

Utilization of Questioning Techniques in Forensic Child Sexual Abuse Interviews

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A partnership project was conducted in Texas between Children's Protective Services (CPS) and a state university to address the research question: What questioning techniques suggested in the child sexual abuse literature are being used in practice? Sixty-two randomly selected videotapes of child sexual abuse interviews were reviewed, and the interviewing techniques were recorded on a 69-item instrument. Most of the reviewed interviews demonstrated the use of 49 of the 69 interviewing technique items. These items include the 4W1H questions (who, when, where, what, and how) in rapport building and competency testing, truth-and-lie items, the 4W1H questions to follow-up the child's statements after disclosure, the use of appropriate techniques, and the use of closing questions.

One type of brief client contact involves forensic interviewing of a child when sexual abuse is suspected. Recently, the focus of the child sexual abuse investigative interview has shifted from eagerly helping the child to disclose abuse to coordinating professional efforts in fact-finding and credibility assessment. The involvements of mental health professionals, including social workers, Children's Protective Service (CPS) case-workers, and clinical psychologists in the investigative process have been documented in recent literature (Cheung, 1997; Kuehnle, 1996). Techniques for how to conduct investigative interviews in a systematic way have been suggested (Faller, 1996; Gardner, 1995; Jones, 1992; Kuehnle, 1996; Morgan, 1995; Wood, McClure, & Birch, 1996; Yuille, Hunter, Joffe, & Zaparniuk, 1993), and multidisciplinary efforts have been documented (Pence & Wilson, 1994), but the outcomes have not been researched, and most studies are descriptive in nature, without validating data to support the suggested techniques.

In some studies, specific questioning techniques are divided into four major areas:

1. rapport-building skills;
2. competency testing;
3. obtaining the details of abuse; and
4. closing the interview (see for example, Jones, 1992; Warren & McGough, 1996; Wood et al., 1996; Yuille et al., 1993).

In order to study this 4-stage interviewing procedure and its questioning techniques, this study focused on identifying and analyzing the most recent efforts in forensic child sexual abuse interviews in a major county in Texas. It is exploratory in nature and involves a utilization analysis of the questioning techniques described in the literature.

THE 4-STAGE INTERVIEW PROCESS

Rapport building skills in an investigative interview are rarely researched. Cheung (1997) illustrates the importance of training rapport-building skills in a multidisciplinary team because rapport building is an important process to ease the anxiety of the child victim. Cheung (1997) noted that many professionals "generally did not respond to or avoided personal questions that were related to the child's current feelings or emotions" (p. 277). Wood and associates (1996) also found that the rapport stage is an essential process, not just a step, for an investigative interview. The rapport-building skills can actually help both the child and the interviewer relax during the interview. Kuehnle (1996) describes four guidelines for rapport development:

1. ask simple questions about the child and provide some personal information about yourself;
2. empathize with a nervous child's feelings;
3. do not ask questions that could be perceived as coercive, such as, "Do you want to be my friend?" and
4. use positive, open-ended questions, which are likely to promote expanded conversations: "What are your favorite TV shows?"

Each of these guidelines suggests that rapport building should not be treated as a mechanical question-and-answer procedure; conversely, spontaneity should be encouraged (p.139).

Immediately following the rapport building stage is the competency testing stage. This stage has three major steps. Step 1 is to ask questions that can further develop rapport, and at the same time establish the child's competency in answering 4W1H questions: Who, Where, When, What, and How questions (Cheung, 1997). Step 2 is to assess the child's ability to differentiate between telling the truth and telling a lie. Step 3 is to explain the ground rules, promising to tell only the truth and accepting "I don't know" or "I don't understand" as an answer or response (Cheung, 1997, p. 281).

Free recall is a complex form of memory retrieval. No one can ensure 100% accuracy in memory recalls (Kuehnle, 1996; Walker, 1988). In research, it was found that young children are less likely than adults to give detailed information using free recall (Kuehnle, 1996). However, in recalling child sexual abuse experiences, Gardner (1995) found that children provide helpful information in a self-expression period if their anxiety and stress can be reduced by means of rapport building questions, drawing, or other projective tests. Free recall of being sexually abused involves more than a pictorial recall; it is a recall of painful, confusing, and ambivalent messages, actions, feelings, and responses. From this perspective, Gardner believes that many children are able to recall some part of the experience without being prompted. Likewise, Kuehnle (1996) found that preschool-age and school-age children can present their experiences based on memories if not influenced by suggestions.

