

American Journal of Orthopsychiatry

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Online First Publication, December 30, 2024. <https://dx.doi.org/10.1037/ort0000816>

CITATION

Shaw, J., Greeson, M. R., Bailey, C., Harris, A. N., & Linden, J. (2024). The impact of mandatory reporting policies on adolescent sexual assault case progression in the criminal legal system. *American Journal of Orthopsychiatry*. Advance online publication. <https://dx.doi.org/10.1037/ort0000816>

The Impact of Mandatory Reporting Policies on Adolescent Sexual Assault Case Progression in the Criminal Legal System

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While little is known about adolescent sexual assault criminal case progression, available research suggests many cases are not referred to the prosecutor for the consideration of charges. Nuanced mandatory reporting laws that require such referrals have been implemented in some states to facilitate criminal case progression. We used medical and criminal legal system records to determine rates of adolescent sexual assault prosecution for 236 cases involving 12- to 19-year-old victims in one locale. Through a causal comparative design, we also assessed the impact of a specific mandatory reporting policy that requires referral of adolescent cases to the prosecutor on prosecution rates. Overall, 8% of cases in our sample resulted in a conviction. The mandatory reporting policy resulted in significantly more cases being referred to the prosecutor but did not result in more cases being charged or ending with a conviction. These findings align with prior research demonstrating that the criminal legal system continues to provide an inadequate response to sexual assault and suggest that this mandatory reporting policy model may not be a viable solution as it did not have its intended impact. It is important to examine the potential iatrogenic effects of such policies and explore alternative paths toward justice and accountability for victims and their communities.

Public Policy Relevance Statement

Some mandatory reporting policies require sexual assault cases involving minors to be referred to the prosecutor with a goal of facilitating criminal prosecution. This study suggests that such policies may not have their intended impact. These policies should be investigated further, and alternative paths toward justice, accountability, safety, and healing should be explored.

Adolescents are sexually assaulted at alarmingly high rates. National studies operating within the gender binary have found that 6%–11% of adolescent females have been raped, with 8% of 14- to 17-year-old girls reporting sexual victimization in the past year alone (Finkelhor et al., 2009; Kann et al., 2016).¹ Nationally representative studies with adults reveal that about one third of adults who have been raped, forced to penetrate, or experienced unwanted sexual contact first had this

experience when they were between 11 and 17 years old (Basile et al., 2022). Overall, the National Center for Juvenile Justice reports that adolescents are 2–2.5 times more likely to be sexually assaulted

¹ Though gender identities fall within, between, outside, and beyond the gender binary (Thorne et al., 2019), much of the research literature does not yet adequately account for such gender diversity in collecting and reporting rates of sexual violence.

Ryan P. Kilmer served as action editor.

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The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the authors(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women. This project was supported by Grant 2017-SI-AX-0001

(Jessica Shaw) awarded by the Office on Violence Against Women, U.S. Department of Justice.

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as compared to adults (Sickmund & Puzanchera, 2014; Snyder & Sickmund, 2006).

The criminal legal system is often presented to sexual assault victims as offering a path toward justice and accountability through the criminal prosecution of those who harmed them.² However, prior research has consistently documented that few sexual assault cases progress through the criminal legal system and result in a conviction (e.g., see Campbell et al., 2014; Hoffman et al., in press; Lonsway & Archambault, 2012; Morabito et al., 2019; Spohn & Tellis, 2012a; Valentine et al., 2016). The only prior study that specifically examined *adolescent* sexual assault case prosecution found that cases often drop out of the criminal legal system when police decide not to refer the case to the prosecutor for the consideration of charges (Campbell et al., 2012). This pattern in adolescent sexual assault case attrition suggests that if only more cases were presented to the prosecutor, more cases would be charged and move forward in the criminal legal system.

In some jurisdictions, mandatory reporting laws have been used as a mechanism to ensure adolescent sexual assault cases are presented to the prosecutor. Specifically, in the state in which the present study took place, mandatory reporting laws require that sexual assault cases that are reported to child protective services are also referred to police and the prosecutor so they may consider pursuing a criminal investigation and prosecution. If implemented as intended, such laws have the potential to increase rates of adolescent sexual assault case prosecution as they ensure these cases are presented to the prosecutor for the consideration of charges. However, there is a dearth of literature on the impact of mandatory reporting policies in general, and no prior research on how mandatory reporting policies that include notification of police and the prosecutor may affect the criminal prosecution of adolescent sexual assault (Bailey et al., 2023). The purpose of this study was to examine the impact of this mandatory reporting policy model on adolescent sexual assault case progression in the criminal legal system. This study contributes significantly to the existing literature and our understanding of adolescent sexual assault case prosecution rates. This is the second study to focus exclusively on adolescent sexual assault case prosecution (see Campbell et al., 2012). This study also provides key insight into the potential of mandatory reporting policies to facilitate the prosecution of adolescent sexual assault cases in the criminal legal system and whether jurisdictions should consider or continue including police and prosecutor notification as part of their mandatory reporting laws.

Adolescent Sexual Assault and Criminal Case Prosecution

The criminal legal system is presented as a means toward justice and accountability for sexual assault victims. Victims are often encouraged to report their assault to police so the case may be criminally investigated and prosecuted. However, prior research has consistently documented a “funnel of attrition” within the criminal legal system, as most sexual assault cases that are reported to police do not result in a conviction (Lonsway & Archambault, 2012, p. 157). A successful case typically progresses from an initial report to police investigation and then is referred to the prosecutor, who files charges and prosecutes the case to a guilty plea or conviction. But most often, cases fall out of the system somewhere along the way. Studies on sexual assault criminal case prosecution have been conducted in a variety of urban, rural, and mid-sized communities

across the country (Campbell et al., 2014; Morabito et al., 2019; Spohn & Tellis, 2012b; Valentine et al., 2016). This body of research has typically found that less than one-quarter of reported sexual assault cases are charged and less than one-in-seven result in a conviction. A recent systematic review by Hoffman et al. (in press) found a weighted average conviction rate of just 9%.

Despite the high rates of sexual assault targeting adolescents, the body of work documenting low rates of sexual assault criminal case progression in the criminal legal system has largely focused on adult sexual assault cases. When adolescents are included in studies of sexual assault case attrition, they tend to be aggregated with adult cases (e.g., see Kaiser et al., 2017; O’Neal, 2015; Spohn & Tellis, 2019) and not examined as a unique group (Hoffman et al., in press). Indeed, only one study to date has examined rates of criminal prosecution for adolescent sexual assault cases, specifically. Campbell et al. (2012) examined case outcomes for 392 sexual assault cases that involved 13- to 17-year-old victims in one rural and one mid-sized county in one Midwestern state. Compared to cases involving adults, Campbell et al. (2012) found a markedly higher rate of prosecution and conviction: Nearly half of the cases (48.7%) were initially charged, and 40% resulted in a conviction. However, it is unknown if the relatively higher rates can be generalized to all adolescent sexual assault cases. As Campbell and colleagues pointed out, “these data are regional, not national, and therefore should not be interpreted to reflect the current state of adolescent sexual assault prosecution in the United States” (Campbell et al., 2012, p. 150). More specifically, Campbell and colleagues’ sample consisted of cases in which a sexual assault nurse examiner (SANE) provided the postassault medical forensic response. SANEs are specially trained to provide comprehensive postassault medical forensic care and have been found to improve prosecution rates (Campbell et al., 2014). Campbell et al.’s sample was also drawn from communities with well-defined coordinated community responses and relatively high rates of sexual assault case convictions overall.

