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# IDENTIFICATION OF CHILD MALTREATMENT WITH THE PARENT-CHILD CONFLICT TACTICS SCALES: DEVELOPMENT AND PSYCHOMETRIC DATA FOR A NATIONAL SAMPLE OF AMERICAN PARENTS

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## ABSTRACT

**Objective:** To create a parent-to-child version of the Conflict Tactics Scales, the CTSPC.

**Method:** Description of the conceptual and methodological approaches used and psychometric data for a nationally representative sample of 1,000 U.S. children.

**Results:** (1) Improved Psychological Aggression and Physical Assault scales. (2) New Nonviolent Discipline scale, supplementary scale for Neglect, and supplemental questions on discipline methods and sexual abuse. (3) Reliability ranges from low to moderate. (4) Evidence of discriminant and construct validity.

**Conclusions:** The CTSPC is better suited to measuring child maltreatment than the original CTS. It is brief (6 to 8 minutes for the core scales) and therefore practical for epidemiological research on child maltreatment and for clinical screening. Methodological issues inherent in parent self-report measures of child maltreatment are discussed. © 1998 M. A. Straus. Published by Elsevier Science Ltd

*Key Words*—Neglect, Abuse, Discipline, Child maltreatment.

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## INTRODUCTION

MOST RESEARCH ON physical and psychological maltreatment of children, and virtually all research on neglect, is based on cases obtained from treatment or judicial agencies. Despite the importance of these clinically based studies, only a small fraction of maltreatment cases are known to social or judicial agencies. Moreover, there is evidence from studies of alcoholism and other social and psychological problems that cases in the general population suffering from the same problem may differ from "clinical" cases in ways that affect treatment or prevention programs (Straus, 1990b). Consequently, epidemiological research on child maltreatment in the general population is needed in addition to clinically based studies.

One of the requirements for epidemiological survey research on the general population is a practical method of ascertaining the presence and degree of maltreatment. The Conflict Tactics Scales or CTS (Straus, 1979, 1990a; Straus, Hamby, Boney-McCoy, & Sugarman, 1996) was designed to meet that need. This paper describes a new version of the CTS called the Parent-Child Conflict Tactics Scales (CTSPC). The CTSPC is intended to measure psychological and physical maltreatment and neglect of children by parents, as well as nonviolent modes of discipline.

*Previous Uses of the CTS to Measure Child Maltreatment*

The original CTS (to be called CTS1 from here on) has important limitations as a measure of child maltreatment (discussed in Straus & Hamby, 1997). The limitations stem from the fact that the CTS1 was designed for use with partners in a marital, cohabiting, or dating relationship. To adapt it for measuring parental behavior, the main modification was to change the referent person from "your partner" to a specific child. Although the CTS1 has worked remarkably well as a measure of child maltreatment (see the review in Straus & Hamby, 1997), some items were not really appropriate for parent-child relationships, and some important parental behaviors were not included.

A computer search for 1980 through 1996 revealed 132 publications that reported results from using the CTS1 to measure child maltreatment (see bibliography in Straus, 1995). Most were based on data from responses by parents. A substantial number used the CTS1 to obtain recall data from adults about the behavior of their parents. Twenty-two studies were based on administration of the CTS1 to children ranging in age from 6 through 17. More important than frequency of use is the evidence accumulating from these studies of the concurrent and construct validity of the CTS1 as a measure of maltreatment of children (Straus & Hamby, 1997; Yodanis, Hill, & Straus, 1997).

An elementary but critically important indicator of validity is the fact that the rates of severe physical assault found by nine different investigators (summarized in Straus & Gelles, 1990b, Table 6-3, part B) show that the CTS identifies many more cases than are known to child protective services (CPS). This is consistent with the long standing belief of CPS workers that there are many times more cases than are referred to them. A type of concurrent validity is the level of agreement between different members of the same family, such as the extent to which the report of a parent agrees with that of a child. Straus and Hamby (1997) summarize the results of six such studies, each of which found substantial agreement. The most extensive evidence is on construct validity. Most of the studies located in our search provide evidence of construct validity because they report findings that are consistent with previously established empirical findings such as etiological links between physical abuse of children and stress (Ehlen, 1987) and depression (Campbell, Kub, Belknap, & Templin, 1997; Zuravin, 1989) or between having experienced abuse and many kinds of maladaptive behavior such as delinquency and substance abuse (Miller, Downs, & Gondoli, 1989), psychopathology (Dutton, Starzomski, & Ryan, 1996) and scores on the Child Abuse Potential Inventory (Caliso & Milner, 1992).

The extent to which the CTS1 has been used in research on child maltreatment, despite its

limitations, suggests that the revision described in this paper could make the CTSPC an even more useful instrument than the CTSI.

## COMPARISON OF CTSI AND CTSPC

### *Theoretical Basis and Mode Of Operationalization*

*Theoretical basis.* Despite important differences between the CTSI and the CTSPC, the theoretical basis and mode of operationalization are fundamentally the same. The theoretical basis of the CTSI is conflict theory (Adams, 1965; Coser, 1956; Dahrendorf, 1959; Scanzoni, 1972; Simmel, 1955; Sprey, 1979; Straus, 1979). This theory assumes that conflict is an inevitable part of all human association, whereas physical assault as a tactic to deal with conflict is not (Coser, 1956; Dahrendorf, 1959). Consistent with this assumption, the CTSPC measures both physical assaults and other tactics.

*Measurement of parent behavior rather than injury or other outcomes.* The CTSPC measures the extent to which a parent has carried out specific acts of physical and psychological aggression, regardless of whether the child was injured. Because the CTSPC measures parental behavior rather than injury, and to avoid confusion with use of the term abuse to indicate an injured child, the CTSI scales are identified as measures of maltreatment. However, in the case of sexual acts by parents, the convention is to use the term abuse regardless of whether there is physical or psychological injury, and we therefore use the term sexual abuse.

The reasons for measuring acts of maltreatment separately from presumed causes (such as attitudes about violence) and effects (such as physical or psychological injury) are discussed in detail elsewhere (Straus, 1990a, 1990b; Straus & Hamby, 1997). One of the most important benefits of measuring maltreatment separately is that it permits investigating the antecedents and effects of maltreatment.

### *Augmented Scales*

A recurring dilemma in test construction is the balance between a test which is brief enough to be applicable in situations that permit only limited testing time (Nelson & Berwick, 1989) and long enough to achieve an adequate sampling of the universe of content (content validity) and enough observations, such as enough items, to achieve an adequate level of reliability. CTSI may have erred on the side of brevity. The CTSPC therefore, has additional items in each of the three original scales.

### *Supplemental Scales and Questions*

The CTSPC includes a supplemental scale on Neglect and supplemental questions on corporal punishment and sexual abuse (see Appendix 3). We identify the weekly corporal punishment items as supplemental because the purpose is to add more detail based on a shorter referent period. We identify the sexual abuse items and the Neglect scale as supplemental because, although they are important forms of child maltreatment, conceptually, neither is a conflict tactic.

