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## The Cutting Edge of Forensic Interviewing

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### ABSTRACT

This article contextualizes new knowledge about forensically interviewing and assessing children when there are concerns about child abuse. The article references the impact of the Child Abuse Prevention and Treatment Act and the circumstance in the 1980s where investigators and clinicians had little guidance about how to interview children about alleged sexual abuse. It further speaks to the consequences of lack of interview guidelines and how videotaped interviews in the McMartin Pre-school cases served as the catalyst for the backlash against child interviewers and their interview techniques. Painful as the backlash was, it led to research and evidence-based practice in interviewing children about child sexual and other abuse. Principal among the practice innovations were forensic interview structures to be used when there is alleged child sexual and other abuse and the strong preference for one interview by a skilled interviewer, who is nevertheless a stranger to the child. Although these innovations satisfied many professionals in the child maltreatment field and critics of child interviewers, the new practices did not address a number of abiding issues: 1) how to meet the needs of children who are unable to disclose maltreatment in a single interview, 2) how to determine which children are suggestible in a forensic interview, and 3) how decisions are made about the likelihood of abuse, based upon the child's information during the interview. The articles in this special section address these cutting-edge issues.

### ARTICLE HISTORY

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## History of interviewing children about sexual abuse

Mandated reporting laws for child maltreatment (CAPTA, 1974), and especially the inclusion of child sexual abuse, as a reportable type of maltreatment, resulted in serious challenges to investigative and assessment techniques. Because sexual abuse rarely leaves physical evidence and most often results in adamant denial by the alleged offender, investigators and mental health professionals charged with determining the likelihood of sexual abuse came to rely primarily on the alleged child victim to provide information (Faller, 2015).

Child victims are typically reluctant to describe sexually abusive experiences. They may not understand the meaning and significance of these experiences. They may have been instructed by their caregivers not to talk to strangers (e.g., forensic interviewers). They may have been admonished by

the offender not to disclose their abuse. They may be fearful they will be shamed and judged complicit. They may dread the consequences of disclosure, for example, being removed from the home or family dissolution, if the offender is extruded from the family (Faller, 2007).

In the mid-1980s, interviewers of children who might have been sexually abused had little guidance about how to conduct such interviews (e.g., Conte, Sorenson, Fogarty, & Dalla Rosa, 1991). They tended to rely upon their training as investigators and clinicians and their intuitions (n.d.d.). Especially challenging were cases where there were multiple alleged victims (Finkelhor, Williams, & Burns, 1993). Although these multi-victim cases were alleged in other contexts, the majority in the 1980s (before the Catholic clergy cases of the early 21<sup>st</sup> century) were in daycare centers. Thus, most victims were pre-schoolers, with limited language skills and arguably greater suggestibility than older children (Ceci & Bruck, 1993). That said, the conclusion about young children's suggestibility is based upon analogue research, not actual cases of abuse.

It is in this context that the McMMartin Pre-school case was investigated by clinicians at Children's Institute International (CII) in Manhattan Beach, CA. There were close to 400 alleged victims over the course of several years (Waterman, Kelly, Oliveri, & McCord, 1993). In the interest of transparency, the CII clinicians videotaped all of their child interviews. Interviewers were observed asking suggestive questions, using puppets to interview children, and employing anatomical dolls (Butler, Fukari, Dimitrius, & Krooth, 2001). Both those accused of sexual abuse and their advocates used the McMMartin case to launch a backlash against child interviewers, including child protection workers (Myers, 1994). Some asserted there was a sexual abuse hysteria in the United States, especially when it came to daycare centers (Gardner, 1991).

## **Response to the backlash**

The upshot of the backlash was to stimulate practice and research to address the shortcomings of interviewing practice and to develop better interview techniques. Arguably the most important was the development of forensic interview protocols or structures. A second was the strong preference for a single interview.