Because preschool-age children have difficulty with spontaneous recall, specific questions are recommended by Gardner (1995) to trigger their responses, such as:

- An initial response: So what's been happening to you lately?
- A follow-up description: What was the next thing that happened?

- Place and location: Tell me exactly where each of these things happened.
- Specific inquiries of the abuse recall: What was [the alleged perpetrator] wearing?
- Noticeable details: What else did you see?
- Other specific corroborative details: Who was the first person you ever told about what X did to you? How did it come about that you told Y about what X did to you? What did Y then say?

In a study of training efforts, Cheung (1997, p. 282) found that direct inquiries perceived as helpful by police officers, social workers, or clinical psychologists are categorized as nonsuggestive, open-ended questions, which encourage the child to freely recall the incident. From the analysis of 74 role-play interviews, trigger questions that are helpful from the child's perspective when the child is reticent include:

- Why are you here today?
- You appear to be upset. Tell me what happened.
- Earlier today at school, you told (someone) that something happened to you. Tell me about that.
- I received a phone call (or report) that something has happened and I would like to be able to help. I first need to know, in your own words, exactly what has happened?
- Has anyone done something to you that you should tell?
- Has anyone told you to keep a secret?

Cheung's (1997) study reveals the fact that "following clues," "active listening," "not interrupting the child," "demonstrating appropriate empathy," "using minimal encouragers such as 'um hm,' 'go on,'" and "using culturally appropriate eye contact" were rated by the child actors as helpful in most interviews (p. 276). In addition, a list of interviewing techniques was validated by a multidisciplinary team of a special child sexual abuse investigation unit in Hong Kong.

In England and Hong Kong, the *Memorandum of Good Practice* (HMSO, 1992) has guided both law enforcement and mental health professionals in developing a collaborative interviewing protocol. The Memorandum is a legal guide that includes a 4-stage process: rapport, free narrative account, questioning, and closing the interview. In parallel with the Memorandum's guidelines, Jones (1992) suggests a 5-stage process:

1. gaining rapport;
2. inquiring about sexual abuse;
3. facilitation;
4. gathering detail; and
5. closing phase.

No matter what the labels are, the interviewer is committed to building rapport, encouraging the child's free recall, specifying information, and closing the interview with the child.

In the United States, although there are no legal guideposts for investigative interviewers to follow, several professional organizations have published their guidelines for their professional members. For example, the American Academy of Child and Adolescent Psychiatry

(ACCAP, 1996) and the American Professional Society on the Abuse of Children (Faller, 1996) have their evaluation guidelines focusing on a comprehensive assessment of the child victim, the alleged offender, and the family. Written documentation is required with specific attention to questions and responses. Characteristics of false allegations and criteria for substantiating sexual abuse are included.

During an investigative interview, it is important to assure the quality of questioning techniques. Of equal importance is the provision of a nonthreatening environment and appropriate behaviors of the interviewer (Poole & Lamb, 1998). In terms of the interviewer's behaviors, Cheung (1997) found that a positive attitude can be developed if the priority is set to protect the child, not to prosecute the offender. With this priority, the special child sexual abuse investigation team of police officers, social workers, and clinical psychologists found that they have been enthusiastically learning new skills to help children address fears and concerns. Questions are used to address children's requests to keep their secret from their parents or other people, such as: *What are you concerned about? Who else shouldn't know about this?* Similarly, a California and Kentucky training study found that the content and process of an interview can be learned and transferred after training, but the skills and behaviors of the interviewers have to be developed through ongoing supervision and team effort (Jones, Stevenson, Leung, & Cheung, 1995; Stevenson, Cheung, & Leung, 1992). In addition, behavioral items to be observed during a videotaped interview include:

1. active listening by use of minimal encouragers and silence;
2. appropriately pacing the interview;
3. congruent behaviors;
4. nonjudgmental attitudes;
5. nonleading questions;
6. not using accusative 'why' questions;
7. demonstrating appropriate empathy and nonpossessive warmth; and
8. not initiating touching (Stevenson et al., 1992).

METHOD

Based on the research literature, the author extracted interviewing items to be included in this study in order to examine the questioning techniques commonly used in practice.