### *Improved Items*

The wording of all items was reviewed and the wording was changed as needed to improve clarity and appropriateness as an indicator of parental behavior. For example, the item "Threw something at him/her" did not indicate whether this was a pillow or a brick. The CTSPC version of the item makes it explicit by specifying "Threw something that could hurt." Some items were

deleted and some new items were added. The severe assault part of the Physical Assault scale has been strengthened by the addition of two new items. The distinction between minor and severe has been applied to the Psychological Aggression scale. As result, we believe the CTSPC provides a better operationalization of the distinction between minor and severe acts. Appendix 2 includes a side by side comparison of items in the CTS1 and the CTSPC.

### *Interspersed Order of Items*

The CTS1 presented the items in hierarchical order of social acceptability, starting with the socially desirable items in the Reasoning scale such as *discussed an issue calmly* and ending with the most severe of the Physical Assault items (used a knife or gun). For the CTSPC, however, the items from different scales and different levels of severity are interspersed in a randomly determined order. There were several reasons for choosing the interspersed order. One is that despite the plausibility of providing a context of legitimation, some users of the CTS have asked only the physical violence questions, yet gotten results that were meaningful. In addition we believed that an interspersed order makes it more difficult to blindly respond "Never" to all items, and that an interspersed order may also minimize demand characteristics by making less obvious which items are scored on each subscale, and by requiring participants to think about each item more than would be the case if they were in groups of similar items. Finally, the pre-test for the national survey that provided the data for this article encountered some nonviolent parents who objected to the hierarchical order. Having declared that they never did the first of the violent acts and "would never do anything like that," they were a little irritated to be asked about 11 other violent acts. This did not occur with the interspersed order. A definitive answer to the question of whether a hierarchical or interspersed order is best will depend on an experiment in which random halves of the respondents are given the hierarchical and interspersed item version. In the meantime, we recommend using the interspersed order of items, as given in Appendix 1.

### *Scale Names, Definitions, and Length*

*Nonviolent discipline.* The Nonviolent discipline scale measures use of four disciplinary practices that are widely used alternatives to corporal punishment (explanation, time out, deprivation of privilege, and substitute activity). This scale replaces the CTS1 Reasoning scale. The replacement does not involve an important loss of continuity with the CTS1 because the original Reasoning scale was inadequate in both the number and content of the items and was rarely used. See Appendix 2 for a comparison of items in the CTS1 and the CTSPC.

*Psychological aggression.* This scale is intended to measure verbal and symbolic acts by the parent intended to cause psychological pain or fear on the part of the child. See Vissing, Straus, Gelles, and Harrop (1991) for a conceptual analysis and empirical data on the CTS1 version of this scale. The CTS1 version had six items and included acts such as "sulked or refused to talk" that may not be particularly salient as behaviors that parents exhibit towards children. The CTSPC version has five items, of which two are modified from the CTS1 child form and three are new. One important modification is that "Threatened to hit or throw something at him/her" has been rewritten to include spanking and to specify that the threat was not actually carried out.

*Physical assault.* The CTS1 included nine physical assault items. The CTSPC has 13. Eight are modifications of CTS1 items to make them more appropriate for parent-child interactions, and four are new. The items cover a wide range of severity and legality. At the low severity end, spanking and other forms of corporal punishment are acts that have traditionally been expected responses of parents to persistent misbehavior (Straus, 1994; Straus & Mathur, 1996). Scores at the high severity end of the scale (such as punching or kicking a child) are indicators of physical maltreatment. The

items in this scale can be used to compute subscales for minor and severe Corporal Punishment (acts of minor physical assault for which parents are granted an exemption from prosecution for assault), Severe Assault (Physical Maltreatment), and Very Severe Assault (Extreme **Physical Maltreatment**)

*Supplemental questions on discipline in the previous week.* These questions were added because they refer to parental behaviors that are often so frequent that the usual CTSPC referent period of the previous 12 months is not meaningful because at least two-thirds of American mothers reported having spanked their child in the past week. Moreover, they spanked, on average, more than three times that week (Giles-Sims, Straus, & Sugarman, 1995). It is unrealistic to expect such parents to do the mental calculations needed to estimate how often they had spanked in the last year. Consequently, rates based on a 1 year, or even a 6 month, referent period are almost certain to drastically underestimate the use of corporal punishment.

*Neglect.* The Neglect scale is intended to measure failure to engage in behavior that is necessary to meet the developmental needs of a child, such as not providing adequate food or supervision. (See Straus, Williams, & Kinard, 1995 for a conceptual analysis and a multidimensional neglect scale.) As in the case of physical and psychological maltreatment, neglect is scored for failing to meet these needs regardless of whether the child is actually damaged by the neglect.

*Sexual abuse.* On an experimental basis, we developed questions to inquire about the sexual abuse of the referent child. Most questionnaires about sexual abuse have been designed to ask adults retrospectively about their childhoods. Many have assumed that parents would be either unlikely to know about or reluctant to disclose abuse of their own children. But as public discussions of abuse have become more open and more abuse is being disclosed, it may be possible to elicit reports about contemporaneous sexual abuse to children from parents. We decided to ask questions about unwanted sexual touch and about forced sexual contact. However, it should be noted that these questions ask about touching and forced sexual contact by an adult or older child — including anyone who was a member of the family at that time. Thus, they are not focused exclusively on parents as is the case with the CTSPC. We asked the questions this way because we hoped that respondents would be more likely to reveal sexual abuse if it was not necessary to indicate who did it. The Gallup Survey used two of these questions. A theoretical explication and the Gallup survey findings from these two questions is in Finkelhor, Moore, Harnby, and Straus (1997).

## THE GALLUP SURVEY

The data for this paper was obtained from a survey initiated and sponsored by the Gallup Organization as part of its National Social Audit Program (Gallup survey, #765). The authors of this paper all participated in the design of the questionnaire, including the design of the CTSPC. The interviews were pretested on a sample of 14 cases, and the wording of some items was revised to correct problems that were uncovered.

### *Sample*

The survey was conducted by telephone in August and September, 1995. The telephone numbers were selected by a random digit stratified probability design. A random procedure was used to provide representation of both listed and unlisted numbers. These methods are designed to produce, with proper weighting for differential sampling rates, an unbiased probability sample of telephone households in the continental United States, which includes 94% of all households (6% of U.S.

households cannot be reached by telephone). Among households that met the eligibility criterion (one or more children under 18 living there), the participation rate was 81%. A total of 1,000 interviews were completed. In two-parent households, one parent was randomly selected for the interview. In multi-child households, one child was randomly identified, and a parent of that child interviewed. All data reported pertain to the child who was randomly identified. See Gallup Organization (1995) for more detailed sampling information.

