

Best Practices for Forensic Interviews of Sexual Abuse Allegations

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Learning Objectives:

Upon completion of this presentation, attendees will be able to:

- a. Describe the knowledge of child development that is requisite for interviewing children about sexual abuse allegations;
- b. Identify the ways in which children's memory can become distorted;
- c. Describe the ways in which interviewer beliefs and expectations can bias the interview;
- d. Describe at least three interviewing techniques that have been empirically found to elicit the most detailed and accurate information when conducting a forensic interview; and
- e. Describe at least three evidence- based best practices for forensic interviewing.

Elements of a Good Forensic Interview: Overview

The investigator should:

- Adopt a neutral stance until the investigation is complete
- Review and evaluate all case reports and evidence related to the alleged abuse in preparation for the interview
- Build rapport at the beginning of the interview
- Use a practice interview when building rapport to enhance free narrative
- Provide ground rules
- Ask open-ended questions and encourage a free narrative from the child
- Pair specific questions with opened-ended prompts
- Avoid pressure, coercion, suggestion through giving the child information, asking leading questions, and repeating questions
- Develop alternative hypotheses about the allegation.
- Examine the existing evidence to determine which hypothesis is most likely.
- Closing the interview without a report of abuse is an acceptable outcome.

Evaluating Medical Evidence of Sexual Abuse

Most cases of child sexual abuse involve NO medical evidence. There is no “gold standard” for evidence of sexual abuse when there is no medical evidence

The only reliable medical evidence is:

- pregnancy
- presence of semen
- presence of gonorrhea or syphilis

Alleged Anogenital “Indicators” of Abuse That Are Also Found in Non-Abused Children

Hymenal “scar” (bands, synechia) or vaginal scar

Vaginal or labial adhesions or vaginal erosions

Urethral “bands”

Anal fissures, anal tags or anal relaxation

Rounded hymenal edge

Hyperpigmentation

Neovascularization

Dilated vaginal opening

Prominent veins

Vaginal erythema

Loss of rugae

Perianal bruising

Hymen thickened or hymen thinned

Healed hymen tear

Hymenal tags or hymen redundant

Labial abrasion or labial thickening

Herpes

Normal Sexual Behavior in Children

- Children under the age of 5 or 6 engage in a wide variety of sexual behaviors.
- After age 6, the frequency of these behaviors decreases with age until puberty.
- As children enter elementary school, they become more “modest”.
- The family has a reciprocal influence on the child’s sexual behaviors.
- Higher levels of family nudity are related to higher levels of overall sexual behavior in children.
- Children with a psychiatric diagnosis exhibit significantly more sexual behavior than children without psychiatric problems.
- Unusual sexual behaviors for children of all ages tend to be more aggressive and imitative of adult sexual behavior.

Most Infrequent Sexual Behavior for Children

Under 4% or less for all ages and both genders exhibit these behaviors. When these behaviors are present, it is possible (but not definitive) that abuse has occurred.

- Puts mouth on sex parts
- Asks to engage in sex acts
- Masturbates with an object
- Inserts object into the vagina/anus
- Imitates intercourse
- Makes sexual sounds

Memory Development and Moral Development in Children

Approximate Age	Memory Development	Moral Development
Birth - 1 ½ - 2	Recognition	Unknown
2 - 3 or 4	Beginning Recall Beginning of Autobiographical Memory	Based on Obedience & Avoidance of Punishment
3 or 4 - 9	Recall becomes Stronger & Infantile Amnesia Becomes Apparent	Egoistic - Based on Egocentric Needs & Earning Rewards or Favors
9 - Early Teens	Recall Becomes Stronger & Infantile Amnesia is More Apparent	Based on Gaining Approval & Avoiding Disapproval
Early Teens - Early Adulthood	Recall is Strengthened Through Rehearsal of Events	Based on Conformity to Rules

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Common Terminology and Facts about Memory

Autobiographical memory:

Memory for experienced events and issues relating to one's self
(also called personal memory or episodic memory)

Autobiographical memory is constructive and reconstructive:

"...brains do not work with information in the computer sense, but with meaning... (which) is a historically and developmentally shaped process...Because each time we remember, we in some senses do work on and transform our memories; they are not simply being called up from store...Our memories are recreated each time we remember." (Rose, 1993:91)

Types of Memory Retrieval

Recognition:

Occurs in the presence of an object that has previously been encountered; this is the first type of memory that infants exhibit.