A second study conducted by Meeker et al. (2021) suggests that the prosecution rates documented by Campbell et al. may indeed be higher than what we would expect to see in most communities. Meeker et al. (2021) examined rates of arrest and initial charging for cases that involved 12- to 17-year-old female victims in which a suspect had been initially identified. While this study did not report the final adjudication status for these cases, the researchers found that only 27.3% of the cases in the sample were initially charged—a rate much more similar to what has been found in adult samples (Campbell et al., 2014; Morabito et al., 2019; Spohn & Tellis, 2012b; Valentine et al., 2016). Indeed, prior research on sexual assault characteristics has found that adolescent sexual assault cases are often more similar to adult sexual cases than those involving younger victims (Cross & Schmitt, 2019); thus, we might expect similar rates of prosecution among adolescents and adults.

Regardless of whether adolescent sexual assault prosecution rates are similar to those documented among adults (Lonsway & Archambault, 2012) or are relatively higher as found in one prior study (Campbell et al., 2012), they may still be lower than what

² Multiple terms are used to refer to someone who has been sexually assaulted. We recognize that people who have been sexually assaulted are both victims of a crime and more than their victimization. They have strengths and agency and are living through recovering from this experience. Because this article focuses on the criminal legal system response, a system in which such individuals are seen and referred to as crime victims, this article uses the term “victim.”

victims and their communities expect. Even if 40% of adolescent sexual assault cases result in a conviction, the majority—60%—do not. Prior research has highlighted that many cases do not result in a conviction because the prosecutors never get to see many sexual assault cases to consider them for charging (e.g., see Alderden & Ullman, 2012; Shaw et al., 2016). For example, in examining adult sexual assault case prosecution in Salt Lake City, Valentine et al. (2016) found that only one third of cases in which the victim chose to seek postassault medical care and report to police were referred to the prosecutor for the consideration of charges. This is consistent with broader national trends. In a recent systematic review, Hoffman et al. (in press) found a weighted referral rate of 29.3% for studies with combined samples of adolescent and adult cases.

In the only study to examine the progression of adolescent sexual assault cases in the criminal legal system, Campbell et al. (2012) found a higher rate of referral. However, mirroring trends in the adult literature, the transition from police to the prosecutor via a referral was still the step in the process at which there was the highest rate of case attrition. Over one third (34.4%) of cases in which the adolescent victim chose to seek postassault medical care and report to police were not referred to the prosecutor. While not all referred cases will result in a conviction, a referral to the prosecutor is a necessary step for the case to move forward in the criminal legal system. Thus, policy interventions that ensure sexual assault cases that are reported to police are also referred to the prosecutor could result in higher sexual assault case prosecution and conviction rates.

Mandatory Reporting Policies and Criminal Case Prosecution

Child abuse mandatory reporting laws (hereinafter, “mandatory reporting laws”) provide a potential mechanism to prevent police from unilaterally deciding whether a case is worth pursuing by embedding into the policy a requirement that prosecutors also be notified. Across all 50 states in the United States, state mandatory reporting laws require certain individuals to report suspected child abuse and neglect to child protection agencies (Bailey et al., 2023). Child protection agencies are then tasked with determining what, if any, response is needed to ensure the safety of the child. For purposes of reporting, most states define a “child” as anyone under the age of 18 years old. However, there is a high degree of variability across states in terms of which specific individuals are mandatory reporters, the specific situations that require a report, and the specific entities that receive and are tasked with responding to the report (see Bailey et al., 2023, for a comprehensive review). Accordingly, there is significant variation in how these laws are applied to adolescent sexual assault cases and anticipated variation in their potential to impact criminal prosecution.

In some states, mandatory reporting laws require that most adolescent sexual assault cases are reported by mandatory reporters, as the legally defining feature of “sexual abuse” is primarily the age of the victim (e.g., see Arkansas Child Maltreatment Act §§ 12-18-103). In other states, only select incidents of adolescent sexual assault require a report, as state statutes specify additional criteria that must be met for child protective services to accept a report for investigation. These additional criteria often relate to the relationship between the “victim” and “alleged perpetrator,” such that the “alleged perpetrator” must be a family member, caregiver, or person

in a position of trust or authority (e.g., see Illinois Abused and Neglected Child Reporting Act 325 Illinois Compiled Statutes 5). In other states still, mandatory reporting laws do not readily provide legal definitions for “abuse” (e.g., see Massachusetts General Law c.119, § 51A). This likely contributes to intrastate, interorganizational, and interindividual variation in how mandatory reporting laws are applied to adolescent sexual assault cases; organizations must supplement state law by providing guidance for their employees, or individual mandatory reporters must decide for themselves what incidents or situations warrant a report (see Bailey et al., 2023).

In addition to variation in whether mandatory reporting laws mandate some or all cases of adolescent sexual assault to be reported to child protective services, there is also variation in the mandatory notification of criminal legal system entities. In some states, mandatory reporters must report a qualifying incident of “sexual abuse” to both child protective services *and* law enforcement (e.g., see Alaska Child Protection Statute Chapter 47.17). In other states, mandatory reporters must report a qualifying incident to child protective services *or* local law enforcement, as both entities are legally required to receive reports of child abuse (e.g., see California Child Abuse and Neglect Reporting Act Penal Code §§ 11164-11174.3). In other states still, a report to law enforcement may be made in lieu of child protective services taking a report. For example, if a mandatory reporter contacts child protective services to make a report, but the incident does not meet child protective services’ criteria to take the report, they may be required to report the case to law enforcement (e.g., see Illinois Abused and Neglected Child Reporting Act 325 Illinois Compiled Statutes 5). Additionally, extending beyond law enforcement, some states’ mandatory reporting policies include the prosecutor in the response by allowing mandatory reporters to make their initial report to the county prosecutor’s office (e.g., see South Dakota §§ 26-8A-8) or by legally requiring all incidents of “sexual assault” that are reported to child protective services to also be referred to local police and the prosecutor (e.g., see Massachusetts General Law c. 119, § 51A-B).

When police and prosecutors are included in mandatory reporting policies, it is often with the explicit intention of coordinating responses across agencies and facilitating criminal prosecution. Indeed, if most sexual assault cases reported to police are not prosecuted because police never refer them for prosecution, including notification of the prosecutor as a legally required and standard component of mandatory reporting has the potential to increase prosecution rates. However, there is a dearth of literature on the impact of mandatory reporting policies in general, and no prior research on how mandatory reporting policies that include notification of both the police and the prosecutor may affect the criminal prosecution of adolescent sexual assault. Given the high rates of adolescent sexual assault and low rates of sexual assault case prosecution, it is important to evaluate if this particular mandatory reporting policy—that is, the notification of police and prosecution as part of the legally required mandatory reporting response—is having its intended impact. Such efforts can provide insight into whether this variation of mandatory reporting policies is worthwhile or if other alternatives should be explored. This study is one such evaluation.

The Present Study

Adolescents are sexually assaulted at alarmingly high rates, yet research on sexual assault criminal case attrition has largely failed

to examine adolescent cases specifically (Bailey et al., 2024). The present study seeks to better understand sexual assault criminal case progression in this population by examining prosecution rates for sexually assaulted adolescents who received a medical forensic exam in one municipal jurisdiction in the Northeastern region of the United States. Adolescents are a unique developmental group with distinct experiences and system encounters (Bailey et al., 2023, 2024; Greeson et al., 2016). Accordingly, it is important to examine their criminal case outcomes separate from older and younger victims. Additionally, Campbell et al.'s (2012) study was carried out in the Midwest. This study takes place in a different region of the country that is generally understudied in sexual assault criminal case attrition literature (Hoffman et al., in press).

