



Exploratory assessments of child abuse: Children's responses to interviewer's questions across multiple interview sessions[☆]

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ABSTRACT

Objective: The present study extends field research on interviews with young children suspected of having been abused by examining multiple assessment interviews designed to be inquisitory and exploratory, rather than formal evidential or forensic interviews.

Methods: Sixty-six interviews with 24 children between the ages of 3 and 6 years who were undergoing an assessment for suspected child abuse were examined. Each child was interviewed 2, 3, or 4 times. The interviewer's questions were categorized in terms of openness (open, closed or choice), in terms of the degree of interviewer input (free recall, direct, leading, suggestive), and for topic (whether the question was abuse-specific or nonabuse-related). Children's on-task responses were coded for amount of information (number of clauses) reported in relation to each question type and topic, and off-task responses were categorized as either ignoring the question or a diverted response.

Results: Children provided a response to most questions, independent of question type or topic and typically responded with one or two simple clauses. Some children disclosed abuse in response to open-ended questions; generally, however, failure to respond to a question was more likely for abuse-specific than for nonabuse-related questions.

Conclusion: The findings are discussed in terms of the growing literature on interviewing children about suspected abuse, particularly in interviews conducted over multiple sessions.

Practice implications: Assessment of suspected child abuse may involve more than a single investigative interview. Research examining children's responses to questioning over multiple interviews (or single interviews conducted over multiple sessions) is necessary for the development of best practise guidelines for the assessment of abuse.

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Introduction

Over the past 2 decades there has been considerable interest in the best ways to interview children suspected of having been abused (for reviews see Ceci & Bruck, 1998; Cronch, Viljoen, & Hansen, 2006; Poole & Lamb, 1998). Optimal interview protocols take into consideration practice guidelines as to how to elicit the most accurate information from the child while at the same time limiting the potential contamination of the child's evidence by the interviewer. Interviewer input may not only distort the child's memory (or report) regarding the alleged abuse, but may also affect the perceived reliability of the child's testimony (see Bruck, 1999). A number of questioning techniques have been identified as potential sources of contamination (Ceci & Bruck, 1998). Of greatest concern is the use of overly suggestive, leading, or coercive questioning styles

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(Poole & Lamb, 1998). Researchers worldwide have recommended that interviewers use open-ended questions, particularly those that elicit a free narrative response, with direct or specific questions used only to follow-up free narratives to obtain the necessary detail (Orbach et al., 2000; Sternberg, Lamb, Davies, & Westcott, 2001a).

Free recall and open questions are typically considered to be the best way to question children because laboratory-based and analogue studies indicate that they lead to the most accurate accounts (e.g., Dent, 1991; Dent & Stephenson, 1979; Goodman & Aman, 1990; Hutcheson, Baxter, Telfer, & Warden, 1995; Oates & Shrimpton, 1991). There are, however, a number of distinctive characteristics of abuse experiences that cannot be simulated in laboratory-based research, for example, feelings of shame, embarrassment, betrayal of loved ones, feeling personal responsibility for the abuse, fears of the consequences of disclosure, and threats or inducements made by the perpetrator (Berliner & Conte, 1995; Elliott, Browne, & Kilcoyne, 1995; Gries, Goh, & Cavanaugh, 1996; Lawson & Chaffin, 1992). Thus, it is important that field studies also examine the use of different types of questions for gathering information about suspected abuse (e.g., DeVoe & Faller, 2002; Lamb et al., 2003; Sternberg, Lamb, Esplin, Orbach, & Hershkowitz, 2002). Researchers examining the National Institute of Child Health and Human Development (NICHD) interview protocol, in particular, have found that the recommended open-ended, free narrative questioning techniques are effective in eliciting information about abuse in forensic settings, at least with children who are forthcoming in disclosing the abuse (Lamb, Hershkowitz, Orbach, & Esplin, 2008; Lamb et al., 2003; Sternberg et al., 2002, 1996, 1997). Further, these field studies have shown that the most open-ended prompts ('invitations') elicit more information from children per question than do specific questions, irrespective of the child's age (Sternberg et al., 1996, 1997). Lamb et al. (2003) also showed that open-ended invitations are just as effective with the younger as with the older children, although younger children report overall less information than older children.

Not all researchers agree that open-ended invitations are always effective in eliciting information about suspected abuse, however, and concerns have been raised that free recall and open-ended questions may not elicit sufficient information when children are interviewed about abuse in the context of pressures to remain silent (*cf* Cederborg, Lamb, & Laurell, 2007; DeVoe & Faller, 2002; Lawson & Chaffin, 1992). DeVoe and Faller (2002), for example, argue that it is unrealistic to expect children to be able to discuss abuse without the use of a direct, focused inquiry. Consistent with this, they examined the number and type of questions children were asked during clinical computer-assisted interviews before children discussed sexual abuse. They found that children did not respond to open-ended inquiries about abuse but required many questions (on average, 92 questions), and various types of questions, before disclosing abuse. Further, Mordock (1996) examined the case notes of 50 children undergoing treatment for substantiated sexual abuse and examined how much structure the therapist provided to assist children to discuss abuse. Of the 29 children who discussed the abuse in therapy, only 1 adolescent child disclosed abuse spontaneously, 10 did so under minimal structure conditions (e.g., the therapist generally introduced the abuse topic area and related it to the child), while the remaining children discussed it when highly structured questions were provided by the therapist (e.g., asking the child directly about the alleged abuse). Mordock (1996) concluded that without direct questioning from the therapist, many children would not have discussed details of the abuse.

Across-study differences in the usefulness of open-ended approaches to interviewing may depend on a number of factors relating to the children being interviewed, as well as differences relating to the interview, including the setting, style and purpose. For example, characteristics of the child such as age (London, Bruck, Ceci, & Shuman, 2005), whether or not they have made a verbal allegation prior to interview (Keary & Fitzpatrick, 1994; see also London et al., 2005 for a review) and/or how willing the child is to discuss the abuse or abuse-related information, may be important (DeVoe & Faller, 2002). Because prior disclosures are strongly associated with disclosure in interview (see London et al., 2005; Pipe et al., 2007, for reviews), studies involving a large number of children who have already made a verbal disclosure may over-estimate the effectiveness of open-ended questions in *eliciting* disclosures, compared to studies in which children have not made clear disclosures or are unwilling to discuss the issue (e.g., DeVoe & Faller, 2002; see Lyon, 2007, for discussion of sampling biases). However, it must also be noted that while highly structured questions may elicit disclosures, we can only conclude that high levels of structure were *necessary* if interviewers first attempted to elicit disclosures using open-ended methods.

The interview context and structure may also contribute to across study differences. In DeVoe and Faller's (2002) study, for example, the computer-assisted interviews were typically longer than traditional interviews, with a longer time period and more questions asked prior to children's disclosure (DeVoe & Faller, 2002). It is possible that the computer-assisted technique may account for some of the differences found in the number and types of questions asked prior to disclosure when compared to the NICHD studies. Moreover, the children in Mordock's study were undergoing therapeutic interviews whereas in the NICHD studies, children were undergoing formal police or child protection interviews. It may be that children undergoing formal police or child protection interviews are more likely to understand what they are there to discuss (i.e., the alleged abuse) and are more prepared to discuss it. Indeed, one of the initial prompts in the most recent version of the NICHD interview protocol is "Tell me the reason you came to talk with me today" (Lamb et al., 2003, p. 928), and such general open-ended invitations are effective in eliciting the abuse disclosure in approximately 83% of cases.