Recall:

The ability to evoke a mental image of something that is not present
(also called evocation)

Cued Recall:

The ability to evoke a mental image of something that is not present when a specific cue or information is provided

The Child's Assumptions about the Interview

- Every question must be answered (Even if I don't understand it.)
- Every question has a right or wrong answer (Even if I don't know it.)
- The interviewer already knows what happened. (So if he/she says something different, then I am wrong.)
- I am not allowed to answer "I don't know".

During the interview, be aware that:

Children are cooperative conversational partners.

Although children generally become less suggestible as they become older, older children can also be suggestible.

Expectations about an outcome can influence the outcome itself.

What you expect influences what you get!

Best Practices and Scientifically Based Guidelines and Protocols on Investigatory Interviewing of Children

(adapted from Michigan Forensic Interviewing Protocol, 2003; Poole & Lamb, 1998; Hershkowitz, et al., 2007 – National Institute of Child Health & Human Development Investigative Interview Protocol; Wakefield, 2006)

Most current best practices and protocols advise interviewers to proceed through a series of distinct interviewing stages, with each stage accomplishing a specific purpose. There are several advantages of a *phased* approach to interviewing:

- All interviewers deliver recommended introductions and instructions to children.
- Interviewers are encouraged to use less directive methods of questioning.
- Phased approaches facilitate training by breaking the interview process into discrete steps that can be mastered separately.

The interview includes 8 phases:

1. Preparing the Interview Environment
2. The Introduction
3. Establishing the Ground Rules
4. Completing Rapport Building with a Practice Interview
5. Introducing the Topic
6. The Free Narrative
7. Questioning and Clarification
8. Closure

The order of these phases can be varied somewhat from interview to interview depending upon children's initial comments and their ages. For example, some children begin to discuss allegations without prompting. In such cases, the interviewer should not interrupt until it is clear that the child has finished giving a free narrative. Moreover, placement of the ground rules is flexible, and interviewers can remind children about the ground rules at any point during the interview. Some interviewers prefer to establish the ground rules before rapport building. This gives them a chance to review the rules during informal conversation.

However, small children may not keep ground rules in mind throughout the interview, so some interviewers introduce the ground rules after initial rapport building. The purpose of the phases is to encourage interviewers to introduce themselves to children, build rapport, deliver age-appropriate instructions, allow

children to talk about their lives in their own words, and use follow-up questions to clarify ambiguities in the reports. Within this framework, interviewers can select approaches that match their styles of interviewing, the ages and needs of individual children, and the specifics of individual cases.

Overview of a Phased Interview

(Poole & Lamb, 1998. Adapted from the Michigan Protocol with permission from the American Psychological Association.)

Preparing the Environment:

Review questions that will test alternative hypotheses about how the allegation arose.

Remove distracting materials from the room.

Record identifying information on video recorded statement, if used.

The Introduction: Hello, my name is ...

Introduce yourself to the child by name and occupation.

Explain the recording equipment if used and permit the child to glance around the room.

Answer spontaneous questions from the child.

Establishing the Ground Rules: Before we talk some more, I have some simple rules for talking today.

Get a verbal agreement from the child to tell the truth.

Remind the child that he/she should not guess at an answer.

Explain the child's responsibility to correct the interviewer when he/she is incorrect.

Allow the child to demonstrate understanding of the rules with practice questions (e.g., "What is my dog's name?").

Completing Rapport Building with a Practice Interview: I'd like to get to know you a little better now.

Ask the child to recall a recent significant event or describe a scripted event (e.g., what he/she does to get ready for school each morning or how he/she plays a favorite game).

Tell the child to report everything about the event from beginning to end, even things that might not seem very important

Reinforce the child for talking by displaying interest both nonverbally and verbally (e.g., "Really?" or "Ohhh").

Introducing the Topic: Now that I know you a little better....

Introduce the topic, starting with the least suggestive prompt.

Avoid words such as *hurt, bad, or abuse*.

The Free Narrative: Tell me everything about that, even little things you don't think are very important.

Prompt the child for a free narrative with general probes such as, "Tell me everything you can about that."

Encourage the child to continue with open-ended prompts such as, "Then what?" or "Tell me more about _____."

Questioning and Clarification: I want to make sure I understand everything that happened.

Cover topics in an order that builds upon the child's prior answers to avoid shifting topics during the interview.

Select less directive question forms over more directive questions as much as possible.

Do not assume that the child's use of terms (e.g., "Uncle" or "pee pee") is the same as an adult's.

Clarify important terms and descriptions of events that appear inconsistent, improbable or ambiguous.

Ask questions that will test alternative explanations for the allegations.

Closure: Is there something else you'd like to tell me about _____? Are there any questions you would like to ask me?

Ask if the child has any questions.

Revert to neutral topics.