Research also suggests that most sexual assault cases are not prosecuted or convicted, with the largest source of attrition at the point of police referral to the prosecutor (Alderden & Ullman, 2012; Campbell et al., 2012; Hoffman et al., in press; Shaw et al., 2016; Valentine et al., 2016). Although mandatory reporting policies for adolescent sexual assault cases vary, one model requires reporting of cases to the police and prosecutor. If implemented as intended, this policy would enable cases to bypass this high point of attrition in the criminal legal process by requiring all cases to be referred to the prosecutor rather than relying on police discretion. If more cases reach the prosecutor, such mandatory reporting policies may ultimately lead to more cases resulting in charges and convictions. However, this has yet to be studied. To assess the impact of this policy model on prosecution rates, we use a causal comparative design to compare prosecutorial case progress through the criminal legal system for adolescent sexual assault cases based on mandatory reporting status. Causal comparative designs are frequently used to examine differences between preexisting or derived groups when the independent variable of interest is the defining feature between the groups and is not amenable to manipulation (Schenker & Rumrill, 2004). Causal comparative designs allow us to better study potential cause and effect relationships retrospectively by employing statistical controls to reduce spuriousness and strengthen support for a cause-effect relationship, should one exist, between the independent and dependent variables of interest (Johnson, 2001). In this case, our independent variable of interest is mandatory reporting status. This variable cannot be manipulated as it is based on the age of the victim. By including control variables in our model that have been previously found to relate to victim age or the criminal legal system response to sexual assault, we can better assess the potential for a cause-effect relationship between mandatory reporting status and case outcomes, should a relationship exist (see Table 1 for list of variables and inclusion rationale).

Accordingly, the purpose of this study was twofold: (a) document adolescent sexual assault criminal case outcomes in one jurisdiction and (b) examine the impact of a unique mandatory reporting policy model on case progression. This study was part of a larger mixed methods project examining the impact of this mandatory reporting response on adolescents' postassault decisions, experiences, and case outcomes (Shaw et al., 2022). This study contributes significantly to our understanding of adolescent sexual assault criminal case progression and the potential of mandatory reporting policies to facilitate the criminal prosecution of adolescent sexual assault cases.

Method

The Sample

We sampled adolescent sexual assault cases in which a SANE provided care at an urban hospital in the focal Northeastern state. We selected for inclusion adolescent sexual cases that met four specific criteria. First, the victim was 12–19 years old at the time of the assault. At 12 years old, victims in the focal state can consent to SANE services without a parent or guardian. The SANE program's policy, as informed by state legislation, requires that the SANE completes a mandatory report to state child protective services for all cases involving victims under the age of 18 years old who report they have been sexually assaulted. Inclusion of all victims, 12–19 years old, allows comparisons to be made across cases in which all victims can independently consent to postassault SANE services and in which there is variation regarding mandatory reporting status. In the middle of this age range, at 16 years old, individuals in the focal state gain the legal ability to consent to sex. While mandatory reporting policies in the focal state still apply, cases involving victims at or over the age of 16 years old may be perceived and handled differently by responders, particularly the prosecutor in their charging decisions. Thus, inclusion of victims across this age range also allows for comparisons to be made based on the victim's legal ability to consent to sex and the case's mandatory reporting status.

Second, the assault occurred within the selected police department's and prosecutor's jurisdiction. While the mandatory reporting policy under investigation was implemented statewide, it can be expected that there is some variation in its implementation and how sexual assault cases are handled more broadly by different police departments and prosecutors (e.g., see Shaw et al., 2020). By limiting cases to those that occurred in a single jurisdiction, this study ensures the same policies and practices are being applied relatively uniformly, thus limiting unnecessary variation and allowing for a focus on the relationship of interest (i.e., mandatory reporting status and case progression).

Third, the victim consented to a medical forensic exam by a SANE at one hospital within the focal jurisdiction. We were evaluating the mandatory reporting response, as initiated by SANE. Accordingly, the victim associated with the selected cases had to have been treated by a SANE. The victim also had to consent to a medical forensic exam complete with the collection of a sexual assault evidence collection kit, as we used the forms completed in the kit to collect our data. These inclusion criteria also prevented additional unnecessary variation from being introduced into the sample (e.g., whether a sexual assault kit was collected) and allowed for a focus on the focal relationship of interest (i.e., mandatory reporting status and criminal case progression). We worked with one hospital, as gaining access to the required hospital records is a complex process involving many players. We partnered with a single urban safety net hospital in the focal jurisdiction (see McNeill et al., 2023). This hospital serves approximately 130,000 patients in the emergency department each year. Most of this diverse patient population is Medicaid insured.

Fourth, the exam occurred between January 1, 2005, and December 31, 2017. We were able to systematically access the necessary electronic and article medical records at the focal hospital dating back to January 1, 2005. We included exams that were

Table 1*Independent Variables, Coding Schemes, and Rationale for Inclusion in Causal Comparative Design*

Variable	Coding	Rationale
Mandatory reporting age group	Nominal dummy 12- to 15-year-old victims 16- to 17-year-old victims 18- to 19-year-old victims	Focal independent variable with 16- to 17-year-old victims as reference group. Categories and reference group allow for comparisons based on victims' legal ability to consent to sex and case's mandatory reporting status.
Victim gender	Binary Female Male	Control variable. Documentation used checkboxes to indicate victim gender. Sexual assault is a gendered crime, and victim gender may influence case progression. ^a
Victim race	Binary Not Black Black	Control variable. Documentation used checkboxes to indicate victim race, including an "other" option. Race was collapsed for analysis given sample composition and to center Black victims. Victim race has been found to influence case progression. ^b
Victim–perpetrator relationship	Nominal dummy Family member Nonfamilial known Stranger	Control variable with family member as reference group. Documentation used a matrix to indicate victim–perpetrator relationship. Cases with multiple perpetrators were categorized based on the most intimate relationship, with stranger the least and familial the most intimate. This variable has been found to influence case progression and vary based on victim age. ^c
Number of types of penetration	Count	Control variable. Documentation used checkboxes to indicate whether there was oral, vaginal, and anal penetration. These were summed to create a count variable (0–3). Number of types of penetration have been found to influence case progression. ^d
Number of anogenital and nonanogenital injuries	Count	Control variable. Documentation recorded the locations and the types of injuries using body diagrams. Injuries have been found to influence case progression and vary based on victim age. ^e
Number of days between assault and exam	Count	Control variable. Documentation noted the dates of exam and assault. This count variable indicated if the exam was conducted on the same day as the assault, 1 day later, 2 days later, or three or more days later. The time between the assault and exam has been found to influence case progression and vary based on victim age. ^f
Multiple perpetrators	Binary Not indicated Indicated	Control variable. Documentation recorded the total number of perpetrators. "Not indicated" included cases that documented there was a single perpetrator, the number of perpetrators was unknown, or in which this information was missing. The number of perpetrators has been found to influence case progression. ^g
Police report filed at time of exam	Binary Not indicated Indicated	Control. Documentation used checkboxes to indicate whether a report was made to police prior to or at the time of the exam. "Not indicated" included cases that documented a report had not yet been filed or this information was missing. A prompt report to police has been found to influence case progression and vary based on victim age. ^h
Physical force	Binary Not indicated Indicated	Control variable. Documentation used checkboxes and a write-in space to indicate whether specific tactics were used by the perpetrator. This variable included the use of strangulation, biting, hitting, and holding down or using body weight to restrain. The use of these tactics has been found to influence case progression and vary based on victim age. ⁱ
Verbal threats	Binary Not indicated Indicated	Control variable. Documentation used checkboxes and a write-in space to indicate whether specific tactics were used by the perpetrator. This variable included the use of verbal threats. The use of these tactics has been found to influence case progression and vary based on victim age. ^j
Weapon	Binary Not indicated Indicated	Control variable. Documentation used checkboxes and a write-in space to indicate whether specific tactics were used by the perpetrator. This variable included guns, knives, blunt objects, restraints, chemicals to cause chemical burns, and any items other than the perpetrator's body or ingested substances. The use of these tactics has been found to influence case progression and vary based on victim age. ^k
Victim substance use	Binary Not indicated Indicated	Control variable. Documentation used checkboxes and a write-in space to indicate whether specific tactics were used by the perpetrator. This variable included the victim orally, nasally, or intravenously ingesting alcohol, drugs, or other substances, knowingly or not. The use of these tactics has been found to influence case progression and vary based on victim age. ^l