What the different findings across studies highlight is the need to examine children's responsiveness to questioning in different settings, such as when the child is being assessed prior to the formal investigative interview, and in different samples of children, including children who have not previously disclosed. Moreover, increasingly, professionals in the field are considering protocols for interviewing some children on more than one occasion, for example, when there are signs of reluctance to disclose abuse early in an interview, when children are very young, or when they have not made a prior verbal disclosure, but there is reason to suspect abuse (Carnes, Nelson-Gardell, Wilson, & Orgassa, 2001; Carnes, Wilson, &

Nelson-Gardell, 1999 *cf* also Hershkowitz, Horowitz, & Lamb, 2007; Orbach, Shiloach, & Lamb, 2007). One rationale is that the more formal structured investigative protocols may not be appropriate with some children, and extended periods of rapport-building, and increasing the child's comfort level in the interview may be necessary for a maximally productive investigative interview (see Lyon & Saywitz, 2006; Saywitz, Esplin, & Romanoff, 2007). To date, such approaches have not been subjected to detailed analysis of the interview dynamic.

The present study

The primary purpose of the present study was to extend existing field research by examining how young children respond to interviewer's questions across multiple session exploratory "assessment" interviews. Frequently, children undergo a number of interviews or forms of assessment before they are formally or evidentially interviewed (Ceci & Bruck, 1993; Hood, 2001; Malloy, Lyon, & Quas, 2007; Plotnikoff & Woolfson, 2001; Poole & Lamb, 1998); whereas extant studies have focused on formal investigative interviews, the dynamics of early, exploratory assessments have not yet been examined.

A field study focusing on the diagnostic assessment process extends the existing literature in several ways. First, children undergoing the diagnostic assessments examined in the present study were typically very young and very young children remain an under studied group (*cf* Lamb, Sternberg, & Esplin, 1998; Lamb et al., 2003). Second, the diagnostic assessments were typically carried out when no clear verbal disclosure of abuse has been made prior to the interview; children undergoing diagnostic assessments were therefore likely to be unaware that they are being assessed due to abuse concerns. This is in contrast to previous studies examining interviews in detail, in which the majority of children were able to respond to a question as to why they are there for the interview (Hershkowitz, 2001; London et al., 2005; Sternberg et al., 1997). Third, the diagnostic assessments were conducted over a number of interviews. Although many professionals and researchers have advocated for a single forensic interview, others have argued that in some circumstances more than a single interview may be necessary for some children to verbally disclose abuse (e.g., Carnes, 2006; see also Hershkowitz, Orbach, et al., 2007) although multiple investigative interviews have yet to be examined (*cf* LaRooy, Lamb, & Pipe, 2009).

In the present study, children were interviewed as part of a diagnostic assessment because of concerns that the child had been abused. At the time of the study, diagnostic assessments were one of three types of specialist interviews used to evaluate the possibility of child sexual or physical abuse in New Zealand; evidential or diagnostic interviews can also be used (Joint NZCYPS/Police Policy and Guidelines, 1996; see Joint CYF/NZ Police Policy and Guidelines, 2007 for current guidelines). Which interview or assessment a child was referred for depended on a number of factors, such as whether or not the child had made a clear verbal disclosure of abuse prior to the interview, the strength or number of potential indicators of abuse, and the age or developmental level of the child (see also Wilson, 2007). Evidential interviews were usually conducted when a child had made a clear verbal disclosure of abuse prior to the interview. Diagnostic interviews were usually conducted when there were strong indicators of abuse but no clear verbal disclosure. Diagnostic assessments were usually conducted when children were very young (e.g., preschoolers) or when there were multiple factors that indicate abuse but do not qualify for a diagnostic interview (Joint NZCYPS/Police Policy and Guidelines, 1996). Diagnostic assessments are inquisitory rather than evidential and are therefore not required to adhere to the evidential and diagnostic best practise guidelines of the day (see Wilson, 2007, for further discussion).

In assessing how children responded over multiple interviews, we examined children's responses to questions relating to the suspected abuse, and also to other, general (nonabuse-related) questions. With very few exceptions (e.g., Hershkowitz, Horowitz, et al., 2007; Orbach et al., 2007) research on forensic investigative interviews has generally focused on children's responses to questions focusing on the substantive issue only (i.e., abuse information, see Lamb et al., 2003; Sternberg et al., 1996, 1997). In addition, all diagnostic assessment interviews were examined to determine whether or not children made abuse allegations within the interview. Previous studies have generally focused on interviews in which abuse allegations were made (Lamb et al., 2003; Sternberg et al., 1996, 1997; but see Orbach et al., 2007 for a counter example).

To examine children's responsiveness in the assessment process, our first step was to determine the frequency of use of different question types (free recall and open-ended questions, as well as more directive questions) across the multiple assessment interviews. We then examined children's responses to the different kinds of questions. Specifically, we focused on three main questions relating to children's responsiveness. First, did children provide more information in response to open-ended invitations than to closed forms of questioning as predicted based on previous studies (Sternberg et al., 1996, 1997)? Second, did children's responsiveness depend on the topic of the question? That is, were children more reluctant to answer questions about abuse-specific topics (e.g., secrets, sexual activity, genital touch) than questions not related to the suspected abuse? Third, because some children in the present study did disclose abuse during the assessment, we examined the type of questions that preceded disclosures, specifically, whether they were open-ended or free recall questions. Finally, because the present study included children from age 3 to age 6, it was possible to examine their responsiveness as a function of age, within an overall young sample. In particular, we asked whether younger children were as willing to discuss abuse-specific topics as older children, and whether they provided less information in response to questions compared to the older children.

Method

Participants

Seventy-one assessment interviews of 26 children (ages 3–6 years) undergoing a diagnostic assessment for potential sexual or physical abuse were available for inclusion in this study. The assessment interviews were carried out at a regional Children and Young Persons Protection Agency (Child Youth and Family, CYF) between October 1997 and October 1999 by a social worker experienced in family therapy and evidential interviewing. Children were excluded from the study if they did not complete the diagnostic assessment process or, due to technical difficulties, the complete diagnostic process was not available for the researchers to analyze ($n = 2$). Children were divided into 2 groups based on age; 3–4-year olds ($n = 14$), and 5–6-year olds ($n = 10$). Of the 24 children assessed, 10 were female and 14 were male. All children who completed the diagnostic assessment process and whose parents gave consent for participation in the study were included, although towards the end of recruitment only older children were considered in order to obtain more equal numbers in the two age groupings. Twenty-one children were referred for evaluation regarding possible sexual abuse only, 1 due to concerns of physical abuse only, and 2 for allegations of both sexual and physical abuse. Most (20) children had not made a verbal disclosure of abuse prior to the assessment and were referred for assessment because of a number of behavioral (e.g., mood, nightmares, inappropriate sexual behavior of the child), verbal (e.g., described inappropriate behavior of others, told to keep secrets) or evidence based (e.g., physical evidence, witness, known perpetrator) indicators.

Procedure

The present study was reviewed and approved by the Ethics Committee of the University of Otago, New Zealand. A regional CYF organization in New Zealand agreed to the study being carried out in their setting. Recruitment of children was initiated by the interviewer when she made initial contact with the child's parents or legal guardians concerning appointment dates and times for assessment. At that time, she gave or sent them information about the study. If parents or legal guardians indicated interest in the study, or wanted to know more about the study before making a decision, the researcher was present at their initial meeting with the assessment interviewer to discuss the details of the study and to answer their questions. The majority of parents gave consent for their child's interviews to be included in the study (86% of parents agreed to participation). Only those children whose parents gave written consent were included in the study.