Thank the child for coming.

Best Practices to Use in an Investigative Interview

1. Avoid bias; explore alternative hypotheses or explanations

To avoid biasing the interview, the interviewer must explore alternative hypotheses. One is that the abuse occurred as alleged, but there are other possibilities to examine. Alternative hypotheses often include the following (these are not exhaustive, but are offered as examples):

- The allegations are basically valid, but the child has substituted a different person for the perpetrator.
- Some of the allegations are valid, but the child has invented or been influenced to make additional allegations that are false.
- The child misperceived innocuous or inappropriate but non-abusive behaviors as sexual abuse.

- The child has been influenced or pressured to make a completely false allegation to serve the needs of someone else.
- The child has made a false allegation for personal motives of revenge, gain, to show off to a peer, or to help someone else.
- The child initially made up the allegations but has talked to several people about them and they have now become real to the child.
- The child saw pornographic magazines and pictures, saw a pornographic movie, or observed adults engaged in sexual activities, and this contributed to the allegations she later made.
- The child engaged in sex play with peers or siblings, and then accused an adult.
- The child was questioned repeatedly by adults who believed the child had been abused, and the child began making statements to please the adults who then reinforced the child with attention or praise.

2. Build rapport at the beginning

One purpose of this part of the interview is to talk about neutral topics and help the child become more comfortable. But it is also to encourage and teach the child to give information to the interviewer. The interviewer must explain the child's role, motivate the child to give detailed and complete accounts of events they have experienced, emphasize the importance of telling only about true events that actually happened, and encourage the child to correct inaccurate statements made by the interviewers. This is best accomplished by beginning the interview with open questions where the interviewer clearly does not have the information. By asking the child to recall a personally-experienced event, the interviewer can gauge the child's verbal skills and communicate that the child is expected to do the talking.

One way to build rapport is to identify—during pre-interview preparation—a specific event that the child recently experienced (or experienced around the time of the alleged abuse). “Training to talk” events could be a birthday party, a recent holiday celebration, an event at school, or a significant family event (e.g., getting a new puppy). The interviewer asks the child to describe this event in detail, **using open-ended prompts**, and conveys complete fascination with everything the child has to say. Young children often have little to say about one-time events. If this is the case, it can be helpful to ask the child to describe a recurring, scripted event.

There are three general principles for rapport building:

- The interviewer tries to elicit information using only open-ended prompts that invite the child to provide multiple-word responses, such as, “Tell me

- everything about that.”
- The interviewer invites the child to be informative with comments such as, “Tell me everything that happened, even little things you don’t think are very important” or “Tell me everything that happened, from the very beginning to the very end.”
 - The interviewer can encourage the child to talk during this phase of the interview with head nods, exclamations (e.g., “Ohhhh”), partial repetitions of the child’s last comment (e.g., Child: “And then he opened my present by mistake.” Interviewer: “Oh, he opened your present.”), or even more direct encouragement (e.g., “You told me a lot about your birthday; I know a lot more about you now”).

3. Have a practice interview

During the rapport phase there should be one or more practice interviews where the child is asked open questions about neutral topics, such their last birthday party or the first day of school, **and encouraged to give detailed narrative answers**. These practice interviews allow the interviewer to gauge the child's memory and ability to describe past events. They also allow the child to practice giving information in response to open, non-leading questions. Research indicates that interviewers get better information from children when they begin with such practice interviews. Children who have the opportunity to practice giving lengthy narrative responses to open-ended questions in the rapport phase continue this behavior in the substantive part of the interview.

4. Provide ground rules

Young children sometimes try to answer any question an adult asks and may provide answers to unanswerable questions. Child interviews should begin with ground rules that include telling the child the interviewer doesn't know the answers and that it is all right for the child to say "I don't know" or "I don't remember," and that the child should correct the interviewer if she says something wrong. It helps if the interviewer practices the ground rules by asking an unanswerable question (e.g., "What is the name of my cat?") and praising the child when he or she says, "I don't know." The interviewer can also deliberately get information wrong (e.g., "You said you have a younger sister and an older brother" when the child has two brothers) and then reinforce the child for correcting the interviewer. Examples of ground rules include:

- I wasn't there and I don't know what happened. Please tell me everything you can remember.

- It's all right to say "I don't know" if you don't know the answer: Please don't guess.
- If you cannot remember everything, that's okay. It's all right to say "I don't remember."
- If I misunderstand something you say, please tell me. I want to understand everything you say.
- If I get something wrong, please correct me.
- It's important to only talk: about things that really happened. We don't talk about make believe or pretend.
- If you don't understand something I say, please tell me and I will try to say it using different words.

