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Spotlight on Practice

## Consistency in children's reports of sexual and physical abuse<sup>☆</sup>

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### Abstract

**Objective:** The goal of the present study was to investigate the consistency of children's reports of sexual and physical abuse.

**Method:** A group of 222 children, ages 3–16 years, participated. As part of legal investigations, the children were interviewed twice about their alleged experiences of abuse. The consistency of children's reports of sexual and physical abuse was examined in the two interviews, in relation to age, type of abuse, gender, memory, suggestibility, and cognitive capabilities.

**Results:** Older children were more consistent than younger children in their reports of sexual and physical abuse. Children were more consistent when reporting sexual abuse than physical abuse. Girls were more consistent than boys in sexual abuse reports. Consistency in sexual abuse reports was predicted by measures of memory, whereas consistency in physical abuse reports was not. Cognitive abilities did not predict consistency in sexual abuse or physical abuse reports.

**Conclusions:** Implications for understanding children's allegations of abuse are discussed.

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## Introduction

If jurors were told that less than 10% of the information provided by a child was consistent across two interviews, how would this information affect the jurors' perceptions of the child's reliability as a witness? According to experimental evidence, it is likely that the jurors would consider the child to be an unreliable witness: Jurors tend to consider child witnesses to be more credible when their reports are consistent (e.g., Berman, Narby, & Cutler, 1995; Leippe, Manion, & Romanczyk, 1992; Myers, Goodman, Redlich, Prizmich, & Imwinkelried, 1999). Interestingly, the reported percentage (10%) is not hypothetical. Rather, it represents the actual overall findings of a study conducted with preschoolers by Fivush and Shukat (1995). However, despite the high inconsistency, the preschoolers in Fivush and Shukat's (1995) study were quite accurate (more than 90% of the information provided was correct). This example shows the need of gaining a deeper understanding of children's consistency and memory capabilities.

Although consistency is an important indicator of believability for jurors, relatively little is known about the factors that affect children's consistency and the conditions under which consistency and accuracy are related. The goals of the present study were to examine: (1) children's consistency of sexual and physical abuse allegations in relation to child age, child gender, and the type of abuse experienced; (2) whether children's accuracy in answering questions about a documented event predicts their abuse report consistency; and (3) whether children's cognitive abilities predict consistency of children's allegations of physical and sexual abuse.

In the following sections, we define consistency and present findings from previous studies that examined the consistency of children's event reports. Additionally, we discuss factors that may affect the consistency of children's reports, particularly when the reported event is an experience of abuse.

### *Consistency in children's reports*

The term consistency refers to whether the same information is reported over time; that is whether, when reported for a second time, the information about the event is the same as previously reported. If children recall the same information, they are consistent; otherwise they are inconsistent. Therefore, consistency indicates that the child reports the very same information about the target event across different interviews. It should be noted that inconsistency thus defined differs from contradiction. Recalling two different features of an event on two separate occasions does not necessarily mean that one feature denies the possibility that the other feature is true. Although a child may be inconsistent because she reports different features of the same event in different interviews, she may still be accurate on both occasions. For example, one can imagine a child who went fishing and hiking during a camping trip. When asked on two different occasions about what she did during the camping trip, she answered "I went fishing" the first time and "I went hiking" the second time. The child has provided inconsistent but not contradictory information. The child would have provided a contradiction if she stated in the second interview "I went hiking and did nothing else" or "I went hiking but not fishing."

Prior studies on consistency in children's reports of their experience have focused on relations among consistency, age, type of information, and accuracy. Each of these topics is discussed in turn next. Additionally, we introduce other factors that may affect the consistency of children's reports, namely gender and cognitive abilities.

*Age and consistency.* Developmental differences in consistency have been reported. Preschool children tend to be inconsistent when recounting their experiences in response to open-ended questions (Fivush, Hamond, Harsch, Singer, & Wolf, 1991; Fivush & Shukat, 1995; Hamond & Fivush, 1991; Peterson, Moores, & White, 2001). When preschool children are interviewed over time with open-ended questions, the information they report is surprisingly accurate. However, children recount high percentages of new information during subsequent interviews. For example, Hamond and Fivush (1991) interviewed preschoolers twice with nonleading questions. Results showed that 75% of the information children reported in the second interview was new (i.e., inconsistent with the information reported during the first interview). However, this information was highly accurate (but see Pipe, Gee, Wilson, & Egerton, 1999).

When school-aged children are repeatedly questioned about events, their recall tends to be more consistent than that of preschoolers (Hudson & Fivush, 1991). One possible explanation for the age difference concerns young children's dependence on adults' questions, that is, young children often structure their reports around cues provided by adults (Fivush et al., 1991). Consequently, if adults ask different questions over time, children's reports will be inconsistent (Hudson, 1990).

*Accuracy and consistency.* Over the past two decades, a deluge of research has been conducted to shed light on factors, such as age, event salience, delay, number of interviews, and questioning style, that affect children's memory accuracy (for reviews, see Bruck & Ceci, 1997, 1999; Quas, Goodman, Ghetti, & Redlich, 2000). In contrast, very little research has been conducted to elucidate the relation between children's memory and consistency over time. Discussing the complete corpus of literature on children's memory is beyond the scope of the present manuscript. Instead, we summarize selected research results that are particularly relevant for understanding the relation between accuracy and consistency.

Research suggests that consistency across interviews is at times differentially influenced by variables affecting accuracy. For example, style of questioning has a different effect on consistency versus accuracy. When open-ended questions are asked of preschoolers, consistency is fairly low, yet accuracy is often quite high (Fivush & Shukat, 1995); if specific nonleading questions are asked, both consistency and accuracy are high (Fivush, 1993). Open-ended or free-recall questions allow children considerable flexibility in choosing the information to report, and thus, promote inconsistency, whereas specific questions provide children with a precise cue of what is to be recalled, and thus, promote consistency.

