Interviewing children about child maltreatment is both challenging and rewarding. It is a little like dancing with a partner who has not yet mastered the steps and is unfamiliar with the music. In the beginning, there are awkward moments trying to make sense of the intentions and expectations of the other. A tentative interaction pattern is established with each turn of the conversation. The interview dance has a structure, yet it is a fluid process. It demands a certain level of flexibility to pursue specific information from children without stepping on their toes. It can be problematic if the interviewer is viewed as leading the child’s movements too much. Success depends on the interviewer’s ability to design a dance that elicits accurate and relevant information without tainting children’s reports. When it works, it is a rewarding waltz.

Thankfully, interviewers are not left out on the dance floor alone to choreograph each interview anew. The past 25 years of empirical research have produced a sufficient evidence base to establish consensus on basic child forensic-interview strategies; that is, on the basic steps of the dance. In this chapter, we highlight principles based on the best available science, understanding that such principles keep changing as new evidence accumulates and that there are gaps in the knowledge base where guidance is limited. Interviewers, like dancers and professionals in any field, need to stay abreast of new steps and developments.

First, we describe the data base from which these steps derive. Then we discuss features of the interview about which there is sufficient empirical evidence and consensus to begin to build guidelines. These include the interview structure, setting, interviewer demeanor, children’s reluctance and suggestibility, rapport development, narrative practice, introducing the topic of abuse, avoiding concepts that confuse children, instructions to children, phrasing of questions, evidence-based strategies for eliciting details, and multiple interviews. Throughout, we demonstrate how to use these evidence-based strategies to interview children about possible maltreatment.

The Evidence Base

We draw our conclusions from a number of sources. These include studies of child witnesses in the field, laboratory analogue studies of children’s recall of staged and fictitious events, guidelines developed by professional organizations such as the American Professional Society on the Abuse of Children (APSAC), the American Psychological Association (APA), the American Academy of Child and Adolescent Psychiatry (AACAP), and the American Academy of Pediatrics (AAP), and protocols that have been empirically tested, the most well researched being the National Institute of Child Health and Human Development Investigative Interview Protocol (Lamb, Hershkowitz, Orbach, & Esplin, 2008) and the Cognitive Interview (Fisher & Gieselman, 1992; Saywitz, Gieselman, & Bornstein, 1992). Other protocols used in the field, such as Finding Words (Holmes & Vieth, 2003), also utilize some of the principles derived from the empirical literature, although there is limited research examining the behavior of interviewers trained in these approaches (Fairley, 2005; Lyon, Lamb, & Myers, 2009). Next, we present a brief overview of the scientific methods used to develop the database, and we describe some key findings.

Recent studies using field methodology provide important information about the eyewitness memory of victims of child sexual abuse. For example, in several field studies,
researchers investigated the accuracy of child victims’ memory when perpetrators recorded (e.g., videotaped) their sexual assaults, inadvertently providing researchers with objective documentation of the incidents against which to evaluate the children’s later reports (see Paz-Alonso, Ogle, & Goodman, 2009, for review). In one such field study, Leander et al. (2007) examined eight children aged 3 to 10 years who were sexually abused by a single individual (a stranger). The perpetrator took photographs of the sex crimes he committed. He would abduct a child, take the child to a building or other location, and sexually assault the victim (e.g., attempted penetration). In addition to the photographs, the perpetrator confessed. The children provided accounts of the abuse to police. The children’s disclosures occurred from one day to five years after the assaults. The children’s accounts were compared to the photographs and the perpetrator’s confession. The children provided accurate information describing events that preceded the sexual assaults, indicating they remembered the incident. Five children, however, failed to provide any sexual information. Only two of the eight children gave detailed reports of the sexual acts. Despite limited completeness, what children did report was quite accurate. Results from this and other field studies strongly suggest that children are able to provide accurate testimony about sexual abuse. Child victims’ feelings of fear, shame, embarrassment, and/or guilt have been suggested as explanations for the finding that children omitted a considerably greater amount of sexual compared to neutral information (e.g., Leander et al., 2007).

In addition to field studies, which are relatively few in number, valuable information about forensic interviewing can be gleaned from analogue research in the laboratory. Analogue studies permit researchers to examine issues that cannot be addressed in field studies. To date, hundreds of analogue studies have been conducted. Overall, they show that memory is multiply determined, depending, for example, on characteristics of the child and the settings in which memory retrieval occurs (for review see Bottoms, Nadjowki, & Goodman, 2009).