5. Ask open questions and encourage a free narrative from the child

The most reliable and forensically useful information from children is obtained by encouraging the child to give a free narrative of the alleged events and by asking a series of open, non-leading questions such as asking the child to "tell me everything you remember about ..." The research evidence is clear: freely recalled information is more likely to be accurate than information obtained in response to yes/no and forced choice questions. All of the articles discussing guidelines for child forensic interviews make this recommendation. Even children as young as four can provide substantial amounts of forensically relevant information in response to free-recall prompts. This means that interviewers do not have to rely on forced choice and yes/no questions even with preschoolers.

The substantive portion of the interview should be also introduced in as open a way as possible. The NICDH investigative interview protocol gives detailed examples of how to progressively phrase such beginning questions and how to continue the interview using open-ended prompts. Some examples of how to use open-ended probes to introduce the topic of the interview include:

- Do you know why you came here to talk to me today?
- Now that I know you a little better, I want to talk about why you are here today. Tell me why you came to talk to me.
- I understand some things have been happening in your family. Tell me about them.

Whenever the child gives response that is on track, the interviewer should encourage a narrative response by asking, "Tell me everything you can remember about that." When the child pauses, the interviewer should follow up with additional open-ended prompts such as, "And then what happened?," "Tell me more about that." Such open questions should be used as much as possible. Interviewers can ask the child to repeat something that wasn't clear or encourage the child to continue the narrative by repeating a phrase, but they

should never interrupt the child to redirect the interview or to ask specific questions. Only when it is clear that the child is not going to provide additional information in response to the open-ended prompts should the interviewer turn to specific questions.

6. Pair specific questions with opened-ended prompts

After obtaining as much information as possible with open questions, interviewers may need to ask specific questions to address important areas that have not been mentioned by the child. When this is necessary, it should be later in the interview; such questions should not be asked at the beginning. When a more specific question must later be asked, it should be paired with an open question. For example, if the child is asked if his clothes were on or off and says, "Off," the interviewer could then say, "Tell me everything about how they got off" If the interviewer asks if anything happened in the bedroom and the child says, "Yes" the interviewer can then say, "Tell me everything that happened there." The risk of getting inaccurate information from such closed questions can be minimized if they are paired with an open-ended prompt.

7. Avoid pressure, coercion, suggestion through giving the child information, asking leading questions, and repeating questions

Although open-ended questions can be repeated without contaminating the child's statements, interviewers should avoid repeating specific, closed, and yes-no questions. When children are asked the same question repeatedly, they can change their answers to conform to what they think the interviewer wants to hear.

Interviewers should never ask suggestive questions which provide information about allegations. The general principle is that the interviewer shouldn't ask a question about something unless the child has already brought it up. Obviously, pressure and coercion should never be used. All the guidelines warn against this.

8. Closing the interview without a report of abuse is an acceptable outcome.

There are many reasons why a child may not disclose: because the abuse didn't occur, because the child is frightened or does not want to get a loved one in trouble, or because the event was not especially memorable and the child is not recalling the target event at this particular moment. The investigative team needs to decide in advance how directly a child should be prompted, taking into consideration the amount of corroborating evidence and the risk to the child from failing to obtain a disclosure.

Red Flags for False Accusations Of Child Sexual Abuse *

- Disputed custody or divorce.
- Mom says the child has disclosed. The child denies any abuse.
- Mom goes Doctor shopping.
- Mom continues to make new allegations, even though the previous ones were not substantiated.
- Reports of the child's "symptoms" cannot be corroborated by neutral parties.
- The child repeatedly denied that sexual abuse occurred but eventually makes an outcry when placed in therapy to uncover the abuse.
- The child is asked leading, suggestive and/or coercive questions after denying that abuse occurred.
- Child is confused when asked for details or asked to clarify contradictions.
- The child's account of the abuse changes overtime.

*No one of these items is necessarily a red flag by itself. When a case contains several of these elements combined, the likelihood of a false allegation increases. When these occur, the case likely warrants a more thorough interview and investigation.