^a Basile et al. (2022). ^b Shaw and Lee (2019). ^c Bailey et al. (2024); Campbell et al. (2009); Morabito et al. (2019). ^d Campbell et al. (2009, 2012); Shaw and Campbell (2013). ^e Alderden and Ullman (2012); Bailey et al. (2024); Beichner and Spohn (2012); Campbell et al. (2009); Wentz (2019). ^f Bailey et al. (2024); Campbell et al. (2009); Wentz (2019). ^g Lafree (1981); Shaw and Campbell (2013); Terranova et al. (2021). ^h Bailey et al. (2024); Lafree (1981); Spohn and Tellis (2019). ⁱ Bailey et al. (2024); Campbell et al. (2009); Beichner and Spohn (2005, 2012); Kerstetter (1990); Morabito et al. (2019); Wentz (2019).

completed up to and including December 31, 2017, as sexual assault cases can take 2–3 years to reach adjudication in the criminal legal system. This timeline allowed us to collect final case dispositions on the included cases prior to the planned end of our grant-funded project in October 2019.

Data Collection

Medical Records. Eligible cases were identified by chart review of patients with the diagnosis of reported sexual assault. This yielded an initial sample of $N = 237$. We coded the medical records for the independent variables (see Table 1 for list of variables and inclusion rationale and Table 2 for sample descriptives). Thirty percent of the cases ($n = 76$) were double-coded to monitor interrater agreement and identify when additional training or codebook clarification was needed, with a final interrater percent agreement of 0.98. All aspects of this study, including chart review, were approved by the Boston College Institutional Review Board (IRB).³ The partnering hospital's IRB also reviewed our procedures, determined they were not engaged in research, and provided a Health Insurance Portability and Accountability Act waiver allowing access to the necessary records to carry out this research.

Prosecution Records. We used victim names to search for and record criminal case outcomes (i.e., the dependent variable) at the prosecutor's office. This involved searching several internal electronic databases, internal article records, electronic public records, and requesting and viewing article criminal dockets at area courthouses. For each case we were able to link to criminal legal system records based on the victim's name, we confirmed we had the correct record by verifying the victim's birthdate and assault date(s). Because the prosecution record searches required many steps and the review of many data sources, all $N = 237$ cases were team-coded, with at least two team members working together to review the records and ensure information was recorded accurately. Cases were coded as active, referred to the prosecutor but not charged, charged but later dismissed (including cases where the perpetrator was only convicted of a nonsex crime via trial or plea bargain), plea bargain (pled guilty to a sex crime), conviction at trial of a sex crime, acquittal at trial, or no record at the prosecutor's office (i.e., not referred). One case was coded as active, as it was still moving through the criminal legal system. This case was not included in the analysis, resulting in a final sample size of $N = 236$. See Table 1 for coding of the independent and control variables.

Data Analysis

To examine the influence of mandatory reporting on case progression through the criminal legal system, case outcomes for all nonactive cases ($n = 236$) were recoded into an ordinal variable as 1 = not referred to the prosecutor, 2 = referred to the prosecutor but not charged with a sex crime, 3 = charged with a sex crime, but not convicted (includes dismissed cases and cases that were acquitted at trial), and 4 = charged and convicted (includes plea bargains and convictions at trial). Descriptive and bivariate analyses were conducted in SPSS.

An ordinal regression was conducted to examine the relationship between mandatory reporting age group and ordinal case outcomes.

Ordinal regression requires that the assumption of proportional odds is met (Hosmer et al., 2013). This assumption requires that the effects of the independent variable are constant between different levels of the dependent variable. In our study, this would mean that the focal independent variable (age group) would have the same effect (i.e., coefficient) at different levels of the dependent variable (case progression). In other words, age's impact on moving from the "not referred" to the "referred" category would be the same as its impact on moving from the "referred but not charged" to the "charged but dismissed" category, and so forth. However, the assumption was not met for one of the focal independent variables (dummy code for age = 18- to 19-year-old victims; $\chi^2 = 16.30$, $df = 2$, $p < .001$), suggesting age had different effects at different phases of the criminal legal system. This also meant that ordinal regression was no longer an appropriate approach.

Therefore, we revised our analytic approach to separately examine (a) the effects of mandatory reporting age group on referrals for all cases and (b) for referred cases that reached the prosecutor, the effects of mandatory reporting age group on prosecutorial outcomes. A logistic regression examined the effect of mandatory reporting age group on referral to the prosecutor for all nonactive cases ($n = 236$). Then, an ordinal regression was conducted to examine the effect of mandatory reporting age group on prosecutorial outcomes for the $N = 183$ cases that were referred to the prosecutor. Case outcomes were coded as 1 = not charged, 2 = charged but not convicted, and 3 = charged and convicted. Logistic regression and ordinal regression analyses were conducted in MPLUS Version 8.4 using maximum likelihood estimation. Missing data were addressed in the regressions via Monte Carlo simulation. Rather than assuming missing data are completely random and dropping cases with missing data, this package in MPLUS uses all cases in the model to estimate the model parameters. It provides the best estimates for the model on the basis of the relationships within the observed data, as well as patterns of missingness. We then retested the models with everything the same, except we replaced Monte Carlo methods for dealing with missing data with pairwise deletion (i.e., dropping cases with missing data on a given parameter estimate). Then, we examined which results were statistically significant in the Monte Carlo model versus the pairwise deletion model. The purpose of this was to evaluate if our conclusions were dependent on the way that we modeled missing data or if they were consistent regardless of how missing data were treated.

Results

Case Outcomes

Table 3 presents case outcomes for the full sample as well as for each age group. In Figure 1, we provide a set of charts that illustrate case progression for the full sample and each age category, starting with 100 cases in each chart. Bivariate analyses showed that mandatory reporting age group was associated with case referral, such that cases in the older age groups were less likely to be referred than cases in the younger age groups (descriptively, 18- to 19-year-old victims had the lowest rates, followed by 16- to 17-year-old

³ The first author and principal investigator (PI) of this project initiated it while affiliated with Boston College. The first author/PI then moved to their current institution, where this project was completed. The PI's current institution ceded review and oversight of this project to the Boston College IRB.