As part of the usual diagnostic assessment process, children suspected of having been sexually or physically abused were given, on average, three assessment interviews in a playroom setting to ascertain whether or not the abuse had occurred. Two children had only two assessment interviews and two had four assessment interviews. Each interview was conducted on a separate day over a period ranging from 7 days to 28 days and each interview lasted approximately 50 minutes. The interviews were unscripted and entailed children being able to play freely within a playroom setting while the interviewer talked to the children and asked questions. All assessment interviews were video and audio-taped via a remotely operated camera for the purposes of the study.

Coding of assessment interviews

Assessment interviews were transcribed verbatim from the audio-tape. Nonverbal responses as observed on the video-tape of the interview were noted in the transcript.

Coding of interviewer questions. All information in the transcript was, first, coded according to whether an interviewer's speech line or aggregation of lines was *on-task*, *off-task* or an *instruction*. On-task information was defined as speech relating to background and other types of information about the child, including abuse issues (e.g., "oh so you have lots of people in your family," "whose house do you go to?"). Off-task was defined as speech relating to play only in the here and now (e.g., "so now you've got the dolly and you're putting it in the sand", "what are we going to do with the trucks?"). Instructions were related to what the child was allowed to do in the playroom setting (e.g., "it's o.k. to say swear words in the playroom," "it's o.k. to talk about things in the playroom").

Second, attempts by the interviewer to elicit on-task information from the child, either by asking an interrogative or giving a command (both referred to as questions) were coded in three ways, as follows. To capture "openness" of questions, each was categorised as either open, closed or choice (see below for definitions). To capture degree of interviewer input in the question (and hence, also suggestiveness), each question was categorised as either free recall, directive, leading, suggestive, reflective, or clarifying (see below for definitions). Traditionally, researchers in the field have used one of these two approaches to coding. Open, closed and choice categories have been examined in a number of field studies (see DeVoe & Faller, 2002; Walker & Hunt, 1998; Warren, Woodall, Hunt, & Perry, 1996; and Wood, Orsak, Murphy, & Cross, 1996) as have free recall, directive, leading, and suggestive categories (e.g., see Sternberg et al., 1996, 1997). Although there is some overlap conceptually between the two types of coding schemes in terms of openness and interviewer input (e.g., a free recall question could also be categorized as an open question) there are also differences (e.g., an open question may also be quite directive and even suggestive if the question introduces new content, but allows the child to provide an answer; a closed question may be directive, leading or suggestive depending on the type of information it introduces). Both approaches to

coding were used in the present study, first, because open questions are often recommended over closed or choice questions, and second, to capture the continuum of interviewer input, from the least (i.e., free recall) to the most interviewer input (i.e., suggestive, coercive), with directives (asking for additional information related to what the child had already said) and leading questions (asking for additional information that does not arise directly from what the child has said) between the extremes.

Questions were also coded according to the content probed, namely whether the question related to the alleged/suspected abuse, or whether it was not related to the suspected abuse. In this way we could also examine whether a particular style of questioning was specific to abuse-related material or was also used when probing “general” information, and whether children responded differentially to the different question types according to the content (abuse-related or not) being probed.

Coding of questions as open, closed, or choice

Coding of questions as open, closed or choice was as follows.

Open questions allowed the child to answer in their own words, and included what, where, how, when type questions (e.g., “what do you like doing?” “who is your teacher?” “show me what he did”).

Closed questions allowed for a yes or no answer only (e.g., “do you like to go to school?” “Is that your brother?”).

Choice questions provided a limited number of responses or choices to choose from (e.g., “did you go into the house or the shed?” “were you angry, scared or sad?”).

Coding of questions as free recall, directives, leading, suggestive, reflective or clarifying

Free recall questions prompted a free recall response from the child and limited the child’s response in only a very general way (e.g., “tell me everything you can about xxx”).

Directive questions requested specific information but did not assume or imply anything that the child had not already spoken about (e.g., “what does he drink?” [child has already said that the man drinks], “who was there at the playground?” [when the child has said that others were there]).

Leading questions ask the child for specific information regarding topics that the child has not already mentioned, and included assumptions about what happened, who was there, and so on (e.g., “who touches diddles?” “Who hits people?” “who else lives at your house?” Note that the distinction between directive and leading is based on the relation between the question content and the information the child has already given. For example, if the child has already said: “I know someone who touches diddles” and the interviewer asks: “who touches diddles?” the questions would be directive, rather than leading).

Suggestive questions either suggest the answer the interviewer expects (e.g., “he forced you to do that didn’t he?” “you like doing that don’t you?”), contain details that the child has not already given and incorporate these details into a question about another topic without giving the child the opportunity to correct the details (e.g., “when you were in the bedroom what did he do?” when the child has not previously said they were in the bedroom, Hence the interviewer has suggested to the child that they were in the bedroom, has not given the child an opportunity to correct the details, and is now asking a question based on the assumption that they were in the bedroom).

Reflectors and *clarifications* were coded as follows. A *reflector* was coded when the interviewer reflected back what the child says in question form (e.g., child: “I go to school,” int: “you go to school do you?” child: “I play with daddy’s car,” int: “do you?”); and *clarifications*, when the interviewer attempted to clarify or check what the child has said; for example, “did I hear that right” or “I didn’t hear what you said so tell me again” (e.g., child: “John had one of those,” int: “oh who had one of those?”).

Topic probed: Abuse-related or nonabuse

Third, all questions were coded according to topic probed as either ‘abuse-specific’ or ‘nonabuse’ content. Abuse-specific questions specifically targeted abuse issues involving physical contact (e.g., “who does not-good touching?”, “tell me about the sore places?”). Nonabuse related questions were more general (e.g., “who looks after you?”, “who visits your house?” “how come you like Tom?”). See [Appendix A](#) for a full description.

Coding of child responses. Children’s responses to the assessment interviewer’s questions were coded based on [Sternberg et al.’s \(1996\)](#) coding of children’s responses, but with modifications to fit the needs of the present study as follows:

On-task information was coded when the child responded to the question (e.g., int: What do you like about mummy? child: She’s nice to me). On-task information could be verbal or nonverbal (e.g., the child nods or points to a part of the body). A *clarification request* was coded when the child asked for clarification of the question or for the question to be repeated (e.g., int: Who was the girl? child: What girl?) *Question ignored* was coded if the child did not respond at all, either verbally or nonverbally. If the child did not respond but, instead, diverted into play-talk or *off-task* information, this was coded as *diverted response* (e.g., int: What part of the body is this? child: where’s the truck? int: who lives in your house? child: broom, broom). *Unintelligible or unfinished responses* were not coded.

Children's *on-task responses* were subsequently coded for the amount of information provided. Amount of information was first coded in terms of clauses (see Gross & Hayne, 1998). A clause was defined as a simple sentence that contained an explicit or implicit verb. Explicit verbs were those stated by the child in their response (e.g., child: "I like dad," coded as one clause: "I like dad because he gives me things," coded as 2 clauses). Implicit verbs were those that were borrowed from the assessment interviewer's question and were implied in the child's response (e.g., int: "What does dad do?" child: "nothing;" "does" is the implied verb); or those that were borrowed from the child's previous speech clause and implied in the present clause (e.g., child: "she wets my bed and mum's bed;" coded as two clauses. One clause for "she wets my bed" and the second clause for "and mum's bed;" implied is the verb 'wets').