With analogue research, memory for sexual abuse is not examined. Instead, memory for mundane experiences (e.g., playing games with a researcher), fictitious experiences (events that were never experienced by the child), or naturally occurring stressful experiences (e.g., medical procedures) is investigated to determine the accuracy of children’s reports and how best to interview children. One beauty of such research is that children’s suggestibility and tendency to make false reports can be examined with scientific precision. For example, in a well-known study (dubbed the “Mr. Science” study) by Poole and Lindsay (2001), 3 to 8 years olds viewed and participated in science demonstrations. Later, their parents read a story that described events not actually experienced during the science show. In other words, the parents provided the children with fictitious information about what had happened during the science events. The children were then questioned by the researchers in follow-up interviews. Regardless of age, a number of children described the fictitious events, even in response to the researchers’ open-ended prompts. Accuracy declined further when children were asked direct questions, especially for the younger children. The older children retracted many of their false reports after receiving instructions that helped them monitor the source of the misinformation. Younger children, however, did not benefit from the instruction. Such research provides vital information about children’s suggestibility and proneness to false reports. Analogue studies are also quite useful in validating interview tactics that bolster the accuracy of children’s reports.
Eisen, Goodman, Qin, Davis, and Crayton (2007) tested the memory of more than three hundred 3- to 16-year-old children who had experienced abuse or neglect. For health reasons, the children underwent an anogenital examination and a venipuncture, and the researchers examined the children’s memory for these routine medical procedures. Clear developmental differences were observed. Children 6 years old and older were more accurate about details of the medical procedures than younger children. Children who suffered sexual and/or physical abuse were more accurate than children who experienced neglect.

Research like that described above has been combined with knowledge gained from thousands of interviews conducted by police, social workers, medical professionals, and clinicians to develop child forensic interview guidelines. Research has evaluated the effectiveness of scientifically based interview protocols. An example is research on the Cognitive Interview (Fisher, Brennan, & McCauley, 2002), which can be used with adults and older children to obtain extensive and accurate reports (see Koehnken, Milne, Memon, & Bull, 1999, for a meta-analyses). Based on basic principles of memory, cognition, and communication, the Cognitive Interview requires that interviewees: (a) reconstruct mentally the personal and environmental context at the time of the crucial event; (b) report everything, including partial information even though it may be considered unimportant; and (c) recount the event in a variety of orders and from a variety of perspectives. Interviewees are given specific directions to facilitate the recall of details, conversations, and names. Research on the Cognitive Interview reveals advantages with adults (e.g., Fisher & Geiselman, 1992) and (in its modified form) with children (Hayes & Delamothe, 1997; Holliday, 2003; Larsson, Granhag, & Spjut, 2003; McCauley & Fisher, 1995; Milne & Bull, 2003).

The most extensively studied child forensic interview protocol is the National Institute of Child Health and Human Development (NICHD) protocol developed by Michael Lamb and his colleagues (see Lamb et al., 2008). Using this protocol, field researchers have examined the quality of children’s memory reports in relation to such factors as age, rapport building, open-ended questioning, use of drawings, and numerous other interview-relevant factors. Based on thousands of NICHD protocol interviews conducted in Israel and other countries, Lamb and his colleagues have worked to pin point the interviewing techniques that produce the best quality of information from children.

**Evidence-Based Interview Strategies**

**Interview Structure**

Interviews differ from ordinary conversations in that they usually have a definite purpose, a question-answer format, and a well-defined goal. Interview structures vary along a continuum from unstructured (where interviewers follow the child’s lead), to highly structured (where exact wording of questions is scripted). In between are semi-structured formats where interviewers follow questioning guidelines and cover predetermined topics, selecting from a toolkit of strategies. Structured protocols help prevent defective interviewing, and standardization increases adherence to evidence-based practices. Semi-structured approaches afford more flexibility. Studies suggest that in the forensic context, totally unstructured interviews are ill-advised. Even when interviewers are well-trained, it is difficult for them to abide by best practice recommendations without following a structured or semi-structured format.
Most protocols use a phased approach. Typically, this includes an initial preparatory phase (e.g., introductions, rapport development, promise to tell the truth, narrative practice, instructions), a second phase for information gathering (e.g., invitation for free recall “What happened?” followed by more focused questions to gather details), and finally a third phase of closure (e.g., re-composure if child is upset, time for child to ask questions). Phases vary in level of empirical support, with a great deal more research conducted on question types than on rapport development or closure.

Setting

Most guidelines recommend an age-appropriate, private, child-friendly setting with minimal distraction. Studies confirm that distractions require children to divide their attention, often with adverse affects on their ability to focus on the interview (e.g., Tun & Wingfield, 1993). Private interviews are recommended to eliminate the possibility of contamination from parents or others who may have a vested interest in the outcome. Even without overt pressure, children may be reticent in the presence of another person. Studies show that children can be reluctant to accuse adults of wrongdoing in the adults’ presence (e.g., Peters, 1991, Experiment 4; but see Talwar, Lee, Bala, & Lindsay, 2004), or to accuse a peer of wrongdoing in the presence of an innocent peer (Harari & McDavid, 1969). Moreover, it should not be assumed that a parent’s presence will decrease stress. Whether a child will experience a particular person’s presence as supportive depends on the nature of the relationship between the child, the person offering support, and the kind of support provided (e.g., Goodman, Quas, Batterman-Faunce, Riddlesberger & Kuhn, 1994, 1997).

Of course, there are cases in which children protest, refuse, and cannot be reassured (e.g., Goodman et al., 1998). Interviewers will want to consider taking precautions when they decide support persons are necessary during the interview, such as instructing the support person to sit behind the child and to redirect the child back to the interviewer if the child has questions. Many protocols recommend asking the adult to leave once the child is comfortable but before substantive questioning begins.

