a balance between the practice experience and the empirical knowledge base for the investigators. The group that participated as the respondents for this study have a broad range and length of practice in the field of child welfare; it could thus be argued that their experience carries a great deal of influence in decision-making.

The limited insight of the respondents into their own decision behavior presents a challenge for decision-making in a high risk situation. "Gut" feelings may not be consistent. Investigators who are not consistent may or may not be providing adequate protection for at-risk children. Knowledge of use of information can help investigators make consistent, appropriate decisions.

This study can be used in the building of practice models in decision-making. Judgment modeling can be used in the training of
child welfare workers. Accurate decision-making and an understanding of the decision tasks can be useful in the development of child welfare policy.

It does not seem to be enough to give child welfare workers information about the task and to conduct training that provides a general education as to the prescriptions of the rules for investigating maltreatment in out-of-home care. Training can be instituted that will incorporate an awareness of the decision-making styles and practices of the individual professionals. In this manner, it might be possible to have more consistency in the decision-making task.

Currently, there are no fixed rule criteria for the decision to substantiate or not substantiate. Stein (1984) suggested that decision-making in child welfare should encompass three steps: (a) developing criteria, (b) using criteria as guides for information collection, and (c) evaluating the information that is gathered by applying the criteria to the evidence to reach a decision. Children's protective services could use the model of Stein and Rzepnicki (1984) to produce a descriptive analysis of the task and identify the information needs, then relate the information to the decision through the use of multiple linear regression and the lens model. The second step would then be to use the data obtained to frame the decision tools for practitioners. The derived weights can be a reflection of either the normative standards of the group or of individual practitioners.
Judgment modeling contributes to the cognitive understanding of the judgments made. Judgment modeling makes explicit the way in which individuals react cognitively. Judgment modeling addresses questions of environment in decision-making. The analysis represents the means by which individuals make decisions in real life behavior situations in objective terms. An analysis of the relationship between the information dimensions and the decision itself provide relevant feedback for the practitioner. Interactive learning between practitioners and the use of an interactive computer program can provide immediate tangible feedback for practitioners in their decision-making. Such programs can provide immediate feedback to the participants on the nature, criteria, consistency, and content of their decisions and thus can aid in the development of personal decision models and a greater understanding of personal decision processes.

The application of such diverse kinds of decision analysis techniques to child welfare training could be an important step in reducing the confusion which surrounds the conflicts in the decision to substantiate or not substantiate maltreatment.

Another approach to decision modeling would be to institute a peer review process within large county child welfare investigation units. Members of the investigation team would serve as peer reviewers. A set number of cases would be "pulled" for review at regular intervals (e.g., monthly). Evaluations of decisions would then be conducted using a set of developed decision criteria. Agreement or disagreement would be given to the individual
practitioner. This approach, if coupled with the use of social judgment modeling for all practitioners, could improve the decision making behavior of the respondents and others.

Future Research

Using decision analysis or judgment modeling in child welfare decision-making has implications for further research in social work in general and in child welfare in particular. There is a documented lack of understanding about decision practices. Further, the level of ambiguity about the definitions of child maltreatment and the lack of consistency in decision-making in child welfare remain fertile ground for future research.

An understanding of how decisions are made, and the understanding on a personal and professional level about individual decisions and about collective policy decisions, could enhance the ability to make better predictive decisions regarding child welfare. With the proliferation of micro-computer technology and the demand for great accountability in child welfare, the clarification of decision models could greatly enhance the ability of social workers to render professional judgments which would "hold up" under scrutiny.

Policy and practice are inextricably tied together. Policy choices are present in every part of social work practice.

As a practice profession, Social Work is also a decision profession. Daily decisions are made by practitioners. The removal
of a child from a parental home to a foster or institutional environment, the treatment of a child in an in home or institutional setting, mental health diagnosis, mental health treatment, the living environment of a homeless mentally disabled individual—all these and more are the purview of social work policy-making as conducted by practitioners.

It is important that we understand the decision tasks of social workers and that those tasks have the benefit of scrutiny in order to better understand how social work policy decisions are designed and to clearly understand those processes.

Using empirical decision analysis techniques provides a better understanding of the formulation of social work policies that extend to facets of training and clinical practice in the realm of child welfare.
LIST OF REFERENCES


Ohio Revised Code 2151.421-2151.99.