At other times, however, consistency and accuracy can both be negatively affected by the type of questions asked. Misleading and suggestive questioning, for example, has been found to reduce both consistency and accuracy. Several researchers provide evidence that when preschoolers are asked misleading questions, they are less consistent over time and are also less accurate (e.g., Poole & White, 1991, 1995). Until a stable, structured memory representation is

formed, the quality of recalled information may be more sensitive to questioning and suggestion (Farrar & Goodman, 1992). Once that structure has been established, consistency of recall increases whereas suggestibility decreases (Fivush & Schwarzmüller, 1995).

*Type of information and consistency.* Another important element related to children's consistency concerns the type of information children report. Children may be more consistent about certain types of events (e.g., positive events) than about other types of events (e.g., negative events). Fivush and Shukat (1995) asked preschool children to recall positive events, such as a trip to Disney World, and then examined children's consistency when reporting activities, objects, persons, locations, adjectives, adverbs, and internal states related to the positive event. Preschool children did not show significant differences in consistency for different types of information.

What if children are asked to report negative events, such as abuse? Also, what if different types of negative events, such as sexual abuse and physical abuse, are reported? Although little research exists on the consistency of children's reports of sexual and/or physical abuse, a few studies may be relevant.

In a unique study on consistency of reports concerning traumatic events, Peterson and her colleagues (Peterson et al., 2001) examined children's accounts of an injury and a visit to the emergency room following the injury. Children were interviewed four times. One of the factors examined was whether consistency changed according to the type of information recalled, namely, injury-related or hospital-related information. Results indicated that participants were more consistent when providing information about the injury versus the hospital visit. It is possible that information characterized by high personal salience, such as core information about getting injured, may be more consistently reported than details surrounding the injury, such as events at the hospital. If this were the case, we should expect information about abusive experiences to be reported with relative consistency.

Nevertheless, differences may be observed in the consistency of children's reports of sexual versus physical abuse. Research suggests that a sexual, or sexually related, meaning attributed to an event can influence completeness of recall. For example, Saywitz, Goodman, Nicholas, and Moan (1991) showed that 7-year-olds recounted a larger amount of information than 5-year-olds when they were asked about a scoliosis examination. However, an age difference failed to emerge in the amount of correct information recalled when children were asked questions about genital touch experienced during a medical examination. Saywitz et al. (1991) hypothesized that the older children were embarrassed and thus, did not provide information about genital touch as freely as they did about a scoliosis exam. Because sexually related content appears to affect the amount of information disclosed, it is reasonable to investigate whether it also affects consistency.

Another factor that might influence children's consistency of abuse allegations is repeated exposure to the abusive event. Although repetition of an event can increase recall for commonalities across event occurrences, Powell and Thomson (1996) found that event repetition reduces recall about what was unique on a specific occurrence of the event. Additionally, when children's consistency was measured across two interviews, consistency scores were higher when children had experienced the event once than when children experienced the event repeatedly.

*Gender and consistency.* One additional factor of interest, particularly regarding consistency of abuse reports, is gender. Studies investigating disclosure of sexual abuse after long delays show that male victims are less likely than female victims to disclose sexual abuse (e.g., [Spatz Widom & Morris, 1997](#)). Males apparently have a reluctance to disclose being a victim of sexual abuse, particularly when the perpetrator is a male, as was the case in these former studies for virtually all the participants. It is therefore of interest to investigate whether gender affects the other characteristics of abuse reports even after disclosure, such as consistency.

*Cognitive abilities and consistency.* There are other factors that may affect the consistency of children's reports, but that to date have not been investigated. One such factor is intelligence. Cognitive capabilities have been examined in relation to memory and suggestibility. Results indicate that cognitive capabilities measured with the Wechsler Intelligence Scale for Children-Revised (WISC-R) are positively correlated with memory and negatively correlated with suggestibility (e.g., [Danielsdottir, Sigurgeirsdottir, Einarsdottir, & Haraldsson, 1993](#); [Richardson, Gudjonsson, & Kelly, 1995](#)). Thus, it is of interest to examine whether cognitive capabilities (e.g., IQ) also predict consistency.

### *The present study*

The objective of the present study was to further our understanding of the consistency of children's reports. The unique sample available for the study—a group of children hospitalized as a part of a legal investigation to substantiate abuse allegations—offers a special opportunity for determining if children are consistent when reporting sexual and/or physical abuse. The legal investigation included examining children for medical signs of physical or sexual abuse; interviewing children for mental health and forensic purposes in a psychological consultation (PC) and forensic interview (FI), respectively; and reviewing prior records of abuse allegations and intervention by social service agencies. To assess consistency, the allegations children made during the PC were compared to the allegations made in the FI. The relations between consistency and other factors such as age, gender, and cognitive abilities were also examined.

In addition, the relation between consistency in reporting abuse and children's accuracy in reporting a nonabusive physical examination was examined. During the investigation, children received a physical examination that included anogenital touch and venipuncture, usually on the second day of their stay in the hospital. After a 3-day interval, children were interviewed about their memory for the physical examination. Units of information children provided during the memory interview were coded and then used for the present study as a measure of the accuracy of children's memory.

The study addresses several specific questions. The first question concerned the relation between child age and consistency. Based on the previously discussed literature on consistency, a significant age effect was expected. This prediction was based on the likelihood that older children would have a more structured memory for the events, which could be retrieved more consistently across repeated interviews. Thus, older in comparison to younger children were expected to provide more consistent allegations.

The second question involved the relation between memory and consistency. Previous studies (e.g., [Fivush & Shukat, 1995](#)) investigated the consistency of children's reports across

repeated interviews as well as children's accuracy. The events studied were always nonabusive and, in general, positive in valence. Of importance, these studies did not investigate children's accuracy on independent measures of memory (i.e., measures of memory gathered for a different event than the one for which consistency scores were gathered).