Interviewer Demeanor

There is scientific evidence suggesting that interviewers are more successful when they provide a supportive yet non-suggestive atmosphere. Social support in the form of eye contact, relaxed body posture, smiling, and warm intonation has been shown to help children be more resistant to misleading questions and to improve interview performance without contaminating their accounts of nonabusive events (see Bottoms, Quas, & Davis, 2007 for review).

Obviously, it is critical that supportiveness not become selective reinforcement of responses that fit the interviewer’s a priori beliefs. Interviewer bias has been linked with distortions of children’s accounts, underscoring the need for objectivity and neutrality (Ceci & Bruck, 2006). In experimental studies, when interviewers are provided with biasing information about false events prior to the interview, and are allowed to script their own questions, they tend to ask repeated yes/no questions about the suggested events (Gilstrap, 2004), increasing error (White, Leichtman, & Ceci, 1997; but see Goodman, Sharma, Thomas, & Considine, 1995). If combined with selective reinforcement of desired responses, these questions can dramatically increase young children’s errors (Garven, Wood, & Malpass, 2000; Garven, Wood, Malpass,
Children’s Reluctance

Studies are clear that interviewers should refrain from pressuring reluctant children. Assuming the child is interviewed relatively soon after an initial disclosure, interviewers should use non-leading means of eliciting information. The goal is to provide an opportunity for disclosure of abuse without creating a false report.

Many abused children are ambivalent about disclosing and are subject to pressures to recant if they have previously disclosed (See Chapter 14). A child might have freely disclosed to a parent or a trusted adult but not be comfortable talking to a stranger. Moreover, very young children may need more guidance, not just to overcome reluctance, but to overcome their verbal and memory limitations. Dealing with nakedness and genital touch is potentially embarrassing (Saywitz, Goodman, Nicholas, & Moan, 1991), even more so if the child recognizes that the touching was wrong.

Some sexual abusers warn victims not to tell (Smith & Elstein, 1993). Even without warnings, the secrecy surrounding abuse teaches the child not to tell. Sexual abusers may threaten violence toward the child, the child’s mother, pets, or others, reinforcing reluctance to disclose (Sas & Cunningham, 1995). Perpetrators may seduce their victim, making the child reluctant to tell due to a sense of guilt. If family members have positive feelings about the abuser (e.g., uncle, mother’s boyfriend), the child may be reluctant to get the adult in trouble (Sauzier, 1989).

Another reason to avoid pressuring reluctant children is that pressure may taint truly abused children’s reports, undermine their credibility, or create avoidable inconsistencies in their reports. Even if the interviewer’s leading questions do not in fact adversely influence the child’s report (e.g., Quas, Malloy, Melinder, Goodman, DeMello, & Schaaf, 2007), the presence of the questions may subject the interview to attack in court. See Chapter 22 for discussion of the courtroom strategy of attacking forensic interviews.

Studies do not suggest that it is necessary to avoid any questions that could be characterized as suggestive. Thus, interviewers are not limited to a simple, “Is there something you want to tell me?” and nothing more. Interviewers strive for a middle ground between a suggestive questions and completely non-suggestive open-ended invitations to speak. Finding the right balance requires skill, training, and experience.

Children’s Suggestibility

Interviewers do not know ahead of time if a child has in fact been abused. Interviewers do know, however, that pressure on a nonabused child may lead to a false allegation (Ceci & Bruck, 2006). Researchers have demonstrated that a number of coercive interviewing techniques can produce false reports, particularly in preschool children. These techniques include selective reinforcement (rewarding desired responses and punishing undesired responses; Garven, Wood, & Malpass, 2000; Garven, Wood, Malpass, & Shaw, 1998), stereotype induction (telling the child that the suspect is a bad person; Leichtman & Ceci, 1995), the use of authority (telling the child what the parent has said or what the interviewer believes; Ceci, Loftus, Leichtman, &
Although individual differences in suggestibility proneness exist at every age, overall young children are particularly likely to fall sway to suggestive pressures. During the preschool years children develop an understanding of the means by which knowledge is acquired and the possibility that beliefs could be false. They become better able to distinguish between events they have personally experienced and events about which they have been told, or heard, or imagined—a process known as source monitoring. Researchers have identified links between age trends in suggestibility and the acquisition of source monitoring abilities (Robinson & Whitcombe, 2003; Welch-Ross, 2000). Young children are inclined to assume that adults are knowledgeable, which increases their vulnerability to suggestion. Preschool children are more suggestible when questioned by an adult than when questioned by a child (Ceci, Ross, & Toglia, 1987), and susceptibility to the status of adults as questioners diminishes with age (Kwock & Winer, 1986). These studies highlight the importance of avoiding leading techniques and taking precautions to avoid suggestion.

