

### **Seminar 3**

## **90 Years of Research on Child Suggestibility**

In this seminar we are going to talk about suggestibility.

What is suggestibility? Years ago Gudjonsson wrote that “Suggestibility” is the extent to which individuals come to accept and subsequently incorporate post-event information into their memory recollections. More recently than that Ceci and Bruck in their important textbook *Jeopardy in the Courtroom*, wrote that suggestibility refers to the degree to which the encoding, storage, retrieval and reporting of events can be influenced of a range of external factors. More recently still, Poole and Lamb defined suggestibility as generally referring to errors that arise when witnesses are exposed to information that is false or to social pressures that encourages particular types of answers. How is suggestibility studied?

Suggestibility has been studied for hundreds of years. In fact Ceci and Bruck teach that Varendonck a Belgian psychologist conducted a number of interesting studies on young children’s testimony many years ago.

In one study seven year old children were asked about the color of a teacher’s beard. Sixteen of eighteen children provided a response where as only two said they did not know. The teacher in question did not have a beard.

In another demonstration a teacher from an adjoining classroom came into Varendonck’s classroom and without removing his hat, talked in an agitated fashion for approximately five minutes. Not removing one’s hat in that day and time was considered quite rude. Only three of the twenty seven students claimed that the hat was not in his hand. In another demonstration Varendonck asked the children in his class to name and describe the person who had approached Varendonck in the school yard that morning, although there was no such person. Seventeen out of twenty-two of the children actually gave a name to the suggested person.

Since then suggestibility has formed an important basis in defending against false allegations of child sexual abuse. Probably the most important place to start after we have a general sense of suggestibility is in obtaining a natural history of the allegation. Wakefield and Underwager suggest that understanding the natural history of an allegation - that is paying close attention to the origin, nature and timing of the allegation - is incredibly important and you’ll learn why as we go through this seminar. In fact this is particularly important because there are lots of validators and evaluators doing work for the courts. What is a validator? The term validator was coined by Professor Richard Gardner when he was at Columbia. A validator in the context of allegations of child sexual abuse, is distinct from an examiner or an evaluator - because validators tend to reason from preconceived notions and commit numerous errors of causism and hyperclaiming. Causism means that they are attributing a cause to something where there is no causative relationship established. Hyperclaiming means making a claim based upon two little information to justify that claim.

The first thing that we need to examine when we're looking at the natural history of an allegation of child sexual abuse, are parental effects. We have to first be cognizant of the effects of parental anxiety. You see parents who worry that their child may have been sexually abused experience elevated levels of anxiety while they deal with the ambiguity of the circumstances. They don't know actually what happened. As long as a child denies abuse a worried parent typically struggles with anxious uncertainty because it's logically impossible to prove a negative. Anxious parents can never know for sure that nothing happened to their child. A parent in these circumstances wonders if their child is intimidated into denial or if the child is too embarrassed or too traumatized to tell the truth. Research tells us that these ambiguous situations increase the probability of people seeking out and relying on the judgments of others. When anxious parents and concerned others discuss the likelihood of their child having been sexually abused, parental anxiety tends to dominate the interchange. In these circumstances a situation rapidly develops where two or more people share the same anxiety while struggling with ambiguous circumstances and limited information. The intense need of people to obtain information under these circumstances usually causes them to speculate about what has happened and speculate with each other. Research tells us that this is the kind of situation that readily facilitates rumor formation and rumor transmission.

Researcher Terrance Campbell describes parental anxiety in terms of expressed emotion. Campbell teaches that parents who worry that their child may have been sexually abused experience elevated anxiety levels while contenting with considerable ambiguity. They don't know what - exactly happened. Campbell claims that as long as a child denies any abuse, a worried parent struggles with a gnawing and unrelenting sense of anxious uncertainty. We could certainly see how this might come about. Any of us that are concerned about children confronted with an allegation of sexual abuse - would be struggling with ambiguity and naturally if we care about children our anxiety would increase. Campbell writes that because it is logically impossible to conclusively prove a negative - anxious parents can never really know for sure that nothing traumatic happened to their child. When we look at the effects of parental anxiety we see that interpretations become biased immediately.

We all know that young children often respond to questions in a vague open ended manner. That kind of response invites considerable amounts of interpretation and speculation. But in the allegation context - these ambiguous responses invite worried, anxious parents to leap to improbable, but plausible sounding conclusions. These are usually ill advised interpretations of what the child may mean. In particular, parents who are worried and anxious misinterpret their children's behavior.