Establishing whether children who are more accurate are more likely to be consistent across events could be of interest to the legal system. In attempting to discredit a witness, a common strategy is to highlight inconsistencies in the witness's testimony. Empirical studies have shown that consistency is, indeed, related to jurors' perception of child witness credibility (Berman et al., 1995; Leippe et al., 1992). Thus, the legal system would benefit from knowing whether consistency is in reality a reliable indicator of accuracy. Previous studies have not investigated whether consistency in reports of abusive events can be predicted by memory for independent, nonabusive events.

In the present study, to assess this relation, measures of children's memory were obtained for a documented event that children experienced during their hospitalization, namely a physical examination conducted by a physician. If a positive relation between accuracy and consistency generally exists, children who provide more accurate information about the physical examination would be expected to be more consistent across the two interviews concerning abusive events. Although we could not directly assess memory accuracy for sexual and physical abuse given the lack of objective recording of the alleged abuse, we could relate consistency to independent measures of accuracy.

The third question pertains to the relation between type of abuse children reported and consistency. It is possible that the trauma related to sexual abuse together with the embarrassment entailed in its disclosure would result in less consistent reports than for physical abuse. However, it is also possible that children might be less consistent in reporting physical abuse because physical abuse also involves traumatic circumstances. Additionally, because physical maltreatment was allegedly a recurrent disciplinary strategy in many households of children who participated in our study, children might be less consistent as a result of the repeated physically abusive incidents they had experienced. In addition, an interaction effect between age and type of abuse was expected. Although older children compared to younger children were expected to be more consistent in reporting physical abuse, a similar age difference might not be evident when children disclose physical abuse. Saywitz et al. (1991) hypothesized that the reverse age trend for 7-year-old versus 5-year-old children's free-recall of genital touch resulted from embarrassment and social pressure. It was expected that events with possible sexual connotations would influence not only the amount but also the consistency of reports.

The fourth question for the present study concerned the effect of gender on consistency. As previously discussed, male victims of sexual abuse are less likely than females to disclose their experience when interviewed after a long delay. It was hypothesized that for male participants who disclose sexual abuse, their reluctance to discuss such experiences would affect the consistency of their reports. Thus, although a main effect of gender on consistency was not anticipated, a significant interaction between type of information (i.e., type of abuse) and gender was expected, such that males were expected to be less consistent than females when reporting sexual abuse.

The last question was related to a possible association between cognitive capabilities and consistency. In the present study, children's cognitive capabilities were assessed with

standardized measures of intelligence (WISC-R for children of 7 years or older and Wechsler Preschool and Primary Scale of Intelligence (WPPSI) for younger children). Because in previous studies, IQ scores are at times positively correlated with accuracy in children's eyewitness memory, it was deemed possible that IQ scores would also be positively related to other features of children's accounts, such as consistency. Therefore, it was predicted that children who score higher on the WISC-R (or WPPSI) would also be more consistent in their abuse reports.

## Method

### *Participants*

A total of 222 children (55% females and 45% males) participated in the present study. The age range was 3–16 years ( $M = 7.3$  years). Specifically, 86 children were between 3 and 5 years of age, 96 were between 6 and 10 years of age, and 40 were between 11 and 16 years of age. Regarding ethnicity, 69% were African-American, 16% were Hispanic, and 15% were Caucasian. The children were patients in a program for the forensic investigation, assessment, and treatment of suspected victims of physical and/or sexual abuse. A total of 40 children (18%) did not report any experience of abuse. A total of 8 children (3.6%) disclosed sexual abuse only, whereas 123 (55.4%) reported experiences of physical abuse only. Finally, a total of 51 children (23%) made allegations regarding both sexual and physical abuse.

### *Measures*

*Memory for medical examination.* Questions that tapped children's memory and suggestibility for an anogenital medical examination were developed from a previous study (see Eisen, Goodman, Qin, & Davis, 1998a). The questionnaire contained one free-recall question ("Tell me everything you can remember about that doctor's exam. What happened?") followed by one prompt for additional information ("What else happened? I need to know everything that happened.") to assess children's free narratives of the exam. The rest of the interview questions were more detailed, cued-recall questions that were similar to those used in other child witness studies (e.g., Carter, Bottoms, & Levine, 1996; Saywitz et al., 1991). Nine open-ended questions prompted children to answer with brief descriptions (e.g., "What did the nurse look like?" "What did the doctor do when she examined your bottom?"). In addition to the open-ended questions, 68 "direct" questions (specific and misleading) were included. Of these, 39 specific questions concerned details from the exam in a straightforward manner and could be answered with a "yes" or "no" response (e.g., "Was there a sink in there?" "Did the doctor check your throat?"). The 29 misleading questions suggested an incorrect response in a leading manner and could also be answered with a "yes" or "no" response (e.g., "The nurse didn't put something tight on your arm, did she?" "The doctor had a band-aid above her eye, right?"). Specific and misleading questions were roughly balanced for equal numbers of "yes" and "no" correct answers to control for possible response bias. The interview was videotaped.

*Psychological Consultation (PC).* The PC was a semistructured interview aimed at evaluating the child for signs and symptoms of trauma, and assessing each child's mental status, emotional functioning, cognitive level, and affective response to the alleged abuse and psychological sequelae to abuse. During the interview, descriptions of the abusive experiences were also elicited. Examples of relevant questions asked include, "Has anybody ever touched you on your private parts?" "What were you doing when he touched you?" "What happens if you do something bad?" "What are you scared of?" The interviewers were either licensed clinical psychologists or advanced doctoral students in psychology. The interview was videotaped.

