

A Comprehensive Literature Review of Forensic Interviewers' Protocols

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BACKGROUND

- Forensic Interviewers: “Professionals charged with investigating child abuse allegations, particularly child sexual abuse or serious physical abuse allegations, must be able to interview children in a manner that is legally defensible, developmentally appropriate, and not unduly suggestive” (Anderson 2010).
- Child Advocacy Centers: “a safe, child-focused environment... the child tells their story once to a trained interviewer who knows the right questions to ask in a way that does not retraumatize the child. Then, a team that includes medical professionals, law enforcement, mental health, prosecution, child protective services, victim advocacy, and other professionals make decisions together about how to help the child based on the interview. CACs offer therapy and medical exams, plus courtroom preparation, victim advocacy, case management, and other services. This is called the multidisciplinary team (MDT) response” (National Children’s Alliance 2018).
- Full (Active) Disclosure: “active disclosure is when a child makes a full statement with supportive details corresponding to the reported abuse allegation and the following: (a) readily identifying the alleged perpetrator and alleged abuse when invited to disclose by the interviewer, (b) providing contextual details when asked or as part of a narrative statement regarding the abuse with few to no statements such as “I don’t know” or “I don’t want to talk about it,” and (c) generally displaying little to no reluctance or hesitation in discussing the abuse or providing details” (Anderson 2016).
- Quasi Witness: “lacking the capacity to be witnesses and so not subject to confrontation, but nevertheless potentially valuable sources of evidence and so subject to a different form of examination” (Friedman 2015). Refers to young children who are called to testify.

PURPOSE

This research aims to identify the strengths and weaknesses of forensic interviewers' protocols. It is essential that Child Advocacy Centers implement interview protocols that are homogenous, utilize positive techniques, and prevent children from being harmed. Compounding information about the various current interview protocols will allow professionals to create a quality standard. With this, children would be more likely to provide full disclosures while minimizing further trauma.

ABSTRACT

Sexual assault is an unparalleled trauma intensified by age. Children who are victims of this attack are often shook by the memories of the event(s). However, children’s testimonies are critical to building cases against perpetrators in the court of law. Specialists, called forensic interviewers, are extensively trained on how to elicit information from a child without inflicting undue harm. Although these forensic interviewers are highly trained, the methods they utilize vary significantly. A systematic review of the protocols reveals many of the methods utilized positive techniques such as open-ended questions, providing resources outside of the interview, and conformed to a coherent questioning strategy. Unfortunately, some included inappropriate use of anatomical dolls, leading questions, and are not tailored to younger children. This poster illustrates the different protocols utilized when interviewing a child that has sustained sexual abuse. Now that the effects of various interviewing methods have been recorded and assessed, children would be best served through a unified forensic interview protocol that keeps the successful techniques and rejects the harmful.

STRENGTHS

RATAC (Rapport, Anatomy Identification, Touch Inquiry, Abuse Scenario, Closure)

- o Focuses on a semi-structured approach that allows for an individualized interview, aimed to be malleable depending on a child’s age, cognitive, social, and emotional development

APSAC (American Professional Society on the Abuse of Children)

- o Focused, assessment driven, and science informed approach
- o Uses developmentally appropriate language, is not restricted to age constraint
 - i. Allows for children with intellectual disabilities to be interviewed in an appropriate way
- o Strives for cultural competency and to demonstrate respect

NICHD (National Institute of Child Health and Human Development)

- o One of the most researched methods, obtains more details from children compared to other protocols, widely used by Child Advocacy Centers
- o Utilizes structured narrative interview attempts to elicit verbal narratives to grasp child’s perspective, hear their story
- o Discourages use of anatomical dolls and drawings

Cincinnati’s Childhood Trust

- o Uses a Child Abuse Team, finds resources to aid the child

RADAR (Recognizing Abuse Disclosure types and Responding)

- o Adaptation of the NICHD Protocol
- o Offers scripts for inexperienced forensic interviewers to use

Tom Lyon 10-Step

- o Derived from NICHD (Widely accepted method)
- o Utilizes open-ended questions
 - i. Example: “You said that (repeat allegation). Tell me everything that happened.”