**Rapport Development**

It is not uncommon for a young child to experience trepidation about leaving familiar caretakers to talk privately with an unfamiliar adult for an unknown purpose. Most guidelines mention that interviewers need to spend time establishing rapport. Yet, there is little scientific data available on the best methods for developing rapport with children. Studies suggest maltreated children can have more difficulty establishing rapport with professionals than nonmaltreated children with mental health problems (Eltz, Shirk, & Sarlin, 1995). Yet, little is known about how children decide whom to trust. Social support provided by the interviewer, as described above, should facilitate rapport. Studies of children’s limited knowledge of the legal system suggest introductions and developmentally sensitive explanations that demystify the legal context might reduce children’s uncertainty about interviewer intentions and improve their productivity (e.g., Nathanson & Saywitz, 2003).

Early verbal interactions during rapport building can be used to demonstrate that the child will be expected to provide as much detail as possible in his or her own words with minimal prompting. To this end, interviewers can rely on open-ended questions that call for multi-word responses as opposed to questions that can be answered yes or no. Time spent in narrative practice, as described in the next section, may also serve the goal of furthering rapport.

**Narrative Practice**

Numerous studies have demonstrated the benefits of practice exercises prior to the substantive portion of the interview to create a template for later questioning patterns. Practice often consists of children answering open-ended questions about innocuous events during the introductory phase of the interview. Studies of the NICHD, Cognitive Interview, and Narrative Elaboration protocols demonstrate that practice answering questions yields greater amounts of information in field studies and greater accuracy of recall in laboratory studies (e.g., Saywitz, Geiselman, & Bornstein, 1992; Sternberg et al., 1997). In the field, Sternberg et al. (1997) found that when interviewers used open-ended prompts rather than option-posing questions in the beginning phase of the interview, children provided longer and richer responses to the first
substantive question about abuse, and longer responses to free recall questions throughout the interview. In the laboratory, Narrative Elaboration and Cognitive Interviews involving similar procedures elicited more information that was accurate than did standard interviews. The optimal length of practice appears to vary by child, but 5 minutes is often sufficient. Observational research cautions against unduly lengthy narrative practice (Davies, Westcott, & Horan, 2000; Hershkowitz, 2009), and experimental work with 10 to 15 minutes of narrative practice has produced mixed results, possibly due to fatigue (Holliday & Albon, 2004; Roberts, Lamb, & Sternberg, 2004).

Various procedures for conducting narrative practice have been studied. In the NICHD protocol, children are asked about a recent event (such as a birthday celebration) and prompted with “Tell me more about the [detail provided by child]” and “What happened next” questions. Similarly, in the Narrative Elaboration protocol, school-age children are asked “Tell me what usually happens at home from the time you get up until the time you go to school. Tell me more? What happened next?” or “Tell me what you did this morning from the time you got up until the time you got here” (Saywitz, Snyder, & Nathanson, 1999). In the Narrative Elaboration protocol, preschoolers are asked to describe the interview room or to describe a story book picture presented by the interviewer (“Tell me what’s happening in this picture?”) to minimize the demands on memory while modeling questioning format (Dorado & Saywitz, 2001). In the Cognitive Interview modified for children, children are asked “Tell me what happens when you brush your teeth” (McCauley & Fisher, 1995). In all of these studies, interviewers taught children what to expect by modeling open-ended prompts (“What happened next? Tell me more…”) to help children practice elaborating on their descriptions in their own words without the use of leading or specific questions.

**Introducing Topic of Interest**

Children should be given the opportunity to provide a spontaneous report in response to open-ended questions. If children do not spontaneously mention abuse, introducing the topic is a sensitive and pivotal moment in the interview. Further research is needed to find ways that are non-leading and productive. However, research on the NICHD protocol provides guidance for introducing the topic of abuse in an investigative interview when children have previously disclosed abuse to someone else. Interviewers open the conversation by asking, “Tell me why you came to talk to me.” Researchers have found that most children in their studies understand the purpose of the investigative interview and are ready to disclose (Sternberg, Lamb, Orbach, Esplin, & Mitchell, 2001). If the child does not mention abuse, the interviewer says “It is important for me to understand why you came to talk to me.” If the child remains unresponsive, the interviewer works through a series of increasingly focused questions, which are based on the child’s previous disclosure (or the reason abuse is suspected), but avoids directly suggesting that a particular suspect has performed a specific act. For example, “I heard that you saw a policeman [social worker, doctor, etc.] last week [yesterday]. Tell me what you talked about.” Or, “I told you, my job is to talk to kids about things that might have happened to them. It’s very important that I understand why you are here. Tell me why you think your mom [your dad, etc.] brought you here today.”

At the point that a child alleges abuse, most guidelines and protocols recommend that the interviewer ask the child to “Tell me everything that happened.” The interviewer encourages the child to provide a narrative of the abuse, using questions such as “Tell me more about [action or
detail mentioned by the child” and “What happened next?” The Cognitive Interview instructs children to “Tell everything that happened, even the little things that you might not think are very important.” This permits the interviewer, rather than the child, to judge forensic relevance.

Research findings support beginning with very general prompts, but when these do not elicit a disclosure, protocols recommend that alternative strategies for engaging in a conversation about points of potential forensic relevance be conducted in the least leading fashion possible. However, there is little research testing the independent contribution of various strategies. Experts tend to recommend more indirect approaches. Faller (1996), for example, recommends asking about different people in the child’s life and what the child likes and does not like about each individual. If the interviewer asks about a number of people other than the perpetrator, questions about the perpetrator would not be unduly leading.