*Forensic Interview (FI).* The FI was a semistructured interview aimed at assessing the allegations of abuse. The interview started by ascertaining whether the child understood the meaning and importance of telling the truth during the interview (e.g., asking a girl, "If I told you that you were a boy, would I be telling the truth or would I be telling a lie?"). The interviewers were mental health specialists trained in forensic interviewing of children. Although PC and FI served different purposes, they both concerned the occurrence of abuse and its dynamics. Examples of relevant questions frequently asked include "Has anyone ever put something in your mouth that you did not like?" "What would you do if someone tried?" "Who whoops you?" "With what?" Props were sometimes used. The FI was also videotaped.

#### *Coding of memory for medical examination*

Children's responses to the Memory for Medical Examination Interview were transcribed verbatim for purposes of coding. Children's responses to free-recall and open-ended questions were coded into units of correct and incorrect information. Responses to specific and misleading questions were coded into correct responses, commission errors, omission errors, and don't know responses (Saywitz et al., 1991). Three coders scored interviews from 36 (16%) randomly selected participants. Lowest reliability of coding as measured by proportion of agreement was .81 for units of information for free-recall and open-ended questions and .96 for responses to specific and misleading questions. Disagreements between coders were resolved through discussion. Two of the coders then scored the rest of the interviews.

#### *Coding of consistency of abuse allegations*

The Psychological Consultation (PC) and Forensic Interview (FI) were transcribed verbatim for purposes of coding. A coding procedure was developed to score for abuse-related content elements within each interview and consistency between interviews. Children's allegations of sexual and physical abuse were scored from the transcriptions by trained coders.

*Content elements coding system.* PC and FI were first scored for abuse-related "content elements." Abuse-related content elements consisted of information provided by children that was relevant to the alleged experiences of physical and/or sexual abuse. The abuse-related content elements included: (1) answers to general questions about being a victim of abuse (i.e., for sexual abuse, "Has anybody ever touched your private parts?" for physical abuse, "Has



anybody ever hit you or beat you up?”); (2) identity of the perpetrator; (3) actions attributed to the perpetrator (e.g., for sexual abuse, “He touched me down there.” for physical abuse, “He hit me with an extension cord.”); (4) location of abuse incidents (e.g., for sexual abuse, “He touched me while I was in the bedroom.” for physical abuse, “We were sitting at the kitchen table, and she got mad.”); (5) recency of the latest abuse incident; (6) frequency of abusive events (e.g., for sexual abuse, “It happened only once.” for physical abuse, “She hits me every time she gets mad . . . once or twice a week.”); and (7) duration of abusive events. For each child, information was gathered about abusive actions for a maximum of three perpetrators of physical abuse and three perpetrators of sexual abuse. For sexual abuse reports, no child reported information for more than three perpetrators. For physical maltreatment reports, seven children mentioned more than three people, but they did not provide additional information about them other than assenting to questions such as “Is there anybody else who hits you with objects?”

*Consistency coding system.* Children’s consistency across the PC and FI was measured by comparing the content elements coded in the PC to the content elements coded in the FI. One comparison was performed for each of the seven content categories. The information could be classified in three ways: consistent, inconsistent but not contradictory, and inconsistent and contradictory. For each child, consistency scores were obtained by attributing a score of 0 to inconsistent and contradictory information, a score of 1 to inconsistent but not contradictory information, and a score of 2 to consistent information. An overall mean consistency score was calculated by averaging across the consistency scores attributed to each content element.

Both abuse-content elements and consistency were coded by two trained coders who independently scored 20% of the interviews to provide a measure of interrater reliability. Proportion of agreement equal to .94 was reached for abuse-content elements and .93 for consistency across interviews. When the Kappa metric was used to correct these proportions for potential agreement by chance, the reliability index ( $K$ ) was equal to .86 for the abuse-content elements and .92 for consistency across interviews. Coders were blind to child age, abuse status, and case details. One of the coders then scored the remaining interviews.

*Wechsler Intelligence Scale for Children-Revised (WISC-R) (Wechsler, 1974).* The WISC-R produces three IQ indices: Verbal IQ, Performance IQ, and Full-scale IQ. Verbal IQ is essentially an index of language and knowledge-based capacities (e.g., vocabulary); Performance IQ concerns visual-motor and problem-solving abilities (e.g., as measured by block design); and Full-scale IQ is an overall evaluation of intellectual functioning that is obtained by combining the raw scores for Verbal and Performance IQ. The WISC-R is standardized for children from the age of 7 to 16 years. For the present study, only the vocabulary and block design subscales were employed.

*Wechsler Preschool and Primary Scale of Intelligence (WPPSI) (Wechsler, 1989).* This test was developed for use with children between the ages of 4 and 7 years. The WPPSI also yields three IQ indices which are comparable to those of the WISC-R: Verbal IQ, Performance IQ, and Full-scale IQ. Again, for the present study, only the vocabulary and block design subscales were used.

### *Procedure*

The maltreatment evaluation entailed hospitalizing children for 5 days while a forensic investigation, aimed to establish if the children were victims of abuse, was ongoing. Data collection was designed to be conducted almost completely within the existing framework of the assessment protocol of the inpatient unit without disrupting the standard procedures of the program. On the first day of hospitalization, each child received a complete physical examination and updated vaccinations. On the second day, each child was given an anogenital exam by a physician, and a venipuncture by a nurse. The PC and FI were administered on separate days between Days 2 and 5. On average, 3 days separated the first interview from the second. The comparison of statements made during PC and FI constituted the main source of data for the present study. Finally, also on Day 5, each child was interviewed for memory of the anogenital examinations.