Researchers Frick, Silverthorn and Evans explained that maternal over reporting of their child's anxious symptoms - was related systematically to the level of maternal anxiety. What they are getting at here - is that the higher the level of the anxiety the more over reporting of symptoms they found in their study. In their study they went on to report that this anxiety related over reporting - seemed to account for the presence of children who received diagnoses solely from the parents report. Research demonstrates that

anxious people interpret ambiguous sentences in threatening ways. In response to the following sentence – “the doctor examined little Emma’s growth” - an anxious parent will interpret “growth” to mean a tumor rather than how tall little Emma was or how big she was that day.

Research also demonstrates that people who are distressed will miss interpret the homophones morning or mourning. In other words, when hearing the homophone, they conclude that it means mourning. With the ambiguity characteristic of children’s verbal behaviors – “he touched me” - for example, the anxiety level of a worried parent can rapidly lead them into bias interpretations of what their child says. In other words, they expect to discover the worst case scenario and as a result of this expectation, that is exactly what they usually discover. Goethe once said “we look for what we know, we find what we look for”. More about that when we talk about interviewers.

When parents conclude that their child has been sexually abused, their anxiety level will cause them to interpret - to the child - what they assumed to have happened. The anxious parent turns “he touched me” into “he touched me bad” - and so does the child. Consequently parents who are worried and anxious as a result of assuming their child has been sexually abused distort and taint the memory of that child usually without any intent to do so.

I used to tell parents when I saw their children in therapy that if they respond to little Johnny hitting himself on the thumb with a hammer, oh my goodness, oh no call the ambulance, everything’s going to be terrible, oh little Johnny, oh amputation, Johnny would have one kind of reaction. But if they responded to little Johnny hitting himself in the thumb with a hammer, oh boy that stinks let’s put some ice on it, hey want an ice cream, let’s watch some TV, Johnny has a totally different reaction. So we can see that anxiety in parents drives up false allegations even when they don’t mean to do so. This is all the more reason to understand the natural history of an allegation before we leapt to conclusions.

Let’s talk about denial and what happens with the parents questioning when a child denies. If a child continues to deny having been sexually abused despite a worried parent’s growing anxiety, the parent’s anxiety usually increases when the child doesn’t acknowledge what the parent assumes. The anxious parent has to struggle with his or her own open ended and unsubstantiated assumptions. In an attempt to reduce their own anxiety level the anxious parent increases the frequency with which he or she questions the child about issues of sexual abuse.

I can’t tell you the number of times that I’ve seen an accusation arise when a parent, who is very anxious, questions the child about whether or not dad touched their vagina after each and every visit with dad. Some of them have gone so far as to actually physically exam the child after each and every visit. What kind of message does that send to the child? This is truly a bad situation. Research documents that over the course of their development - especially by the age of six children learn that repetition of the same parental question indicates that they have previously responded incorrectly. Otherwise,

why would their parent continue asking the same question over and over. This was studied by Siegal, Waters and Dinwiddy in their important article *Misleading Children: Causational Attributions for Inconsistency*. Otherwise, why would their parents continue asking the same question over and over. In these circumstances children will attempt to answer adult questions even if the questions are bizarre.

Mr. Clancy's right, in fact researchers Hughes and Grieve demonstrated that when asked non-sensical questions such as is milk bigger than water, most five and seven year olds replied yes or no. These children rarely replied I don't know.

In abuse allegation circumstances, parents are seeking information. They seek the information by questioning their children repeatedly about sexual conduct. According to researchers of child language acquisition - the children assume that their parents are testing their knowledge. Consequently children will alter their answers looking for parental approval. This is particularly damaging because parental questions provoke vivid images in children's minds. What did the pebble in your shoe feel like when you were walking or alternatively, what did it feel like when he touched you. Often the critical imagery is planted via suggestive questions and it can provide children with alternative responses they think their anxious parents are seeking. We must also be aware that research has demonstrated that children interviewed by parents have less accurate recall.

Ricci, Beal & Dekle reported on two experiments conducted with kindergarten children. They found that children interviewed by their parents had less accurate recall than those interviewed by an experimenter. They explained - and I'll quote "the results of both experiments also indicate that many young children will respond to an interviewer's query by changing their initial identifications". The researchers concluded that young children interpret adult questions such as, are you sure or what about this one, as a cue that their first answer must have been incorrect and that they should produce a different response. This is critical when we think about how many times kids are interviewed in these anxiety dominant situations.