Sample

In a county in Texas, a total of 4,373 videotapes of child sexual abuse investigations were recorded during a 2-year period. By means of a systematic sampling procedure, 113 of these videotaped interviews were content analyzed.

Instrument

In a pilot study, a team of five researchers was trained to use a data-collection instrument. The reliability of the recording system was checked with two pilot cases, and professional feedback was obtained from the CPS office. The instrument was revised to include an additional item, *the first told person's reaction*, to identify motivation of report. As a result, 69 items were included in the instrument (see Table 1).

TABLE 1. QUESTIONING TECHNIQUES USED IN DISCLOSURE CASES (TOTAL N = 62)

Questioning Techniques	n	%
<i>Stage I. Rapport</i>		
1. State the name of the interviewer	60	96.8
2. State the agency	19	30.6
3. State the position or role of the interviewer	9	14.5
4. Identify the purpose of the interview	4	6.5
<i>Competency Assessment</i>		
5. Who Questions	57	91.9
6. When Questions	53	85.5
7. Where Questions	59	95.2
8. What Questions	61	98.4
9. How Questions	59	95.2
<i>Other Rapport Questions</i>		
10. Home Situation	49	79.0
11. Discipline Method	8	12.9
12. Family Relationship	16	25.8
13. Others	31	50.0
<i>Truth & Lies</i>		
14. Help the child understand the importance of telling the truth	59	95.2
15. Assess the child's ability to differentiate the truth and a lie	59	95.2
16. Use a direct approach (child's own definition)	48	77.4
17. Use examples to define the truth and a lie	51	82.3
18. Give a 'truth' example	44	71.0
19. Give a 'lie' example	49	79.0
Use one example for the 'truth' and one for a 'lie'	41	66.1
20. Conclude the importance of telling the truth	55	88.7
<i>Stage II. Free Narrative Account</i>		
21. Encourage the child to tell what happened in his/her own words	58	93.5
<i>Stage III. Questioning (After Disclosure)</i>		
<i>Who Questions</i>		
22. Full name of the alleged perpetrator (AP)	54	87.1
23. Relationship of the AP to the child	57	91.9
24. Brief description of the AP	32	51.6
25. Who else was there when the abuse occurred?	39	62.9
26. Who was the first person you told about the abuse?	49	79.0
27. This person's reaction	31	50.0
28. Who else knew about the abuse?	30	48.4
29. Other who questions	39	62.9
<i>What Questions</i>		
30. Focus on the most recent sexual abuse first	50	80.6
31. What did the AP do?	57	91.9
32. What did the child do before/during/after the abuse?	24	38.7
33. What was the AP wearing?	35	56.5
34. What was the child wearing?	52	83.9
35. What did the child see, say, or feel before/during/after the abuse?	40	64.5
36. What did the AP say?	54	87.1
37. What else happened in this incident?	43	69.4
38. Other what questions	61	98.4

TABLE 1. Continued

How Questions		
39. Determine method of abuse	60	96.8
40. Frequency	45	72.6
41. Duration or length	13	21.0
42. Clarify the child's terminology for private body parts	61	98.4
43. Use the child's terminology to ask further questions	60	96.8
44. How did the child feel after the abuse?	10	16.1
45. How does the child usually get along with the AP?	9	14.5
46. Other how questions	55	88.7
Where Questions		
47. Abuse location or place (e.g. home, bedroom)	56	90.3
48. Address of the location	28	45.2
49. Brief description of the location	34	54.8
50. Where were other family members during the abuse?	42	67.7
51. Other where questions	42	67.7
When Questions		
52. Date (year, season, holiday)	33	53.2
53. Time (if not exact time, day/night)	33	53.2
54. Other 'when' questions	42	67.7
Determine the Progression		
55. What else happened?	23	37.1
56. How often similar incidents occurred	15	*
57. Ask about the first incident using the 4W1H questions	23	*
58. Ask about other incidents between the first and the most recent incident	19	*
59. Other progression questions	11	*
60. Anatomical dolls used	29	46.8
Avoid using inappropriate techniques		
61. Do not use inappropriate 'why' questions	54	87.1
62. Do not use inappropriate leading questions	47	75.8
63. Do not use judgmental statements or questions	58	93.5
64. Do not initiate touching	60	96.8
65. Do not use other inappropriate techniques	55	88.7
Stage IV. Closing the Interview		
66. Give appropriate information about what will happen next	9	14.5
67. Address the child's concerns	22	35.5
68. Ask the child "Do you have any questions?"	53	85.5
69. Thank and reassure the child	54	87.1

*Items not applicable in some cases.