References

- Adams, J. K. (1996). Investigations and interviews in cases of child sexual abuse: A look at the scientific evidence. *Issues in Child Abuse Accusations*, 8 (34), 120-138.
- Bradley, A. R. & Wood, J. M. (1996). How do children tell?: The disclosure process in child sexual abuse. *Child Abuse & Neglect*, 20 (9), 881-891.
- Brainerd, C. J., Reyna, V. F., & Ceci, S. J. (2008). Developmental reversals in false memory: A Review of data and theory. *Psychological Bulletin*, 134, 334-375.
- Bruck, M. & Ceci, S.J. (2000). Reliability and suggestibility of children's statements: From science to practice. In D. Schetkey & E. Benedict (Eds.), *Comprehensive Textbook in Child and Adolescent Forensic Psychiatry*.
- Bruck, M, Ceci, S. J., & Francoeur, E. (2000). Children's use of anatomically detailed dolls to report on genital touching in a medical examination: Developmental and gender comparisons. *Journal of Experimental Psychology: Applied*, 6(1):74-83.
- Bruck, M., Ceci, S.J., & Hembrooke, H. (2002). The nature of children's true and false narratives. *Developmental Review*, 22, 520-554.
- Bruck, M., Melnyk, L., & Ceci, S. J. (2000). Draw it again Sam: The effect of drawing on children's suggestibility and source monitoring ability. *Journal of Experimental Child Psychology*, 77, 169-196.
- Bussey, K. (1992). Children's lying and truthfulness: Implications for children's testimony. In S. J. Ceci, M. D. Leichtman, & M. E. d Putnick (Eds.), *Cognitive and social factors in early deception* (pp.89-109). Hillsdale, NJ: Lawrence Erlbaum.
- Bussey, K., Lee., K., & Grimbeck, E. J. (1993). Lies and secrets: implications for children's reporting of sexual abuse. In G. S. Goodman, & B. L. Bottoms (Eds.), *Child victims, child witnesses: Understanding and improving testimony* (pp. 147-168). New York: Guilford Press.
- Call, J. A. (1994) False allegations of sexual abuse in custody and visitation disputes. *Oklahoma Family Law Journal*, 9(2), 76-86.
- Carnes, C.N. (2000). *Forensic evaluation of children when sexual abuse is suspected*, 2nd ed., National Children's Advocacy Center, Huntsville, AL.
- Carnes, C.N., Nelson-Gardell, D., Wilson, C., & Orgassa, U.C. (2001). Extended forensic evaluation when sexual abuse is suspected: A multisite field study. *Child Maltreatment*, 6, 230-242.
- Ceci, S.J. & Bruck, M. (Spring 2000). Why judges must insist on electronically-preserved recordings of child interviews. *Court Review*, 37,10-12.

Ceci, S.J., Bruck, M., & Battin, D. (2000). The suggestibility of children's testimony. In Bjorklund, D. (Ed). *False-memory creation in children and adults* (pp. 169-201). Mahwah, NJ: Erlbaum.

Ceci, S. J. & Bruck, M. (2006). Children's suggestibility: Characteristics and mechanisms. *Advances in Child Development and Behavior*, 34, 247-281.

Ceci, S. J., Bruck, M., Kulkfsky, S. C., Klemfuss, J. Z. & Sweeney, C. (2008). Unwarranted assumptions about children's testimonial accuracy. *Annual Review of Clinical Psychology*, 3, 311-328.

Ceci, S. J., Crossman, A., L., Scullin, M., Gilstrap, L., & Huffman, M. (2001). Children's suggestibility research: Implications for the courtroom and the forensic interview. In Westcott, H.L., Davies, G.M. & Bull, R. (Eds) *Children's Testimony: A Handbook of Psychological Research and Forensic Practice*. Chichester: Wiley.

Ceci, S.J., Fitneva, S. A., & Williams, W. M. (2010). Representational constraints on the development of memory and metacognition: A developmental-representational-theory. *Psychological Review*, 117, 464-495.

Ceci, S. J., & Friedman, R. D. (2000). The suggestibility of children: Scientific research and legal implications. *Cornell Law Review*, 86, 34-108.

Ceci, S. J., Huffman, M. L., Crossman, A., Scullin, M., & Gilstrap, L. (2000). How reliable are children's memories? (pp. 27-44). In Krasnegor, N. A., Anderson, N. B., & Bynum, D. R. (Eds.), *Health & Behavior*, Vol. 1. Bethesda, MD: NIH, Office of Behavioral and Social Sciences.

Ceci, S.J. & Kanaya, T. (2000). Motivated forgetting. In W.E. Craighead & C.B. Nemeroff (Eds.) *The Corsini Encyclopedia of Psychology and Behavioral Science*, 3rd ed. (pp. 979-980). New York: John Wiley & Sons.

Ceci, S. J. & Klemfuss, J. Z. (2010). Children's suggestibility: Knowns and unknowns. *The Advocate: Division 37 of APA*, 33, 3-7.

Ceci, S. J., Leichtman, M.D. & Putnick, M.E. (Eds.), (1992). *Cognitive and social factors in early deception* (pp.89-109). Hillsdale, NJ: Lawrence Erlbaum.

