

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/273514667>

# Common Errors in the Assessment of Allegations of Child Sexual Abuse

Article in *The Journal of psychiatry & law* · September 2010

DOI: 10.1177/009318531003800306

---

CITATIONS

3

---

READS

387

1 author:



Eric Mart

Eric G. Mart and Associates

16 PUBLICATIONS 34 CITATIONS

SEE PROFILE

Some of the authors of this publication are also working on these related projects:



Article in *Arch Clin Neuropsychol*. 2016 Sep;31(6):554-61. doi: 10.1093/arclin/acw048. Epub 2016 Aug 1. [View project](#)



Mart, E. G., & Connelly, A. W. (2010). An unusual case of epileptic postictal violence: Implications for criminal responsibility. *Open Access Journal of Forensic Psychology*, 2, 49-58. [View project](#)

## Common errors in the assessment of allegations of child sexual abuse

BY ERIC G. MART, PH.D., ABPP (FORENSIC)

---

*The assessment of child sexual abuse (CSA) allegations is a complex, challenging, high-stakes undertaking. The consequences of sloppy assessments leading to false positive or false negative court decisions are clearly severe. Despite this, many professionals and paraprofessionals who undertake such assessments continue to perform substandard child sexual abuse investigations. This article presents some of the common errors made by CSA investigators and suggests the use of research-based investigative protocols and ongoing training as ways of improving this situation.*

**KEY WORDS:** *Child sexual abuse, assessment, investigative protocols.*

---

The sexual abuse of children is a serious and ongoing problem in American society. There is a tremendous cost to victims of such abuse, and the sheer number of allegations places a serious burden on the resources of the civil and criminal justice system. It is important to recognize that the

**AUTHOR'S NOTE:** *For additional information about this article contact: Eric G. Mart, Ph.D. ABPP (Forensic), Highland Psychological Service, 311 Highlander Way, Manchester, NH 03103. E-mail: emart@comcast.net.*

© 2010 by Federal Legal Publications, Inc.

way such cases are investigated can have an extremely important impact on the alleged victim, the alleged perpetrator, as well as the families of those involved. Many states have passed or are in the process of passing lengthy mandatory minimum sentences and procedures for the indefinite civil commitment of those convicted of sexual assaults as sexually violent persons. Often there is no evidence in child sexual abuse (CSA) cases beyond that produced by the forensic interview of the child who is suspected of being a victim of such abuse.

There are a number of reasons for this general lack of hard evidence in these types of cases. First, virtually all acts of CSA are committed in private, so only the alleged perpetrator and the alleged victim know what really happened. Further, many of the acts that fall under the heading of CSA would not be expected to leave injuries or even indications that they had occurred. Examples of these types of activities are fondling, exposure, or acts of oral sex. Complicating matters further, there is medical research that suggests that even acts of abuse that might reasonably be expected to leave physical signs such certain types of penetration may leave no characteristic injuries or signs (Adams, Harper, Knudson, & Revilla, 1994).

As a consequence, a child's statements to law enforcement officers or child protection workers take on a great deal of significance in the context of investigations of sexual abuse allegations. One way of thinking about the potential problems that a poorly conducted interview can produce is to use the analogy of crime scene investigation. If a crime scene investigation is well conducted, it can provide a great deal of information about the specifics of the crime; the investigator may find DNA, fibers, gunpowder residue, and other evidence that will assist in the apprehension of the guilty party and the exoneration of the innocent. On the other hand, poor investigatory technique can degrade the crime scene; samples can be mishandled, objects moved from original

positions, foreign DNA introduced, or fingerprints may be wiped away. Once a crime scene is degraded, it cannot be reconstructed. In the same way, well-conducted interviews can do much to assist fact finders in arriving at their conclusions regarding the presence or absence of CSA. Poorly conducted interviews can have tragic consequences; an abused child can be sent back to their abuser, or an innocent man or woman may spend the rest of his or her life incarcerated. And as with crime scenes, once a child's recollections are distorted by poor interviewing techniques, his or her memories cannot be restored to their original state. It is for this reason that it is absolutely essential that such interviews be conducted in a manner that effectively elicits information while minimizing the chances that the child's statements will be rendered unreliable.