## **Results**

### *Preliminary analysis*

Given the characteristics of the sample (123 children disclosed physical abuse only, 8 children disclosed sexual abuse only, and 51 children disclosed both physical and sexual abuse), including “type of abuse” as an independent variable in analyses was problematic, specifically because of the few children who disclosed sexual abuse only. To include type of abuse as a factor, we conducted the following preliminary analyses: We examined whether consistency of sexual abuse reports differed between children who disclosed sexual abuse only, and children who disclosed both sexual and physical abuse. A one-way ANOVA was performed with consistency of sexual abuse reports as the dependent variable and disclosure status (sexual abuse only vs. sexual and physical abuse) as the independent variable. No significant difference was detected (sexual abuse only disclosers:  $M = 1.39$ ; sexual abuse and physical abuse disclosers:  $M = 1.42$ ,  $F(1, 58) < 1$ ). Given these results, when we were interested in including type of abuse as a factor, we collapsed the sexual abuse only and sexual and physical abuse groups as follows: For children who disclosed sexual abuse only and who disclosed sexual and physical abuse, each child’s consistency score for *sexual abuse reports* was used. That is, we compared the consistency of sexual abuse reports, regardless of whether the children who reported sexual abuse also disclosed physical abuse, to the consistency of physical abuse reports (reported by children who disclosed physical abuse only).

### *Age, type of abuse, gender, and consistency*

To test the effect of age, type of abuse, and gender on consistency of children’s allegations, we conducted a 3 (age: 3- to 5-year-olds vs. 6- to 10-year-olds vs. 11- to 16-year-olds)  $\times$  2 (type of abuse: physical abuse vs. sexual abuse)  $\times$  2 (gender: female vs. male child) between-subjects analysis of variance (ANOVA), with mean consistency scores as the dependent measure. This analysis compared the consistency of physical abuse reports for the 123 children who disclosed

physical abuse only, to the consistency of sexual abuse reports for children who disclosed sexual abuse only ( $n = 8$ ) and who disclosed both sexual and physical abuse ( $n = 51$ ). The number of observations in the smallest cell equaled 11. A significant main effect of age emerged, such that older children were more consistent than younger children. Whereas 11- to 16-year-olds and 6- to 10-year-olds did not significantly differ in consistency (6- to 10-year-olds,  $M = 1.19$ ; 11- to 16-year-olds,  $M = 1.20$ ), both of these older age groups were significantly more consistent in their abuse reports than were 3- to 5-year-olds,  $M = .97$ ,  $F(1, 168) = 7.09$ ,  $p < .01$ ,  $\eta^2 = .04$ . A significant main effect of type of abuse also emerged,  $F(1, 168) = 45.52$ ,  $p < .001$ ,  $\eta^2 = .18$ . Consistency was higher for sexual abuse disclosures,  $M = 1.43$ , than for physical abuse disclosures,  $M = .95$ . The main effect of gender was not significant. However, a significant interaction between gender and type of abuse emerged,  $F(1, 168) = 9.04$ ,  $p < .01$ . Analysis of simple effects revealed that girls were significantly more consistent than boys,  $M_s = 1.57$  versus 1.16, respectively, when disclosing sexual abuse,  $F(1, 56) = 10.15$ ,  $p < .01$ ,  $\eta^2 = .15$ . Girls were not significantly more consistent than boys when disclosing physical abuse,  $M_s = 1.00$  versus .90, respectively,  $\eta^2 = .04$ . No significant interaction effect between age and type of reported abuse was found,  $F(2, 168) < 1$ .

It was also of interest to determine if children who disclosed both sexual and physical abuse differed in consistency of reports of sexual versus physical abuse. Conducting a within-subjects analysis controls for possible confounding factors across children who experience different types of abuse. Consistency scores from children ( $n = 51$ ) who disclosed both types of experiences were selected and entered into a 3 (age: 3- to 5-year-olds vs. 6- to 10-year-olds vs. 11- to 16-year-olds)  $\times$  2 (type of abuse: sexual abuse vs. physical abuse) ANOVA, in which age varied between subjects and type of abuse varied within-subjects. There were too few older boys who experienced both sexual and physical abuse to include gender as a factor in the analysis. Results revealed that the main effect of age approached significance: 3- to 5-year-olds,  $M = 1.04$ ; 6- to 10-year-olds,  $M = 1.28$ ; 11- to 16-year-olds,  $M = 1.33$ ,  $F(2, 48) = 2.81$ ,  $p = .07$ ,  $\eta^2 = .09$ . Additionally, the effect of type of abuse reported was significant,  $F(1, 49) = 19.39$ ,  $p < .001$ ,  $\eta^2 = .27$ . Mean consistency for sexual abuse reports was 1.44, whereas for physical abuse reports mean consistency was 1.04. Thus, again, sexual abuse reports were more consistent than physical abuse reports. No significant interaction between age and type of abuse emerged.

Finally, to ensure that the effect of type of abuse on consistency could be extended to children who disclosed only one type of abuse, a one-way abuse-type ANOVA was performed to compare consistency for children who disclosed physical abuse only and consistency for children who disclosed sexual abuse only. Despite the reduced sample size for children who disclosed sexual abuse only ( $n = 8$ ), the results showed a pattern in accord with that reported earlier, that is, consistency was higher for sexual abuse than physical abuse reports: consistency of sexual abuse reports,  $M = 1.74$ ; consistency of physical abuse reports,  $M = .97$ ,  $F(1, 127) = 6.24$ ,  $p = .01$ ,  $\eta^2 = .13$ .

One possible explanation for the difference in consistency in sexual versus physical abuse reports rests on the fact that many children in our sample reported that physical abuse was often associated with punishment practices adopted by several members of children's households. It would follow that, when children were interviewed about their experiences, they

might have encountered more difficulties across interviews in consistently describing a target event out of several repeated events by multiple caretakers than when they were asked to describe the usually more limited events of sexual abuse. In this sense, sexual abuse could be considered a relatively distinctive experience probably associated with more specific persons and time/place coordinates. Thus, children may be more likely to describe a sexual abuse experience consistently.