Ceci, S. J., Loftus, E., Leichtman, M., Bruck, M. (1994). The possible role of source misattributions in the creation of false beliefs among preschoolers. *International Journal of Clinical and Experimental Hypnosis*, 42 (4). 304.

Ceci, S.J., Papierno, P.B., & Kulkofsky, S. C. (2007). Representational constraints on children's memory and suggestibility. *Psychological Science*, 18, 503-509.

- Cheung, K. M. (1997). Developing the interview protocol for video-recorded child sexual abuse investigations: A training experience with police officers, social workers, and clinical psychologists in Hong Kong. *Child Abuse and Neglect*, 21 (3), 273-284.
- Coleman, L. (1989). Medical examination for sexual abuse: Have we been misled? *Issues in Child Abuse Accusations*, 1 (3), 1-9.
- Crossman, A.M., Powell, M.B., Principe, G.F. & Ceci, S.J. (2002). Child testimony in custody cases: A review. *Journal of Forensic Psychology Practice*, 2, (1).
- Daly, L.W. (2004). Police officers do not receive adequate training to prepare them to handle child sexual abuse investigations *Journal of Issues in Child Abuse Allegations*, 14 (1). [Electronic Version].
- Dewhurst, S.A. & Robinson, C.A. (2004). False memories in children: Evidence for a shift from phonological to semantic associations. *Psychological Science*, 15 (11),
- Dunne, J., & Hedrick, M. (1994). The parent alienation syndrome: An analysis of sixteen cases. *Journal of Divorce & Remarriage*, 20, (3/4), 21-39.
- Dziech, B. W. & Schudson, C. B. (1989). *On trial: America's courts and their treatment of sexually abused children*. Boston: Beacon Publishers. 782-86.
- Emans, S. J., Woods, E. R., Flagg, N. T., & Freeman, A. (1987, May). Genital findings in sexually abused, symptomatic and asymptomatic girls. *Pediatrics*, 79, (5), 778.
- Faller, K.C., & Henry, J. (2000). Child sexual abuse: A case study in community collaboration. *Child Abuse & Neglect*, 24, 1215-1225.
- Faller, K. C. (2007). *Interviewing children about child sexual abuse*. New York: Oxford University Press.
- Fontanella, C., Harrington, D., & Zuravin, S.J. (2000). Gender differences in the characteristics and outcomes of sexually abused preschoolers. *Journal of Child Sexual Abuse*, 9, 21-40.
- Friedrich, W. (1995). The clinical use of the child sexual behavior inventory. *The APSAC Advisor*, 8, 1-20.
- Friedrich, W. N., Fisher, J., Broughton, D., Houston, M., & Shafran, C. R. (1998). Normative sexual behavior in children: A contemporary sample. *Pediatrics*, 101 (4).
- Friedrich, W. N., Grambsch, P., Broughton, D., Kuiper, J., Beilke, R. L. (1991). "Normative sexual behavior in children". *Pediatrics* 88, 456 – 464

Friedrich, W. N., Grambsch, P., Damon, L., Hewitt, S., Koverola, C., Lang, R., Wolfe, V., Broughton, D. (1992). Child sexual behavior inventory: Normative and clinical comparisons. *Psychological Assessment, 4*, (3), 303 – 311.

Garbarino, J., & Stott, F. M. (1992). *What children can tell us: Eliciting, interpreting, and evaluating critical information from children*. San Francisco: Jossey-Bass Publishers.

Gardner, R. (1998). Recommendations for dealing with parents who induce a parent alienation syndrome in their children. *Journal of Divorce & Remarriage, 28*(3/4), 1-23.

Garven, S., Wood, J. M., Malpass, R. S., & Shaw, J. S. (1997). More than suggestion: The effect of interviewing techniques from the McMartin preschool case. *Journal of Applied Psychology*.

Gilstrap, L. & Ceci, S. J. (2004). Reconceptualizing children's suggestibility: bidirectional and temporal properties. *Child Development, Vol. 75*(6).

Hickman, J.A. & Reynolds, C.R. (1994). Effects of false allegations of sexual abuse on children and families. In B. Threatt (Ed.), *Evaluating children's allegations of sexual assault*. Austin, TX: Texas Legal Resource Center for Children and Travis County Bar Association.

Haugaard, J. J., & Crosby, C. (1989). Children's definitions of the truth and their competency as witnesses in legal proceedings. Paper presented at the Southeastern Psychological Association Conference, Washington, DC.