It is not my intention to review the voluminous literature that makes it clear that faulty interviewing techniques can produce inaccurate recollections in children, which will be remembered in their distorted form long after the interview has occurred. In my work as a forensic psychologist, I have had the opportunity to review a large number of tapes of these interviews, and I have also conducted such interviews myself. No interview is perfect; there are always questions that could have been better phrased, or questions that were never asked that should have been. The interviews I have reviewed have ranged from excellent to truly wretched. The purpose of this article is to review common problems that occur in CSA interviews and to suggest some potential remedies for these problems.

### **Lack of rapport**

There is a consensus that children respond best when the interviewers take time to establish rapport. This would appear to be a matter of common sense; children discussing possibly dramatic events with a strange adult are more likely to be

guarded if they are not made to feel comfortable. In my experience of reviewing the tapes of many child interviews, it is clear that many interviewers either have little experience establishing rapport with children, or do not attach sufficient value to the need to make the child feel comfortable and safe. This tendency to give rapport building short shrift in forensic interviews of children has been noted by other authors (Sternberg, Lamb, Esplin, & Baradaran, 1999). This lack of rapport can be recognized by observing a number of child behaviors, ranging from subtle to obvious. Subtle signs of lack of rapport can include lack of eye contact, minimal verbal responses to even nonthreatening questions, closed body language, and a lack of smiling at any point in the interview. Less subtle indicators can be fidgetiness, physical indications of anxiety, crying, asking to leave, or expressing feelings of fear and apprehension.

This failure to establish rapport can occur for a number of reasons. One reason for this is that there is often a lack of recognition that having the kind of joining skills that provide for good rapport with children is a skill that needs to be practiced. Such skills cannot be acquired from attending a few workshops and taking a course or two in developmental psychology. It is clear that many Child Advocacy Centers (CAC) and law enforcement interviewers simply have not had enough experience talking to children in different age groups in interview settings and don't really know what to say. They are not natural in their approach to children, and their stiffness and discomfort are obvious.

A second problem that prevents the establishment of rapport with the child in the interview is an overly concrete approach to following the protocol being utilized. In such cases, interviewers come across as overly focused on getting to the disclosure/nondisclosure phase of the interview, and do not realize that they can take their time to chat or engage in activities not directly related to the matter at hand. Time can and should be taken to draw pictures, discuss movies, or ask

about pets. Rushing through the introductory phase of the interview in order to get to what the interviewer thinks is the important part of the discussion is an error; all phases of the interview are important.

Another major obstacle to the development of rapport is the failure of the interviewer to understand the dynamics of the situation from the child's perspective. Examples of this are easy to observe. *On many tapes that I have reviewed, one of the first things the interviewer tells the child is the rules of the interview.* The statement "in this room we only talk about true things that really happened" is perfectly appropriate at the right point of the interview, but in many tapes you can almost hear the child thinking "Who are you to tell me the rules? I didn't agree to anything before coming here and you are not my parent." In addition, most of the authoritative, well researched interviewing protocols stress the importance of helping the children being interviewed to express their *narrative with minimal prompting and in their own way.* (Kuehnle, 1996; Lamb, Hershkowitz, Orbach, & Esplin, 2008). The immediate imposition of rules by the interviewer can have the unintended effect of reinforcing the tendency of the child to view the adult as an authority figure and to acquiesce to inadvertent errors or suggestions. It is important for interviewers to try and see the interview process from the child's standpoint if they are going to be responsive to the child's concerns; failure to do so will impede the development of trust and rapport.

As mentioned previously, interviewers should also be aware of indications from the child that rapport has or has not been established. Behavioral indicators that rapport has not been established can range from overt to subtle. A child may cry and ask to leave the room, or refuse to cooperate with the interviewer. The child may avoid eye contact, appear nervous, curl into a ball or cover his or her face. It is not uncommon to see interviewers become frustrated in the face of these types of behaviors and place more pressure on the

child to cooperate, including closed and leading questions. Interviewers may also believe that these behaviors are indicators of distress at discussing abuse, when the behaviors may actually be reactions to other stressors or to the interview itself. In such circumstances it is not uncommon to see the interviewer react to these behaviors by asking more focused and/or leading questions about abuse that the interviewer now assumes occurred. I have also noticed that interviewers will often react to these behaviors with problematic behaviors of their own: closed posture, pursed lips, muscular tension, or frowning, which can all have the effect of further alienating the child interviewee.

