CONDUCTING A FORENSIC INTERVIEW
WITH A CHILD WITNESS

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PURPOSE OF INTERVIEW

TO OBTAIN A TRUTHFUL ACCOUNT FROM THE CHILD IN A MANNER WHICH WILL BEST SERVE THE INTERESTS OF THE CHILD WHILE AT THE SAME TIME BEING LEGALLY ACCEPTABLE
PHASED APPROACH

- Interview is a process in which a number of interviewing techniques are used in phases.
- Phases proceed from general and open to specific and closed.
- Does not imply that other techniques are unacceptable, but simply that this provides a sound legal framework within which to work.
Who are you interviewing?

7 year old female

- No verbal disclosure – only physical symptoms
- Concrete Operational stage of development (Piaget)
  - logical thinking begins
  - beginning to be less egocentric – understand the perceptions and behaviours of others
  - begins to answer questions about the feelings of others
  - better understanding of the sequence of events (when events happen)
  - Still have difficulty with hypothetical/abstract questions (Why & How)

Cultural/social issues (establish the position from an adult)

- Talking about sex
- Authority of adults

Family dynamics (find out how the child feels about the people at home)

- Large family
- Uncle is a significant caregiver

Social network (who else is significant in child’s life)
PREPARATION

Who are you interviewing?

- Other people to interview
  - Mother – child disclosed some information to her regarding the discharge
    - Child’s likes/dislikes
    - Child’s personality
    - Child’s development
    - Any changes in child she has noticed

Order of interviews

- Mother first – provides information about the child that can be used in that interview
  - Relationships with all individuals in the house
  - Other significant relationships
  - Family’s position regarding talking about sex
    - terminology

Child
PREPARATION

- Decide where the interview must take place
- Ensure that setting is private without distractions
- Provide some activity for the child (not too distracting)
- Find out whether child wants to be accompanied by any person (be careful!! – useful usually only during rapport building)
PHASE ONE: RAPPORT

AIM

- to build a relationship between interviewer and child so that the child can feel relaxed and comfortable
- to supplement the interviewer’s knowledge about the child’s emotional and cognitive development as well as the child’s ability to communicate
- Extremely important phase for this case study – may take some time
WHAT TO DO

- Introduce yourself to the child.
- Explain your role and the purpose of the interview.
- Explain ground rules of interview.
- Explain why the interview is being conducted, what will happen with the information, and a discussion on telling the truth.
  - Doctor noted physical symptoms and you want to try and found out what happened
  - Keep it simple
- Be reassuring and allay fears (ask the child if she has any).
- Remain neutral.
WHAT NOT TO DO

- Do not refer to alleged offence during this phase.
- Do not overemphasise your authority in relation to the child.
- Avoid staring at the child.
- Do not make any promises or predictions.
- Do not assume or appear to assume the guilt of anyone – case study: who immediately comes to mind?
PHASE TWO: FREE NARRATIVE ACCOUNT

- Child must be encouraged to provide an account of alleged offence in his/her own time.
- Interviewer acts as facilitator.
- Use general, open-ended questions.
- Purpose is to obtain information from the child which will be spontaneous and free from interviewer’s influence.
Open-ended questions would include:
- Can you tell me what happened?
- Is there something you would like to tell me?

Prompts may be necessary, but should be appropriate and open-ended.

Be sensitive to any pauses or silences and resist the need to speak as soon as the child stops.

- Use communication skills
  - Acknowledgements – I can see you are thinking hard about that question

Remain neutral. Do not indicate any form of approval or disapproval.
PHASE THREE: QUESTIONING

This phase consists of 3 stages:

- Open-ended questions
- Specific yet non-leading questions
- Closed questions
OPEN ENDED QUESTIONS

- Ask child to provide information in a manner that is non-leading e.g. “Are there some things that you are unhappy about?”
- Questions could be more focused, provided they are still open-ended e.g. “What does ‘X’ do that makes you feel scared?” – depends on information already provided by the child.
BEWARE

Open-ended questions can also be suggestive or leading in that they can provide information which may be incorrect, or they can refer to information or events to which the child has not previously referred:

- What does your uncle/father do that makes you feel scared?
- Has the child said that the uncle/father scares her?
SPECIFIC YET NON-LEADING QUESTIONS

- Purpose here is to give child an opportunity to extend and clarify any information which the child provided in previous phases.
- All questions must be legally acceptable.
- These questions do not presuppose a particular answer i.e. where child has said a man wearing a jacket grabbed her, a question here would be: “What did the jacket look like?”
CLOSED QUESTIONS

- Used when open-ended questioning has not elicited sufficient information.

- A closed question is one that gives a child a limited number of alternatives e.g. “Was the jacket a dark colour or a light colour?”

- These questions are very similar to leading questions, and should be used with care.