Hershkowitz, I., Fisher, S., Lamb, M.E. & Horowitz, D. (2007). Improving credibility assessment in child sexual abuse allegations: the role of the NICHD investigative interview protocol. *Child Abuse and Neglect, 31*(2), 99-110.

Jensen, L. A., Arnett, J. J., Feldman, S. S. & Cauffman, E. (2004). The right to do wrong: Lying to parents among adolescents and emerging adults. *Journal of Youth and Adolescence, 33* (2), 101-112.

Jones, D. P. H. & McGraw, J. M. (1987). Reliable and fictitious accounts of sexual abuse in children. *Journal of Interpersonal Violence, 2*, 27-45.

Kaplan, H. J. (2003). An alternate hypothesis for People v Kaplan: The alliance of fact, research, and reason. *Journal of Issues in Child Abuse Allegations, 13* (1). [Electronic Version].

Kail, R. (1990). *The development of memory in children (3^d ed)*. New York: W. H. Freeman & Co.

Kail, R. (2003). *Advances in child development and behavior*. San Diego: Academic/Elsevier.

Kellogg, N. D., Parra, J. M., & Menard, S. (1998). Children with anogenital symptoms and signs referred for sexual abuse evaluations. *Archives of Pediatric Adolescent Medicine*, *152*, 634-641.

Kerns D. L., Ritter, M. L. & Thomas, R. G. (1992). Concave hymenal variations in suspected child abuse victims. *Pediatrics*, *90*, 265-271.

Klemfuss, J.Z., Ceci, S.J., & Bruck, M. (2008). Normative memory development and the child witness. In Kuehnle, K. & M. Connell (Eds.), *Child Sexual Abuse Allegations*. NY: Wiley.

Lewis, M., Stanger, C., & Sullivan, M. W. (1989). Deception in 3-year-olds. *Developmental Psychology*, *25*, 439-443.

Lieb, R., Berliner, L. and Toth, P. (1997, January). *Protocols and Training Standards: Investigating Allegations of Child Sexual Abuse* [Electronic Version]. Washington State Institute for Public Policy.

London, K., Bruck, M., Ceci, S. J. & Shuman, D. W. (2005). Disclosure of child sexual abuse: What does the research tell us about the ways that children tell? *Psychology, Public Policy, and the Law*, *11*(1), 194-226.

London, K., Bruck, M., Wright, D. B., & Ceci, S. J. (2008). Review of the contemporary literature on how children report sexual abuse to others: Findings, methodological issues, and implications for forensic interviewers. *Memory*, *16* (1), 29-47.

McBride, K. (1996). Child sexual abuse evaluations: A joint investigative approach combining the expertise of mental health and law enforcement professionals. *Policing in Central Europe: Combining Firsthand Knowledge With Experience From the West*. College of Police and Security Studies, Slovenia

McCann, J., Vouris, J. & Simon, M. (1988, June). Labial adhesions and posterior fourchette injuries in childhood sexual abuse. *American Journal of Diseases in Children*, *142*, 659.

McCann, J., Voris, J., Simon, M. & Wells, R. (1989). Perianal findings in prepubertal children selected for nonabuse: A descriptive study. *Child Abuse and Neglect*, *13*, 179-193.

Michigan Forensic Interviewing Protocol, 2003. State of Michigan Governor's Task Force on Children's Justice and Department of Human Services. Retrieved online July 7, 2007 from: http://www.michigan.gov/documents/dhs/DHS-PUB-0779_211637_7.pdf

Orbach, Y., Hershkowitz, I., Lamb, M.E., Sternberg, K.J., Esplin, P.W. & Horowitz D. (2000). Assessing the value of structured protocols for forensic interviews of alleged child abuse victims. *Child Abuse and Neglect*, *24*(6), 733-52.

Paine, M.L., & Hansen, D.J. (2002). Factors influencing children to self-disclose sexual abuse. *Clinical Psychology Review, 22*, 271-295.

Poole, D.A. & Lamb M.E. (1998). *Investigative Interviews of Children: A Guide for Helping Professionals*. Washington, D.C., American Psychological Association.

Poole, D.A., & Lindsay, D.S. (2002). Children's suggestibility in the forensic context. In M.L. Eisen, J.A. Quas, & G.S. Goodman, (Eds). *Memory and suggestibility in the forensic interview. Personality and clinical psychology series* (pp. 355-381). Mahwah, NJ: Erlbaum.

Powell, M.B., Thompson, D. M., & Ceci, S. J. (2003). Children's memory of recurring events: Is the first event always the best remembered? *Applied Cognitive Psychology, 17*, 127-146.