The Finding Words approach uses anatomical drawings or dolls as an introductory tool (Holmes & Vieth, 2003; Vieth, 2006). Although dolls and drawings can be used non-suggestively, evidence suggests that actual practice is often problematic (e.g., Everson & Boat, 2002; Thierry, Lamb, Orbach, & Pipe, 2005). Several researchers have raised concerns about the risks associated with anatomical drawings and dolls, particularly when used in interviews with preschool children (Bruck, Ceci, Francoeur, & Renick, 1995; Steward et al., 1996). Brown, Pipe, Lewis, Lamb, and Orbach (2007) found that encouraging children to provide verbal descriptions of abuse was superior to pointing to body parts on a drawing. Further research is needed to examine how interviewers trained by Finding Words use interviewing aids in the field and the impact on children’s reports (Lyon et al., 2009).

Phrasing Questions in Language Children Understand

Numerous studies demonstrate the value of phrasing questions in grammar and vocabulary children can understand. Unfortunately, questions asked of child witnesses are routinely beyond their level of comprehension. Communication breakdowns occur when young children are asked long, overloaded questions using complex grammar and sophisticated vocabulary (Brennan & Brennan, 1988; Carter, Bottoms, & Levine, 1996; Perry, McAuliff, Tan & Claycomb, 1995; Saywitz, Jaenicke & Camparo, 1990). Interviewers are encouraged to simplify their language, for example, by clarifying terms in advance, asking children to tell the interviewer what they think a word means (“Tell me what allegation means?”) rather than asking whether children know what a word means (“Do you know what an allegation is?”) because children are likely to answer “yes” even when thinking about a different word (e.g., “alligator”). Use short sentences and simple grammar, devoid of embedded clauses and double negatives. Replace pronouns (“he” and “she”) and deictics (“that” or “there”) with proper names (e.g., replace “he” with “Steve”) and specific locations (e.g., replace “there” with “in the garage”; see Saywitz & Camparo, 1998; Walker, 1999).

Avoiding Concepts that are Difficult for Children to Understand

Interviewers should avoid questions with cognitive demands that exceed a child’s knowledge and reasoning skills. For example, number and time are concepts common in investigative interviewing that develop gradually and are difficult for young children to understand and use accurately in verbal conversation.
Number. It can be problematic to ask a young child how many times an event occurred. The child is likely to pick an arbitrary number (a million, thirty-eight). As well, the number may change from interview to interview. A moment’s reflection highlights what a difficult task it is to estimate how many times something occurred. Either one imagines each event and mentally counts, or one estimates the number (Bradburn, 2000).

It is easy to misjudge a child’s ability to estimate. Children can often recite numbers before they know how to count and can count objects before they can count events in memory (Wynn, 1990, 1992). What constitutes an event is also open to question. Does the child enumerate abuse by reflecting on particular acts or on times when a series of acts occurred?

To approach questions regarding number, the NICHD protocol recommends that after the child has first disclosed abuse and described an episode, the interviewer ask “Did this happen one time or more than one time?” If the child says “More than one time,” the interviewer then inquires about the last time the abuse occurred, the first time the abuse occurred, and the time the child remembers the most. The interviewer follows up by asking if there are any other times the child remembers.

Time. Similar to children’s understanding of numbers, children’s understanding of time develops gradually. Children learn how to tell time on a clock before they can estimate what time an event occurred. Unless one looks at a watch or calendar during an event, subsequent recall of the time requires inferential skills (e.g., “It was shortly before New Year’s, so it probably was December”; Friedman, 1993). Many children fail to make such inferences. The interviewer can often elicit information from the child about contemporaneous events, which enables the interviewer to estimate the time. For example, a child may state where other people were at the time of the abuse (e.g., “My mother was at church”), or what the child was doing (e.g., asleep at night, taking a nap after school). Legally, exact dates and times are not necessary, particularly if the abuser had frequent access to the child and the abuse occurred on multiple occasions over a period of time (Myers, 2005).

Some temporal terms can be confusing for young children. “Yesterday and “today” are difficult for young children, in part because of their shifting meaning (today is tomorrow’s yesterday). For the young child, yesterday often refers to anything in the past, and tomorrow refers to anything in the future (Harner, 1982). Obviously, the interviewer should not assume that a young child understands weeks and months, or that the child can estimate time using these intervals.

When questioning children about a sequence of events, interviewers need to be cautious in using the terms “next,” “before,” and “after” because younger children often describe events in the order in which they occurred regardless of whether one asks about what happened before or after another event (Carni & French, 1984). The safest course is to ask “What happened next?”

Instructions to Improve Children’s Performance

Young children are accustomed to speaking to authoritative adults (teachers, parents) who already know the answers to many of their questions. Given a strongly worded question, children may agree, not because of what they believe, but because of their desire to please the interviewer
and because of their reluctance to appear ignorant. It may be possible to reduce misconceptions children have about interviews through instructions. Researchers have examined instructions that increase children’s willingness to say “I don’t know” or “I don’t understand,” reduce children’s tendencies to defer to authoritative interviewers, and increase children’s willingness to disclose negative experiences.