### *Sample Characteristics and Weighting*

The data on the children in the survey matched U.S. 1990 Census information fairly closely for characteristics of children under 18 such as gender (49% girls), and minority representation (12% Black, 7% Hispanic). The mean age of parents was 36.8 years. More mothers than fathers were interviewed (66% of the sample), partly because the sample included single parents who are predominantly mothers. Fifty-two percent of the parents were married, 15% remarried, 20% divorced, 8% never married, and 4% were cohabiting. The referent children ranged in age from infants to age 17, with a mean age of 8.4 years. There was an over representation of households with college educated parents (34% vs. 23% in the Census) and an under representation of those with less than a high school education (8% vs. 14% in the Census). In all analyses, data were weighted to reflect the latest U.S. Census statistics with regard to the gender of the respondent, children's age, race, region of the country, and parent's education. This involved an assumption that the replies of nonsurveyed members of under represented groups would be similar to those who were surveyed.

## PREVALENCE AND CHRONICITY

We will comment only briefly on the prevalence and chronicity statistics from the Gallup Survey because this is a methodological paper rather than a substantive report. But at least some consideration of these statistics is needed to evaluate the extent to which the CTSPC has been able to identify a meaningful pattern of parent behavior.

### *Definitions*

*Prevalence.* Table I provides data on two prevalence rates: annual and lifetime. The annual rate is the number per thousand parents who engaged in each CTSPC item during the previous year. The lifetime rate is the number per thousand who had ever engaged in each CTSPC item with the referent child. We use the rate per thousand because it permits easier comparison with the most widely used prevalence rates: cases reported to child protective services (National Center on Child Abuse & Neglect, 1996) and the National Incidence Survey (National Center on Child Abuse & Neglect, 1988).

*Chronicity.* As used here, applies to the subset of parents who engaged in at least one of the acts in the scale. It indicates how often those acts occurred in the previous year. The chronicity measure is needed to deal with the extremely skewed distribution of the Physical Assault scale. This makes it inappropriate to use the mean to describe how often abusive acts occurred. For example, Physical Assault item O in Table I shows a rate of 38 per thousand for hitting a child with an object on some part of the body other than the buttocks. This is a high rate. Nevertheless, it is also an extremely skewed distribution. As a result of the preponderance of nonviolent parents, estimates of the average number of assaults are close to zero (.2). A more meaningful estimate of the average number of assaults of this type in the previous 12 months (5.7 times) uses the mean based on just parents who did it at least once.

Table 1. Prevalence Rates per Thousand and Chronicity Estimates for CTSPC Scales and Items (N=1,000)\*

Scale and Items	Prevalence		Year Chronicity**
	Year	Ever	
<b>Nonviolent Discipline</b>	<b>977</b>	<b>999</b>	<b>46.0</b>
A. Explained why something was wrong	943	945	18.3
E. Gave him/her something else to do instead of what he/she was doing	770	831	12.2
Q. Took away privileges or grounded him/her	760	785	10.8
B. Put in "time out" (or sent to room)	755	813	13.0
<b>Psychological Aggression</b>	<b>856</b>	<b>899</b>	<b>21.7</b>
F. Shouted, yelled, or screamed at	847	867	12.8
N. Threatened to spank or hit but did not actually do it	536	618	10.6
J. Swore or cursed at	243	260	6.5
U. Called him/her dumb or lazy or some other name like that	163	175	5.7
L. Said you would send him/her away or kicked him/her out of the house	60	7	3.9
<b>Physical Assault</b>	<b>615</b>	<b>770</b>	<b>13.4</b>
H. Spanked on bottom with bare hand	469	636	7.5
P. Slapped on the hand, arm, or leg	369	512	7.3
D. Hit on the bottom with a belt, a hairbrush, a stick or some other hard object	207	294	5.5
C. Shook him/her: All children	90	150	2.8
Child under age 2	43	43	2.4
Child age 2 and older	96	161	3.9
O. Hit some other part of the body besides the bottom with a belt, a hairbrush, a stick	38	50	5.7
R. Pinched him/her	43	59	6.4
V. Slapped on the face, head or ears	46	64	3.4
G. Hit with a fist or kicked hard	3	14	3.7
T. Threw or knocked down	2	8	4.2
K. Beat up that is you hit him/her over and over as hard as you could	2	6	1.8
I. Grabbed around neck and choked	-	7	-
M. Burned or scalded on purpose	-	1	-
S. Threatened with a knife or gun	-	1	-
<b>Neglect</b>	<b>270</b>	<b>306</b>	<b>6.9</b>
NA. Had to leave your child home alone even when you thought some adult should be with him/her	195	213	6.0
NC. Were not able to make sure your child got the food he/she needed	110	137	5.5
NE. Were so drunk or high that you had a problem taking care of your child	23	33	5.9
ND. Were not able to make sure your child got to a doctor or hospital when he/she needed it	4	12	2.0
NB. Were so caught up with problems that you were not able to show or tell your child that you loved him/her	2	11	4.6

\* Rates and means are weighted to correct for sampling deviations from the census distribution (see Methods section). The items are arranged in order of frequency of occurrence. The letters preceding each item correspond to the letters in the CTSPC as printed in the Appendix. Prevalence and chronicity is not given for the last three Physical Assault items because no instances were reported for the current year.

\*\* Chronicity is the mean number of times each act was reported among the subset of parents who reported at least one occurrence.

### Rates

*Nonviolent discipline.* The top panel of Table 1 indicates, not surprisingly, that almost all parents (977 per thousand) reported engaging in at least one of the four disciplinary tactics in the Nonviolent Discipline scale. The chronicity mean of 36.0 indicates that parents reported using these four techniques an average of 46 times during the preceding 12 months. The most frequently used technique for correcting misbehavior was explaining why it was wrong.

*Psychological aggression.* The rates show that psychological aggression was almost as frequent as Nonviolent Discipline. Again, not surprisingly, the most frequent mode of psychological aggression was shouting, yelling, or screaming at the child, and the next most frequent was threatening to spank or hit. Swearing at and cursing the child occurred much less often, but still at very high rates (243 per thousand).

*Physical assault.* This scale covers a broad range of acts, from culturally legitimate corporal punishment to criminal acts of physical assault. The corporal punishment items in the scale account for most of the physical assaults by parents. A rate of 614 per thousand was found for the Corporal Punishment subscale (items H, P, D, R, V, and C for children age 2 and over), as contrasted with a rate of 49 per thousand for the items making up the Severe Physical Assault subscale (item C for children under 2, and items O, G, T, K, J, M, and S). Although, as expected, Severe Physical Assault occurred at a much lower rate than the corporal punishment items, this rate is still about 11 times greater than the rate of 4 per thousand for cases reported to child protective services in 1994 (National Center on Child Abuse & Neglect, 1996, pp. 2–5), and five times greater than the rate of 9.1 per thousand uncovered by the Third National Incidence Study (Sedlak & Broadhurst, 1996).