APPENDIX A

RESPONDENT INSTRUCTIONS AND COMPLETE INSTRUMENT
INSTRUCTIONS FOR COMPLETION OF VIGNETTES FOR PROPOSAL: "FACTORS UTILIZED IN SCREENING AND SUBSTANTIATION DECISIONS REGARDING REPORTS OF MALTREATMENT OF CHILDREN IN OUT OF HOME CARE"

Each of the following 105 profiles presents information about a reported incident of maltreatment of a child in out of home care. You are asked to carefully review each profile and, based on the information presented, to indicate your decision on the scale immediately following the profile. Please note that the scale is an expression of your assessment about the likelihood that you would substantiate the alleged maltreatment. Please circle the number that corresponds to your judgment about this likelihood of success.

The second question you are asked to answer relates to whether or not you would have screened the report in for investigation.

Please read the profiles over carefully to acquaint yourself with the information dimensions and the way various pieces of information are presented. You may find that the rating task may be laborious, and fatigue may possibly impair your ability to maintain consistency. As a general suggestion, you may try to rate 25 profiles at the beginning and then assess your efforts to determine your rate of completion based on how you feel after rating the first set.

It is essential that you do these ratings seriously and with an effort to represent how you rate real allegations. While the information presented in the profiles is not exactly in the form with which you may be most familiar, the information dimensions and scales used were developed from what you and your colleagues reported to be important issues and factors to consider in decisions to investigate and/or substantiate reports of maltreatment.

Thank you again for your willingness to be a part of this research effort. I appreciate your efforts in making this project possible.
Dear Participant:

Attached you will find the series of profiles regarding abuse/neglect of children in out of home care. There are 105 profiles for your review. The numbering, however, goes from 1 to 114. I have removed nine (9) profiles from the set. The profiles that were removed represented profiles which were simply not plausible, such as a 6 month old child who reported the abuse.

As indicated in the instructions on the second page, the first five (5) profiles are a pilot effort for you to become familiar with the format, and will not be used for the analysis.

Thank you so much for your willingness to participate in this study.

August 19, 1993.
Age of child: 17 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct caregiver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 3:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_______ Yes  _______ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 3:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Indicated Definitely substantiate Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 7 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate               Indicated               Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes          _____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate
Indicated
Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 3:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Indicated Definitely substantiate

substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 7 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institution
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 3:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Report: Neighbor
Child behavioral status: Age appropriate behaviors
Responsible for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not Indicated Definitely
substantiate substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_______ Yes _______ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Observable signs of Physical injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Indicated Definitely substantiate Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: age appropriate behavior
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years  
Sex of child: Female  
Consequences to child: Observable signs of physical injury  
Reporter: Neighbor  
Child behavioral status: Severe behavioral disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Mildly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Professional staff/institutional  
Previous reports regarding placement/facility: None  
Child/caretaker ratio: 10:1  
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th></th>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definite not substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indicated</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Definitely substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not     Indicated     Definitely
substantiate              Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes         _____ No
Age of child: 6 months
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 1.0
Definitely not substantiate

0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9
Indicated

1.0
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 4:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes       _____ No
Age of child: 7 years
Sex of child: Male
Consequences to child: Child's condition due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate          Indicated          Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes          _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not    Indicated    Definitely
substantiate    Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes    ______ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 4:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes
_____ No
Age of child: 17 years  
Sex of child: Female  
Consequences to child: No observable Consequences  
Reporter: Neighbor  
Child behavioral status: Mild behavior disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Mildly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Professional staff/institutional  
Previous reports regarding placement/facility: None  
Child/caretaker ratio: 2:1  
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th></th>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  
_____ No
Age of child: 6 months
Sex of child: Female
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct caregiver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Indicated Definitely substantiate
substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 3:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes    _____ No
Age of child: 7 years
Sex of child: Male
Consequences to child: Observable sign of physical injury
Reporter: Medical Doctor
Child behavioral status: Age appropriate behavior
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes ______ No
Age of child: 3 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 4:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

[ ] Yes [ ] No
Age of child: 6 months
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  0.1  0.2  0.3  0.4  0.5  0.6  0.7  0.8  0.9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated Definitely substantiate

Indicated

Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
definitely not substantiate indicated definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes     _____ No
Age of child: 11 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 4:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0
Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years  
Sex of child: Male  
Consequences to child: Child's condition worsened due to lack of medical care  
Reporter: Medical Doctor  
Child behavioral status: Severe behavioral disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Resistant  
Attitude of perpetrator toward what happened: Unaware of problem  
Role of perpetrator: Direct care giver  
Previous reports regarding placement/facility: None  
Child/caretaker ratio: 6:1  
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Definitely not substantiate  
Indicated  
Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