Data recording was divided into the 4 stages: rapport, free narrative, questioning, and closing. The 4W1H questions (Where, When, Who, What, and How) were included in both the Rapport and Questioning stages. When the researcher reviewed a videotape, she or he checked which questioning items had been used in the interview, and then used the open-ended lines to record what techniques and questions were utilized.

Each of the selected tapes was reviewed at the agency by at least two researchers. Of the 113 sample cases, a total of 238 instruments were collected. Among these tapes, 23 were not included in the analysis for various reasons: 15 interviewees were not child victims; 3 were Spanish-speaking cases with no translation; 3 were nonsexual abuse cases (physical abuse);

1 was a blank tape; and 1 was an unclear tape. As a result, data were analyzed from 90 tapes. Matching the data of each of the cases, inconsistencies were further checked and corrected. Responses coded for open-ended questions were also checked for accuracy. When checking the qualitative data between raters, a word-by-word description of what the interviewer said was selected over a summary of what had been said. No inconsistencies were found.

FINDINGS

All 90 cases were suspected cases of child sexual abuse. After reviewing the contents of these videotaped interviews, the researcher found that 62 children (68.9%) revealed experiences of child sexual abuse, while 28 children (31.1%) did not reveal or refused to talk. This article will focus its analysis on the 62 cases with child sexual abuse disclosure information.

Demographics

The child victims in these disclosure cases had an average age of 8.39 years and a median age of 8. The 3:1 female-male ratio suggests that many more girls than boys reported their sexual abuse experiences. Although the average age of female and male victims was very close (8.76 vs. 7.31), a statistically significant difference was found ($t = 6.22$; $p < .05$). A closer examination of the age differences found that more teen female children ($n = 11$) reported abuse than their gender counterpart ($n = 2$). The racial compositions of the disclosure subjects were: 41.9% Whites, 27.4% Blacks, and 30.6% Hispanics. There were no significant differences in racial compositions between gender groups ($\chi^2 = 1.389$, $df = 2$, $p = .499$), indicating that both female and male children were represented proportionally in these three racial groups.

All disclosure cases were alleged child sexual abuse cases. All alleged perpetrators (AP) were known to the child victims. In five cases, the child victim could not clearly identify how the AP was related to the child. Most of the APs ($n = 55$, 88.7%) were closely related to the child victims. The relationship breakdown is listed in Table 2.

Interviewing Techniques

Utilization of the Literature Items. The utilization rates of the 69 technique items based on the literature were analyzed. Given that these sexual abuse cases represented a variety of problems, children used different ways to express their concerns, and the narrative provided

TABLE 2. ALLEGED PERPETRATOR'S RELATIONSHIP TO THE CHILD ($N = 62$)

Relationship	<i>f</i>	%	Cumulative %
Father	21	33.8	33.8
Stepfather	8	12.8	46.6
Mother's boyfriend	6	9.7	56.3
Uncle	6	9.7	66.0
Sibling/Step-sibling	5	8.1	74.1
Cousin	4	6.5	80.6
Grandfather	4	6.5	87.1
Step-grandfather	1	1.6	88.7
Friend	1	1.6	90.3
Other kid	1	1.6	91.9
Unknown	5	8.1	100.0
Total	62	100.0	

by the children could be detailed or brief, and some of the items were not applicable for all cases. Sometimes, questioning items that were helpful in one case might not be perceived as helpful in another case. Furthermore, some questions could be optional based on the progress of the interview. Therefore, a majority rule was used to determine utilization of each of the questioning items; that is, items that were used in more than 50% of the cases were reported for this research study.

As shown in Table 1, the responses to the 69 closed-ended items were analyzed. Forty-nine items were used in most cases, among which 29 items were used in more than 80% of the cases. The 49 items included the 4W1H questions for use in rapport building and competency testing, items for the truth and lie ritual, appropriate techniques, the use of closing questions, and specific questioning techniques for asking follow-up questions after the child had disclosed sexual abuse.

Fifteen items were used less than 50% of the time. These items were: "interviewer's agency," "interviewer's role/position," "purpose of the interview," "discipline method," "family relationship," "who else know about the abuse," "what did the child do before/during/after the abuse," "duration or length of the specific action," "how did the child feel after the abuse," "how did the child usually get along with the AP," "address of the location," "what else happened (to determine progression)," "anatomical dolls used," "give appropriate information about what will happen next," and "address the child's concern."