Table 2
Sample Descriptives

Variable (No. of cases missing this information)	<i>n</i> (valid %)
Age group (0 missing)	
12- to 15-year-old victims	68 (28.8)
16- to 17-year-old victims	97 (41.4)
18- to 19-year-old victims	71 (31.1)
Gender (one missing)	
Cisgender female	222 (94.5)
Cisgender male	13 (5.5)
Race (six missing)	
Black	150 (65.2)
Hispanic/Latino	38 (16.5)
White	20 (8.7)
Asian	4 (1.7)
Black and Hispanic/Latino	4 (1.7)
Black and White	3 (1.3)
Hispanic/Latino and American Indian/Alaska Native	1 (0.4)
"Other"	10 (4.3)
Victim–perpetrator relationship (16 missing)	
Known nonfamilial	115 (52.3)
Stranger	78 (35.5)
Family member	27 (12.3)
Number of acts of penetration (0 missing)	
No penetrative acts	35 (14.8)
One type of penetration	117 (49.6)
Two types of penetration	62 (26.3)
Three types of penetration	22 (9.3)
Number of days between assault and exam (three missing)	
Same day	92 (39.5)
1 day	89 (38.2)
2 days	28 (12.0)
Three or more days	24 (10.3)
Multiple perpetrators (0 missing)	
Not indicated	174 (73.7)
Indicated	62 (26.3)
Police report filed at time of exam (0 missing)	
Not indicated	49 (20.8)
Indicated	187 (79.2)
Physical force (0 missing)	
Not indicated	82 (34.7)
Indicated	154 (65.3)
Verbal threats (0 missing)	
Not indicated	161 (68.2)
Indicated	75 (31.8)
Weapon (0 missing)	
Not indicated	198 (83.9)
Indicated	38 (16.1)
Victim substance use (0 missing)	
Not indicated	177 (75.0)
Indicated	59 (25.0)

Note. For analysis, race was collapsed into Black ($n = 157$; 68.3%) and not Black ($n = 73$; 31.7%); on average, victims sustained $M = 0.59$ anogenital injuries ($SD = 0.94$) and $M = 0.91$ nonanogenital injuries ($SD = 1.95$); on average, there were $M = 0.93$ days between the assault and exam ($SD = 0.96$).

victims, followed by 12- to 15-year-old victims; $\chi^2 = 92.61$, $df = 2$, $p < .001$). See Table 4. Similarly, bivariate analyses of cases that were referred to the prosecutor showed that mandatory reporting age group was associated with final case outcomes. Descriptively, referred cases involving 12- to 15-year-old victims tended to progress the farthest, referred cases involving 16- to 17-year-old victims were the least likely to result in charges, and referred cases involving 18- to 19-year-old victims were the least likely to be convicted when charged ($\chi^2 = 9.61$, $df = 4$, $p = .048$). See Table 5.

Effects of Mandatory Reporting Age Group on Referrals

A logistic regression was conducted to examine the effect of mandatory reporting age group on referral to the prosecutor (see Table 6). Of the 236 active cases, 183 (77.5%) were referred to the prosecutor. After controlling for victim and case characteristics, mandatory reporting age group was associated with referral for prosecution. Specifically, cases involving 18- to 19-year-old victims had lower odds of referral than cases involving 16- to 17-year-old victims (OR 95% CI [0.010, 0.119]).⁴ Both 16- to 17-year-old victims and 18- to 19-year-old victims are over the age of consent, but 16- to 17-year-old victims fall under the umbrella of mandatory reporting. This suggests that mandatory reporting may increase referrals to the prosecutor. However, no statistically significant difference was found between 16–17 and 12- to 15-year-old victims (OR 95% CI [0.677, 25.999]), indicating similar rates of referral, despite 16- to 17-year-old victims being over the age of consent and 12- to 15-year-old victims being unable to consent to sexual activity. Results were replicated in a model that used pairwise deletion instead of Monte Carlo simulation to address missing data. Patterns of statistical significance for both the focal independent variables (mandatory age reporting groups) and control variables were the same, indicating the treatment of missing data did not affect the results.

Effects of Mandatory Reporting Age Group on Referred Cases' Outcomes

Of the 183 cases that were referred to the prosecutor, 130 (71.0%) were not charged, 33 (18.0%) were charged but did not result in a conviction, and 20 (10.9%) were charged and resulted in a conviction. An ordinal regression was conducted to examine the effect of mandatory reporting age group on prosecutorial outcomes of cases that were referred to the prosecutor (1 = not charged, 2 = charged but no conviction, 3 = charged and convicted). The overall model violated the assumption of proportional odds ($\chi^2 = 31.135$, $df = 9$, $p < .001$). This was likely driven by the fact that the effect of two of the control variables on the dependent variable also violated the assumption of proportional odds (i.e., whether a police report was made at the time of the exam and number of acts of penetration). Therefore, these variables were dropped from the model. The revised model met the assumption of proportional odds ($\chi^2 = 11.604$, $df = 7$, $p = .114$).

After controlling for the effects of victim and case characteristics, mandatory reporting age group was not associated with final case outcomes (see Table 7). Referred cases involving 16- to 17-year-old victims had similar prosecutorial outcomes when compared to referred cases involving 12- to 15-year-old victims (OR 95% CI [0.558, 3.129]) and referred cases involving 18- to 19-year-old victims (OR 95% CI [0.493, 4.132]). The model was replicated without Monte Carlo simulation. The patterns of statistical significance held for the focal independent variables (mandatory reporting age groups) and all control variables with two exceptions. The number of days between the assault and the exam and multiple perpetrators were no longer statistically significant when missing data were dropped instead of addressed statistically. This suggests

⁴ Estimation of logits and odds ratios is distinct in logistic regression and ordinal regression in MPLUS. For consistency, we are presenting statistics from one source. We have therefore provided odds ratios and not regression coefficients.

Table 3*Case Outcomes for Adolescent Sexual Assault Cases Involving 12- to 19-Year-Old Victims*

Outcome	12- to 15-year-old victims	16- to 17-year-old victims	18- to 19-year-old victims	Total sample
Not referred	2 (2.1%)	7 (10.3%)	44 (62.0%)	53 (22.5%)
Referred, but not charged	66 (68.1%)	61 (89.7%)	27 (38.0%)	130 (55.1%)
Charged, but later dismissed	14 (14.4%)	9 (13.2%)	9 (12.7%)	32 (13.6%)
Acquitted at trial	0 (0.0%)	1 (1.5%)	0 (0%)	1 (0.4%)
Pled guilty	14 (14.4%)	2 (2.9%)	1 (1.4%)	17 (7.2%)
Convicted at trial	1 (1.0%)	1 (1.5%)	1 (1.4%)	3 (1.3%)
Total	97 (100%)	68 (100%)	71 (100%)	236 (100%)

data were not missing at random, and simulation of missing data contributes to better modeling. Regardless, estimation of missing data did not affect the findings with respect to the focal independent variable: mandatory reporting age group.

Discussion

Despite the high rates of sexual assault targeting adolescents, little is known about adolescent sexual assault criminal case prosecution. Only one prior study has examined adolescent sexual assault criminal case outcomes, and there are no known studies to date that have assessed the impact of mandatory reporting policies intended to promote adolescent sexual assault criminal case progression (Bailey et al., 2023; Campbell et al., 2012). The present study contributes significantly to the existing literature by reporting rates of adolescent sexual assault prosecution in a new jurisdiction in the Northeastern United States. We found high rates of attrition in this sample of adolescent sexual assault cases. The present study also provides insight into the potential role of mandatory reporting policies in promoting such prosecution by evaluating the impact of one specific mandatory reporting policy model on adolescent sexual assault criminal case progression. We found that this mandatory reporting policy—requiring a referral to police and prosecution—increased referral rates but did not ultimately lead to higher conviction rates, suggesting the policy is not having its intended impact.