- The child’s options have been severely limited and this may not be a method of eliciting informative replies.
CLOSING THE INTERVIEW

- The interview must be closed on a positive note.
- The child should be thanked for her co-operation.
- The interviewer should also provide simple, straight-forward information about the steps to follow.
- The child should be given an opportunity to ask questions.
- Interviewer must return to rapport phase and chat about neutral topics.
- Give the child a contact name and number.
SEXUAL SLANG WORDS

- children use different terms for various body parts and their sexual functions
- these do not necessarily have derogatory meanings
- can create issues of comprehension
- particularly significant in forensic interview
SEXUAL SLANG WORDS

- use the child’s term as much as possible
- avoid correcting the child
- don’t show disapproval of the child’s choice of words
SEXUAL SLANG WORDS

BREASTS
- boobs
- bumps
- mosquito
- bites
- tits
- bust
- titties

BUTTOCKS
- arse
- fanny
- behind
- poo-poo
- tail
- bottom
- cheeks
<table>
<thead>
<tr>
<th>MALE GENITALS</th>
<th>FEMALE GENITALS</th>
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<tbody>
<tr>
<td>it</td>
<td>flower</td>
</tr>
<tr>
<td>winkie</td>
<td>hole</td>
</tr>
<tr>
<td>cock</td>
<td>between my legs</td>
</tr>
<tr>
<td>dick</td>
<td>thing</td>
</tr>
<tr>
<td>down there</td>
<td>private parts</td>
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<tr>
<td>piepie</td>
<td>it</td>
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<tr>
<td>stick</td>
<td>wee- wee</td>
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<tr>
<td>willie</td>
<td>puss/pussy</td>
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<tr>
<td>knife</td>
<td></td>
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<td>privates</td>
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SEXUAL SLANG WORDS

SEXUAL INTERCOURSE
- all the way
- get laid
- doing it
- messing with me
- rubbing
- nookie
- hurt me down there
- quickie
- put it in
- making love
SEXUAL SLANG WORDS

BEWARE!

Children may use the terms for sexual intercourse to describe genital fondling or any kind of penetration.
NAMING OF BODY PARTS

- It is important to get the child to identify the parts of the body he refers to without in any way leading him or suggesting terminology.
- This can be done with the aid of body drawings.
EXAMPLE

INTERVIEWER: He touched your poo-poo?
CHILD: Yes.
INTERVIEWER: You may have to help me here, okay?
CHILD: Hmmmm.
INTERVIEWER: You see, the word ‘poo-poo’ can be a bit confusing sometimes and I want to make sure I understand properly. Okay?
CHILD: Yes.
INTERVIEWER: When you say ‘poo-poo’, do you mean the part you wee with or the part where the poo comes out?
USING DRAWINGS TO IDENTIFY BODY PARTS
Aim of a forensic interview: to gather a truthful account from the child without it in any way being contaminated.

Contamination occurs with:

- poor interview techniques
- inappropriate behaviour on part of interviewer
- unfavourable interview environment
- other influences, such as pressure by family members
INTERVIEWER BIAS

- personal assumptions held by interviewer
- child must be unconditionally believed
- perceive role as substantiating abuse
- Idaho v Wright: the interview was “performed by someone with a preconceived idea of what the child should be disclosing” (UNCLE!)
INTERVIEWER BIAS

Biased interviewers will err in the direction of their expectancies when they summarise, analyse and interpret information, and their own attitudes and expectancies will influence the actual behaviour of their subjects.
INTERVIEWER BIAS

- PERSONAL ASSUMPTIONS
- REINFORCEMENT
- REPEATED QUESTIONING
- AUTHORITY
REINFORCEMENT

- Parenting techniques: change child’s behaviour using attention, praise, approval.
- Children sensitive to approval and will behave in way that gets rewarded.
REINFORCEMENT

VERBAL

Approval
- “Good, that’s just right!”
- “Mommy will be so proud that you told us.”
- “You’re so brave to tell us all of this.”
- “After you’ve talked to us, then you can have an ice-cream.”

Pressure/Coercion
- “If you don’t tell, you will feel yucky inside.”
- “It’s important.”
- “If you don’t tell us, your mommy will be very disappointed in you.”
Desired responses are cued by tone of voice, small body movements, postures as well as suggestive and repeated questions. These would include:

- using a cold or neutral tone of voice
- moving away from the child
- avoiding the child’s eyes
- ignoring the child’s responses
Repeated interviewing: with every interview the child learns more about what the interviewer expects and what will get a positive response.

Repeated questions: when a child says nothing has happened, the interviewer keeps repeating the question and asking other questions until the child finally affirms abuse.
Prosecutor: And when you were lying on top of Bridget, where was your private?
Bobby: I forgot.
Prosecutor: Do you remember telling Miss Judy that you had to put your private next to her private? Did you have to do that, Bobby?
Bobby: No, Sir.
Prosecutor: What did you say?
Bobby: Yes, Sir.
REPEATED QUESTIONING

- lack of experience or confidence
- tiredness
AUTHORITY

Power, authority, status and credibility of adult interviewer will increase suggestibility of child.