Rapport Building. Content analysis was further conducted among the open-ended questioning techniques written next to these 69 items. Competency testing and rapport building questions that were used during the rapport stage were content-analyzed. Questions that were used in more than 50% of the cases included: "What is your name?" ($n = 57, 92\%$); "How old are you?" ($n = 56, 90\%$); "When is your birthday?" ($n = 50, 81\%$); "Who do you live with?" ($n = 46, 74\%$); "Where do you live?" ($n = 40, 65\%$); "Where do you go to school?" ($n = 38, 61\%$).

Questioning Techniques With Reticent Children. During the Free Narrative Stage, if children did not respond to the interviewer's inquiries such as, "Tell me what happened," the interviewer would ask specific questions regarding the purpose of the interview, and then provide the child with information about "good touching, bad touching." Questions that were asked in these cases included: "Why are you here today?" ($n = 51, 82\%$); "What parts of your body shouldn't be touched by others?" ($n = 48, 77\%$).

The Truth & Lie Ritual. The truth and lie ritual served three major functions. First, it was used as a transition method to link the relaxing rapport stage to the more serious free narrative reporting stage. Second, it assessed if the child was able to differentiate between telling the truth and telling a lie, and between fact and fantasy. Third, it provided an opportunity for the interviewer to explain to the child the importance of telling what had really happened while not making anything up, even when a child, either because of age or developmental ability, did not understand the examples given by the interviewer.

Interviewers in 95% of the disclosure cases helped the child to understand the importance of telling the truth. A direct approach was used in 48 cases (77.4%), that is, asking the children to define the truth and a lie in their own words. In 44 cases (71%), at least one example was used to assess the child's competency in differentiating between telling the truth and telling a lie. A balanced perspective of using one "truth" example and one "lie" example was represented in 41 cases (66.1%).

Whether the child disclosed or not, the interviewer went through a "truth and lie ritual" in all interviews. A content analysis of 111 "truth and lie" examples used in these 62 interviews was conducted. These examples can be categorized into five groups:

1. Nonspecific definitions given by the interviewer (52 examples given): real, honest, made up, not real, good thing, bad thing.

2. Child's information (26 examples given): the child's age, name, clothes, shoes.
3. Incident-specific examples (21 examples given): money stolen, cookies eaten, broken toy, a child hitting someone, milk spilt on the floor.
4. Observations (8 examples given): wall paper color, who's in the room, raining in the room, birds flying in the room.
5. Imaginary examples (4 examples given): an elephant on your hand; a cup on your hand; dinosaurs flying through the window.

Most of these examples were used as either a truth or a lie example, depending on what the interviewer had used to illustrate the point. Some of the nonspecific definitions given by the interviewers were evaluated as judgmental or confusing, such as, "It is a bad thing to tell a lie, isn't it?" Imaginary items were used by the interviewers as examples of telling a lie. Since children can usually respond to a question regarding their own personal data but not to a question about an unfamiliar scenario, the literature supports the use of concrete examples when questioning children. For example, questions about the child's age, name, or clothing color are helpful in assessing the child's understanding (Cheung, 1997). Also, when an example is given, it is helpful to first check the correct answer with the child before asking the child if the example illustrates the truth or a lie. In addition, it was not helpful to use either the child or the interviewer as the person to illustrate the example of telling a lie because it might confuse the child about his or her own to tell the truth and the truthful image of the interviewer.

According to the analysis, some of the examples were considered helpful in determining the children's understanding of telling the truth or telling a lie, including:

Information Based on the Child:

1. What is your name? (The child answered correctly) If someone said your name is [correct/wrong name], would it be the truth or a lie (mistake)?
2. How old are you? (The child answered correctly) If someone said you're [correct/wrong age], would it be the truth or a lie?
3. I noticed that you are wearing blue jeans today. If someone said you're wearing [blue jeans/a dress] today, would this person be telling the truth or telling a lie?

Incident-Specific Examples:

1. A friend ate all the cookies from the cookie jar and he said he [did/didn't], would this friend be telling the truth or telling a lie?
2. A girl took money from her mom's purse and said she [did/didn't], would she be telling the truth or telling a lie?
3. A boy broke his toy and told his mom [he did it/his sister did it], would he be telling the truth or telling a lie?