*Neglect.* This scale revealed an annual prevalence rate of 270 per thousand. Almost all of this is attributable to leaving a child alone when the parent felt an adult should be present, and to not providing food the parent felt the child needed. However, item NE shows that there was also a fairly high rate of failure to provide adequate care because of problem drinking (23 per thousand).

## RELIABILITY

A problem with the parent-child version of CTS1 that we hoped to remedy with the CTSPC is low internal consistency reliability. The alpha coefficients from seven analyses of the CTS1 data averaged .58 for the overall Physical Assault scale and .68 for the Psychological Aggression scale (Straus & Hamby, 1997). The CTSPC alpha coefficients for the present sample of parents are similar: Overall Physical Assault scale = .55, Psychological Aggression = .60, Nonviolent Discipline = .70, and the new Neglect scale has an alpha of only .22. Alpha for the Severe Physical Assault subscale is near zero (–.02).

It is customary to think that when an instrument lacks reliability, it must also lack validity. That principle, however, applies to *temporal* consistency, but not necessarily to internal consistency. An instrument can have zero internal consistency along with near perfect temporal consistency (Acock, 1979; Turner & Wheaton, 1995). The Physical Assault and the Neglect scales of the CTSPC fit the conditions under which this could occur. One reason for the low internal consistency reliability of the severe assault scale is because the items measure rare events. The extremely skewed distributions drastically lower the correlation between the items and reduces alpha because alpha is a function of the size of the correlations between items. In addition the severe assault items do not meet other assumptions such as equal variance. Finally, although there may be an occasional abusing parent who has hit the child with a belt or stick, and also choked, burned, and stabbed the child in the last year, this would be rare even among abusing parents. Thus, we would not expect the substantial correlations between items that are required for a high alpha coefficient. Although test-retest reliability data is not yet available for the CTSPC, it is available from three studies using the parent-to-child physical assault scale of the original CTS. The coefficients range from .49 (McGuire & Earls, 1993) to .70 and .79 (Johnston, 1988) to .80 (Amato, 1991).

## DISCRIMINANT AND CONSTRUCT VALIDITY

Evidence of construct validity occurs when a test is correlated with other variables for which there are theoretical or empirical grounds to expect an association (Campbell & Fiske, 1959) and are not correlated when there are grounds for expecting the two variables to be uncorrelated. An overall judgment concerning construct validity takes many such linkages, including findings from

different studies. An accumulated body of such evidence exists for the parent-to-child version of the CTS1 (see the review in Straus & Hamby, 1997). Yet, even though the CTSPC retains the basic theoretical and operational approach of the CTS1, one cannot be sure that findings based on the CTS1 apply to the CTSPC. However, the prevalence rates in the previous section, and the findings on linkages with demographic variables and correlations between scales to be presented in this section are a start toward answering that question.

### *Demographic Correlates*

*Age of parent.* There is evidence that older parents are less inclined to use corporal punishment and less likely to physically maltreat a child than younger parents (Connelly & Straus, 1992). Therefore, if the CTSPC measures are valid, both corporal punishment and severe assaults should decrease with the age of the parent. We found a correlation of  $-.33$  between parent's age and the Corporal Punishment Scale,  $-.12$  between parent's age and the Severe Assault scale. These correlations are consistent with previous research and therefore contribute to the evidence suggesting that the CTSPC is a valid measure of violence by parents.

*Age of child.* The prevalence and the chronicity of corporal punishment decline rapidly from about age 5 on (Straus, 1994). However, for more severe assaults by parents, the evidence is contradictory. Among cases known to child protective services, the physical maltreatment rate also decreases with age (National Center on Child Abuse and Neglect, 1996), although not nearly as much as the decrease in corporal punishment. However, research using the CTS1 found no decrease in severe assaults with child's age (Wauchope & Straus, 1990). Wauchope and Straus argue that the higher rate of physical maltreatment of young children in CPS statistics reflects the greater risk of injury among infants and toddlers, rather than a greater rate of assault. Instruments such as the CTS1 and the CTSPC assess the occurrence of assaults, regardless of injury. Consequently, evidence of validity would be present if the child's age were negatively correlated with corporal punishment, but uncorrelated with severe assaults. Consistent with this, we found a correlation of  $-.34$  between child's age and corporal punishment and a nonsignificant correlation of  $-.06$  with severe assaults.

*Minority race/ethnic group.* Studies of Corporal Punishment have shown no clear difference between Euro American and either African American or Hispanic American parents (Straus, 1994; Straus & Camacho, in press). On the other hand, research on severe assaults has typically found higher rates for the two minority groups. The higher rate of severe assaults may reflect the greater stress that minority group parents experience in American society. Whatever the reason, if the CTSPC scales are valid, they should show, at most, a slight relation to minority status for corporal punishment, and a stronger relationship for severe assaults. Analyses of covariance of the CTSPC data (holding constant SES, age of child and parent, and gender of child and parent), as expected, found no significant difference between Euro Americans and African Americans in corporal punishment. For severe assaults, however, the African American rate of 148 per thousand was more than three times greater than the Euro American rate of 34 per thousand ( $F = 12.68, p < .001$ ).

*Gender of parent.* Previous research has found a higher rate of corporal punishment and severe assaults by mothers than fathers. With the CTSPC, we found a significant interaction between gender of parent and age of the child, after controlling for race and gender of the child and SES ( $F = 2.84, p < .05$ ). The interaction shows that the difference between mothers and fathers is greatest for young children. This is consistent with the most plausible explanation for the higher maternal rate of corporal punishment and severe assaults — that it reflects the far greater time spent in child care by mothers. In respect to severe assaults, the rate for mothers (5.91) was more than double that for fathers (2.58), but the difference is not quite significant ( $F = 2.15, p < .07$ ).

Table 2. Partial Correlations Between CTSPC Scales\*

Scale	1	2A	2B	3A	4
I. Nonviolent Discipline	—				
2A. Ordinary Corporal Punishment	.39	—			
2B. Severe Corporal Punishment	.23	.34	—		
3A. Ordinary Psychological Aggression	.53	.56	.33	—	
3B. Severe Psychological Aggression	.22	.24	.23	—	
4. Severe Physical Assault	.04	.13	.24	.14	—

\* All variables are the annual frequency version of the scale or subscale (see text). The variables controlled by partial correlation are age of child, gender of child and parent, child race, education of parent, and residence in the South. Correlations of 0.05 or greater are significant at  $p < .05$ .

Overall, seven of the eight tests provided evidence of construct or discriminant validity. Moreover, the one exception showed that, as predicted from previous research, the rate of severe assaults by mothers was double the rate of severe assaults by fathers, even though the  $p$  of .07 did not quite reach the .05 level.