### ***Interview structures***

Forensic interview protocols began to appear beginning in 1989. One of the first was one developed at CornerHouse, an interview center in Minneapolis, MN, entitled RATAc. RATAc stands for 1. Rapport, 2. Anatomy Identification, 3. Touch Inquiry, 4. Abuse Scenario, and 5. Closure. The RATAc interview structure has been very influential because in 2002 it was incorporated into the Finding

Words training curriculum, sponsored by the American Prosecutors Research Institute and provided by the National Center for the Prosecution of Child Abuse (Faller, 2015). RATAAC is a semi-structured interview protocol which allows the forensic interviewer to accommodate the needs of the child and the specifics of the allegation. In addition, RATAAC incorporated media into the forensic interview as aides, specifically easel drawing, anatomical drawings, and anatomical dolls (Anderson et al., 2010). CornerHouse has trained forensic interviewers in all 50 states and 20 countries (CornerHouse, 2018).

In the 1990s, two developmental psychologists at the National Institute for Child Health and Human Development (NICHD), Michael Lamb and Kathleen Sternberg, with colleagues, undertook the task on developing a forensic interview protocol, making use of knowledge from child development. They partnered with interview sites in the United States and other developed countries to field test and refine their protocol. The NICHD Investigative Interview Protocol is a linear, completely scripted protocol, with 11 phases (<http://nichdprotocol.com/NICHDProtocol2.pdf>). The NICHD Protocol is internationally recognized and has been translated into at least 24 languages (<http://nichdprotocol.com/the-nichd-protocol/>).

Both RATAAC and the NICHD Protocol have undergone revisions. RATAAC, now called the CornerHouse Forensic Interview Protocol, retains its semi-structured approach and its use of media, but incorporates recent research findings. It now includes narrative practice, ground rules, and invitational questions. Narrative practice is asking the children to provide a narrative about a neutral or positive event prior to questioning about abuse; this improves the child's narrative during the abuse-related phase of the interview (Anderson, Anderson, & Gilgun, 2014). Providing the child with interview rules sets the expectations for the forensic interview. Typical rules are: 1) If you don't know the answer, it's OK to say, "I don't know;" 2) If I make a mistake, tell me; and 3) Getting the child to promise to tell the truth. RATAAC only introduced rules if they became relevant during the interview. The new CornerHouse Protocol calls rules orienting messages, now provided during the initial part of the interview and then reinforced when they are relevant later in the interview (Anderson, 2013). RATAAC advised the use of "Wh" questions (e.g., where were you touched?) and yes/no questions, such as, "Are there places on your body no one should touch?" (Anderson et al., 2010). The current CornerHouse Protocol advises that initial use of open-ended invitations, such as "Tell me the reason you are here," followed by focused probes to gather details, and then a return to open-ended invitations (Anderson, 2013).

The revisions to the NICHD Protocol are quite different. Initial research on the NICHD Protocol focused upon children who actually disclosed abuse (Lamb, Orbach, Hershkowitz, Esplin, & Horowitz, 2007). In the early 2000s, NICHD researchers turned their attention to children who did not disclose, but for whom there was corroborating evidence of abuse (Pipe, Lamb, Orbach, & Cederborg, 2007). They developed the Revised NICHD Protocol. The interview

structure remains scripted, but it places rapport building (e.g., “Tell me the things you like to do.”) before giving the child the interview rules. It also advises the interviewer to use the child’s name frequently, to smile and lean forward, to engage in eye contact, to acknowledge the child’s emotions, and to provide non-contingent support (Hershkowitz, Lamb, & Katz, 2014). The Revised NICHD Protocol has been demonstrated to increase disclosures of abuse by approximately 10% (Hershkowitz et al., 2014).

There have been multiple adaptations of both the CornerHouse Protocol (e.g., ChildFirst; <https://www.zeroabuseproject.org/education-training/childfirst-forensic-interview-protocol/>) and the NICHD (e.g., RADAR; Everson, Ragsdale, Snider, & Rodriguez, 2019), Michigan Forensic Interview Protocol (State of Michigan Governor’s Task Force, 2002), Ten-Step Investigative Interview (Lyon, 2005) and indeed a proliferation of forensic interview protocols. That said, the two main approaches in the United States derive from CornerHouse and NICHD Protocols.