**Giving permission to say “I don’t know.”** Children are often reluctant to say “I don’t know,” particularly when asked yes/no questions (e.g., Poole & Lindsay, 2001) or specific wh-questions (e.g., Memon & Vartoukian, 1996). A number of studies have found that instructing children that “I don’t know” answers are acceptable reduces children’s suggestibility to misleading questions (Cordon, Goodman, & Saeternoe, 2005; Endres, Poggenpohl, & Erben, 1999; Gee, Gregory, & Pipe, 1999; Saywitz & Moan-Hardie, 1994; Walker, Lunning, & Eilts, 1996; Warren, Hulse-Trotter, & Tubbs, 1991). Several studies include helping the child practice saying “I don’t know” by asking a few unanswerable questions, such as “If I ask you a question and you don’t know the answer, then just say ‘I don’t know.’ So, if I ask you the question, ‘What is my dog’s name?’ What do you say? O.k., because you don’t know. But what if I ask you, ‘Do you have a dog?’ O.k, because you do know.”

Interviewers are cautioned to provide the child examples because a simple “It’s ok to say I don’t know” is likely to be ineffective (Geddie, Fradin, & Beer, 2000; Memon & Vartoukian, 1996; Moston, 1987). Furthermore, interviewers should reinforce giving an answer when one does know, so children don’t over-use the “I don’t know” response (Gee, Gregory, & Pipe, 1999; Saywitz & Moan-Hardie, 1994).

**Giving permission to say “I don’t understand.”** Children rarely ask for clarification of questions they do not understand (Carter, Bottoms, & Levine, 1996; Perry et al., 1995; Saywitz et al., 1999). Children are less adept than adults at monitoring their comprehension. Even if they recognize incomprehension, they are reluctant to let the interviewer know. Telling children that it is permissible to say they do not understand and that doing so will lead the interviewer to reword the question reduces the likelihood that grade school children will attempt to answer incomprehensible questions (Saywitz et al., 1999). Practice on a few incomprehensible questions improves school age children’s performance still further (Saywitz et al., 1999), and even has some positive effect with preschool children (Peters & Nunez, 1998).

Different protocols use different variations on this instruction. In experimental studies, Saywitz and colleagues told children “I am going to ask you some questions. Some of the questions will be easy to understand, and some questions will be hard to understand. When you hear a question you do not understand, tell me that you do not understand the question. Say ‘I don’t understand,’ ‘I don’t know what you mean,’ or ‘I don’t get it.’ I will tell the question again in new words.” Young children were told to “Put out your hand like a police officer stopping traffic to stop the question” (Saywitz et al., 1999). In the NICHD protocol, children are told “If I ask you a question and you don’t know what I mean or what I am saying, you can say ‘I don’t know what you mean.’ I will ask it in a different way. So, if I ask you, ‘What is your gender?’ what do you say? Good, because ‘gender’ is a big word. So, then I would ask, ‘Are you a boy or a girl?’ O.k. because boy or girl is an easier way to say gender.”

**Warning children about misleading questions.** Two studies have found positive effects from warning children that questions might mislead them and then giving permission for them to
correct the interviewer (Saywitz & Moan-Hardie, 1994; Warren, Hulse-Trotter, & Tubbs, 1991). Saywitz and Moan-Hardie included the following instruction as part of their intervention to reduce suggestibility “Sometimes I may put my guess into a question or I may make a mistake. You should tell me if I am wrong. I was not there, and I could not know what happened. It is important for you to tell me if I make a mistake. I want you to correct me.”

**Telling children you don’t know what happened and cannot help them answer questions.** Children often assume that interviewers are knowledgeable, even though the interviewer did not witness the event. Children are more suggestible when they believe the interviewer knows what occurred (Ceci, Ross, & Toglia, 1987; Kwock & Winer, 1986; Lampinen & Smith, 1995; Toglia, Ross, Ceci, & Hembrooke, 1992). Informing children that one doesn’t know has been shown to reduce suggestibility to misleading questions (Mulder & Vrij, 1996). Mulder and Vrij (1996) informed children “I don’t know what’s happened to you. I won’t be able to tell you the answers to my questions.” Similarly, Saywitz and colleagues found positive results with the following instruction “I was not there. I could not know what happened. I will not be able to help you answer the questions.”

**Eliciting a promise to tell the truth.** Although children are unlikely to understand adult versions of the oath, by grade school children recognize the significance of promises, and still younger children understand that when one says one will do something, one is likely to do it (Lyon, 2000). Research with both maltreated and non-maltreated children has found that eliciting a promise to tell the truth increases children’s honesty (Lyon & Dorado, 2008; Lyon, Malloy, Quas, & Talwar, 2008; Talwar, Lee, Bala, & Lindsay, 2002, 2004). Lyon and his colleagues found positive effects from asking the child “Do you promise that you will tell me the truth? Are you going to tell me any lies?”