#### *Correlations Among CTSPC Scales*

The interrelations of the scales provide another opportunity to explore the construct and discriminant validity of the CTSPC. As with the demographic correlates, if scales are correlated when there are theoretical grounds for expecting a link between the constructs they purport to measure, those correlations contribute to evidence of construct validity; and if scales are *not* correlated when there is no basis for expecting a relationship, it can be regarded as evidence of discriminant validity (Campbell & Fiske, 1959). On the other hand, a correlation when there is no theoretical basis for expecting two constructs to be related, raises the possibility that the correlation results from a method effect. Social desirability response set, for example, is a shared methodological element that could produce a correlation between the scales.

Table 2 gives partial correlations among the main CTSPC scales. It does not include data on neglect and sexual abuse because these are exploratory supplemental measures. Partial correlations were used to control for six variables that could produce spurious correlations (age of child, gender of child and of parent, child race, education of parent, and Southern Region).

*Correlates of nonviolent discipline.* The first column of Table 2 shows the correlation of scores on the Nonviolent Discipline scale with each of the other scales. On theoretical grounds we hypothesized that nonviolent discipline (which includes techniques such as explaining and time out) would have a positive correlation with the Corporal Punishment scale because both are legal and normative ways of controlling misbehavior. On the other hand, we expected a negative correlation or nonsignificant correlation with the Severe Assault scale because severe assaults are not socially approved.

The correlation of .39 in the first column of Table 2 is consistent with the first hypothesis. The lower, but still positive correlation just below that of .23 with Severe Corporal Punishment is also consistent with our hypothesis because the Severe Corporal Punishment scale includes acts such as hitting a child with a paddle that are no longer considered legitimate by many, even though they are legal in every state of the U.S.

The second hypothesis, that the Nonviolent Discipline scale would have a negative or nonsignificant correlation with the Severe Assault and Sexual Abuse scales was also supported because the correlation in row 4 is only .04.

The relationships between Nonviolent Discipline and Psychological Aggression against a child

was not the object of a hypothesis because of oversight. However, if we had posed a hypothesis, we would have posited a positive correlation because both behaviors are driven by the level of misbehavior of the child. For example parents faced with misbehavior tend to use multiple strategies. The correlations of .53 and .22 are consistent with this hypothesis.

In addition, the tendency for Nonviolent Discipline and Psychological Aggression to be correlated helps deal with the social desirability response set problem. If responses to the CTSPC represented mainly the extent to which parents present themselves as engaging in socially desirable methods of child rearing, there would be a negative correlation because the Nonviolent Discipline scale measures socially approved practices whereas the Psychological Aggression scale measures socially disapproved behaviors.

*Correlates of corporal punishment.* Columns 2A and 2B of Table 2 show the relation of the Corporal Punishment subscales to the Psychological Aggression scale (rows 3A and 3B). The conflict-escalation theory of violence argues that verbal aggression, rather than being cathartic and tension reducing, tends to increase the risk of physical assault (Berkowitz, 1993). Empirical research has supported the escalation rather than the catharsis theory by finding a strong association between psychological aggression and the probability of physical assaults (Berkowitz, 1993; Murphy & O'Leary, 1989; Straus, 1974). If the escalation theory is correct, and if the CTSPC measures of Psychological Aggression and Corporal Punishment are valid, they should be correlated. The four relevant correlations (.56, .24 in column 2A and .33, .23, in column 2B) are consistent with this theory and previous research and therefore supports the construct validity of the scale.

Finally, there is considerable research showing that the more corporal punishment used by parents, the greater the risk of it escalating into more severe assaults (Straus, 1994). However, because this happens only rarely, the relationship will be weak, and the correlations of .13 and .23 are consistent with that hypothesis.

## DISCUSSION

The Parent-Child Conflict Tactics Scales (CTSPC) is a revision of the Conflict Tactics Scales (CTS) that is specifically focused on parental behavior. The modifications include:

- Revision of the Psychological Aggression and Physical Assault scales to (1) improve clarity and age-appropriateness; (2) add items to increase content validity; (3) better differentiate between levels of severity of aggression by parents.
- Replacement of the Reasoning scale by a Nonviolent Discipline scale.
- New supplementary scales to measure Neglect and Sexual Abuse, and supplemental questions on discipline methods used in the previous week.

### *Issues and Difficulties in the Measurement of Child Maltreatment*

Numerous problems complicate measurement of child maltreatment. These problems suggest that data on child maltreatment, especially if from interviewing parents, may be particularly difficult to obtain, and pose more measurement problems than measures of partner maltreatment. In the sections below, we identify several issues and difficulties, explain how they were addressed, and evaluate how successfully the CTSPC handles these difficulties.

*Developmental issues.* Children are likely to experience different forms of aggression than adults. Furthermore, children of different ages are likely to experience somewhat different forms of aggression, and these forms may have differential impact at different ages. This is true of

psychological and physical violence. For example, spanking infants is relatively infrequent, spanking toddlers is nearly universal, and slapping adolescents is common but not universal. Threatening to kick a child out of the house is probably most common during adolescence and may have little meaning for pre-verbal children. In terms of impact, shaking infants can be a serious and even life-threatening act, while shaking older children is unlikely to lead to serious injury.

The wording of the CTSPC items makes them more appropriate indicators of parent-child interaction. The CTS1 retained all of the partner violence items in the parent-child scale, some of which are questionable for assessing parental behaviors. For example, psychological aggression items such as "stomped out of the room" and "said something to spite him/her," have less relevance for parental behavior than spouse-spouse interactions and were omitted from the CTSPC. Physical assault items which are common between partners, such as "threw something at him/her," have been replaced by more common and important forms of child maltreatment such as shaking. Moreover, scoring the shaking item is age-dependent to reflect the severity of shaking infants. For other items, the complexity of age-based scoring was avoided by wording items as broadly applicable as possible. In the present sample, internal consistency varied only slightly across age groups, suggesting that these problems have been adequately addressed in the revision.

*Normative issues and social desirability.* Some forms of aggression towards children, such as spanking and shouting, are normative both legally and culturally. With the increased recognition of the problem of child maltreatment, more severe forms of aggression such as hitting a child with a belt or paddle, although still legal (see for example NH vs. Johnson. No. 90-533, New Hampshire Supreme Court, June 25, 1992) are less acceptable than 20 years ago, when the first self-report studies of child maltreatment were done (Straus, Gelles, & Steinmetz, 1980). Thus, the effects of a socially desirable response set must be considered in the assessment of child maltreatment.