Another critical feature associated with repeated exposure to physical maltreatment, and which therefore may negatively affect consistency, is frequency of physical abuse. Because frequency was one of the content elements coded for every alleged perpetrator, we also examined the relation between consistency of physical abuse reports and the average frequency of physical maltreatment, as reported by children. Although the correlation was in the predicted direction, it was not significant,  $r = -.18$ ,  $p = .21$ ,  $n = 66$ . It should be noted, however, that children were not always directly asked about the frequency of physical maltreatment; thus, the number children for whom this information was available was relatively small.

To further test the possibility that repeated exposure to abusive incidents may negatively affect consistency, using a measure that was available for all children in the study, the number of alleged perpetrators (1–3) was used as an indicator of multiple experiences of physical maltreatment. Although the number of perpetrators is not a direct index of number of abuse incidents, children who have been abused by more than one perpetrator arguably may be considered to have suffered repeated abuse, particularly in physical abuse cases, where the maltreatment is often a standard disciplinary method. In our sample, only one child provided allegations of sexual abuse regarding three perpetrators (restricting the range so as to preclude meaningful analysis of number of sexual abuse perpetrators), as opposed to 30 children who disclosed information regarding three physical abuse perpetrators. A one-way ANOVA was performed using number of perpetrators (1, 2, or 3) as the independent variable and consistency of physical abuse allegations for children who disclosed only physical abuse as the dependent measure. A significant effect of number of perpetrators on consistency emerged (one perpetrator,  $M = 1.04$ ; two perpetrators,  $M = 1.11$ ; three perpetrators,  $M = .80$ ), such that children who made allegations about three perpetrators were significantly less consistent than those who reported information regarding one or two perpetrators,  $F(1, 166) = 6.23$ ,  $p < .01$ ,  $\eta^2 = .09$ . However, when the consistency of children who disclosed information about only one physical abuse perpetrator was compared to the consistency of children who disclosed information regarding only one sexual abuse perpetrator, consistency in sexual abuse reports was still significantly higher,  $M = 1.44$ ,  $F(1, 98) = 21.77$ ,  $p < .001$ ,  $\eta^2 = .16$ . Thus, the number of alleged perpetrators does not seem to be the only reason for the difference between consistency in sexual versus physical abuse reports.

In summary, a significant effect of age on consistency of abuse reports emerged. Additionally, consistency varied according to the type of information and gender of the child: Children were more consistent when reporting sexual abuse than when reporting physical abuse, and girls were more consistent than boys in their reports of sexual but not physical abuse. Results suggested that one of several possible reasons for the difference in consistency in sexual and physical abuse reports could be due to the exposure of physically abused children to multiple perpetrators.

### *Memory accuracy and consistency*

*Memory for medical examination.* Results concerning the children's memory for the medical examination are presented in detail in Eisen, Goodman, Qin, and Davis (1998b). Here we provide summary information needed to interpret the memory and consistency correlations. Because of a floor effect, children's answers to the initial free-recall question and initial prompt were not analyzed. Instead, each child's average correct units across the nine open-ended questions constituted a measure of memory accuracy: overall  $M = 1.46$ ,  $SD = 1.22$ . Incorrect units in response to open-ended questions were rare, overall  $M = .27$ ,  $SD = .37$ . Responses to "direct" questions (specific plus misleading) were coded as correct answers,  $M = .69$ ,  $SD = .19$ , omission errors (if children did not provide information about something that actually happened),  $M = .15$ ,  $SD = .09$ , and commission errors (if children provided information about something that did not actually happen),  $M = .10$ ,  $SD = .08$ . ("Don't know" responses were relatively infrequent and were not subjected to analysis.) All memory measures were significantly correlated with age except for average number of incorrect units of information in response to open-ended questions,  $r = -.14$ ,  $n = 180$ ,  $p = .06$ .

*Memory and consistency.* As described previously, the consistency of sexual abuse reports did not differ between children who disclosed sexual abuse only and children who disclosed both sexual and physical abuse. Therefore, to increase the number of children included in the following analyses, consistency scores for sexual abuse reports for all children who reported sexual abuse were included in the correlations concerning consistency of sexual abuse disclosure.

Analogously, to include as many children as possible who disclosed physical abuse in the correlations between memory and consistency of physical abuse disclosure, we first investigated whether the consistency in physical abuse reports differed between children who disclosed physical abuse only and children who disclosed both physical and sexual abuse. We therefore performed a one-way ANOVA with consistency of physical abuse reports as the dependent variable and disclosure status (physical abuse only vs. sexual and physical abuse) as the independent variable. No significant difference was detected: physical abuse only disclosers,  $M = .97$ ; sexual abuse and physical abuse disclosers,  $M = 1.06$ ,  $F(1, 173) < 1$ . Therefore, for purposes of the correlational analyses of the consistency of physical abuse disclosure, the physical abuse only group was combined with the physical abuse and sexual abuse group in regard to the consistency of their physical abuse reports.

*Sexual abuse disclosers.* Because age affects memory and, in the present study, an age effect for consistency in sexual abuse reports approached significance, age was statistically controlled when examining the relation between memory and consistency. Additionally, because gender had a significant effect on consistency of sexual abuse reports, gender was also statistically controlled. When age and gender were both partialled, the following correlations were obtained for 59 children who reported sexual abuse: Consistency was significantly correlated with number of correct units of information reported in response to open-ended questions,  $r = .33$ ,  $p < .05$ , and with proportion of omission errors to specific questions,  $r = -.53$ ,  $p < .001$ . The correlation between consistency and proportion of correct responses to specific questions

approached significance,  $r = .28$ ,  $p = .06$ . Consistency was not significantly correlated with proportion of incorrect information reported to open-ended questions,  $r = -.07$ ,  $p = .62$ , proportion of commission errors to specific questions,  $r = .17$ ,  $p = .25$ , proportion of correct responses to misleading questions,  $r = .13$ ,  $p = .41$ , proportion of omission errors to misleading questions,  $r = -.24$ ,  $p = .12$ , and proportion of commission errors to misleading questions,  $r = .09$ ,  $p = .53$ .