#### **Failure to understand and assess development-related abilities**

When observing forensic interviews of children or reviewing those that have been taped, important errors can often be seen at the outset of the interview. Although some interviewers do an excellent job of orienting the child, many leave out important aspects of this phase. Developmental level should be assessed, particularly with younger children. The child's grasp of numbers, time, and position should be checked by having them count objects or put stickers on paper, place things on top or underneath other objects, and by asking about addresses, the names of family members, and other related information. This is done so that the judge or jury will have this information and be able to apply it in their deliberations. Unfortunately, this portion of the interview is often either neglected or incompletely assessed. I have personally developed what I refer to as the "Sponge Bob Square Pants" technique, which I use because nearly all younger children love this show. I ask questions about the names of the characters, where they live, what they are like and what they do. I also include statements about the show that are incorrect, such as saying that Patrick, a starfish, is a snail or that Squidward (Sponge Bob's nemesis) is very nice. This helps

assess memory, the ability to recall and communicate information, and the child's ability to resist misinformation in a completely nonthreatening way. This information can also be important if the child's competence to testify is questioned.

In the same way, some interviewers do not take into account a young child's ideas about sexuality. For example, they often assume that children necessarily experience sexual activities in the same way an adult would. Many of the ways that children are abused such as fondling, oral sex, or exposure are not necessarily painful or experienced as aversive at the time of the acts. For this reason, questions that assume distress or even an understanding of the nature of these acts can contaminate the interview or lead to misunderstandings. Many interviews include questions to young children about who touches their genitals, and affirmative answers are sometimes taken as indications of abuse in and of themselves. This is clearly a mistake, since there is a good deal of research that indicates that incidental, nonsexual genital touching between parent and child has a high base rate (Freidrich et al., 2001; Rosenfeld, Bailey, Siegal, & Bailey, 1986). If the child being interviewed is 3 or 4 years old, it is quite likely that everyone who cares for him or her has touched his or her genitals at one time or another. Asking only about one parent's having so touched a child and not exploring anyone else's touching is an error, and may reflect confirmatory bias on the part of the interviewer. Confirmatory bias refers to the tendency of humans to prematurely favor one hypothesis over another and then to over-value evidence that supports this hypothesis while neglecting potentially disconfirming data. Because this tendency is a natural aspect of human cognition, an important part of training professionals who investigate child abuse is to help them develop methods of guarding against threats to objectivity.

Lack of understanding of child development in relation to children's understanding of sexual activity does not occur only when the suspected victims are pre-school age, and can



occur with older children. I consulted in a case that involved an 11-year-old boy and two 12-year-old girls. It was alleged that the adult perpetrator had involved all three children in a variety of sexual activities at the same time. The activities included sexual acts between the adult and the children, as well as between the children. A significant problem with the case was that in their interviews these children, who were assumed to be able to relate events without difficulty, gave accounts of what occurred that varied substantially. One child denied being involved at all and stated that she had watched the abuse through a partially open bedroom door; the other girl stated that the boy had intercourse with her, but the boy denied this. This disparity in the children's stories was difficult to account for and caused problems in the prosecution of the case. Despite this, the alleged perpetrator was convicted and subsequently confessed.

The information the perpetrator provided made it clear that at the time he abused the children, they did not experience the sexual acts involved as painful or aversive. As a consequence, they did not know that they were not culpable and felt compromised because they believed they had done something wrong. For this reason, they changed their versions of what had occurred in ways they saw as self-serving. The interviewers assumed that the children viewed the sexual activity as traumatic and aversive in part due to a lack of openness about how the children experienced these events. This lack of understanding and openness could have had the consequence of allowing the perpetrator to avoid the consequences of his actions and remain free to potentially victimize other children.

Another element of the interview that is often neglected or mishandled is the assessment of the child's ability to differentiate between things that actually occurred and those that were suggested or are the product of fantasy. Almost all interviewers go through a cursory "truth and lies" ceremony. This usually takes the form of the interviewer, wearing a blue

shirt, asking "If I said this was a red shirt, would that be the truth or a lie?"

The use of the term "lie" is problematic because it implies the conscious intent to deceive, which is almost never an issue with young children. When a child says he thinks Batman is a real person, he is mistaken, not prevaricating. It is better to ask if things are true or untrue. But it is good practice not to stop here. It should be explained to the child that they should not guess if they don't know something. Additionally, they should be assessed and trained in this regard. After being told that they should not guess, they should be asked a question that they could not know the answer to, such as the color of the interviewer's car or his or her middle name. If the child responds to the questions with guesses, he or she should have the issue explained again and then tested again. If they respond with an appropriate "I don't know" they should be reinforced. If they cannot grasp the concept, this is also important information for the fact finder. Again, this step is often left out of interviews or incompletely performed.