Prosecution Rates

This study found that only 8% of adolescent sexual assault cases resulted in conviction. This both reinforces prior literature suggesting that case attrition is high in adolescent sexual assault cases (Campbell et al., 2012), while at the same time suggesting attrition for these cases may be higher than previously thought. The only existing study to examine adolescent sexual assault criminal case outcomes separately from older and younger victims reported a conviction rate of 40% (Campbell et al., 2012). We found much lower conviction rates in the present study: 15% for cases involving 12- to 15-year-old victims, 4% for cases involving 16- to 17-year-old victims, 3% for 18- to 19-year-old victims, and 8% for our overall sample. In comparing our findings to this prior study, it is important to note that differences in inclusion criteria may account for some of the difference in conviction rates. First, the Campbell et al. study's sample included cases that involved 13- to 17-year-old victims, while the present study captured a wider age range, including victims between the ages of 12 and 19 years old. If we limit our sample to only include 13- to 17-year-old victims, we still find a much lower conviction rate of 9% (13 convictions/145 cases involving 13- to 17-year-old victims). The study samples also differ in that Campbell and colleagues only included cases in which the victim had reported to police. Our sample does not have an inclusion criterion that the case was reported to police by the victim, as the mandatory reporting policy required all cases involving 12- to 17-year-olds to be referred to police. This difference is important because victims who

Figure 1
Combined Case Progression by Age Group Starting With 100 Cases

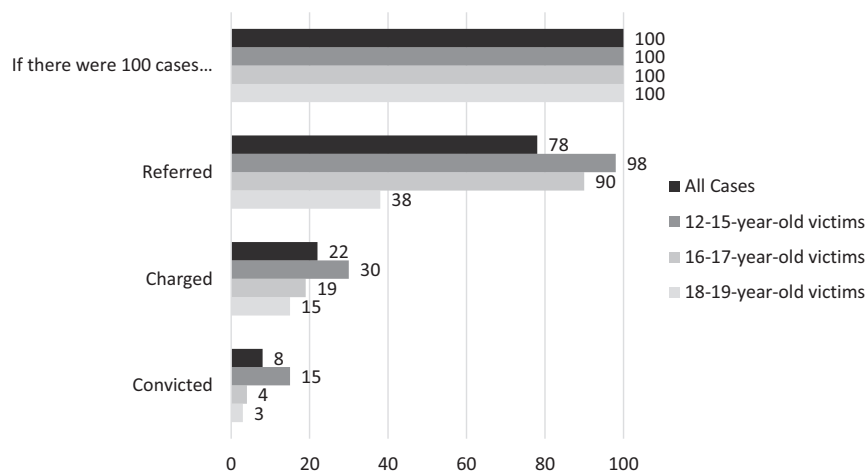


Table 4
Referral to the Prosecutor by Mandatory Reporting Age Group

Outcome	12- to 15-year-old victims	16- to 17-year-old victims	18- to 19-year-old victims	Total sample
Not referred	2 (2.1%)	7 (10.3%)	44 (62.0%)	53 (22.5%)
Referred	95 (97.9%)	61 (89.7%)	27 (38.0%)	183 (77.5%)
Total	97 (100%)	68 (100%)	71 (100%)	236 (100%)

choose not to report to police may be disinterested in engaging with police who learn about the case through other means (i.e., the mandatory reporting response). This would then likely result in lower prosecution rates. Our data contain information on if a report was made to police by the victim prior to or at the time of exam but do not include information about those who chose to report after the exam. Still, if we bound our sample to only include 13- to 17-year-old victims who reported to police prior to or at the time of exam to compare conviction rates for this bounded sample to Campbell's results, we find a conviction rate of 10% (12 convictions/122 cases involving 13- to 17-year-old victims who reported to police)—still markedly lower than what was found by Campbell and colleagues.

It is likely that these minor methodological differences do not completely account for the large difference we see in conviction rates, and instead there is a meaningful difference in the community contexts. We know that there is a great deal of variability in the United States in procedures and practices for investigating and prosecuting sexual assault cases and a great deal of variability in sexual assault case outcomes (e.g., Hoffman et al., in press). Comparing this study with prior research suggests that there is also great variability in adolescent sexual assault case outcomes. As such, what do we know about these communities that may have contributed to these different rates of attrition?

One important factor may be the demographics of the focal communities. Campbell et al.'s study sample consisted of mostly White victims (80.3% White), corresponding to the demographics of the rural and mid-sized communities in the Midwest in which they conducted their research. Our study focused on a safety net hospital in a city in the Northeast. Consistent with the patient population served by this hospital, our sample consisted of mostly Black and Hispanic/Latino victims (85.1% Black alone, Hispanic/Latino alone, or multiracial, including one of these categories). We included victim race as a control variable in our models and did not find an association between race and case outcomes. However, prior research has documented the systemic, cumulative, and sometimes invisible nature of race-based oppression and discrimination within the criminal legal system's response to sexual assault (Shaw & Lee, 2019). For example, prior research has found that police complete fewer investigative steps in cases that involve Black victims and are more likely to blame Black

victims for police inaction as police deem Black victims "uncooperative" (Shaw et al., 2016). Thus, while race was not significantly associated with case outcomes within the focal community studied, it is difficult to dismiss entirely that the racial and socioeconomic composition of our sample likely influenced how these cases were handled by criminal legal system actors.

Differences in adolescent sexual assault attrition rates may also relate to how stakeholders address sexual assault within their community. Campbell et al.'s sample consisted of victims who received postassault care from community-based SANE programs that operated within counties with well-established and multidisciplinary coordination across medical, advocacy, police, and prosecution. One county had a formalized multidisciplinary sexual assault response team, and the other had long-standing, informal relationships between providers. The victims in our sample received postassault care from a SANE within a hospital setting absent of this same level of coordination. This may explain in part the disparate case outcomes as formalized coordination among medical providers, criminal legal system actors, and advocates is often established with a goal of improving sexual assault criminal case outcomes. For example, through formalized multidisciplinary coordination, criminal legal system actors may learn from other sexual assault service providers about the impact of trauma and more effective ways to interact with trauma victims. Indeed, prior studies examining the infrastructure of sexual assault response teams found that while cross-training can be challenging, it is also quite helpful (Greeson & Campbell, 2015; Wegrzyn et al., 2021). As responders learn from one another, criminal legal system actors may be more willing to move cases forward in the system and better able to support victims along the way.

While it is impossible to determine with certainty why our results differ from prior research on adolescent sexual assault, two things are quite clear. First, adolescent sexual assault case outcomes vary greatly depending on jurisdiction. Second, adolescent case attrition is high, particularly in the present study. Prior research has found patterns in case characteristics and handling that suggest adolescent sexual assault cases are more similar to adult cases than those involving younger victims (Cross & Schmitt, 2019). Our findings align with this pattern, as our conviction rate of 8% aligns closely with the weighted 9% average found among adult and adolescent samples

Table 5
Outcomes of Cases Referred to the Prosecutor by Mandatory Reporting Age Group

Outcome	12- to 15-year-old victims	16- to 17-year-old victims	18- to 19-year-old victims	Total sample
Not charged	66 (69.5%)	48 (78.7%)	16 (59.3%)	130 (71%)
Charged, no conviction	149 (14.7%)	10 (16.5%)	9 (33.3%)	33 (18%)
Charged, convicted	15 (15.8%)	3 (4.9%)	2 (7.4%)	20 (10.9%)
Total	95 (100%)	61 (100%)	27 (100%)	183 (100%)

Table 6

Logistic Regression Results Examining Effects of Mandatory Reporting Age Group on Referral to Prosecutor

Variable	OR [95% CI]
Age group: 12- to 15-year-old victims	3.856 [0.677, 21.959]
Age group: 18- to 19-year-old victims	0.035 [0.010, 0.119]*
Gender	0.319 [0.024, 4.164]
Race	0.402 [0.127, 1.268]
Victim–perpetrator relationship: Stranger	0.048 [0.003, 0.653]*
Victim–perpetrator relationship: Known (nonfamilial)	0.041 [0.003, 0.523]*
Number of types of penetration	0.877 [0.483, 1.592]
Number of anogenital injuries	1.182 [0.670, 2.085]
Number of nonanogenital injuries	0.963 [0.764, 1.213]
Number of days between assault and exam	0.969 [0.574, 1.635]
Multiple perpetrators	0.806 [0.273, 2.374]
Police report filed at time of exam	9.807 [2.755, 34.908]*
Physical force	2.610 [0.846, 8.046]
Verbal threat	0.544 [0.179, 1.656]
Weapon	0.317 [0.084, 1.195]
Victim substance use	0.731 [0.259, 2.064]

Note. Model fit: Akaike information criterion = 3709.799; Bayesian information criterion = 3921.093; reference group for age group = 16- to 17-year-old victims; reference group for victim–perpetrator relationship = familial; CI = confidence interval.