*Physical abuse disclosers.* As described previously, age was statistically controlled when conducting correlational analyses concerning physical abuse disclosers and memory performance. Additionally, because the number of physical abuse perpetrators had a significant effect on consistency of physical abuse reports, the number of reported perpetrators was also controlled.

Overall, 174 children disclosed physical abuse. Memory measures were available for 168 of them, and these 168 children were included in the following analyses. No significant correlation was obtained between consistency of physical abuse reports and the memory measures. Consistency was not significantly correlated with: number of correct or incorrect units of information reported in response to open-ended questions,  $r = -.08$ ,  $p = .32$ , and  $r = .16$ ,  $p = .08$ , respectively; or proportion of correct responses, omission errors, and commission errors to specific and misleading questions,  $r_s \leq .10$ ,  $p_s \geq .12$ .

In summary, consistency of child sexual abuse reports was predicted by memory responses to open-ended and specific questions, but not by responses to misleading questions. In addition, consistency of physical abuse reports was not significantly correlated with any of the memory measures.

#### *Cognitive capabilities and consistency*

No significant correlation emerged between cognitive capabilities as measured by IQ tests and consistency in disclosing either type of abuse.

## **Discussion**

The present study investigated variables such as age, type of information, gender, memory, and cognitive capabilities possibly affecting consistency of children's reports of sexual and physical abuse. As predicted, older children were more consistent than younger children, reflecting an expected developmental trend in the consistency of abuse reports. This finding is congruent with those from previous research on nonabusive events (e.g., [Poole & White, 1991](#)). One possible explanation for age differences in consistency concerns older versus younger children's well-structured event representations. If older compared to younger children are more capable of structuring their own event reports and therefore less reliant on adult questioning, older children will have the potential to be more consistent. Younger children's memory reports would be expected to vary with the questions asked resulting in less consistent statements.

A significant relation between type of information and consistency was also found. Children provided more consistent information when reporting experiences of sexual abuse compared

to physical maltreatment. This result was obtained when comparing the consistency of reports of children who disclosed both sexual and physical abuse and also when comparing the consistency of reports of children who disclosed sexual abuse only and physical abuse only. A possible explanation for this finding is that differential exposure to the abusive events may affect consistency: When a given event is repeatedly experienced, the task of providing consistent reports across different interviews may become harder due to the difficulty of focusing on a unique incident out of the set of repeated experiences. We found confirmation that children who disclosed physical abuse regarding three perpetrators were significantly less consistent than children who disclosed information about one or two perpetrators. However, children who disclosed information about only one sexual abuse perpetrator were still more consistent than children who disclosed information only about one physical abuse perpetrator. Thus, further investigation is needed to shed light on the reasons for the difference in consistency in sexual and physical abuse reports. Replication and further investigation of these results are important, particularly in consideration that they argue against the notion that children are particularly inconsistent when reporting sexual abuse because of embarrassment and other social factors (Saywitz et al., 1991). It should be noted, however, that in the present study, we compared sexual abuse reports to physical abuse reports. It is still possible that children are more consistent when reporting a neutral or positive event than when reporting an abusive experience. Because no baseline measure of consistency was obtained for a neutral event, relating the present findings to results of previous studies about consistency is difficult.

Another possible explanation for the difference in consistency found for sexual abuse allegations as opposed to physical abuse allegations concerns the questioning style. Although no formal examination of questioning style was completed for the present study, consistency was coded for information elicited by an initial general question, such as “Has anybody ever touched you in your private parts?” for sexual abuse investigations, and “Has anybody ever hit you or beat you up?” for physical abuse investigations. On average across interviews (PC and FI), the general question for sexual abuse was asked for 82.8% of the participants, whereas the general question for physical abuse was asked only for 45.5% of the cases. The fact that general introductory questions were less frequently asked for physical abuse investigations may indicate that interviewers investigated physical abuse less systematically, or used different prompts, at least initially, to elicit information from children. This difference may have differentially impacted consistency for sexual and physical abuse reports.

Another interesting result was that consistency was differentially affected by gender as a function of type of reported abuse. Thus, not only are males less likely than females to disclose sexual abuse experiences, as observed in previous research on memory for abuse experiences (e.g., Spatz Widom & Morris, 1997), but in the present study they were also less consistent when talking about such experiences. Several possibilities could be proposed as to why females were more consistent than males in sexual abuse disclosure. For instance, boys may be less comfortable than females in providing information regarding bodily touch, resulting in decreased consistency. However, for the present study, we did not have information that could be used to explain this result. Thus, the role played by gender in allegation consistency requires further investigation.

One important part of this study was the investigation of the relation between memory, cognitive capabilities, and consistency. Traditionally, laypeople consider consistency as a memory-related phenomenon (although consistency is also at times considered an indicator of honesty rather than memory per se) (Berman et al., 1995). The importance of consistency in credibility judgments is evident in the literature regarding jurors' attributions of credibility: Jurors view consistency in a witness's allegation as a sign of credibility (e.g., Leippe et al., 1992; Myers et al., 1999). However, the relation between consistency and other memory-related measures has rarely been directly addressed. In the few studies that examined the issue, results did not support the idea of a relation between memory accuracy and consistency (e.g., Fivush & Shukat, 1995). In the present study, some support for a positive relation was found between accuracy for the Anogenital examination and consistency about the sexual abuse allegations.