### **Failure to use a hypothesis testing model**

A second general problem seen in many child abuse related interviews is the failure of the investigator to understand his or her role. The investigator's role is, or should be, to develop information to assist the court through the use of a hypothesis testing model. This requires some explanation. In any case of alleged child abuse there are a number of logical possibilities about the actual state of affairs. The matter has come to the authorities because the child is alleged to have said something to somebody that raised concerns that they have been abused. Some of the possibilities include the following as suggested by Kathryn Kuehnle (1996):

1. The child has been abused and matters transpired almost exactly as the child initially disclosed as far as what acts of abuse occurred and the identity of the perpetrator.

2. The child has been abused and the account of the acts is accurate, but the allegation is misdirected (child mentions step-father but means natural father)
3. Certain elements of the child's accounts are accurate but others are not (inaccuracies in locations, number of times, mistakes of omission or commission)
4. The child's account is inaccurate due to leading parent interviews or poor interviews by CAC or law enforcement
5. The child is consciously lying about abuse

There are other possible hypotheses, but these are possibilities in nearly every CSA case. In a good forensic interview, the evaluator should come into the situation with no preconceptions and should not be favoring any of these possibilities.

Manifestations of a failure to use hypothesis testing can be seen in a variety of interviewer behaviors. For example, interviewers may use repeated questions only when the child does not answer in the expected direction. An interviewer will ask "Are you sure?" or ask the same question again ("Was it over or under your pajamas?") when the child does not confirm abuse, but never raises questions when the child confirms abuse. This may also be an indication of confirmatory bias.

Unskilled interviewers can also differentially reinforce certain types of child responses with praise or body language. In many tapes I have reviewed, interviewers respond to any answer suggestive of abuse with behaviors ranging from enthusiastic head nods and smiles (which does not happen when the child says abuse did not occur) to statements such as "You are very brave to tell me that," which is also problematic, since the child may not have experienced the alleged perpetrator's actions as aversive at the time that they occurred. The examiner should generally encourage the child's verbalizations whether they suggest abuse or not, unless it is clear that the child is guessing, in which case that issue should be revisited.

### Failure to develop contextual details

Clearly, the more relevant information judges and juries have about what the child tells the examiner, the better they will be able to do their jobs. Interviewers should attempt to elicit contextual detail about the alleged acts from the child as this will not only help the court, but has also been shown to improve recall. They should ask where the abuse occurred, details of the physical setting, what the parties were wearing, what was taken off, the relative positions of alleged victim and abuser during the acts described, what was said, whether anyone else was home, and other details that might be able to be corroborated and that paint a picture of the scene. Many interviewers do this with great skill, whereas others make no such attempt. If the child is unable or unwilling to provide these details despite the use of good interviewing techniques, there is little the interviewer can do, but the attempt should be made. Let us consider two examples:

- a. A 6-year-old Hispanic female tells the examiner that her older cousin "put his hand in my underpants and put his finger in my privates." She tells the interviewer that it happened once in her bedroom but cannot tell the date or time of year. The interviewer does not ask for more detail.
- b. A 6-year-old African American male tells the examiner that his uncle sexually abused him in the basement playroom. The abuse involved the uncle forcing the victim to perform oral sex on him. In response to open ended and focused questions, the child also relates that his uncle stood with his pants unzipped, his penis was erect and circumcised, and that "goopy stuff" came out of the tip. When asked about the color of the "goopy stuff," the child said it was white. The child also stated that this occurred after his uncle took his "private" out of his mouth, and rubbed it with his own hand. The child related that when this happened, his uncle made some funny noises like he was pushing something heavy and then wiped his hands with Kleenex that he flushed down the toilet.

As can be seen from these two examples, the judge or jury in the latter example has a great deal more information on which to make a determination of guilt or innocence and are

not simply placed in the position of having to make a highly subjective judgment based on the child's perceived credibility. Further, it is clear from a large body of research that people, whether experts or laypersons, seldom perform at better than chance levels when making determinations regarding veracity based simply on their impressions of the demeanor of the person testifying (Bond & DePaulo, 2006).