Unfortunately, a standardized measure of social desirability was not available in the Gallup survey. This precluded one important way of investigating this phenomena. However, the CTSPC addresses the issue of social desirability in several ways. First, the CTSPC includes several nonviolent discipline items that provide respondents an opportunity to show that they have carried out socially appropriate responses to the child's misbehavior, creating a "context of legitimation" (Shehan, 1995, p. 2). The CTSPC begins with two of these socially acceptable discipline items to help create this context. The remaining items are presented in an interspersed order to avoid providing information about the researchers' perceptions of item severity. Dahlstrom, Brooks, and Peterson (1990) found that this strategy increased endorsement of items in their study of depression. Additionally, care has been taken to use words such as "spanked" instead of "hit," because spanking is the socially acceptable way of describing hitting a child on the buttocks with the hand. Also, some items have been made more specific to help identify the normative status of the act. For example, because hitting a child on the buttocks with an object is more socially acceptable than on other parts of the body, the item hit with a belt, a hairbrush, a stick or some other hard object was replaced by two items, one of which begins "Hit on the bottom with . . ." and the other begins with "Hit on some other part of the body besides the bottom with . . ."

The results reported in this paper suggest that these efforts to address social desirability response biases met with mixed success. On the positive side, as noted earlier, pretesting indicated that respondents preferred the interspersed order to the hierarchical order. The overall yearly incidence rate for severe assaults reported in the Findings section is several times greater, than the rate of cases known to child protective services or the National Incidence surveys, and the sexual abuse rate (Finkelhor et al., 1997) is nine times greater than the rate of officially known cases (National Center on Child Abuse and Neglect, 1996). These findings based on the CTSPC are consistent with the findings from studies which used the CTS1 to estimate rates of physical maltreatment (summarized in Straus & Gelles, 1990b, Table 6-3, part B).

### *Possible Uses of the CTSPC*

In the light of the low internal consistency reliability of the Severe Assault scale and the evidence suggesting that social desirability reduces reporting of physical and psychological attacks, the information provided by the CTSPC must be considered a minimum estimate of child maltreatment. If the lower bound nature of the data is kept in mind, we believe that the CTSPC can be useful in research and clinical settings.

*Epidemiological research on prevalence, risk factors, and sequelae.* Despite the presumed under-reporting, the CTSPC results in rates that are several times higher than rates based on cases known to professionals. Consequently the CTSPC may be useful to provide prevalence estimates for cities, regions, or nations, or for specific types of populations, such as low income and young parents. Thus, the CTSPC, like the CTSI, will permit research that cannot usually be conducted with a purely clinical sample because a nonmaltreatment sample is rarely available for comparison (see Kinard, 1994, 1995 for an exception). The CTSPC can be similarly useful in research on the sequelae of maltreatment in the general population.

*Clinical screening.* In clinical settings, experience with maritally distressed couples shows that the CTSI reveals physical violence between partners that in about three quarters of the cases, was *not* known to the therapist (Aldarondo & Straus, 1994; O'Leary & Murphy, 1992). The CTSI also found more violence among men arrested for wife-assault than was known to police or prosecutors (Ford, 1990). The CTSPC may also be useful in screening for child maltreatment.

*Evaluation of treatment and prevention programs.* The CTSI has been used in more than 20 studies evaluating progress in treatment of wife-assault (e.g., Dunford, 1990; Edleson & Syers, 1990, 1991; Hamberger & Hastings, 1986) and in a few studies evaluating child maltreatment prevention or treatment programs such as home visiting (Olds & Kitzman, 1993). Since, as noted earlier, the theoretical basis and mode of operationalization of the CTSPC are basically the same as the CTSI, the successful use of the CTSI suggests that the CTSPC could also be an important tool for evaluating prevention and treatment of physical and psychological maltreatment of children.

## ADMINISTRATION AND SCORING

### *Applicable Populations*

*Educational and ethnic group.* Although the CTSPC was designed to facilitate self-administration, it can be administered as a face-to-face or telephone interview. In revising the CTS we kept the vocabulary and sentence structure simple to make it applicable to a broad section of the population. The Flesch grade level measure (Flesch, 1949) for the three basic scales (Nonviolent Discipline, Psychological Aggression, and Physical Assault) is 6th grade. If the supplemental scales (Neglect and Sexual Maltreatment) are included, it is slightly higher (6.4). In addition, the CTSPC is likely to be usable with many cultural groups because CTSI has been used with several U.S. ethnic groups and in other nations and the CTSPC retains the basic conceptualization and operationalization used for the CTSI.

*Child respondents.* The original CTS has been used with child respondents (Kolko, Kazdin, & Day, 1996). The CTSPC can also be used with children as the respondents. For pre-adolescents, this needs to be done in the format of an interview. The self-administered questionnaire format can be used with adolescents. With adult children it can be used to obtain recall data on the behavior of their parents when they lived at home. When a child is the respondent, each item can be asked about the mother and the father.

### *Self Only and Self and Partner Mode of Administration*

The CTS has usually been administered by asking parents to describe what they themselves have done (Self Only instructions). In two-parent households this omits actions of the other parent. Ideally both parents should complete the CTS, but this is often not possible. One alternative is to present the questions in pairs, one for the respondent's self-report and the other for the respondent to indicate the partner's behavior. However, this doubles the administration time, and also depends on the respondent being able to estimate how often the partner engaged in each of the behaviors in the CTSPC.

We conducted an experiment on a variation which could at least avoid most of the increased testing time. A random half of respondents received the Self Only instructions and the other half were asked to indicate what they *and* their partner have done (Self and Partner instructions). This experiment was limited to two-parent households and to the items in the Nonviolent Discipline, Psychological Aggression, Physical Assault, and Neglect scales. It should be noted that one would not expect the rates to double when there is data on both parents because parental behavior will be correlated but not mirror images of each other and because one parent will not know everything that the other has done. Nonetheless, we expected the rates to be higher when respondents were asked about the behavior of both parents. Contrary to the hypothesized increase in rates, there was a significant difference between the two groups only on the Neglect scale, and even that difference was not in the predicted direction: Respondents who described only their own behavior reported higher levels of neglect than those describing their own and their partner's behavior. We do not have an explanation for these findings and we plan a second experiment to examine the findings when the items are presented in pairs, one for respondent self-report and one for the respondent's report concerning the partner. In the meantime, we recommend the self-only mode of administration.

*Other uses.* The CTS1 items have also been used as coding categories for analysis of documents data such as police records (Claes & Rosenthal, 1990), orders of protection (Gondolf, McWilliams, Hart, & Stuehling, 1994), and psychiatric intake interviews (Gondolf, Mulvey, & Lidz, 1990), and the CTSPC might also be useful for this purpose.

### *Length and Testing Time*

The three core CTSPC scales are slightly longer than the CTS1 (22 compared to 19 items). If the 14 supplemental questions are added, it is almost double the length. Despite that, the administration time (10–15 minutes) is still brief enough to be practical in clinical settings or for inclusion in epidemiological surveys. If greater brevity is needed, the supplemental questions can be omitted, which makes the testing time about 6 to 8 minutes.

### *Referent Time Period and Referent Situation*

*Referent time period.* The standard instructions for the CTS ask what happened in the previous year. However, this can be modified to ask about other referent periods, for example since moving in with a new partner, since a previous stage of a treatment program, or the previous month or 6 months.