* $p < .05$.

(Hoffman et al., in press). Regardless, these rates are likely much lower than we would expect or should be willing to accept.

Mandatory Reporting Policies as a Potential Intervention

Prior research has documented that sexual assault cases often drop out of the criminal legal system while under the purview of police as they decide that a case should not be pursued and do not screen it

Table 7

Ordinal Regression Results Examining Effects of Mandatory Reporting Age Group on Prosecutorial Outcomes for Referred Cases

Variable	OR [95% CI]
Age group: 12- to 15-year-old victims	1.321 [0.558, 3.129]
Age group: 18- to 19-year-old victims	1.412 [0.483, 4.132]
Gender	1.887 [0.455, 7.829]
Race	0.608 [0.283, 1.307]
Victim–perpetrator relationship: Stranger	0.145 [0.047, 0.442]*
Victim–perpetrator relationship: Known (nonfamilial)	0.193 [0.072, 0.520]*
Number of anogenital injuries	1.012 [0.668, 1.533]
Number of nonanogenital injuries	1.040 [0.849, 1.273]
Number of days between assault and exam	0.682 [0.421, 0.938]*
Multiple perpetrators	0.247 [0.077, 0.798]*
Physical force	0.514 [0.226, 1.166]
Verbal threat	0.680 [0.268, 1.723]
Weapon	1.706 [0.538, 5.411]
Victim substance use	0.734 [0.274, 1.968]

Note. Model fit: Akaike information criterion = 2596.704; Bayesian information criterion = 2760.388; reference group for age group = 16- to 17-year-olds; reference group for victim–perpetrator relationship = familial; CI = confidence interval.

* $p < .05$.

with or refer it to the prosecutor (Campbell et al., 2014; Lonsway & Archambault, 2012; Shaw et al., 2016; Valentine et al., 2016). The mandatory reporting policy assessed in this study was unique in that it included notification of both police and prosecution. If implemented as intended, this would result in all sexual assault cases to which the mandatory reporting policy applied being referred to the prosecutor, potentially increasing the number of cases that are prosecuted and result in a conviction. After controlling for other case variables, we found that cases to which the mandatory reporting policy applied (i.e., with 12- to 17-year-old victims) were referred to the prosecutor at statistically significantly higher rates than cases to which the mandatory reporting policy did not apply (i.e., with 18- to 19-year-old victims). Nearly all cases involving 12- to 15-year-old victims (98%) and 16- to 17-year-old victims (90%) were referred to the prosecutor, compared to only 38% of cases involving 18- to 19-year-old victims. These rates indicate that the mandatory reporting policy was being implemented as intended. The lower rate of referral for 18- to 19-year-old victims was somewhat expected, as these cases would only appear at the prosecutor's office if the victim chose to report the sexual assault to police. Indeed, in addition to mandatory reporting status significantly predicting case referral, we found that cases with a police report made prior to or at the time of exam were significantly more likely to be referred to the prosecutor. However, a police report did not guarantee that the case would be referred to the prosecutor. Sixty-nine percent of the cases involving 18- to 19-year-old victims were reported to police prior to or at the time of the exam, yet only 38% of cases involving 18- to 19-year-old victims had a record with the prosecutor. Nearly half (45%) of the cases involving 18- to 19-year-old victims who made a report to police prior to or at the time of the exam were not referred to the prosecutor. This demonstrates how police exercise discretion in deciding which cases to refer in the absence of a policy that mandates their referral.

However, the impact of this mandatory reporting policy on criminal case progression fizzles once cases reach the prosecutor. We found that a case's mandatory reporting status (i.e., whether the case involved a 12- to 17-year-old victim or an 18- to 19-year-old victim) had no impact on if the case was charged or resulted in a conviction. Instead, cases were more likely to be charged and result in a conviction when they involved multiple perpetrators, a familial perpetrator, and when the victim received more immediate postassault medical care (i.e., fewer days between the assault and exam). Stein and Nofziger's (2008) analysis of the 1995 National Survey of Adolescents similarly found that cases involving nonparental adult relatives were more likely to result in an arrest as compared to other victim–perpetrator relationships. Our findings also align with prior research that has found arrest of perpetrator and criminal case progression were more likely in adult cases when there were fewer days between the assault and exam (Campbell et al., 2009; Lafree, 1981).

Even though the mandatory reporting status of a referred case did not significantly predict case charging and conviction, it might still seem as though it could play an important role in the number of charged and convicted cases. The logic may be that if we are able to increase the overall number of cases that are referred to the prosecutor, it will inevitably also increase the number of cases that are charged and convicted. For example, we found that one third (31%) of the referred cases involving 12- to 15-year-old victims were charged, and half (52%) of the charged cases resulted in a conviction. If these rates are constant, efforts to increase the number

of cases referred to the prosecutor will result in more charges and convictions—as more cases go in, more cases go forward. However, these rates are not constant. As Figure 1 illustrates, case progression is markedly different for 16- to 17-year-old victims. Whereas *one third* of referred cases involving 12- to 15-year-old victims were charged, only *one fifth* of referred cases involving 16- to 17-year-old victims were charged. Whereas *half* of charged cases involving 12- to 15-year-old victims resulted in a conviction, only *one quarter* of charged cases involving 16- to 17-year-old victims resulted in a conviction. Though the same mandatory reporting policy applies to both 12- to 15-year-old and 16- to 17-year-old victims, the rates of attrition once cases reach the prosecutor are much steeper for the older group, resulting in case outcomes that more closely resemble those of cases involving 18- to 19-year-old victims. Thus, simply increasing the number of cases that reach the prosecutor does not guarantee more cases will be charged and result in a conviction. Our findings demonstrate that legally mandating cases be referred to the prosecutor largely just moves the high point of case attrition from being at the point of referral to the point of charging instead. These findings align with some prior research that has argued that police are not solely responsible for the high rate of sexual assault case attrition. The problem is systemic, with multiple criminal legal system actors at multiple points in the process often conferring with one another and sharing responsibility for patterns observed (Morabito et al., 2019; Pattavina et al., 2016, 2021; Spohn & Tellis, 2019).

Limitations and Future Research

While this study makes a significant contribution to the existing literature on adolescent sexual assault case progression in the criminal legal system and the potential intervening role of mandatory reporting policies, it is not without its limitations. First, our study relied exclusively on existing medical, prosecutor, and court records. While our team took additional steps to ensure data were coded accurately and completely (e.g., double-coding, searching multiple databases and record sources), errors or omissions in the original data sources would be retained. For example, if a medical provider checked the wrong box on a form or if the prosecutor misplaced a case record, we would have no way of knowing. Of course, this is a limitation in all research that relies on existing records and was likely no greater an issue in this study than in prior work that has used similar unobtrusive methods to study and understand system responses in a way that would otherwise not be possible.