Particularly, a significant positive correlation was found between consistency of sexual abuse allegations and number of correct units of information reported to open-ended questions; a significant negative correlation was obtained with proportion of omission errors to specific questions; whereas the correlation between consistency and proportion of correct responses to specific questions approached significance. Previous literature suggested that, to be able to report events consistently, children have to possess well-structured memory representations (e.g., Fivush & Schwarzmüller, 1995). Such representations would also support the ability to report more complete accounts when children receive only general prompts like open-ended questions. Thus, the positive correlation between consistency and amount of information may reflect the availability of such memory representations. This account is consistent with our results because consistency in sexual abuse reports was related to the amount of information reported in response to open-ended questions. However, memory was not a significant predictor of consistency in physical abuse reports. Further research is needed to explain why consistency of sexual but not physical abuse is associated with memory for a documented event.

Intelligence was not a significant predictor of consistency. Thus, one conclusion might be that intelligence is not related to consistency. This conclusion should be drawn with caution. First, the measures of IQ were the WISC-R or WPPSI. The possibility that these measures are socio-culturally and racially biased should be taken into consideration, given that children participating in the study largely represented minority groups (70.6% were African-American, 14.8% were Hispanic, and 14.6% were Caucasian). Further investigations should include, if possible, measures that are more sensitive to ethnic and cultural backgrounds.

#### *Directions for future studies*

The present research leaves many questions to be answered: (1) Why does the consistency of children's reports differ for sexual versus physical abuse? (2) Why do males and females differ in their consistency of reporting physical versus sexual abuse? (3) Why is memory not a reliable predictor of consistency in physical abuse reports?

To address these questions and study consistency systematically, several steps should be taken in future research. First, it is recommended that measures of consistency of abuse reports be accompanied by measures of consistency for neutral or positive events. This would provide



a baseline for the consistency of children's reports. Gathering baseline measures to understand children's ability to talk about events consistently is of interest for several reasons. For example, after collecting measures of consistency for neutral events, it may be found that the magnitude of the difference between consistency of reports about neutral events and abusive events is much larger than the difference between consistency for physical and sexual abuse reports. Such a pattern of results would suggest that in general consistency is adversely affected by a negative valence of the to-be-reported event. On the contrary, the consistency of reports of neutral events may be similar to the consistency of reports of sexual abuse, and consistency of reports of physical abuse may be lower. In this case, the valence of the event would not offer a valuable explanation for the results and other interpretations should be sought.

One additional suggestion for future studies is related to the methodological limitations of the present study. The two interviews representing the main source of data (PC and FI) served different purposes. Therefore, the information related to the abuse was not elicited in the same way during the interviews. Interviewers did not follow a precisely fixed protocol, but they were provided with a list of topics to be addressed during the interview. However, there was considerable overlap in the issues to be covered in both interviews. These facts may have affected the consistency measures in the present study. An important consideration in this regard is that the PC and FI involved actual assessments of children to determine if they were victims of abuse. In child abuse investigations generally, decisions about children's abuse status are made on a daily basis also starting from interviews that are not standardized. Therefore, the present study dealt with the type of information on which child protection workers, attorneys, and jurors base their decisions, resulting in a considerable gain for the ecological validity of the study. However, to further study questions about consistency, and to increase the internal validity of such research, relying on interviews that follow the same protocol would be helpful.

One last observation relates to the possible explanatory power of models of consistency other than memory-based ones. For instance, one possibility is that some children may be more sensitive than others to the pragmatic principle of communication that the same information should not be provided to the same conversational partner (Fivush & Schwarzmüller, 1995). We can speculate that perhaps when children are questioned about the same event, a similar principle would apply: Children may feel the need to provide new information. Thus, when interviewed by different interviewers, they may decide to provide different details.

Finally, it might be the case that other age-related factors predict consistency. For instance, evidence exists for the need, developing with age, of providing a coherent image of self-related events (Mischel, 1992). Given the importance of consistency in legal prosecutions, a quest for answers becomes imperative.

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## Résumé

**Objectif:** On a voulu dans cette étude étudier la cohérence des révélations faites par des enfants concernant des sévices sexuels et physiques.

**Méthode:** Un groupe de 222 enfants, âgés de 3 à 16 ans a été constitué. Au cours d'investigations légales, on a questionné deux fois les enfants au sujet de leurs allégations concernant des abus subis.

**Résultats:** Les enfants étaient plus cohérents en rapportant des abus sexuels que des sévices physiques. Les filles étaient plus cohérentes que les garçons en rapportant des abus sexuels. On pouvait faire une prédiction de la cohérence des déclarations d'abus sexuels par des mesures de la mémoire, alors qu'on ne le pouvait pas pour les déclarations de sévices physiques.

**Conclusions:** Les implications pour comprendre les allégations par les enfants d'avoir subi des abus sont discutées.

## Resumen

**Objetivo:** El objetivo del presente estudio fue investigar la consistencia en los reportes infantiles de abuso físico y sexual.

**Método:** Participó un grupo de 222 niños y niñas de 3 a 16 años. Como parte de las investigaciones legales, los niños fueron entrevistados dos veces sobre sus alegatos de experiencias de abuso. La consistencia de los reportes infantiles sobre abuso sexual y físico se examinó en las dos entrevistas, en relación a la edad, tipo de abuso, género, memoria, capacidad para ser sugestionable, y capacidades cognoscitivas.

**Resultados:** Los niños y niñas mayores fueron más consistentes al reportar el abuso sexual y físico. Las niñas eran más consistentes que los niños en sus reportes de abuso sexual. La consistencia en los reportes de abuso sexual se pudo predecir con medidas de memoria, mientras que la consistencia en los reportes de abuso físico no. Las habilidades cognoscitivas no predecían consistencia en los reportes de abuso sexual o abuso físico.

**Conclusión:** Se discutieron las implicaciones para entender los alegatos de abuso de los niños y niñas.