That said, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) fostered the development of a consensus statement regarding forensic interview protocols, which was published in 2015 (Newlin et al., 2015). The statement supports a three-phase interview structure: 1) rapport-building phase, 2) substantive phase, and 3) closure phase. The statement further acknowledges that no two children are alike, nor are their interviews. It advises using narrative practice during the rapport-building phase in order to increase the probability the child will provide a narrative account of abuse, and it advises the use of open-ended questions.

### ***Strong preference for the single interview***

There are at least two reasons for the strong preference for a single interview: 1) concerns that interviewers program children by repeated interviews with suggestive questions, and 2) concerns that multiple interviews are traumatizing to children. Thus, a single interview in which the child discloses sexual abuse became the “gold” standard. Indeed, in some communities, prosecutors have prevented interviewers from conducting more than a single interview. That said, the literature does not support that multiple interviews contaminate the child’s account, as long as there are no leading questions (Lyon, 1999; Malloy & Quas, 2009). Concerns that multiple interviews were traumatic derived from practice in the early 1980s, when a child might be interviewed by multiple professionals, each with a discrete role in the child’s case; thus, the child had to repeat the detail of sexual abuse to several strangers. Research, however, does not support that more than one interview by the same interviewer is traumatizing (La Rooy, Lamb, & Pipe, 2009).

There is also a serious problem with the single interview preference. It flies in the face of what is known about the disclosure process, which is typically painful, incremental, and protracted (e.g., Alaggia, 2004; Pipe et al., 2007; Summit, 1983). The 2015 OJJDP consensus statement acknowledges that disclosure of sexual abuse is a process and that some children need more than one interview (Newlin et al., 2015).

Moreover, in research by Hershkowitz et al. (2014), comparing the traditional NICHD Protocol with the revised NICDH Protocol in 426 cases with corroborative evidence, the overall disclosure rate was only 56.1% (traditional NICHD, 50.3%; revised NICHD 59.8%). Thus, close to half of children in these high certainty cases failed to disclose when interviewed by skilled interviewers using an evidence-based protocol. Instead of regarding more than one interview as risky, it can be seen as giving the child more than a single chance to tell (Faller, Cordisco-Steele, & Nelson-Gardell, 2010).

Indeed, there is already research demonstrating the efficacy of more than a single interview. For example, in a pioneering endeavor, the National Children's Advocacy Center undertook a multi-site study, comparing the use of four sessions to eight sessions with cases that that could not be resolved in a single session (Carnes, Wilson, Nelson-Gardell, & Orgassa, 2001). Although both the four and eight session conditions resolved cases, the eight session evaluations resolved more cases as credible allegations of sexual abuse. Later analysis on the same data set concluded that six sessions was optimal for an extended assessment (Faller & Nelson-Gardell, 2010).

Without using the criterion of unresolved cases, Hershkowitz and Turner (2007) conducted a study involving 40 Israeli children alleged to have been sexually abused. These children were interviewed twice by Youth Investigators, using the NICHD protocol. There was a half hour break between the first and second interview. During the second interview, children provided new details, on average one-fourth of the total information they disclosed. Only 37% of the information from the first interview was repeated in the second interview.

Today there are a number of sites around the country that conduct extended assessments, including the National Children's Advocacy Center (Huntsville, AL), the Family Assessment Clinic (Ann Arbor, MI), and CornerHouse (Minneapolis, MN). The models used for extended assessments vary as do the criteria for eligibility for an extended assessment.