Disclosure of abuse

We examined all transcripts (66 assessment interviews across 24 participants) to ascertain whether they contained a discussion of a *substantive issue*, defined as an instance in which a child disclosed or talked about sexual abuse, physical abuse, or partaking in or witnessing a sexual event. More than one substantive issue could be identified per assessment interview, for example, incidents of sexual abuse plus physical abuse. Furthermore, a disclosure of a substantive issue could be coded more than once across interviews if the event was talked about in one interview, and then discussed again in a later interview.

Each substantive issue was assigned to one of the mutually exclusive disclosure categories of sexual abuse, physical abuse or sex-related activity, as follows.

Sexual abuse was defined as the child verbally or nonverbally (e.g., nodding, demonstrating on a doll what had occurred) providing information which indicated they had experienced sexual abuse. Sexual abuse here follows Faller's definition as "any act between people who are at different developmental stages which is for the sexual gratification of the person at the more advanced developmental stage" (Faller, 1988, p. 394). It also included sexual acts between children of the same developmental level if there was evidence of force or coercion by one person on the other (e.g., "he made me take off my clothes," "he said he would beat me up if I didn't").

In cases where it was unclear whether the child was describing sexual abuse or not, the decision was made to code sexual abuse only if there were additional indicators that supported the abuse hypothesis. For example, "he touched my diddle" may or may not indicate abuse. The touch may have been for medical or cleanliness reasons. If the person who touched the "diddle" was someone for whom that act would be inappropriate (e.g., a school teacher or neighbour), or if the child gave additional information such as "he said not to tell anyone" or "I didn't want him doing it," then it would be classified as sexual abuse.

Physical abuse was defined as acts of force enacted on the child by an adult. It included hitting, punching, pushing, pulling, scratching, or other acts that seemed excessive and beyond what would normally be considered within reason for disciplinary purposes. For example, at the time the study was conducted, it may have been legally acceptable to smack someone on the legs or bottom if not too much force was used. Punching a child in the face, or pulling them up by their ears, would not have been legally acceptable. This definition was based on Section 59 (1) of the (N.Z.) Crimes Act (1961) which was in force at the time the study was conducted and stated "Every parent of a child and every person in the place of the parent of a child is justified in using force by way of correction towards the child, if the force used is reasonable in the circumstances." Section 59 (1) of the (N.Z.) Crimes Act has since been amended (see The Crimes (Substituted Section 59) Amendment Act 2007) abolishing the use of parental force for correction.

Sex-related activity was coded when the child discussed seeing or participating in activities such as self-masturbation, sexual activities with other children of the same developmental level not involving force or coercion, or witnessing adult sex acts. Witnessing adult sex acts would be coded as sex-related activity if it seemed that the child had inadvertently witnessed adult sexual encounters. If, on the other hand, it appeared that adults were deliberately exposing the child to adult sex acts for the adult's sexual gratification, then this would be coded as sexual abuse.

Coding reliability: To ensure that coding of the child's responses was reliable, 33% of coded transcripts were randomly selected and recoded by an independent, trained coder. Reliability coefficients of not less than 85% were obtained, assessed separately for each of the coded variables. Most reliability coefficients were in the 90–100% agreement range.

Results

The interviews of children who had at least three assessment interviews were included in the following descriptive and statistical analyses of questions asked by the interviewer ($n = 22$ children). Two of these children had a fourth interview which was not included for the purposes of the descriptive and statistical analyses reported here ($n = 66$ assessment interviews).

Analyses of questions asked by the interviewer

We compared the frequency of use of different question types for the two age groups (3–4-year olds, $n = 13$; 5–6-year olds, $n = 9$) and across the three interviews, in three separate analyses: (1) questions categorized as open, closed, or choice; (2) questions categorized according to the degree of interviewer input in the question (i.e., free recall, directive, leading, suggestive, with the additional categories of reflector or clarification); (3) the topic probed (abuse-specific or nonabuse related).

Table 1

Mean number (and standard error) of open, closed, and choice questions asked by the interviewer by age and interview.

Interview	3–4 years			5–6 years		
	1	2	3	1	2	3
Open	5.00(1.34)	33.07(4.33)	56.53(6.57)	8.00(1.61)	30.77(5.21)	79.77(7.90)
Closed	4.53(1.38)	17.30(2.99)	18.92(3.34)	9.66(1.65)	25.66(3.60)	29.77(4.01)
Choice	.30(.29)	9.15(1.60)	5.69(1.12)	1.33(.35)	12.11(1.93)	7.66(1.35)

Open, closed, and choice questions. With respect to *openness* of the questions, **Table 1** shows the mean numbers of open, closed, and choice questions asked by the interviewer for the two age groups and across the three interviews. Across the 3 assessment interviews (combined) the interviewer asked an average of 35.97 ($SD = 2.25$) open questions, 17.24 ($SD = 1.39$) closed questions, and 5.83 ($SD = .56$) choice questions.

To determine if the interviewer's use of open, closed, or choice questions differed as a function of the age of the child or the interview (first, second, or third), a 2 (age) \times 3 (interview) \times 3 (question type) ANOVA with repeated measures over interview and question type was conducted. This analysis yielded a main effect of age, $F(1, 20) = 5.51, p < .05$; overall, older children were asked more questions ($M = 22.55, SE = 1.84$) than younger children ($M = 16.88, SE = 1.55$). There were also main effects of interview, $F(2, 40) = 31.23, p < .01$, and question type, $F(2, 40) = 156.90, p < .01$, qualified by a significant (interview \times question type) interaction, $F(4, 80) = 27.20, p < .01$.

To examine the interview \times question type interaction, post hoc Bonferroni paired *t*-tests were conducted and revealed that the pattern of open, closed, and choice questions differed across the three interviews (see **Table 1**). Open questions increased systematically across the three interviews; interview 1 to interview 2, $t(21) = 7.53, p < .01$, interview 1 to interview 3, $t(21) = 7.48, p < .01$, interview 2 to interview 3, $t(21) = 2.88, p < .01$. Closed questions increased from interview 1 to interview 2, $t(21) = 6.89, p < .01$, but did not increase significantly from interview 2 to interview 3. The interviewer's use of choice questions peaked in interview 2, $t(21) = 8.81, p < .01$, and then decreased, $t(21) = 3.54, p < .01$. As shown in **Table 1**, by the third interview, open questions were the type most frequently asked, for both age groups, and accounted for approximately 75% of all questions asked.

There were no other significant interactions. That there was no question type \times age interaction indicates that although the interviewer asked older children more open, closed, and choice questions than the younger children, the distribution of these question types did not differ for the two age groups (see **Table 1**).

Interviewer input into questions. With respect to degree of *interviewer input*, the mean number of free recall, directive, leading, suggestive, reflective, or clarifying questions asked by the interviewer are shown in **Table 2**. Across the 3 assessment interviews (combined) directive questions ($M = 39.34, SE = 2.75$) were the most frequent (64% of questions), followed by leading ($M = 10.64, SE = 1.04, 20\%$ of questions) and reflective questions ($M = 6.78, SE = .81, 11\%$ of questions). There were very few free recall ($M = .39, SE = .12, 1\%$ of questions), suggestive ($M = .74, SE = .09, 1\%$ of questions) or clarifying questions ($M = 1.97, SE = .29, 3\%$ of questions). Thus, while the majority of questions were open in that they required the child to generate a response, relatively few were free recall, with no interviewer input.

Because of the low frequencies of free recall, suggestive and clarifying questions and concern that the assumptions of the statistical analyses would be violated, these questions were not subjected to more detailed analyses. The remaining question types, directive, leading, and reflective, were submitted to a 2 (age) \times 3 (interview) \times 3 (question type) ANOVA with repeated measures over interview and question type and revealed a main effect of age. As expected, older children were asked more questions than younger children $F(1, 20) = 4.76, p < .04$. The main effects of interview, $F(2, 40) = 97.59, p < .00$, and question type, $F(2, 40) = 8.58, p < .01$, were qualified by an interview \times question type interaction, $F(4, 80) = 59.75, p < .0001$.