Principe, G. & Ceci, S. J. (2002) I saw it with my own ears: The effects of peer conversations on preschoolers' reports of nonexperienced events. *Journal of Experimental Child Psychology 83*, 1-25.

Raskin, D.C., Yuille, J, S. (1989). "Problems in evaluating interviews of children in sexual abuse cases", in S. J. Ceci et al., *Adult Perspectives on Children's Testimony*. Springer-Verlag: N.Y.

Richardson, J. & Schuster, M. (2004). *Everything you never wanted your kids to know about sex (but were afraid they'd ask)*. New York: Three Rivers Press. Retrieved online October, 15, 2006 from: <http://www.enotalone.com/article/2479.html>

Rudy, L., & Goodman, G. S. (1991). Effects of participation on children's reports: Implications for children's testimony. *Developmental Psychology, 27*, 527-538.

Sas, L. (2003, November). The interaction between children's developmental capabilities and the courtroom environment: The impact on testimonial competency. *Research and Statistics*. Department of Justice, Canada. Retrieved online June 21, 2005 from: http://canada.justice.gc.ca/en/ps/rs/rep/2002/interaction/inter_sum.html

Schneider, W., & Pressley, M. (1989). *Memory development from 2 to 20*. New York: Springer-Verlag

Scullin, M. H. & Ceci, S. J. (2001). A suggestibility scale for children. *Personality & Individual Differences, 30*, 843-856.

Scullin, M, Kanaya, T., & Ceci, S. J. (2002). Measurement of individual differences in children's suggestibility across situations. *Journal of Experimental Psychology: Applied, 8* (4), 233-246.

Sjöberg, R.L., & Lindblad, F. (2002). Delayed disclosure and disrupted communication during forensic investigation of child sexual abuse: A study of 47 corroborated cases. *Acta Paediatrica, 91*, 1391-1396.

Somer, E., & Szwarcberg, S. (2001). Variables in delayed disclosure of childhood sexual abuse. *American Journal of Orthopsychiatry*, 71, 332-341.

Sorenson, T. & Snow, B. (1991). How children tell: The process of disclosure in child sexual abuse. *Child Welfare*, 70, 3-13.

Sternberg, K.J., Lamb, M.E., Esplin, P.W., Orbach, Y., & Hershkowitz, I (2002): Using a structured interview protocol to improve the quality of investigative interviews, in *Memory and Suggestibility in the Forensic Interview*. Edited by M.L. Eisen, J.A. Quas, G.S. Goodman. Mahwah, NJ, Lawrence Erlbaum Associates. pp. 409-436.

Stouthamer-Loeber, M. (1987, April). Mothers' perceptions of children's lying and its relationship to behavior problems. Presented at the Annual Meeting of Society for Research on Child Development, Baltimore, MD.

Thompson, W. C., Clarke-Stewart, A., & Lepore, S. J. (1997). What did the janitor do? Suggestive interviewing and the accuracy of children's accounts. *Law and Human Behavior*, 21(4), 405-426.

Turtle, J. W., & Wells, G. L. (1987). Setting the stage for psychological research on the child eyewitness. In S. J. Ceci, M. P. Toglia, & D. F. Ross (Eds.), *Child eyewitness memory* (pp. 230-248). New York: Springer-Verlag.

Wakefield, H. (2006). Guidelines on investigatory interviewing of children: What is the consensus in the scientific community?, *Issues in Child Abuse Accusations*, 16, 1.

Warren, A., Woodall, C. Hunt, J. & Perry, N. (August, 1996). It sounds good in theory, but...*Child Maltreatment*, 1, (3), 231-254.

Warren, A.R. & Marsil, D.F. (2002). Why children's suggestibility remains a serious concern. *Journal of Law and Contemporary Problems*, 65 (1), 127-147.

Wood, B., Orsak, C., Murphy, M., & Cross, H.J. (1996). Semistructured child sexual abuse interviews: Interview and child characteristics related to credibility of disclosure. *Child Abuse & Neglect*, 20, 81-92.

Wood, J. M., McClure, K. A., & Birch (1996). Suggestions for improving interviews in child protection agencies. *Child Maltreatment*, 1 (3), 223-230.

Wood, J.M., & Garven, S. (2000). How sexual abuse interviews go astray: Implications for prosecutors, police, and child protection services. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 5, 109-118.

Yuille, J. C., Hunter, R., Joffe, R., & Zaparniuk, J. (1993). Interviewing children in sexual abuse cases. In G. S. Goodman, & B. L. Bottom' (Eds.), *Child victims, child witnesses: Understanding and improving testimony* (pp. 95-116). New York: Guilford Press.