### **The present special section**

It was the preference for a structured, single session, stranger interview that inspired this special section. Specifically, articles were solicited on the following emergent issues or knowledge gaps:

- (1) Since the 1990's, the single session, stranger interview model (SSSI) has been widely accepted in the field of child forensic interviewing as preferred, if not best, practice. Given our current understanding of the sexual abuse disclosure process which often includes delay, denial, minimization, and incremental reporting, existing research on the high rate of disclosure failures associated with the SSSI model, and given emerging research on the efficacy of multi-session, narrative interview approaches, is a re-appraisal of the SSSI model overdue? In light of practical concerns about cost and convenience, are there viable alternatives to the SSSI model that maintain more appropriate balance between sensitivity and specificity?
- (2) A consistent finding in the suggestibility research is that children differ in their vulnerability to suggestion. Faced with identical misleading influences, some children resist, some resist if the interviewer smiles and seems friendly, others succumb regardless. What is known about these suggestibility subgroups? Are we able to reliably differentiate them, especially among preschoolers? Has the research on suggestibility been misrepresented and overemphasized? If so, how should that impact forensic practice?
- (3) A key component of forensic CSA evaluations is an assessment of the alleged victim's disclosure statement. Although in the 1980's there were a number of articles written about characteristics of a true allegation and contrasting characteristics of a false allegation, this work is in need of updating. Moreover, some forensic interview protocols and practices do not allow the forensic interviewer to assess the child's disclosure statement. Should forensic interviewers and evaluators be assessing children's disclosure statements? If so, what characteristics of the child's statement and presentation are used? How effective are these assessments? What research support is there for these assessments?

In this section of the *Journal of Child Sexual Abuse*, three articles are provided. How they fit with the solicitation and the substantive content of the articles are briefly described below.

Duron and Remko's article, "Consideration for pursuing multiple session forensic interviews in child sexual abuse investigations" (2020) addresses the first domain about which new knowledge was sought: alternatives to the single session stranger interview. These authors examine forensic interview practice at Children's Advocacy Centers in the state of Texas (CACTX). They describe the single session forensic interview model, entitled Semi-Structured Narrative Process, the Multi-Session Forensic Interview Process, and the implementation of the Multi-Session Forensic Interview Process at one Texas CAC.



Klemfuss and Olaguaz (2020) address the second domain for which new knowledge was sought: subgroups of children in terms of their vulnerability to suggestive techniques in interviews. Their article, “Individual differences in children’s suggestibility: An updated review” reviews 55 analogue studies of 6,455 children, ages 2–18. The studies included in the sample span the timeframe 2004–2017, the timeframe derived from the end point of an earlier study by Bruck and Melnyk (2004). Few of the analogue studies were ones with ecological validity (analogous to abuse). Findings are consistent with earlier research in that children who are developmentally challenged and those with beginning language abilities are more vulnerable to suggestion.

Duron’s article, “Searching for the truth: The forensic interviewer’s use of an assessment approach while conducting child sexual abuse interviews” (this issue), addresses the third domain of inquiry for this special section. This is another article about forensic interview practice in the state of Texas. This article is based upon the coding of 100 interviews conducted by five interviewers. The author explores how the interviewers assessed the likelihood of sexual abuse by seeking details about the sexual victimization and describes patterns across interviews. Both quantitative and qualitative findings are presented.

## Conclusions

Impressive progress has occurred in forensic interviews and evaluations in the last 45 years. The field of forensic practice in child sexual abuse has progressed from interviews where professionals were essentially “flying by the seats of their pants” to a point where there are clear guidelines about how to structure interviews, the types of questions that are preferred, and how to elicit a narrative that is free of contamination from victims of abuse. Moreover, there is a better appreciation of memory and suggestibility in children, specifically at what age children are no more suggestible than adults.

The field is on the cusp of greater flexibility based upon the needs of the child, for example by identifying children who are reluctant to disclose and adapting interview techniques and structures to address their needs. The research in this section of the *Journal of Child Sexual Abuse* adds new knowledge that can guide forensic interviewers and the forensic interview process.

## Notes on contributor

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