Observations:

1. Is it raining inside this room? (The child answered no). If someone said it [is/isn't] raining inside this room, is this person telling the truth or telling a lie?
2. Do you see birds flying inside this room? (The child answered no). If someone said there is a bird flying inside this room, is this person telling the truth or a lie?

Imaginary Examples:

1. If someone said that there is an elephant sitting on my hand, is this person telling the truth or making things up?
2. If someone said two dinosaurs were just flying out through this room, would that really happen? (The child answers no.) If someone said it really happened, would this person be telling the truth or telling a lie?

Other Interviewing Techniques Demonstrated. In addition to using 4W1H questions as reported in the quantitative analysis section, some interviewers demonstrated helpful techniques that were appropriate for children. These techniques are illustrated as follows:

1. Clarify terminology for private body parts
 - Can you spell this word for me?
2. Show empathy
 - I understand it is hard to spell it out sometimes.
3. Clarify emotional cues
 - You don't remember or you don't want to talk about it? It's ok if you don't want to talk. Just let me know how you feel.
4. Show non-possessive warmth and understanding
 - Nobody here will be upset with you because you don't remember or don't want to talk about it.
5. Admit making mistakes and model acceptable behaviors
 - Thank you for reminding me that you told me already. Sometimes if I forget something, you just let me know, OK?

DISCUSSIONS AND IMPLICATIONS TO PRACTICE

Since this was an exploratory and qualitative study, the 69 items derived from the literature were grouped into twelve categories: interviewer's identification, rapport building techniques, truth and lie ritual, free narrative, who questions, what questions, where questions, when questions, how questions, progression questions, appropriate techniques, and closing questions. Over 90% of the interviewers demonstrated the use of a systematic interview procedure. The same protocol with a similar four-stage process was used in all cases. The encouragement of using a free-narrative approach was demonstrated. A high percentage of cases (93.5%) used a general question, *Tell me what happened*, to begin the main content of the interview, that is, before asking specific questions to clarify the child's disclosure. This finding supports the advice from the literature that a neutral perspective or a blank-screen approach should be used to encourage children to disclose and describe the incident in their own words (Cheung, 1997; Gardner, 1995; Kuehnle, 1996; Yuille et al., 1993). In this study, when the child was reluctant to disclose or seemed to be unable to relate to the interviewer, the question, *Why are you here today?* was used in most cases. When the free-narrative format did not help initiate information, other techniques were used, such as, *I heard that something had happened to you. Tell me about it.*

Because children's terminology is different from adults,' it is critical for the interviewers to use 4W1H questions to clarify the specific details of abuse. In those cases when the child

was reticent, 4WIH questions were also used to address the child's concerns and emotional cues, such as: *What has happened that you liked or didn't like? Tell me what happened that you should not tell.* In addition, these questions were used to follow-up with the child's statements, such as: *You said the dog licked you. Whose dog was it? What is the name of this dog?* Other questions could also be used to follow-up with the child's clues: *Who else was with the dog? Where were you? What else happened in this person's house after the dog licked you?*

Items to Be Included in the Interview Protocol

Pence and Wilson (1994) suggest that an investigative protocol is a helpful tool for establishing interagency agreement and providing a detailed outline for the investigative interview. The data presented here provide information to establish a protocol because the interview items were based on inputs from multidisciplinary teams representing the police, child welfare professionals, and mental health professionals (Cheung, 1997; Wood et al., 1996; Yuille et al., 1993). Further validation of these items is highly recommended.

There are several explanations regarding why the first five items were used in less than 50% of the cases. First, for the items related to the interviewers' identification and the interview purpose, the interviewers assumed that the introductory procedure explained to the child prior to the videotaped interview was sufficient. Second, discipline method and family relationship were optional questions to build rapport and assess other forms of abuse. However, if the videotape is to be viewed for legal prosecution purposes, the child's knowledge about whom the interviewer is and his/her agreement to be videotaped during the interview should be a standard procedure included on the tape. Furthermore, the interviewer's introductory statement would help the child feel more comfortable in getting started with the videotaping process.