Post hoc Bonferroni paired *t*-tests conducted to evaluate the interview \times question type interaction revealed that both directive and leading questions increased markedly across the three interviews [$t(21) = 9.41, 8.57, 4.45$ for directive, $p < .01$], [$t(21) = 6.07, 8.51, 3.95$ for leading, $p < .01$]. Reflective questions were more frequently asked in interview 2 than in interview 1 [$t(21) = 3.92, p < .01$], but did not increase further in interview 3. There were no other interactions.

Table 2

Mean number (and standard error) of free recall, reflective, direct, leading, suggestive, and clarifying questions asked by the interviewer by age and interview.

Interview	3–4 years			5–6 years		
	1	2	3	1	2	3
Free recall	.07(.08)	.76(.36)	.53(.20)	.11(.10)	.11(.44)	.77(.24)
Reflective	3.61(1.16)	7.07(1.48)	6.76(1.19)	5.55(1.40)	11.00(1.78)	6.66(1.43)
Direct	6.15(1.68)	37.00(4.57)	52.00(7.46)	10.77(2.02)	45.77(5.49)	84.33(8.96)
Leading	2.53(.61)	11.84(2.05)	18.38(2.58)	2.44(.73)	8.89(2.47)	19.77(3.11)
Suggestive	.15(.11)	.61(.24)	1.15(.39)	.33(.14)	.88(.29)	1.33(.47)
Clarifying	.23(.27)	2.23(.53)	2.07(.71)	1.66(.33)	1.88(.63)	3.88(.85)

Table 3

Mean number (and standard error) of questions asked by the interviewer per topic (abuse-specific versus nonabuse).

Interview	Younger			Older		
	1	2	3	1	2	3
Abuse-specific	3.15(1.29)	11.23(2.63)	40.84(6.65)	3.11(1.55)	7.55(3.16)	55.55(7.99)
Nonabuse	9.61(2.44)	48.30(5.85)	40.30(5.45)	17.77(2.93)	61.00(7.03)	61.66(6.56)

The absence of a question type \times age interaction indicates that although the interviewer asked older children more reflective, directive, and leading questions, the distribution of these questions did not differ for the two age groups (see Table 2).

Topics probed by questions. The mean number of abuse-specific and nonabuse questions asked by the interviewer is shown in Table 3. To determine whether the topic probed by the interviewer's questions differed across age groups and/or across the three interviews a 2 (age) \times 3 (interview) \times 2 (topic) ANOVA with repeated measures over interview and topic was conducted. This analysis yielded the expected main effect of age, and main effects of interview, topic, and an age by topic interaction. Overall, the number of questions asked increased across interviews, both abuse related and nonabuse questions, $F(2, 40) = 99.90, p < .01$. In interview 1, very few questions were asked. Although the interaction was not significant, Table 3 shows that for both age groups there was a sharp increase in the number of nonabuse questions in the second interview, which then remained constant, whereas abuse-related questions did not increase until the third interview. As a result, nonabuse questions predominated in the first two interviews, but in the third interview abuse and nonabuse questions were equally frequent.

The main effect of, question topic, $F(1, 20) = 82.49, p < .01$, indicated that overall, the interviewer asked more nonabuse-related questions 39.61 ($M = 39.61, SE = 1.39$) than abuse-specific questions ($M = 19.64, SE = 1.93$), $F(1, 22) = 82.4, p < .01$ (see Table 3). This effect was qualified by an age \times topic interaction, $F(1, 20) = 5.85, p < .05$. Separate comparisons (Bonferroni adjusted) of the number of abuse-specific and nonabuse questions, respectively, as a function of age indicated that although the interviewer asked a similar number of abuse-specific questions of younger and older children, she asked more nonabuse questions of older children ($M = 98.23, SE = 7.95$ for younger children, $M = 140.44, SE = 10.88$ for older children), $t(22) = 2.98$ (see Table 3).

Children's responses

The interviews of children who completed diagnostic assessment (i.e., whether they had 2 or 3 assessment interviews) were included in the following descriptive and statistical analyses of children's responses ($n = 24$ children).

In examining children's responses to the interviewer's questions, we first asked, did the child provide on-task information in response to the interviewer's questions (i.e., the child replied to the interviewer's question), and if so, did the amount of on-task information (i.e., mean number of clauses) provided by the child when he or she answered on-task depend on the topic (abuse-specific or nonabuse), age (i.e., 3–4- versus 5–6-year olds), type of question (i.e., open, closed, choice), or degree of interviewer input into the question (i.e., free recall, directive, leading, suggestive, reflective)? We also asked whether children's responsiveness differed as a function of whether or not they disclosed a "substantive issue" during the course of the interviews. Fourteen (58%) of the children interviewed discussed one or more substantive issues during at least one interview (see below for further information).

Second, if the child did not reply to the interviewer's question, what type of "no response" was given (i.e., did the child ignore the question, divert attention, or give an off-task response)? And, third, when a child disclosed abuse, what type of question elicited the disclosure?

Because children were asked more nonabuse than abuse-specific questions, older children were asked more questions than younger children, and children were asked some types of questions more than others (e.g., open versus closed, directive versus free recall), the descriptive statistics concerning children's responses reported here, and the subsequent analyses, were conducted using proportions (Greer & Dunlap, 1997). Proportions were obtained by dividing the number of replies children gave (i.e., on-task information, clarification requested, question ignored, diverted response) to each question (type, topic) by the number of each question (type, topic) that the interviewer asked. Because relatively few abuse-specific questions were asked in Interviews 1 and 2, the analyses were conducted on data collapsed across the 3 interviews.

Children's on task responses. Overall, children generally responded to the interviewer's questions by providing on-task information ($M = 83\%, SE = .02$) and made very few requests for clarification of the interviewer's questions ($M = 2\%, SE = .00$).

To determine if children's responsiveness with on-task information depended on the topic of the question, the age of the child, or whether the child disclosed a substantive issue during the interview, a 2 (age) \times 2 (topic) \times 2 (disclosure status) ANOVA with repeated measures across topic was conducted. There was a main effect of topic, $F(1, 20) = 6.01, p = .02$; questions that did not relate to abuse were more likely to elicit on task information ($M = 89\%, SE = .01$) than were abuse-specific questions ($M = 83\%, SE = .03$). Main effects of age, $F(1, 20) = 20.43, p < .01$, and disclosure status $F(1, 20) = 11.41, p < .01$, were qualified by an age \times disclosure status interaction, $F(1, 20) = 13.69, p < .01$, shown in Fig. 1. The age difference in responsiveness is most

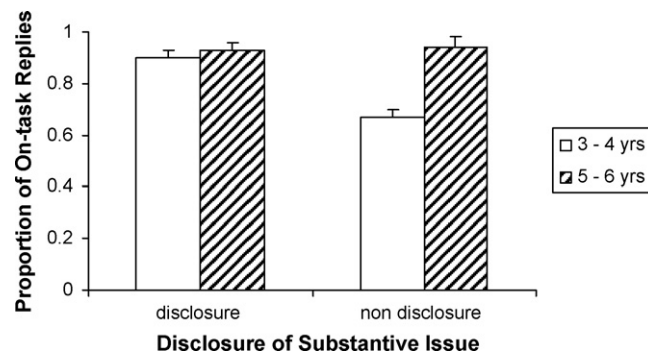


Fig. 1. Mean proportion of on-task responses as a function of age and disclosure collapsed across abuse and nonabuse topics.

marked for children who did not disclose a substantive issue (Fig. 1). Younger children who did not disclose a substantive issue were also less responsive to all questions than were younger children who did disclose a substantive issue. There were no other interactions, indicating that children's greater responsiveness to nonabuse than abuse-related questions did not depend on their age or on whether the child disclosed a substantive issue.