### **Failure to utilize a structured interview format**

Although there are a number of protocols that are utilized to direct child sexual abuse interviews, such as those developed by American Professional Society on the Abuse of Children (1997), The American Association of Child and Adolescent Psychiatry (1998), and the American Psychological Association (1999), the best researched is the National Institute of Child Health and Human Development Protocol most recently described in Lamb et al. (2008). Lamb et al. use what the authors refer to as an "hour glass" shaped procedure in that it starts with child orientation that covers truth and nontruth, assessment of external threats to reliability, and then moves to nonthreatening topics. The discussion of nonthreatening topics allows for the establishment of rapport and also allows the interviewer to train the child to respond to open-ended prompts, such as "Tell me all about that" and "What happened next?" The interviewer then moves into issues peripherally related to abuse as such. For example, in the case of an allegation of incestuous abuse, general questions such as "Tell me all about your family" may be asked and the child may bring up information relevant to the alleged abuse with no further prompting. Should this not occur, the authors introduce the topic in as general a manner as possible. Questions such as "I hear that there have been some problems in your family lately" can be used to bring the allegations to mind. Clearly, this method is far less likely to produce problems than a strongly focused or leading question such as "Tell me about

the bad touching,” which is leading because it includes information not provided by the child, which is that the child experienced the touching as bad, or that any touching occurred at all.

If the child responds to this mild prompt with information suggestive of abuse, the interviewer then attempts to extract a free narrative from the child using open-ended questions as previously described. Leading, suggestive, or closed questions (those that can be answered with a simple yes or no) are avoided. Once this is accomplished, the interviewer goes back over the child’s narrative and asks focused questions to clarify anything that is difficult to understand, contradictory, or vague. It is in this stage that contextual detail is often elicited. Once this has been accomplished, the authors suggest that the interview revert to nonthreatening topics and allow the child to relax, rather than terminating the interview with the child potentially in a state of emotional distress. After this has been accomplished, the interview is terminated. This structured interview format is sometimes referred to as “funnel” shaped (Poole & Lamb, 1998) because it starts out with a broad range of topics and gradually narrows to the introduction of issues related directly to possible abuse. It should be noted that the interview then broadens to clarifying questions, and then finishes with the reintroduction of a broad range of nonabuse related topics.

Structured interviews are superior to free-wheeling interviews for a number of reasons. Researchers working in a number of areas of psychology have demonstrated the superiority of structured interviews over unstructured ones, and the research on the National Institute of Child Health and Human Development interview protocol demonstrates that it produces more and better information from child interviewees with less chance of inadvertent contamination by the interviewer, and helps assure that all appropriate questions are asked in ways that do not neglect important areas of inquiry (Hershkowitz, Fisher, Lamb, & Horowitz, 2007).

A less remarked-upon problem related to the use of structured interviews that is sometimes observed is the failure to depart from the structure when it is clearly justified. This would be the case when there is unusually strong evidence that abuse has occurred. For example, very clear evidence of genital trauma or the presence of a sexually transmitted disease in a child would justify focused or even leading questions. There are other situations in which the use of such techniques should be considered. In one case in which I consulted, allegations against the father of a 9-year-old girl arose in the context of marital counseling. The couple was discussing problems in the family generally, and then the wife brought up the fact that she was becoming uncomfortable with the family's practices regarding nudity and co-sleeping. This included the fact that the daughter had only recently stopped showering with her father, often ran around the house naked, and on one occasion had climbed into her father's bed when he was sleeping clad only in a t-shirt. The father agreed that all of these things had occurred, and that he had spoken to his daughter about curtailing the co-sleeping. The therapist felt that he did not think that what was described constituted sexual abuse, but also felt that under the state's reporting laws it was appropriate to call Child Protective Services (CPS). The parents agreed, feeling that having the girl interviewed would clear things up.

In the interview, the daughter steadfastly denied that any of the things that the parents had described had occurred. The interviewer was clearly at a loss as to what to do. She persisted in asking questions about sleeping arrangements, showering, what people in the family slept in and other questions along these lines. Although it is important in most circumstances not to lead, this was clearly an example of a case where doing so was perfectly appropriate. The interviewer could have told the child that her father had already stated that certain behaviors had occurred and that she was curious about why she was denying this. Was there anything else the examiner should know? Was the child

simply embarrassed? The child ultimately told her therapist that she did not understand why she was being asked such questions by someone she didn't know and thought the best response was to stonewall.