Parents influence on children's memory and recall should not be underestimated. One of our friends, Debra Poole, teamed up with David Lindsey and tested parental influence in a unique way. In their research - children between the ages of three and eight participated in a session that involved four science demonstrations conducted by Mr. Science. Immediately after the demonstration children were interviewed non-suggestively about what they had seen. The children responded with a great deal of accurate information and minimal inaccurate information. Three months later a storybook was mailed to the parents of these children. Each storybook was specially constructed and designed specifically for each child. The storybook described two science demonstrations the children had seen and two demonstrations they had not seen. The storybook also described an instance of non-experienced touching involving Mr. Science having put something yucky in the child's mouth. After the Parents read the storybook three times to each child the children were interviewed again - in a non-suggestive manner and then in a leading manner. In response to the non-leading portion

of this second interview - a hundred and fourteen children reported a total of fifty-eight events they never experienced - including seventeen reports of non-experienced touching. The older children reported as many non-experienced events as the younger children in this study. In response to the leading & suggestive portion of the interview - thirty-three or forty-two percent of the children in each group falsely reported that Mr. Science (1) put something yucky in their mouth, or (2) hurt their tummies.

I want to talk for a moment about maternal recall of the conversations they have with their children. When attempting to recall conversations with their children, mother's reports may not be complete and the reports may omit important details. In a study by Maggie Bruck and her colleagues the experimenters demonstrated that mothers have difficulty recalling

(1) how they elicited information from their children,  
(2) whether the children's statements were spontaneous or prompted and  
(3) whether specific utterances were spoken by themselves or their children. The research team reported and I'll quote:

"... if probed about the contexts of certain utterances (for example, when a mother reports, 'My child said that a man touched him'), our data indicate that the mother may not be able to accurately recall whether these were the child's own words or if her statement is a reconstruction of a conversation in which the child provided one word answers to a series of direct and possibly leading questions from the mother."

Sobering, especially for proponents of hearsay testimony. Remember that research has demonstrated that compared to an unfamiliar interviewer children demonstrate less accurate recall of an event when interviewed by one of their parents. Recall that Ricci and colleagues demonstrated that seventy-one percent of the parents in their research used at least one ineffective questioning technique, such as rapid fire questions, repetitive questions or pressing for a response. When parents and children agree there is endorsement of many more symptoms.

Frick and colleagues demonstrated that when parents and children agree many more symptoms like anxiety or depression or trauma are reported. The researchers studied consecutive referrals to a university based out patient clinic and concluded that the reports of mothers that their kids were anxious was directly related to the mothers own anxiety level. They also found that when kids agreed with their moms far more symptoms were endorsed by both.

Anxious parents, endorsement of symptoms, parents not accurately remembering what they say, incredible use of leading and probing questions by anxious parents, this is fertile territory for altered memory. Remember, the natural history of the allegation is of the utmost importance. What happens next in a natural history?

Kids are interviewed by others as well. In network formation we're looking at the way that social surrounds impact on the kids. You see by the time a child is initially interviewed regarding allegations of sexual abuse she is frequently surrounded by a network of adults who already assume that the alleged abuse did occur. Grandma, grandpa, boyfriend, etc. When surrounded by a network of adults who believe that she's

been abused a child is under enormous pressure to conform for reports to what this trusted network of adults believes.

From an early age children perceive that their adult conversational partners are cooperative, truthful and not deceptive, so why not conform to what they already believe. Thus, the expectations of the adult network demand conformity in the child's mind. What about peer influences?

As long ago as 1900 Benet reported that children alter their responses to conform to the influences of their peer group - even when the altered responses are mistaken. Researchers have determined that children's recollections of a sniper attack on a school in February, 1984 were profoundly influenced by their peers. Interviewing children who were present and not present during the attack, Pynoos and Nader found that even these non-witnesses reported memories. These researchers reported - and I'll quote - "One girl initially said that she was at the school gate nearest the sniper when the shootings began. In truth, she was not only out of the line of fire, she was half a block away. A boy who had been away on vacation said that he had been on his way to the school, had seen someone lying on the ground, had heard the shots, and then turned back. In actuality, a police barricade prevented anyone from approaching the block around the school." The researchers concluded that wanting to define themselves as part of the in group that experienced this attack - these children subsequently revised their memories of what they had witnessed. Were they lying? No they had revised memories by the peer influences, by the network influences, maybe even by parental influences. We should not underestimate the effect of rumors and stereotypes.