To determine if children's responsiveness differed across the different types of question (i.e., open, closed, choice), a 2 (age) \times 3 (question type) ANOVA with repeated measures over question type was conducted (see Table 4). There was a main effect of age, $F(1, 20) = 10.90, p < .05$. Overall, older children gave a greater proportion of replies providing on-task information than did younger children. There was also a main effect of question type, $F(2, 40) = 18.61, p < .01$. Post hoc Bonferroni paired t -tests revealed a greater proportion of on-task information was provided in response to choice questions ($M = 96\%, SE = .01$) than to open ($M = 84\%, SE = .02$), $t(1, 21) = 5.43, p < .01$, or closed questions ($M = 83\%, SE = .02$), $t(1, 21) = 6.68, p < .01$. Children almost always responded to choice questions by providing on-task information. There were no significant interactions.

To determine if on-task responses depended on the degree of interviewer input (i.e., free recall, directive, leading, suggestive, reflective) a 2 (age) \times 5 (question type) ANOVA with repeated measures over question type was conducted. Neither the main effect of question type nor the interaction with age was significant. Children were just as likely to reply with on-task information irrespective of whether the question was free recall, directive, leading, suggestive, or reflective (see Table 4). Because clarification questions were repetitions of other questions (due to the interviewer not hearing the child's answer), children's responses to clarification were not included in these analyses.

Off-task responses. The proportions of off-task responses are the inverse of on-task responses and were therefore not analyzed separately. However, recall that a failure to respond to a question (off-task) could be further categorised as the child ignores the question and makes no response, or the child diverts their response to play or other activities. A 2 (age) \times 2 (topic) \times 2 (off-task response) ANOVA with repeated measures over topic and off-task response yielded main effects of age, $F(1, 20) = 9.81, p < .01$, topic, $F(1, 20) = 6.20, p < .02$, and off-task response, $F(1, 20) = 7.50, p < .05$. Overall, younger children made a greater proportion of off-task responses to the interviewer's questions ($M = 10\%, SE = .01$) than did older children ($M = 3\%, SE = .01$), and a greater proportion of off-task responses were given in response to abuse-specific questions ($M = 8\%, SE = .01$) than to nonabuse questions ($M = 5\%, SE = .00$). Children who responded off-task to the interviewer's question were more likely to make a diverted response (play or other talk) ($M = 9\%, SE = .01$) than to ignore the question completely ($M = 4\%, SE = .01$). There were no significant interactions. All children made a diverted response to at least one question (range, 1–31 questions) or ignored the question altogether (range, 2–57 questions). Diverted responses were the most frequent form of not responding, accounting for 71% of instances.

Table 4

Mean proportion (and standard error) of on-task responses as a function of question type (openness—open, closed, choice; suggestiveness—free recall, reflective, direct, leading, suggestive) and age.

Age	3–4 years	5–6 years
Openness		
Open	.79(.03)	.91(.04)
Closed	.78(.02)	.88(.03)
Choice	.92(.02)	.99(.02)
Suggestiveness		
Free recall	.73(.15)	.72(.16)
Reflective	.67(.05)	.84(.05)
Direct	.81(.04)	.90(.05)
Leading	.73(.05)	.90(.05)
Suggestive	.67(.11)	.76(.12)

Table 5

Mean number of clauses (and standard error) as a function of question type (openness—open, closed, choice; suggestiveness—free recall, reflective, direct, leading, suggestive) and age.

Age	3–4 years	5–6 years
Openness		
Open	1.18(.03)	1.32(.04)
Closed	1.25(.05)	1.39(.06)
Choice	1.25(.06)	1.28(.05)
Suggestiveness		
Free recall	1.38(.18)	1.16(.30)
Reflective	1.28(.07)	1.51(.11)
Direct	1.19(.03)	1.29(.03)
Leading	1.22(.04)	1.45(.06)
Suggestive	1.09(.09)	1.30(.15)

Amount of information. Because older children were asked more questions than younger children, and the number of questions asked varied across question topic and question type, to obtain a measure of the amount of information elicited by the different question types and topics, the mean number of clauses elicited per question was obtained for each child. Mean number of clauses was obtained by dividing the number of clauses provided by the number of questions asked for a given question type or question topic.

First we examined the mean number of clauses per question as a function of age and question topic (abuse-specific, nonabuse). Analysis of variance revealed a main effect of age, $F(1, 20) = 4.56, p < .05$, but no effect of question topic or interaction. Overall, older children ($M = 1.3, SE = .04$) provided more information than did younger children ($M = 1.2, SE = .04$) although the difference was very small.

We also examined whether the amount of information elicited per question differed as a function of question type. Separate ANOVAs with age as the between subject variable and question type as the within subject variable failed to reveal significant main effects or interactions, for question type in terms of openness [$F(2, 40) = 1.65, p = .20$], or for question type in terms of degree of interviewer input [$F(2, 40) = .89, p = .77$]. On average, children provided a little more than 1 clause of information in response to all question types (see Table 5).

When children disclosed abuse, what was the eliciting question? Fourteen (58%) of the children interviewed discussed one or more substantive issues. Twenty-five substantive issues were identified in total. Of the 25 substantive issues discussed, 23 were cued by the interviewer, that is, the interviewer provided a question or statement that elicited the child's disclosure. Only in 2 cases was the disclosure initiated by the child (i.e., spontaneous). The following summary statistics are based on the substantive issues that were cued by the interviewer (i.e., $n = 23$).

First, we examined questions immediately preceding the disclosure in terms of openness (i.e., whether the question was open, closed or choice). The question that most often directly preceded the discussion of a substantive issue was an open question (74%). Closed questions also preceded the child discussing abuse (9%) but choice questions never preceded the discussion of a substantive issue. On some occasions the interviewer made a statement rather than a question that prompted the child's disclosure (e.g., "I heard there was someone called Peter"), or the question that preceded the disclosure was begun, but not finished. Statements or unfinished questions (not included in the other coding categories) also elicited discussion of a substantive issue (17%).

Second, we examined questions immediately preceding the disclosure in terms of degree of interviewer input (i.e., whether the question was free recall, directive, leading, suggestive or reflective). The question or statement that most often directly preceded the initial discussion of a substantive issue was either a directive utterance (44%), or a leading utterance (39%). Interviewer statements (17%) also preceded substantive issues being discussed. Suggestive utterances did not elicit any disclosures. Recall, however, that the interviewer asked mostly directive and leading questions and this pattern of children's disclosures may reflect the types of questions asked. Further, given that directive questions were more common than leading questions, proportionately more disclosures occurred following leading utterances.

Discussion

The present study examined very young children's responsiveness in interviews conducted over multiple sessions as part of an assessment for abuse. The primary focus of the study was the effectiveness of different types of questions in eliciting information from children. We examined this in two ways, first by comparing the effectiveness of open, closed and choice questions, and second by comparing questions categorized according to interviewer input, namely free recall, directive, leading and suggestive. In terms of the amount of information elicited, children typically responded with one simple sentence, occasionally two, across all question types. This was the case for questions focusing on abuse and those that were more general, and although, overall, older children provided slightly more information than did younger children, the difference was not large. However, although they elicited similar amounts of information, there are important differences between the different types of questions and the quality of the information they elicited, as discussed below.