CATTA (Child Abuse Training and Technical Assistance Center)

- o Uses open ended questions
- o Provides training and assistance to CAC’s, multi-disciplinary teams, and prevention methods

Cognitive Graphic Interviewing

- o Encourages uninterrupted narratives, uses open-ended questions

Reid Technique (Reid Interrogation Method)

- o Asks more closed-ended questions and fewer open-ended questions

Medical Model

- o Focused on patient’s well-being

ChildFirst

- o Derived from the RATAC-Based Approach

WEAKNESSES

RATAC (Rapport, Anatomy Identification, Touch Inquiry, Abuse Scenario, Closure)

- o It utilizes the anatomical doll and drawings
- o Specific questions regarding touch can negatively affect rapport during an interview

“Process of Inquiry” (method to frame interview questions children under 10 years old) elicits less accurate responses than other methods such as ChildFirst

APSAC (American Professional Society on the Abuse of Children)

- o Deviates from focusing on child’s wellness to obtain evidence
- o Has not been updated since 2012

NICHD (National Institute of Child Health and Human Development)

- o Forensic Interviewers deviate from this protocol when interviewing younger children, believe that open-ended questions are difficult for children to understand
 - i. (Lack of structure does not affect the effectiveness of this method)

Cincinnati’s Childhood Trust

- o Has younger children use anatomical dolls

RADAR (Recognizing Abuse Disclosure types and Responding)

- o Pulls information out of the child, NCAC says it does not work, not accredited
- o Can only be used on children 5 years and older

Tom Lyon 10-Step

- o Does not work well with younger children because it can be challenging for interviewers to implement open-ended questions on a consistent

basis, leads to leading questions in younger children

CATTA (Child Abuse Training and Technical Assistance Center)

- o Focused on finding diagnosis, wants to identify how accurate their responses are

Cognitive Graphic Interviewing

- o May cause stress on children from bringing up the past

Reid Technique (Reid Interrogation Method)

- o Disregards child’s beliefs and feelings, psychological coercion, uses accusatory statements

Medical Model

- o Results tend to be inconclusive, behaviors caused by abuse may be present in a child who was not abused

ChildFirst

- o Quasi witness, children can’t understand the consequences of their actions
 - i. An adult would normally be cross-examined

RESULTS

- The literature revealed that protocols utilizing open-ended questions elicit more complete disclosures.
- An experiment that compared the NICHD Protocol to non-protocol interview techniques found, “...children interviewed by the NICHD Protocol provided more central details [Hedge’s $g = .90$ (95% CI .70, 1.10), $Z = 8.91$, $p < .001$] and more details in general [Hedge’s $g = .95$ (95% CI .77, 1.13), $Z = 10.40$, $p < .001$] in response to invitations than children interviewed by standard interviews.” (Bernia 2015).
- Utilizing open-ended questions instead of suggestive questions with younger children reduces their inaccurate responses. (Fanetti, O’Donohue, & Bradley, 2006).
- NCAC discredits protocols implementing phrases such as, ““correct me,” “don’t know,” “don’t understand,” and “true and real”” (NCAC 2014).
- The findings highlighted anatomical dolls’ negative effect: reducing children’s likelihood to fully disclose. (Buck 2011).
- Literature agrees that video recording is the most accurate and best way to document interviews

CONCLUSIONS AND IMPLICATIONS

- A uniform protocol should be utilized by every state to create the same opportunity for children to safely tell their story without being instilled with fear or pressured with leading questions
- Anatomical dolls do not have a clear protocol for how they are used nor do they produce meaningful disclosure
- For the well-being of the children, anatomical dolls should no longer be used
- Regular trainings should be implemented to promote the use of proper protocols
- Experienced forensic interviewers should be retrained in the updated protocol
- It is important to continue asking children of all ages open-ended questions
- Current protocols that use open-ended questions and elicit active disclosures should be used to create the new homogeneous protocol
- Protocols that are not tailored to the child’s age, ability status, and social development should be altered to focus on these attributes
- It is important to continue finding methods that provide active responses so children can be considered quality witnesses of their own abuse
- Forensic Interviewer burnout was not considered in any of the literature that was reviewed

SEARCH CRITERIA

I performed a search with the following electronic databases: Academic Search Ultimate, Google Scholar, and JSTOR. The keywords used for the searches were: [forensic interview and protocol], [nichd and protocol], [forensic interview and protocol], [apsac], [ratat protocol], [forensic interviewers and protocols], [cincinnati’s childhood trust], [medical model protocol interview], [cognitive graphic interviewing and sexual assault], and [National Children’s Advocacy Center’s interview protocol]. The last database search was performed in April 2018.

ACKNOWLEDGEMENTS

I would like to thank my advisors Emily Lux and Barry Ackerson for their assistance and guidance throughout my research.