*Referent event or situation.* An alternate to a time period referent is a specific conflict or situation. It may be easier to recall what happened in relation to a specific conflict or situation than a time period. If so, it could produce more accurate information, but at the cost of losing information about other situations and therefore annual prevalence rates for violence. In clinical applications, however, period-prevalence rates are not usually of interest. A specific conflict referent might

provide information that could be discussed with the client to help develop appropriate modes of dealing with those situations. There are also some situations where the CTS can be administered with both types of referent. The referent for the initial testing might be for a time period such as the previous 12 months. When a particularly difficult situation or type of conflict has been identified in the course of working with the family, a subsequent testing might use the next occurrence of that situation as the referent.

### *Permission for Research Use of the CTSPC*

Permission to reproduce the CTSPC will be granted without charge to persons who agree to carry out and report psychometric analyses (such as reliability and factor analyses), or who agree to provide us with data to use for psychometric analysis. If data are provided, their use will be limited to psychometric analyses, and the right to use the data for substantive analyses will rest exclusively with the person or persons providing the data.

### *Scoring*

Scoring the CTSPC follows the principles described and explained in the manual for the CTSI (Straus, 1995) and in Straus and Gelles (1990b). Consequently, this section covers only the most basic aspects of scoring.

The CTS is scored by adding the midpoints for the response categories chosen by the participant. The midpoints are the same as the response category numbers for categories 0, 1, and 2. For category 3 (3–5 times) the midpoint is 4, for category 4 (6–10 times) it is 8, for category 5 (11–20 times) it is 15, and for category 6 (More than 20 times in the past year) we suggest using 25 as the midpoint.

*Treatment of response category 7.* Response category 7 ("Not in the past year, but it did happen before that") is used in two ways. (1) When scores for the previous year are desired (the usual use of the CTS), category 7 is scored as zero. (2) Category 7 can also be used to obtain a "relationship-prevalence" measure of physical assault, i.e., did an assault ever occur? Respondents who answer 1 through 7 are scored as 1 (yes).

*Prevalence and chronicity.* As explained earlier, when the CTS is used for research with any type of sample except cases known to be violent (such as parents in a treatment program), we recommend creating two variables for each Physical Assault scale and subscale: a prevalence variable and a chronicity variable. The prevalence variable is a 0–1 dichotomy, with a score of 1 assigned if one or more of the acts in the scale occurred. The chronicity variable is the number of times the acts in the scale occurred, among those who engaged in at least one of the acts in the scale. Use of the CTS with a person or group known to be violent does not require separate prevalence and chronicity variables because prevalence is already known.

### *Alternative Response Categories*

Users of the CTSI have sometimes replaced the 0 to 20+ response categories with categories such as never, sometimes, often, and frequently. The 0 to 20+ categories are preferable because of person-to-person and situation-to-situation differences in the numerical referent of words such as sometimes, often, and frequently; and because numerical categories permit estimates of the mean, median, or total number of physical assaults and injuries.

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## RÉSUMÉ

**Objectif:** Crier une version parent-enfant du Conflict Tactics Scale, la CTSPC.

**Méthode:** Descriptions des approches conceptuelles et méthodologiques utilisées et des données psychométriques pour un échantillon représentatif de 1000 enfants aux États-Unis.

**Résultats:** 1. Amélioration des échelles d'Aggression Psychologique et d'Attaque Physique. 2. Nouvelle échelle de Discipline non Violente, échelle supplémentaire de Négligence, et questions supplémentaires sur les méthodes de discipline et sur l'abus sexuel. 3. Taux de fiabilité de bas à moyen. 4. Preuves de validité discriminative.

**Conclusions:** Le CTSPC est plus à même de mesurer les mauvais traitements que le CTS original. Il est de courte durée (6 à 8 minutes pour les échelles majeures) et donc très pratique pour les recherches épidémiologiques sur les mauvais traitements ainsi que pour les évaluations cliniques. Les problèmes méthodologiques soulevés par les mesures d'auto-signalement par les parents en ce qui concerne les mauvais traitements sont discutés. Maarten Goedee

## RESUMEN

**Objetivo:** Crear una versión de las Escalas de Tácticas Conflictivas (Conflict Tactics Scales, CTSPC) de padres-a-hijos.

**Método:** Descripción de los enfoques conceptuales y metodológicos utilizados y los datos psicométricos de una muestra nacional representativa de 1,000 niños de USA.

**Resultados:** (1) Escalas de Agresión psicológica y Asalto Físico Mejoradas. (2) Nueva Escala de Disciplina No-Violenta, escala suplementaria de Negligencia, y preguntas suplementarias sobre métodos de disciplina y abuso sexual. (3) Rango de Confabilidad de bajo a moderado. (4) Evidencia de validez discriminatoria y de construcción.

**Conclusiones:** El CTSPC está mejor equipado que el CTS original, para evaluar el maltrato infantil. Es breve (6 a 8 minutos para las escalas centrales) y por lo tanto práctico, para la investigación epidemiológica sobre maltrato infantil y para la evaluación clínica.

## APPENDIX 1. PARENT-CHILD CONFLICT TACTICS SCALES, FORM A

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David Finkelhor, David W. Moore, and Desmond Runyan

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### ITEMS IN INTERSPERSED ORDER

Children often do things that are wrong, disobey, or make their parents angry. We would like to know what you have done when your [SAY age of referent child] year old child, did something wrong or made you upset or angry.

I am going to read a list of things you might have done in the past year and I would like you to tell me whether you have: done it once in the past year, done it twice in the past year, 3-5 times, 6-10 times, 11-20 times, or more than 20 times in the past year. If you haven't done it in the past year but have done it before that, I would like to know this, too.

1 = Once in the past year

2 = Twice in the past year

3 = 3-5 times in the past year

4 = 6-10 times in the past year

5 = 11-20 times in the past year

6 = More than 20 times in the past year

7 = Not in the past year, but it happened before

0 = This has never happened

- A. Explained why something was wrong
- B. Put him/her in "time out" (or sent to his/her room)
- C. Shook him/her
- D. Hit him/her on the bottom with something like a belt, hairbrush, a stick or some other hard object
- E. Gave him/her something else to do instead of what he/she was doing wrong
- F. Shouted, yelled, or screamed at him/her
- G. Hit him/her with a fist or kicked him/her hard
- H. Spanked him/her on the bottom with your bare hand
- I. Grabbed him/her around the neck and choked him/her
- J. Swore or cursed at him/her
- K. Beat him/her up, that is you hit him/her over and over as hard as you could
- L. Said you would send him/her away or kick him/her out of the house
- M. Burned or scalded him/her on purpose
- N. Threatened to spank or hit him/her but did not actually do it
- O. Hit him/her on some other part of the body besides the bottom with something like a belt, hairbrush, a stick or some other hard object
- P. Slapped him/her on the hand, arm, or leg
- Q. Took away privileges or grounded him/her
- R. Pinched him/her
- S. Threatened him/her with a knife or gun
- T. Threw or knocked him/her down
- U. Called him/her dumb or lazy or some other name like that
- V. Slapped him/her on the face or head or ears