In sum, interview instructions are easy to administer and improve the performance of many children. However, instructions are not a panacea. Highly leading questions will still elicit high rates of error (e.g., Mulder & Vrij, 1996), and children will under-utilize the options provided them (e.g., to express incomprehension; Peters & Nunez, 1999; Saywitz et al., 1999). Although some research has found that preschool children benefit from instructions (Cordon et al., 1995; Peters & Nunez, 1998), younger children are likely to benefit less than older children because of their difficulties in understanding why and how one knows or doesn’t know (Welch-Ross, 2000), and in detecting their incomprehension (Cosgove & Patterson, 1977). Given the limitations of instructions, the optimal solution is to ask simple non-leading questions. The best way to improve children’s performance is to improve the questions we ask.

**Eliciting Additional Details Without Leading Questions**

Interviewers should avoid suggestive techniques that mislead, introduce bias, reinforce interviewer expectations, apply peer pressure, stereotype the accused as a bad person, and invite children to pretend or speculate (Ceci & Bruck, 2006). Most interviewers know that they should not ask children leading questions, but few agree about what a leading question is. Data support the notion that questions lie along a continuum of impact. On one end of the continuum (the more leading end), the interviewer supplies details, and on the other end of the continuum (the more nonleading end) the child supplies details. Consider the distinction between free recall and recognition (recognition is sometimes called “option posing”). With free recall, the interviewer simply asks “What happened?” and the child supplies the details. With recognition, the
The interviewer provides choices, and the child picks the correct choice. Hence, the interviewer supplies details that the child merely affirms or denies. Recognition questions tend to begin with “Did,” “Was,” and “Were.” Recognition questions often limit the child’s response to a single word.

It is easy to understand why questions that move toward interviewer-supplied details increase the dangers of suggestibility. If the interviewer supplies details, many of the details are likely to be incorrect—the product of the interviewer’s presuppositions or biases. And if children are susceptible to suggestion because they trust the interviewer, because they wish to please the interviewer, or because they doubt their own memory, interviewer-supplied details may taint the child’s report, and possibly the child’s memory for the event (Ceci & Bruck, 2006). Moreover, because children are inclined to guess, it is easier for them to guess in response to questions with interviewer-supplied details (Waterman, Blades, & Spencer, 2001).

**Question Types**

**Elaboration prompts.** Fortunately there are questions that lie between free recall and recognition. To elicit additional detail in the child’s own words, studies suggest interviewers refer to details mentioned by the child previously and follow up with a request for elaboration like “Tell me more about...” (e.g., “You said he put some cream on his finger. Tell me more about that”; Dorado & Saywitz, 2001; Lamb et al., 2008). In order to encourage the child to continue to provide narrative information, interviewers should make liberal use of “What happened next?” questions (Lamb et al., 2008).

**Wh- questions.** Wh- questions typically begin with “What,” “Where,” “When,” “Who,” “Why,” or “How.” Wh- questions can be either general or specific. As Wh- questions become more specific, the interviewer supplies more of the details. Compare “What was the man wearing?” (more general) with “What color were the man’s shoes?” (more specific). In comparison to free recall prompts like “What happened?” specific Wh- questions focus on particular aspects of the to-be-remembered event. This is helpful to the child who has difficulty self-generating details. However, as Wh- questions become more specific, two dangers increase. One danger is that the interviewer’s beliefs about the event will affect the child’s report (e.g., the interviewer assumes the man was wearing shoes). Another danger is that a child who is inclined to guess will come up with a plausible response—one that is incorporated into the child’s report.

Yet, exceedingly general questions can become so vague or abstract that they sail over children’s heads. A helpful guide to balance the general and the specific is to try to use concepts that are concrete and easy to visualize, rather than speaking in generalities, without introducing leading information not already mentioned by the child. One can follow-up on answers to general questions to be certain the interviewer accurately understands the child’s answer with prompts that ask children to explain their answer in their own words (e.g., “Tell me more about …;” or “What makes you think so?”).

When compared to the forced-choice questions described below, Wh- questions are often the least leading form of follow-up question to elicit elaboration. For example, when questioning children about sexual abuse, it is tempting to ask “Were your clothes on or off?” because this detail helps clarify that the touching was sexual and affects the seriousness of the abuse. However, because the question is forced choice (recognition), children will often simply choose
one of the options. In contrast, the interviewer who asks “Where were your clothes?” will
discover that children often describe their clothes such that they were neither on nor off (e.g.,
“around my knees”). If the child had simply chosen one of the options (“on” or “off”), the
interviewer would have formed an inaccurate picture of the event. Similarly, interviewers will
often ask “Did he hit you?” which can be less leadingly asked in Wh- form as “What did he do
with his hands?”

Studies of Narrative Elaboration provide guidance on using Wh- questions to explore five
basic characteristics of incidents: (1) Participants (e.g., “Who was there?” “What did the person
[or name of person identified by child] look like?”); (2) Location (e.g., “Where were you?”
“What did the place look like?”); (3) Specific actions (e.g., “What did Joe [name of person
previously identified by child] do?”); (4) Conversations (e.g., “What did Joe [name of person
identified by child] say or tell you?”); and (5) Emotional states of participants (e.g., “How did
you feel when...” “What did Joe do or say to make you think he was mad [name of emotion
suggested by child...]?”). These categories are derived from a rich body of research on
children’s event knowledge and narrative skills (Nelson, 1986; Stein & Glenn, 1978).