First, although choice questions elicited no more information than the other question types, children were more likely to respond to them, compared to either open or closed (yes/no) questions. While effective questions and prompts will, ideally, elicit responses from children, choice questions can be problematic, precisely because they *are* highly likely to elicit responses. The problem is that children may feel the need to choose one of the options, even when they do not know the answer to the question or the correct option is not provided (see Poole & Lamb, 1998). For example, children typically attempt to answer adults' questions even if the question does not make sense (e.g., Hughes & Grieve, 1980) and choice questions may simply exacerbate this propensity to respond. At issue, therefore, is the accuracy of the information elicited (Aldridge & Wood, 1998). The present study was a field study, and therefore the accuracy of the information could not be determined. However, analogue studies highlight the risks of choice questions and point to the advantages of open-ended questioning (see Peterson & Biggs, 1997; Poole & Lamb, 1998).

Second, when questions were compared in terms of degree of interviewer input, free recall questions were just as likely to be responded to as the direct, leading and suggestive questions and they elicited at least as much information as other questions. Given that this information was generated by the child, rather than the interviewer, it is more valuable than the same information elicited by a question requiring a recognition or a yes/no response or one that is cued by the interviewer's knowledge, beliefs, or suspicions as to what happened.

However, in the present study, free recall questions did not elicit *more* information than the other questions; as noted above, children typically responded with one simple sentence, occasionally two, across all question types. These findings contrast with those of Sternberg et al. (1997) who found that children provided more information in response to free recall than other questions. In part, the problem may be that in the present study, as in some other field studies (e.g., Sternberg et al., 1997; Sternberg, Lamb, Orbach, Esplin, & Mitchell, 2001; Walker & Hunt, 1998; Warren et al., 1996), free recall questions were seldom used and as a result it is difficult to assess their effectiveness reliably. There are, however, other potentially important explanations of the different findings regarding the effectiveness of free recall questions.

One possibility relates to the context in which the free recall questions were used. In studies finding these to be more productive than other question types, practice narratives based on open-ended prompting preceded the introduction of the "substantive topic," the focus of the investigative interview (e.g., Sternberg, Lamb, Davies, et al., 2001; Sternberg, Lamb, Orbach, et al., 2001). Practice in narrating a past event in response to free recall questions in the rapport-building phase of the interview has been shown to lead to longer responses in the substantive phase of the interview, compared to practice using closed or option-posing questions (Sternberg et al., 1997). In the present study, in contrast, free recall questions were rare across all three interviews, and children did not, therefore, have practice in providing free narrative accounts. Indeed, in the present study, many of the questions the interviewer asked, including the open-ended questions, required only a short answer (e.g., "what school do you go to?"), potentially indicating to children that short answers were appropriate. Even when they were asked free recall questions, therefore, children may have continued to provide these short answers (see Roberts, Lamb, & Sternberg, 2004; Sternberg et al., 1997).

In addition, the children in the present study were very young, and previous studies have shown that young children tend to offer shorter responses to all types of questions, including free recall questions (Lamb, Sternberg, & Esplin, 2000; Sternberg et al., 1997). Children classified in this study as "older children" were still only in the 5–6-year-old range and in many studies these children would be classified as young (e.g., Lamb et al., 1998; Sternberg et al., 1996, 1997). The constricted age range of the children in the present study may also go some way to explaining the relatively small (but significant) age differences observed.

We also examined children's relative responsiveness to questions that were abuse-related and those that were on more general topics. Although most of the interviewer's questions elicited "on-task" information, questions that were not concerned with abuse-related topics elicited more replies than those focusing on abuse-specific issues. Further, children provided less information in response to the abuse-related questions. These findings suggest that children were less willing to respond to questions relating to abuse. Of course, some of the children in the present study never disclosed an abusive incident and an unknown number of children had not been abused, and therefore the lack of responsiveness is not surprising. But the pattern of selective responsiveness was not restricted to children who had not disclosed an abusive incident; rather, it held both for children who disclosed abuse at some point during the interview and those who did not. Previous studies have shown that children may be reluctant to discuss potentially sensitive topics, such as genital touch (Saywitz, Goodman, Nicholas, & Moan, 1991) and field studies have found that that even when there is good reason to suspect abuse, some children are reluctant to discuss it (Hershkowitz, Horowitz, et al., 2007; Orbach et al., 2007). Hershkowitz, Horowitz, et al. (2007) also found that for children who were reluctant to disclose abuse, their reluctance was evident in the "presubstantive" phase of the interview, prior to discussion of why the children were being interviewed (Hershkowitz, Horowitz, et al., 2007). In the present study, we found that the younger (3–4-year-old) children who did not disclose abuse were generally less responsive to all questions than those who did, somewhat consistent with Hershkowitz et al.'s findings. Few studies have examined children's readiness to answer questions on nonabuse topics compared to abuse-specific topics in a field setting and the results reported here are necessarily preliminary.

Interestingly, children in the present study seldom asked the interviewer to clarify a question, a finding which is in keeping with previous research. Children are known to rarely ask for clarification, even when they do not understand the question (Saywitz & Snyder, 1993; Zajac & Hayne, 2003). The proportion of requests for clarification in the present study were similar to those reported in courtroom settings (Zajac & Hayne, 2003). Given that children in the present study were in a supportive, child-centred environment compared to children in a courtroom setting under cross examination more requests

for clarification might have been expected. It is possible that, simply, children in the present study understood the questions the interviewer asked them. *Davies and Seymour (1998)*, for example, found that trained interviewers asked more simple and developmentally appropriate questions than is typically the case for lawyers and if this was the case, children would not have needed to request clarification. However, it is also possible that because the children in the present study were very young they may have been unaware that they did not understand the question and therefore did not seek clarification (*Carter, Bottoms, & Levine, 1996*) or, alternatively, even if they had been aware, they may have been reluctant to ask for clarification. Previous research has shown that unless children are instructed specifically to ask for clarification they will usually just try and answer the question even if they do not understand it (see *Poole & Lamb, 1998*, for a review).

Given that some children in the present study disclosed abuse (the “substantive issue”) during the assessment, we examined the type of questions that preceded disclosures, specifically, whether they were open-ended or free recall questions. Children did discuss abuse and sex-related information in response to open-ended questions, the type of questions recommended because they are less likely to lead to inaccuracies in children’s accounts (see *Poole & Lamb, 1998*), and three quarters of children’s disclosures were elicited by these open-ended questions rather than closed questions. Although the interviewer asked more open-ended questions, thereby giving more opportunity for children to provide abuse information in response to an open-ended question, the findings of the present study demonstrate that given the opportunity, and provided with open-ended questions, children are able to respond with abuse-related information.

Recall, however, that open-ended questions as categorised in the present study may also be categorised as free recall, directive or leading when viewed in terms of interviewer input or suggestiveness of the question. Categorized this way, free recall questions, the least suggestive in terms of interviewer input, rarely preceded children’s disclosures of abuse. This may, of course, reflect the very low number of free recall questions asked (less than one on average per interview) and the limited opportunity for children to disclose to these questions. However, in *Sternberg et al.’s (1996, 1997)* studies, children typically disclosed the substantive issue in response to the first free recall question they were asked during that interview, namely, “I want to talk about the reason that you are here today. I understand that something may have happened to you. Please tell me everything that happened” (1997, p. 1145). It may be that the statement preceding the free recall question gave the children a clear indication of the type of information the interviewer was seeking and accounts for the high proportion of children in response to the initial question. Moreover, in the most recent version of the NICHHD protocol, interviewers specifically prompt children to talk about the event that is under investigation with the question, “Tell me the reason you came to talk with me today” (*Lamb et al., 2003*, p. 928), again, assuming that the child knows why they are being interviewed. It is possible that such free recall questions or prompts may be less useful in the context of an assessment or exploratory interview when children may have little understanding of the reason for the interview.