## APPENDIX 2. CTS1 AND CTSPC ITEMS ARRANGED BY SCALE AND SUBSCALE

### CTSI

#### Reasoning

- A. Discussed an issue calmly with (child name)
- B. Got information to back up your side of things
- C. Brought in, or tried to bring in someone to help settle things

#### Psychological Aggression

- D. Insulted or swore at him/her
- E. Sulked or refused to talk about an issue
- F. Stomped out of the room or house or yard
- G. Cried (this item is not scored)
- H. Did or said something to spite him/her
- I. Threatened to hit or throw something at him/her
- J. Threw or smashed or hit or kicked something

#### Physical Assault

- A. Minor Assault (Corporal Punishment)
- K. Threw something at him/her
- L. Pushed, Grabbed, or shoved him/her
- M. Slapped or Spanked him/her

#### B. Severe Assault (Physical Maltreatment)

- N. Kicked, bit, or hit him/her with a fist
- O. Hit or tried to hit him/her with something.
- P. Beat him/her up
- Q. Burned or scalded him/her.
- R. Threatened him/her with a knife or gun.
- S. Used a knife or fired a gun.

### CTSPC

#### Non-violent Discipline

- A. Explained why something was wrong
- B. Put him/her in "time out" (or sent to his/her room)
- Q. Took away privileges or grounded him/her
- E. Gave him/her something else to do instead of what he/she was doing wrong

#### Psychological Aggression

- N. Threatened to spank or hit him/her but did not actually do it
- F. Shouted, yelled, or screamed at him/her
- J. Swore or cursed at him/her
- U. Called him/her dumb or lazy or some other name like that
- L. Said you would send him/her away or kick him/her out of the house

#### Physical Assault

- A. Minor Assault (Corporal Punishment)
- H. Spanked him/her on the bottom with your bare hand
- D. Hit him/her on the bottom with something like a belt, hairbrush, a stick or some other hard object
- P. Slapped him/her on the hand, arm, or leg
- R. Pinched him/her
- C. Shook him/her (this is scored for Very Severe if the child is <2 years)

#### B. Severe Assault (Physical Maltreatment)

- V. Slapped him/her on the face or head or ears
- O. Hit him/her on some other part of the body besides the bottom with something like a belt, hairbrush, a stick or some other hard object
- T. Threw or knocked him/her down
- G. Hit him/her with a fist or kicked him/her hard

#### C. Very Severe Assault (Extreme Physical Maltreatment)

- K. Beat him/her up, that is you hit him/her over and over as hard as you could
- I. Grabbed him/her around the neck and choked him/her
- M. Burned or scalded him/her on purpose
- S. Threatened him/her with a knife or gun

### APPENDIX 3. SUPPLEMENTAL QUESTIONS

#### Weekly Discipline (Recommended when corporal punishment is a focus)

Sometimes it's hard to remember what happened over an entire year, so we'd like to ask a few of these questions again, just about the last week. For each of these questions, tell me how many times they happened in the last week.

- 1 = Once in the last week
- 2 = Twice in the last week
- 3 = 3-5 times in the last week
- 4 = 6-10 times in the last week
- 5 = 11-20 times in the last week
- 6 = More than 20 times in the last week
- 0 = This has not happened in the last week

- WA. Put him/her in "time out" (or sent to his/her room)
- WB. Shouted, yelled, or screamed at him/her
- WC. Spanked him/her on the bottom with your bare hand
- WD. Slapped him/her on the hand, arm, or leg

#### Neglect

Sometimes things can get in the way of caring for your child the way you would like to: for example, money problems, personal problems, or having a lot to do. Please tell me how many times in the last year this has happened to you in trying to care for your child. Please tell me how many times you:

- 1 = Once in the past year
- 2 = Twice in the past year
- 3 = 3-5 times in the past year
- 4 = 6-10 times in the past year
- 5 = 11-20 times in the past year
- 6 = More than 20 times in the past year
- 7 = Not in the past year, but it happened before
- 0 = This has never happened

- NA. Had to leave your child home alone, even when you thought some adult should be with him/her
- NB. Were so caught up with your own problems that you were not able to show or tell your child that you loved him/her
- NC. Were not able to make sure your child got the food he/she needed
- ND. Were not able to make sure your child got to a doctor or hospital when he/she needed it
- NE. Were so drunk or high that you had a problem taking care of your child

#### Sexual Maltreatment

The questions on sexual maltreatment (questions SC and SD) are preceded by questions on sexual maltreatment of experienced by the parent (questions SA and SB). This was done on the assumption that it is somewhat less threatening to be asked about or reveal one's own victimization than it is to be questioned about sexual maltreatment of one's children. See Finkelhor et al (1996) or further information on the sexual maltreatment supplemental questions.

Now I would like to ask you something about your own experiences as a child that may be very sensitive. As you know, sometimes, in spite of efforts to protect them, children get sexually maltreated, molested, or touched in sexual ways that are wrong. To find out more about how often they occur, we would like to ask you about your own experiences when you were a child.

SA. Before the age of 18, were you personally ever touched in a sexual way by an adult or older child, when you did not want to be touched that way, or were you ever forced to touch an adult or older child in a sexual way -- including anyone who was a member of your family, or anyone outside your family? (If "Yes", ask: ) did it happen more than once?

- 0 = No, it did not happen
- 1 = Yes, it happened just once
- 2 = Yes, it happened more than once

SB. Before the age of 18, were you ever forced to have sex by an adult or older child -- including anyone who was a member of your family, or anyone outside your family? (If "Yes", ask: ) Did it happen more than once?

- 0 = No, it did not happen
- 1 = Yes, it happened just once
- 2 = Yes, it happened more than once

SC. What about the experience of your own child. As far as you know, IN THE PAST YEAR, has your child been touched in a sexual way by an adult or older child when your child did not want to be touched that way, or has (he/she) been forced to touch an adult or an older child in a sexual way -- including anyone who was a member of your family, or anyone outside your family? (If "Yes", ask: ) Has it happened more than once? (If "No", ask: ) Has it ever happened?

- 0 = No, it did not happen
- 1 = No, has not happened in the past year, but has happened
- 2 = Yes, it happened just once
- 3 = Yes, it happened more than once

SD. In the last year, has your child been forced to have sex by an adult or an older child -- including anyone who was a member of your family, or anyone outside your family? (If "Yes", ask: ) Has it happened more than once? (If "No", ask: ) Has it ever happened?

- 0 = No, it did not happen
- 1 = No, has not happened in the past year, but has happened
- 2 = Yes, it happened just once
- 3 = Yes, it happened more than once