### **Failure to assess external threats to interview reliability**

Unfortunately, it is a fact of life that almost all children make initial disclosures about abuse to untrained interviewers such as parents or teachers. This only makes sense, since children spend the most time with these persons. Problems arise when these "first responders" unwittingly make all of the classic interviewing errors and inadvertently contaminate or implant inaccurate memories. There are a number of common problems that arise from parental or other untrained person's interviews. These include the use of leading questions ("Did your Dad touch your privates in the bedroom when you visited?"), and the evident presence of confirmatory bias and speculation on the part of the parent that leads to confabulation on the part of the child. Parents may be inexperienced and wrongly believe that certain sexual behaviors on the part of a child may be indicative of sexual abuse when they are in fact normal. Repeated interviewing by parents is a problem; Ceci and Bruck (1985), in their book *Jeopardy in the Courtroom*, note that "The vast majority of the children in our case studies were certainly interviewed on many, many occasions before testifying in court. And the bulk of the questioning was 'off the record,' conducted in the privacy of children's homes and therapists' offices, and not electronically preserved (p. 107)." I personally consulted on a case where parents interviewed their child about a very questionable allegation over 100 times.

These external threats to interview reliability can have the effect of creating false allegations. The clearest example of this that I have seen occurred in a case in which I performed the child interview at the behest of a guardian ad litem (GAL) in a



visitation case. The child was 6 years old and had made a statement that his father, who had visitation on alternate weekends, had forced the boy to perform oral sex on him. When the child was interviewed, there were so many inconsistencies in his allegations that the case was classified as unfounded by the local Child Protection Agency. However, the GAL was still concerned and wanted the child interviewed again. Prior to the actual interview I spoke to the boy's mother, who was not sure that anything had happened, but mentioned that her son had been having behavior problems for some time prior to the allegations being made. She also told me that the initial allegation had been made to her ex-boyfriend who had been living with her at the time, but had since moved out.

I used the NICHD protocol and was successful at establishing rapport. At the point where I asked "I understand that there have been some problems in your family" the boy put his head down on the table and began to weep. After I had calmed him down a bit, I asked "Tell me everything about why you are upset." He told me "I am upset because of the lie I told about my Dad that has caused so much trouble." I told him that whatever he said to me, he was not in any trouble, and this seemed to help him. Responding to my open-ended prompts, the boy told me what had occurred, and I was able to confirm and expand my understanding by asking his mother further questions. The mother's boyfriend was going to bed and noticed that the boy was masturbating in his own bed. Putting together the fact that the child had been having behavior problems and now was masturbating, he came to the firm conclusion that the boy had been sexually abused. The boyfriend had never liked the father and also concluded that the father must be the perpetrator. He got the child out of bed and questioned him in a style that was more of an interrogation than an interview. He told the boy that he knew he had been abused. The boy denied it but the boyfriend was insistent. He also asked the child a series of questions about how he had been abused, describing a variety of sexual activities in detail. Under pressure, the boy "admitted" that

he had been abused and stated that it had been by another child at his day care center. The boyfriend refused to accept this and the child offered up name after name, hoping it would satisfy the boyfriend. The interrogation continued until he finally said the name of his father and agreed to questions about oral sex. His observed difficulties being consistent with CPS occurred because he was describing something that had never happened. I asked him if he had been aware that people engaged in oral sex previous to his "disclosure" and he told me "Not until [boyfriend] told me about it."

It is important for the interviewer to check for the presence or absence of external threats to the reliability of the interview. Early in the interview the child should be prompted to tell the interviewer anything that he or she might have been told by any third party. The child should also be questioned, when appropriate, about whether he or she actually experienced what they are stating, or if they heard it from someone else. This can elicit the possibility of coaching or repeated interviewing by another adult. In addition, while moving beyond the scope of the interview proper, persons or agencies investigating allegation of CSA should gather data about potential sources of external contamination, including repeated and/or suggestive interviewing, confirmatory bias, prior animosity against the accused, or the presence of a potential ulterior motive on the part of the accuser. None of this proves that abuse did not occur, but it does supply important information to the fact finder in such cases.