It is appropriate here to comment on the dual coding system of the current system. This was adopted because in the research literature there are a number of ways to categorize questions but there are no standardized operational definitions of these categories. What one study may call a focused question, another study may call an open-ended question. What some studies refer to as closed questions, other studies describe as leading. What one study may classify as leading, another study may call suggestive. A single question can be described as being both open and leading/suggestive dependant on the coding system. For example, the open-ended question, “who was in your room?” could be considered leading or suggestive if the child has not already reported that there was someone in their room. There is clearly a need for careful scrutiny of coding scheme definitions before across study comparisons or generalizations are made.

The present study focused on children’s responses to questions put to them by a single interviewer whose approach may not be representative of how other similar assessments are conducted, for example, in the USA (e.g., *Carnes, 2006*) or even within New Zealand, given differences in training and variation in practice as to when and how such assessments are conducted. However, increasingly, multiple interviews are being suggested as appropriate for some children, for example, very young children or those showing signs of being reluctant to disclose early within an investigative interview. Clearly further studies will be necessary to identify optimal strategies for conducting phased interviews such as this.

The present study did allow us to examine the way in which the interviewer in this study questioned children across the interviews. The number of questions the interviewer asked increased incrementally across the 3 interviews, although the average time duration of the interview (50 minutes) did not increase. In the first interview, very few questions were asked and the questions generally did not relate to abuse. This first interview was primarily a rapport-building interview in which the interviewer played and interacted with the child. The second interview introduced topics that were related to the abuse inquiry but were not explicit, such as “how come you like Joe?”, whereas in the third interview abuse-specific questions were raised, and questions about the reason the child was referred (i.e., the substantive issue) were introduced. Generally the topics probed were not repeated across the three interviews. For example, if the interviewer asked questions about the function of various body parts in the second interview, it would not generally be raised again in the third interview.

Thus, in the present study it appeared that the three interviews constituted one interview spread out over time rather than a repetition of one or more interview(s) consistent with *The Guidance (2002)*. Because a substantial amount of time in the first interview was spent on rapport-building and familiarising the child with the environment and the interviewer before she asked about abuse-related issues, the multiple session approach to interviewing may resolve some of the concerns sometimes raised by social workers, specifically that more time is needed to build rapport with children than is allowable in a single interview and that it is impractical to expect children to disclose in an unfamiliar environment to a stranger (see *Aldridge & Wood, 1998; Davies, Wilson, Mitchell, & Milsom, 1995*).

A further issue for consideration raised by the present study is the appropriate setting for such multiple session interviews. The diagnostic assessments in the present study were carried out in a playroom setting, with toys and play activities available. Anecdotally, both positive and negative effects of this setting were observed in the present study. Some children find the investigatory process itself stressful (Berliner & Conte, 1995) and a playroom environment may, therefore, constitute a nonstressful, child-friendly environment in which children can be assessed without the unfamiliarity of a more formal assessment setting. Most children in the present research clearly relaxed within the playroom environment and engaged in a number of play activities. Furthermore, the playroom environment may also be useful in that it gives children alternatives to answering a question when they do not want to answer it. In the present study, children were more likely to divert into other activities when they did not reply to the interviewer's questions than to say nothing at all. It is also possible, however, that children did not answer the question because they were distracted by the playroom environment, clearly a negative effect. Aldridge and Wood (1998), in their examination of 180 video-taped interviews, for example, noted that toys and play activities sometimes distracted children from answering interviewer's questions. In addition to toys being distracting, researchers have expressed concern that toys and playroom activities encourage fantasy and make believe (Lamb, Sternberg, & Esplin, 1994; see Pipe & Salmon, 2009, for review) and lead to inaccuracies in what children report (Salmon & Pipe, 1997).

To conclude, the difficulties in interviewing children about alleged abuse are numerous. The interviewer needs to ask the child for information that the child may not be willing to share. Not only are the questions on difficult topics, but due to concerns of children's suggestibility, interviewers are required to elicit abuse information in the least leading way possible. Research studies focusing on how children respond and disclose in investigatory settings are still relatively few and there remain many unknowns. Further research is needed on the effectiveness of free recall questions across a number of different interview contexts and child-related variables, such as the child's age, readiness to disclose, and other factors that may inhibit or encourage disclosures. Because research conducted in the field may be used in court, researchers need to be particularly cautious about how they generalise their findings and clearly spell out the limitations of any given study. For example, if most children in a particular study readily disclose in response to an open-ended free recall question then the specifics of that population (e.g., the context of the interview, the age range of the children, whether they have previously disclosed abuse, the type of abuse) need to be clearly identified and the findings from the study not generalised to all children who have been abused until there is sufficient data to establish that such generalization is appropriate.

The present study suggests that an interview conducted over multiple sessions may not differ substantially from a single interview in its structure, with the first interview effectively providing the opportunity for rapport building. However, future research will need to examine the role of these initial sessions in setting up expectations and setting the stage for the kinds of responses children should provide. For example, as in previous studies, we might expect that asking children for detailed, open-ended responses to the neutral questions in the early sessions will lead to longer responses when the substantive issue is introduced in the later interview sessions. Such questions await further research, but suggest very fruitful directions for approaches that involve multiple interview sessions with some children.

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Appendix A. Topic

Topic of questions

All on-task interrogatives or commands were designated as relating to one of the following mutually exclusive topics; background, nongenital body parts, genital body parts, who the child likes/doesn't like, potentially abuse-related, potentially abuse-related genital specific, disclosure, sex.

Background: General background information about the child (e.g., “where do you live?” “who lives with you?” “tell me who looks after you,” “where do you go to school?”).

Nongenital body parts: Naming nongenital body parts and describing their function (e.g., “what part is this?” [interviewer points to hands of a doll], “what are hands for?”).

Genital body parts: Naming genital body parts and describing their function (e.g., “what part is this?” [interviewer points to genital parts of a doll], “what's a diddle for?”).

Like/not like: Interrogatives or commands relating to who the child likes or doesn't like and why (e.g., “who do you like at home?” “how come you like her?”).

Potentially abuse-related: Interrogatives or commands about good and not good touching, hitting, sore areas, kicking, rude, naughty, bad things, scared, unhappy, worried, secrets (e.g., “who does not good touching?” “do you have any worries?”).

Potentially abuse-related genital specific: Interrogatives or commands about who sees or touches genital areas (e.g., “who sees your diddle?” “who touches fannys?”).

Disclosure: When the child has disclosed physical or sexual abuse, interrogatives or commands relating to this disclosure (e.g., “what did he do with his hands?” “where were you when that happened?”). Note: See Chapter 6 for definition of sexual/physical abuse.

Sex: Interviewer's interrogatives or commands relating to the child discussing observing or participating in sexual activities that do not meet the criteria for abuse (e.g., observing parents, self-masturbation, sex with peers, see Chapter 6 for definition of sexual/physical abuse).

The 8 topics readily fit into either an abuse-specific or nonabuse category. The *abuse-specific* category consisted of questions coded as abuse-related, sex-related, disclosure and abuse-genitalia. The *nonabuse* category consisted of questions coded as background, body parts-genital, body parts nongenital, like/not like.