The item *anatomical dolls used* is an optional item because dolls should not be used when the child can describe the incident in detail. An analysis of the other nine questions that were used in less than 50% of cases shows that these items were specifically designed to help children deal with their emotions, and to help the interviewer assess what happened without going into yes/no, multiple-choice, or leading questions that might assume sexual abuse. For further research and practice, the percentages presented in this study can serve as beginning data for examining the development of an interview protocol. Since all 69 items were assessed by the literature to be helpful, more studies should be conducted to examine their usefulness before any items are excluded from the interview protocol (see Cheung, 1997; Gardner, 1995).

In addition to the 15 "less used" items, four items that clarify the progression of abuse were also used in less than 50% of the cases. It was found that multiple methods of sexual abuse were revealed by 27 children in these 62 disclosure cases. Since progression of sexual abuse was reported by more children than the utilization rate, the progression questions were underutilized in these cases, and should be further examined in future research.

Special Caution When Using an Interview Guide

The 69-item instrument that was used in collecting data from these videotaped interviews needs to be validated. It should be used as an interviewing guide rather than a rigid policy. The interviewer must pay attention to its applications. Special attention should be given to three areas: children's use of language, techniques to obtain information regarding motive to report, and interviewers' flexibility. In this study, *what* and *how* question items were accompanied by open-ended spaces to remind the researchers to record the children's terminology of private body parts and sexual activities. In an interview protocol, the interviewer should be reminded to clarify the terms and then to use the child's terminology to further ask questions in the interview.

Motive to report is another area that has been addressed in the literature (Wakefield & Underwager, 1988) that requires special attention. Since a direct question regarding motive is likely to be an accusing "why" answer, it is suggested in the protocol that the interviewer use the 4W1H questions to determine motive. Examples taken from this study include: *Who was the first person you told about this incident? Who else knew about this? What was this person's reaction? What happened with your daddy (AP) after you told this person? When did you decide to tell this person about it? What did this person say? How did you get along with your daddy (AP) before this happened? How do you get along with him now?* The most direct but less threatening question is: *What made you decide to report?*—A neutral tone of voice is important when these questions are to be offered.

Flexibility is another important point to remember when an interview guide is used. It is suggested that a forensic interview protocol be served mainly as a tool to coordinate interview efforts. It can also be used to train and remind interviewers of what specific questions to ask, such as the full name of the alleged perpetrator, a brief description when the AP's name is not given, and the full address or descriptions of the abuse location. Additional items that are helpful can be added according to the case situation presented by the child. Lastly, and most importantly, the interviewers should hold the value that "working for the welfare of the child" is the priority goal of the interview (Cheung, 1997, p. 274). An interview guide should be used with sensitivity to children's needs and concerns (Saywitz & Goodman, 1996).

Limitations of the Study

This study had several limitations. First, it was a sample study of one geographic location. The generalization of the questioning techniques was limited to a specific county with a population of 3.8 million. Second, all interviewers were female and the study could not focus on the impact of same-sex or opposite-sex interviewers on the child's willingness to disclose. Third, the use of 50% as the criterion to analyze the item utilization was based on experience rather than on prior research support because no literature has suggested any concrete criteria to substantiate the content of an interview protocol. Fourth, the items that were used in less than 50% of the cases were supported by the literature to be relevant to sexual abuse investigations, and more studies should be conducted to support their inclusion (or exclusion). Finally, since the 28 children who did not reveal child sexual abuse did not provide much information in their interviews, it was difficult to analyze how the interview could have helped them disclose their sexual abuse incidents.

Conclusion

It is observed that most of the items specified in the instrument can be used to conduct an investigative interview, while also guiding professional practice. The analyses from both quantitative and qualitative data highlight five important steps to guide the process of conducting a child sexual abuse investigative interview:

1. Use a four-stage approach (Rapport, Free Narrative, Questioning, and Closing).
2. Give children an opportunity to describe the incident in their own words.
3. Use 4W1H questions to clarify the child's statements.
4. Do not use leading questions that indicate the interviewer's prior knowledge about the abuse, and do not make judgmental comments about the abuser or the child.
5. Address the child's concerns and questions before closing the interview.

As the demand of involving mental health professionals in child sexual abuse investigative interviews increases, it is important to use a protocol to coordinate our efforts, guide our

practice, and evaluate the quality of our performance. The overall goal of an investigative interview is to help the child disclose factual information. Interviewers are not judges or prosecutors: they are fact-finders. Selection of interviewing items to develop a protocol should be done with this fact-finding role in mind.

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