[ ] Yes  
[ ] No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable sign of sexual injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0
Definitely not indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  ______ No
Age of child: 17 years
Sex of child: Male
Consequences to child: No observable Consequences
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 3:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0
Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 11 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated Definitely substantiate
substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years  
Sex of child: Male  
Consequences to child: No observable consequences  
Reporter: Medical doctor  
Child behavioral status: Mild behavior disorder  
Responsibility for injury: Could have been accidental  
Cooperation of perpetrator: Highly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Direct care giver  
Previous reports regarding placement/facility: Several  
Child/caretaker ratio: 6:1  
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  
______ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 3:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _______ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes       _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: No observable Consequences
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not Indicated Definitely
substantiate Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 4:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate

Indicated

Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes

_____ No
Age of child: 11 years  
Sex of child: Male  
Consequences to child: Child's condition worsened due to lack of medical care  
Reporter: Neighbor  
Child behavioral status: Mild behavior disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Highly cooperative  
Attitude of perpetrator toward what happened: Remorseful  
Role of perpetrator: Foster parent  
Previous reports regarding placement/facility: Several  
Child/caretaker ratio: 3:1  
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Child injured while care giver not present
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 10:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 11 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Child
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes ______ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated

Indicated

Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 10:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate Indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 3:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate   Indicated   Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 11 years  
Sex of child: Male  
Consequences to child: No observable Consequences  
Report: Child  
Child behavioral status: Age appropriate behaviors  
Responsibility for injury: Could have been accidental  
Cooperation of perpetrator: Mildly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Direct care giver  
Previous reports regarding placement/facility: Several  
Child/caretaker ratio: 6:1  
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0  
Definitely not substantiate  
Indicated  
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  
_____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate Indicated Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes _____ No
Age of child: 11 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_______ Yes  _______ No
Age of child:  13 years
Sex of child:  Female
Consequences to child:  Observable signs of physical injury
Reporter:  Neighbor
Child behavioral status:  Age appropriate behaviors
Responsibility for injury:  Could have been accidental
Cooperation of perpetrator:  Highly cooperative
Attitude of perpetrator toward what happened:  Unaware of problem
Role of perpetrator:  Foster parent
Previous reports regarding placement/facility:  None
Child/caretaker ratio:  2:1
Response of child:  Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate

Indicated

Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly accidental
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years  
Sex of child: Male  
Consequences to child: No observable Consequences  
Reporter: Child  
Child behavioral status: Severe behavioral disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Resistant  
Attitude of perpetrator toward what happened: Remorseful  
Role of perpetrator: Professional staff/institutional  
Previous reports regarding placement/facility: Several  
Child/caretaker ratio: 6:1  
Response of child: Complacent  

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Substantiate Definitively Indicated Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Child's condition worsened due to the lack of medical care
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Definitely not</td>
<td>Indicated</td>
<td>Definitely</td>
<td>Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes          ______ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Observable signs of physical injury
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years  
Sex of child: Female  
Consequences to child: Child injured while caregiver not present  
Reporter: Child  
Child behavioral status: Age appropriate behaviors  
Responsibility for injury: Could have been accidental  
Cooperation of perpetrator: Mildly cooperative  
Attitude of perpetrator toward what happened: Remorseful  
Role of perpetrator: Professional staff/institutional  
Previous reports regarding placement/facility: Some  
Child/caretaker ratio: 10:1  
Response of child: Angry  

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)  

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0  
Definitely not substantiate  
Indicated  
Definitely substantiate  

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)  

_____ Yes  
_____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 4:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes     _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of Problem
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate

Indicated

Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 6 months  
Sex of child: Male  
Consequences to child: Observable signs of physical injury  
Reporter: Neighbor  
Child behavioral status: Age appropriate behaviors  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Highly cooperative  
Attitude of perpetrator toward what happened: Unaware of problem  
Role of perpetrator: Professional staff/institutional  
Previous reports regarding placement/facility: Some  
Child/caretaker ratio: 10:1  
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  
_____ No
Age of child: 11 years  
Sex of child: Male  
Consequences to child: Observable signs of physical injury  
Reporter: Child  
Child behavioral status: Mild behavior disorder  
Responsibility for injury: Could not have been accidental  
Cooperation of perpetrator: Highly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Foster parent  
Previous reports regarding placement/facility: Some  
Child/caretaker ratio: 3:1  
Response of child: Angry

<p>| | | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitly not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate Indicated Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Male
Consequences to child: No observable Consequences
Reporter: Child
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  0.1  0.2  0.3  0.4  0.5  0.6  0.7  0.8  0.9  1.0
Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated

Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>.1</th>
<th>.2</th>
<th>.3</th>
<th>.4</th>
<th>.5</th>
<th>.6</th>
<th>.7</th>
<th>.8</th>
<th>.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes          _____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Medical Doctor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 3:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not Substantiate
Indicated
Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 7 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Child
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not indicated
Indicated
Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes      _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: No observable Consequences
Reporter: Medical Doctor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Highly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th></th>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 13 years
Sex of child: Female
Consequences to child: No observable Consequences
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate
Indicated
Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

______ Yes  ______ No
Age of child: 13 years  
Sex of child: Male  
Consequences to child: Child's condition worsened due to lack of medical care  
Reporter: Neighbor  
Child behavioral status: Mild behavior disorder  
Responsibility for injury: Could have been accidental  
Cooperation of perpetrator: Resistant  
Attitude of perpetrator toward what happened: Remorseful  
Role of perpetrator: Foster parent  
Previous reports regarding placement/facility: None  
Child/caretaker ratio: 4:1  
Response of child: Withdrawn  

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)  

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0  
Definitely not substantiate  Indicated  Definitely substantiate  

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)  

_____ Yes  _____ No
Age of child: 6 months
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Direct care giver
Previous reports regarding placement/facility: None
Child/caretaker ratio: 2:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not Indicated Definitely
substantiate Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child injured while caregiver not present
Reporter: Neighbor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not
substantiate

Indicated

Definitely
Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes

_____ No
Age of child: 17 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Professional Staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 2:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not
Indicated
Definitely
substantiate
Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Angry

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate  Indicated  Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Female
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Medical Doctor
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Remorseful
Attitude of perpetrator toward what happened: Angry
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: Several
Child/caretaker ratio: 3:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0  .1  .2  .3  .4  .5  .6  .7  .8  .9  1.0

Definitely not indicated
Definitely substantiate

Indicated

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 3 years
Sex of child: Male
Consequences to child: Observable signs of sexual injury
Report: Neighbor
Child behavioral status: Age appropriate behaviors
Responsibility for injury: Could not have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Professional staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10.0+1
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate

Indicated

Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years  
Sex of child: Female  
Consequences to child: Observable signs of sexual injury  
Reporter: Neighbor  
Child behavioral status: Severe behavioral disorder  
Responsibility for injury: Could have been accidental  
Cooperation of perpetrator: Mildly cooperative  
Attitude of perpetrator toward what happened: Angry  
Role of perpetrator: Direct care giver  
Previous reports regarding placement/facility: None  
Child/caretaker ratio: 10.0+:1  
Response of child: Complacent  

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)  

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0  
Definitely not substantiate  
Indicated  
Definitely Substantiate  

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)  

_____ Yes  
_____ No
Age of child: 17 years
Sex of child: Male
Consequences to child: No observable Consequences
Reporter: Neighbor
Child behavioral status: Mild behavior disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Professional Staff/institutional
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 10:01
Response of child: Withdrawn

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0

Definitely not substantiate
Indicated
Definitely Substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 11 years
Sex of child: Male
Consequences to child: Child's condition worsened due to lack of medical care
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Resistant
Attitude of perpetrator toward what happened: Remorseful
Role of perpetrator: Foster parent
Previous reports regarding placement/facility: None
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 1.0

Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child: 7 years
Sex of child: Female
Consequences to child: Observable signs of sexual injury
Reporter: Child
Child behavioral status: Severe behavioral disorder
Responsibility for injury: Could have been accidental
Cooperation of perpetrator: Mildly cooperative
Attitude of perpetrator toward what happened: Unaware of problem
Role of perpetrator: Direct caregiver
Previous reports regarding placement/facility: Some
Child/caretaker ratio: 6:1
Response of child: Complacent

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

0.0 .1 .2 .3 .4 .5 .6 .7 .8 .9 1.0
Definitely not substantiate  Indicated  Definitely substantiate

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No
Age of child:
Sex of child:
Consequences to child:
Reporter:
Child behavioral status:
Responsibility for injury:
Cooperation of perpetrator:
Attitude of perpetrator toward what happened:
Role of perpetrator:
Previous reports regarding placement/facility:
Child/caretaker ratio:
Response of child:

Based on the given information, how likely would you be to substantiate this report of abuse/neglect? (Circle your response)

<table>
<thead>
<tr>
<th>0.0</th>
<th>0.1</th>
<th>0.2</th>
<th>0.3</th>
<th>0.4</th>
<th>0.5</th>
<th>0.6</th>
<th>0.7</th>
<th>0.8</th>
<th>0.9</th>
<th>1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely not substantiate</td>
<td>Indicated</td>
<td>Definitely Substantiate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you were the person screening this report would you have screened it in for investigation? (Check space by your response)

_____ Yes  _____ No