Another element of elaboration is to prompt children to justify their answers with “What
makes you think so?” Or “What made him do that?” (Saywitz & Snyder, 1996; Saywitz, Snyder,
& Lamphear, 1996). For example, when a child said someone was mad, a request from the
interviewer for clarification elicited from the child the behaviors the child observed that led to
the impression of anger, “He yelled at my sister to get out when she walked in on us.”

A Wh- question is not only a way to avoid the dangers of suggestibility, it is also a means
of eliciting details that an interviewer would not elicit were he or she limited to recognition
questions. If an interviewer asks a series of yes/no questions, the interviewer is likely to receive a
series of yes/no answers, and the information obtained will only be as good as the interviewer’s
ability to imagine the details. If the interviewer asks Wh- questions that require multi-word
responses, children will often mention idiosyncratic details of the abuse that lend their reports
credibility. Moreover, the likelihood of logically inconsistent responses is reduced if questions
are Wh- rather than yes/no.

Yes/no questions. Recognition questions can vary in how leading they are. The simplest
sort of recognition question is a yes/no question. Like Wh- questions, yes/no questions can be
either general (“Did he say anything?”) or specific (“Did he tell you to keep a secret?”). Yes/no
questions are not highly leading, but can be problematic if a child has a response-bias (a
tendency to answer questions yes or no), or is reluctant to answer. The research is mixed on
whether young children do indeed exhibit a “yes” bias to yes/no questions (cf. Greenhoot,
Ornstein, Gordon, & Baker-Ward, 1999 [yes-bias not detected] with Peterson, Dowden, &
Tobin, 1999 [yes-bias detected]). However, there is good evidence that young children are
reluctant to answer “I don’t know” to yes/no questions (Poole & Lindsay, 2001; Walker et al.,
1996). Moreover, in laboratory studies, children’s responses to yes/no questions are less accurate
than their responses to open-ended questions (Baker-Ward, Gordon, Ornstein, Larus, & Clubb,
1993).

Yes/no questions can be made more leading by turning them into negative term questions
(e.g., the negative form of “Did he tell you to keep a secret?” is “Didn’t he tell you to keep a
secret?”; Whipple, 1915) or tag questions (e.g., “He told you to keep a secret, didn’t he?”;
Greenstock & Pipe, 1996). Negative term questions and tag questions are particularly likely to affect the responses of preschool children, who are more vulnerable to interviewer pressure. Fortunately, these two question types are not difficult to avoid.

Most guidelines recommend that when yes/no questions are necessary, they are followed by open-ended prompts to elaborate. For example, if an interviewer asks a specific yes/no or forced-choice question, the interviewer follows up with an open-ended question to minimize the suggestiveness of the specific question (Sternberg et al., 2002). If a child answers, “Yes” to “Did he say what would happen if you told anyone?” the interviewer follows up with “What did he say?”

**Forced choice/multiple choice questions.** Another kind of recognition question that is potentially problematic is the forced-choice question in which the interviewer gives the child a series of choices from which the child chooses the “correct” response (e.g., “Was his shirt red or blue?”). Like yes/no questions, forced-choice questions assist the child in generating details but may also supply erroneous information. Because of their reluctance to answer “I don’t know” to recognition questions, young children may feel compelled to choose one of the options even if they don’t know the correct answer, and even if neither answer is correct. When children choose randomly, they tend to choose the last option (Walker et al., 1996).

It is often difficult to interpret the meaning of a child’s response to a forced choice question. Interviewers often make the mistake of rephrasing Wh- questions as yes/no questions, by prefacing the Wh-question with “Can you tell me...” or “Do you know...” Although one could argue that prefacing Wh-questions in this way reduces the likelihood that a child will guess a detail (because she can instead answer “No”), “No” responses are ambiguous. For example, if one asks “Do you know if he said anything?” it is unclear if a “No” response means “No, I don’t know,” or “No, he didn’t say anything.”

**Multiple Interviews**

Excessive interviewing of young children using suggestive techniques can be detrimental to the accuracy of their reports (e.g., Ceci, Loftus, Leichtman, & Bruck, 1994; but see Quas et al., 2007). However, repeated non-leading interviewing tends to uncover new details (Hershkowitz & Terner, 2007; see review in LaRooy, Lamb, & Pipe, 2009). Researchers have not found a detrimental effect of repeating open-ended wh-questions (who, what, where, when, how). Repetition of yes/no questions, however, can be problematic, especially those with embedded information that came from sources outside the child (see review in Lyon, 2002).

**Conclusion**

Much has been learned from scientific research on forensic interviewing of children. Although challenges remain, research provides important insights into choreographing child forensic interviewing into a successful “dance”—one that is informed by science. Guidelines and protocols help teach both the interviewer and the child the appropriate steps—steps that promote accurate and complete reports. In this way, there is less stepping on each others’ toes, and the interviewer is less likely to be accused of inappropriately leading the child’s performance. Research helps the interviewer design a dance that optimizes the chances of eliciting accurate and credible information. This dance benefits all.
References