Second, our sample consisted of adolescent sexual assault cases in which the victim received immediate postassault medical forensic care from one hospital in one jurisdiction in the focal state in which the mandatory reporting policy model under investigation was implemented. We intentionally chose this hospital and jurisdiction because of the diverse patient population it served. However, it is unclear if our findings can be generalized to other samples and locales. It is important that future research continue to build our understanding of adolescent sexual assault case progression in diverse community contexts by focusing on this age group specifically and separately from older and younger victim populations (see Bailey et al., 2024).

It is also important to acknowledge that this is the first known study to examine the impact of mandatory reporting policy. Further, causal comparative designs are excellent for addressing potentially spurious relationships through statistical controls when experimental manipulation is not possible, but they cannot perfectly assess causality.

Ultimately, they cannot account for what we cannot measure. It is possible there are other characteristics we could not measure that could relate to both age group and case progression and affect the relationship between the two. However, this study found no evidence of the effect of mandatory reporting on conviction rates, reducing concern over whether effects are spurious or not. Despite this, more research is needed to examine further the role of mandatory reporting policies in relation to criminal case progression and beyond. Mandatory reporting policies were created with multiple ends that do not focus entirely on the criminal legal system (e.g., protection, prevention, service connection; see Bailey et al., 2023). Much more research is needed to understand the potential benefits and harm of different models of mandatory reporting when employed in the context of adolescent sexual assault (see Bailey et al., 2023). In particular, future research should include qualitative investigations that explore the perspectives and firsthand experiences of victims and system actors (e.g., from the criminal legal, medical, and child protection systems). While this study was part of a larger mixed methods project that included victim interviews (Shaw et al., 2022), we need much more research to understand these policies' overall impacts and how different individuals and communities may experience them (see Bailey et al., 2023, 2024).

Implications for Practice and Policy

Despite these limitations, this study provides key insight that can inform practices and policies related to adolescent sexual assault criminal case handling and the utilization of mandatory reporting policies within this context. As previously discussed, there is significant variation in mandatory reporting policies regarding the specific entities involved in the legally mandated response. One mandatory reporting policy model includes notification of police and prosecution with an explicit intention of facilitating criminal prosecution. However, we found that this mandatory reporting policy model is not having its intended impact as it does not result in more criminal charges and convictions. Instead, this model seems only to move the high point of case attrition within the criminal legal system from the point of referral (i.e., police not referring cases to the prosecutor) to the point of charging (i.e., prosecutors not charging cases). Based on these findings, there is no benefit to including police and prosecution in the mandatory reporting response to adolescent sexual assault cases. Furthermore, additional research suggests that including police and prosecution in the legally mandated response in this context may cause harm as such policies are often incompatible with adolescent victims' postassault concerns, needs, and desires. While prior research on adolescent victims' postassault disclosure and formal help-seeking is rather limited, it has found that most adolescent victims choose not to report their assault to police or seek postassault medical care (Casey & Nurius, 2006; Du Mont et al., 2016; Finkelhor & Ormrod, 1999; Jones et al., 2003; Kilpatrick et al., 2003; Muram et al., 1995; Peipert & Domagalski, 1994). Research on general help-seeking among adolescents suggests that teens' reluctance to engage formal systems stems from confidentiality and privacy concerns, as well as beliefs that they will be met with nonhelpful responses (Bailey et al., 2024; Dubow et al., 1990; Finkelhor et al., 2001; Finkelhor & Wolak, 2003; Helms, 2003; Kuhl et al., 1997; Schonert-Reichl & Muller, 1996).

Based on the present study's findings and related relevant literature, mandatory reporting policies that require reporting to police and a

referral to prosecution may be unnecessarily funneling victims into a criminal legal system that they do not want to engage. This taxes an already overburdened criminal legal system. Accordingly, states should review and consider revising their mandatory reporting policies in a way that does not legally mandate involvement of police and prosecution. Instead, criminal legal system engagement should be presented as an option for adolescent sexual assault victims. In this study, we found that most adolescent sexual assault cases that resulted in a conviction were cases in which the victim made a police report prior to or at the time of the medical forensic exam. Thus, these cases did not need the mandatory reporting policy to facilitate notification of police and prosecution; the victim had already notified the police themselves. Instead of focusing on getting more cases into the criminal legal system that will ultimately drop out, resources and reform should focus on responding more effectively to those cases in which victims themselves choose to engage it. Such efforts must also account for the many different criminal legal system actors and components, as our findings demonstrate and build upon an existing literature that indicates the problem of sexual assault case attrition is not isolated to a specific set of responders (e.g., police) or phase of the process (e.g., police investigation; Morabito et al., 2019; Pattavina et al., 2016, 2021; Spohn & Tellis, 2019).

Our findings also indicate that more concerted efforts need to be made to offer potential postassault pathways toward justice, accountability, safety, and healing outside of the criminal legal system. This study adds to an already sizeable literature demonstrating that the criminal legal system response to sexual assault victims is inadequate and has not shown substantial improvements over time (e.g., see Hoffman et al., in press; Lonsway & Archambault, 2012, for reviews; Shaw & Lee, 2019; Spohn & Tellis, 2012a). Yet, the criminal legal system is still presented and prescribed as a primary path forward following a sexual assault. Victims are encouraged to report their assault to police; mandatory reporting laws sometimes mandate notification of police and prosecution; and coordinated community responses often include criminal legal system actors and design their activities around the needs of the criminal legal system. We cannot continue to rely primarily on the criminal legal system to provide postassault justice, accountability, safety, and healing when most evidence is to the contrary. It is essential to explore, develop, and invest in alternatives that better meet the needs of victims and their communities. For example, 12- to 17-year-old adolescents in our sample were unable to obtain postassault medical care without being entangled in the criminal legal system, wherein they only had an 11% chance of their case resulting in a conviction. Sexual assault victims, including adolescent victims, should be able to access confidential postassault medical care, civil legal assistance, mental health care, and advocacy services without an assumption, expectation, or requirement that they engage the criminal legal system (see also Bailey et al., 2023, 2024). Sexual assault victims and broader communities should also have opportunities to pursue justice through means that best align with their needs. While often dismissed as underdeveloped, unrealistic, or illegitimate, communities have been developing and utilizing alternatives like restorative and transformative justice for decades (Kim, 2021). Rather than dismiss these alternatives as illegitimate, the body of research demonstrating the inadequate and harmful criminal legal system responses should invite our curiosity to reimagine and enrich the range of postassault options available to victims and their communities.

In conclusion, our findings demonstrate that the criminal legal system continues to fall short in providing a means toward justice and accountability for sexual assault victims. Mandatory reporting policies that attempt to facilitate criminal case progression in the context of adolescent sexual assault may not have their intended impact, as the high rates of sexual assault case attrition within the criminal legal system are not limited to a particular stage of the criminal legal process (e.g., referral to the prosecutor) or group of actors (e.g., police). This problem is systemic, thus requiring systemic interventions. While additional research on the impact of mandatory reporting policy models is needed, the continued documentation of the inadequate criminal legal system response to sexual assault invites curiosity and a willingness to pursue alternatives that will better facilitate and support postassault justice and accountability for sexual assault victims, those who harm them, and their communities.

Keywords: sexual assault, mandatory reporting, adolescents, prosecution, attrition

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