As stated at the beginning of this article, given the potential consequences proceeding from poor quality CSA interviews, it is important that they be of the highest quality. The following suggestions should be considered as ways of insuring this:

1. Interviewers should have advanced degrees in some field of mental health. Although I have seen excellent interviews performed by individuals without such degrees, persons without such training are at a disadvantage due to their lack of specific training with interviewing, child development, and approaching problems through hypothesis testing.

2. Having such a degree is not sufficient in and of itself to ensure interview quality. The interviewer should have coursework in interviewing children and/or receive substantial post-graduate instruction and supervision in this area.
3. Mental health professionals involved in the interviewing of children when sexual abuse is suspected should receive specific training in the use of protocols such as that developed by Poole and Lamb. Additionally, this training should be viewed as an ongoing process. Research has demonstrated that trained evaluators tend to slip back into problematic interviewing practices in a matter of months if they do not engage in frequent supervision (Fisher, 1995). Fanetti, O'Donohue, and Bradley (2006) have developed a protocol for the assessment of interview quality with good interscorer reliability. When it is commercially available, CPS organizations will be able to objectively grade CSA interviews and better monitor interviewer performance on an ongoing basis.

Some will doubtless complain that these suggestions, if implemented, will increase costs associated with CSA investigations, disqualify experienced interviewers, and place logistical burdens on already pressured CPS personnel. But changes in how such cases are handled are long overdue. With state legislatures having chosen to raise the stakes in such cases through the imposition of extreme penalties for those so convicted, such changes in our approach to allegations of child sexual abuse are essential. With the stakes raised to this level for both the alleged victim and alleged perpetrator, those committed to justice will want to do all that can be done to ensure that investigations of this type be performed in the most accurate and effective manner possible.

#### References

- Adams, J.A., Harper, K., Knudson, S. & Revilla, J. (1994). Examination findings in legally confirmed child sexual abuse: It's normal to be normal. *Pediatrics*, 94(3), 310-317.
- The American Association of Child and Adolescent Psychiatry. (1998). Guidelines for the clinical evaluation of child and adolescent sexual abuse. *Journal of the American Academy of Child and Adolescent Psychiatry*, 27, 655-657.

- American Professional Society on the Abuse of Children. (1990, 1997). *Guidelines for the evaluation of suspected sexual abuse in young children*. Chicago, IL: Author.
- American Psychological Association. (1999). Guidelines for psychological evaluations in child protection matters. *American Psychologist*, *54*, 586-593.
- Bond, C.F., Jr., & DePaulo, B.M. (2006). Accuracy of deception judgments. *Personality and Social Psychology Review*, *10*, 214-234.
- Ceci, S.J., & Bruck, M. (1995). *Jeopardy in the courtroom: A scientific analysis of children's testimony*. Washington, DC: American Psychological Association.
- Fanetti, M., O'Donohue, W., & Bradley, A. (2006). A method for evaluating child forensic interviews. *American Journal of Forensic Psychology*, *24*(3), 5-27.
- Fisher, R. (1995). Interviewing victims and witnesses of crime. *Psychology, Public Policy, and Law*, *1*(4), 732-764.
- Freidrich, W.N., Fisher, J.L., Dittner, C.A., Acton, R., Berliner, L., Butler, J., et al. (2001). Child sexual behavior inventory: Normative, psychiatric, and sexual abuse comparisons. *Child Maltreatment*, *6*(1), 37-49.
- 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 & Neglect*, *31*(2), 99-110.
- Kuehnle, K. (1996). *Assessing allegations of child sexual abuse*. Sarasota, FL: Professional Resource Exchange.
- Lamb, M.E., Hershkowitz, I., Orbach, Y., & Esplin, P. (2008). *Tell me what happened: Structured investigative interviews of child victims and witnesses*. West Sussex, UK: Wiley-Blackwell.
- Poole, D., & Lamb, M. (1998). *Investigative interviews of children: A guide for helping professionals*. Washington, DC: American Psychological Association.
- Rosenfeld, A., Bailey, R., Siegal, B., & Bailey, G. (1986). Determining incestuous contact between parent and child: Frequency of children touching parents' genitals in a nonclinical population. *Journal of the American Academy of Child Psychiatry*, *25*(4), 481-484.
- Sternberg, K. J., Lamb, M. E., Esplin, P.W., & Baradaran, L. (1999). Using a scripted protocol to guide investigative interview: A pilot study. *Applied Developmental Science*, *3*(2), 70-76.