Rumor formation and rumor transmission thrive in atmospheres of negative stereotypes. He's an abuser, he hurt you, obviously negative stereotypes. Research tells us that stereotypes motivate people to leap to premature conclusions about other people that they don't know well. The late Gordon Allport who for many years a distinguished member of the Harvard, faculty spoke of stereotypes as labels. At one point he explained labels act like shrieking sirens deafening us to all finer discriminations that we might otherwise perceive. In response to stereotypes the exchanges of anxious parents and concerned others frequently converge into stereotypes and shared theories. Research in social psychology teaches that people in these circumstances rapidly reach consensus via a process called sharpening and leveling. In their interactions they "sharpened" or emphasize impressions that are consistent with their pre-existing stereotypes. At the same time they "level" or de-emphasize any information which is not consistent with their pre-existing stereotypes. The effects of sharpening and leveling are very important in the network involvement and rumor transmission that surrounds the natural history of any allegation of sexual abuse and should never be underestimated. In response to the effects of sharpening and leveling - the developing agreements can convince children that they have discovered important facts and can convince the adults that they have discovered important facts, they say to themselves we agree therefore we must be right. In this way rumor formation and rumor transmission driven by the effects of stereotyping will often cause two or more people to verify for each other that some imaginary event actually transpired. Consequently, what originated as a worrisome possibility - sexual abuse - acquires the untoward status of fact.

The next critical event that transpires in the natural history of sexual abuse allegations is the interview process. In this context we're discussing an interviewer other than a parent. Let's talk about the stereotyping effects of interviews. For example in a study called the Incrimination of Dale. Researchers Lepore and SESCO demonstrated the negative effects of stereotyping with children. In their experiment, children between four and six years of age played with a man named Dale. Dale also asked the children to help him take off his sweater. Half the children were then interviewed in a neutral manner about their interactions with Dale. The remaining children encountered an interviewer who spoke in an incriminating way about Dale. The incriminating interviewer made statements such as: he wasn't supposed to do or say that, that was bad, what else did he do that was bad and statements such as those. All the children were then asked a series of direct questions about what happened with Dale. The children in the incriminating condition, that's the stereotyping condition remember, gave significantly more inaccurate responses than the children in the neutral condition. One-third of the children in the incriminating condition embellished their incorrect responses in an incriminating manner. For example, asked if Dale ever touched other kids at school the children reported (1) he touched Jason, Tony and Molly, (2) he touched them on their legs, (3) he kissed them on their lips, (4) he took their clothes off. One child even reported: "yes my shoes, my socks, my pants, but not my shirt". In this way Lepore and SESCO found that in comparison with children in a neutral condition children in the incriminating condition were more likely to make negative statements about Dale. (1) the guy came in and did some bad things, (2) these children also agreed that Dale intended to be bad, intended to fool around, to not do his job and to be mean.

Next I would like to talk about interviewer bias. Bruck and Ceci have proposed that and I'm quoting: "... interviewer bias is the central driving force in the creation of suggestive interviews." Bruck and Ceci went on to explain that "Interviewer bias characterizes an interviewer who holds a priori beliefs about the occurrence of certain events and, as a result, molds the interview to elicit from the interviewee statements that are consistent with these prior beliefs."

How many times have you seen in a CPS interview or in the police interview that the interviewers start the interview out believing that the allegation's true. They don't conduct an interview to determine the truth, they act as though they know the truth. Interviewers insist that they carefully avoid directing any statements or questions at children that are leading and suggestive. Research does not support these claims. In fact, research documents that during their interviews, interviewers typically question interviewees in a manner that biases the information that they obtain. The expectations of interviewers can also lead them to believe that evidence consistent with their initial impressions were exhibited during an interview when in fact they were not. It reminds me of an interviewer who had decided that a mother had sexually brushed her hair, against her young four year old during a monitored visit. When I saw that interpretation, it was interesting because I always thought that was rather nice when my wife would play with our children that way and brush them with her hair. It was simply a matter of biased interviewing. The research has also demonstrated that interviewers are less likely to

recall evidence actually presented during an interview, which is not consistent with their original impressions. These judgmental errors are known as “confirmatory bias”. Next let’s talk about demonstrations of interviewer bias. One study in particular has demonstrated the frequency and extent of interviewer bias when interviewing young children. In this study Petit, Fagen and Howie - examined how an interviewer’s information about events would effect the style of questioning and the accuracy of the child’s report. Here’s how it works. The researchers had three to five year olds participate in a staged event. The children were questioned two weeks later. Three sets of interviewers were used. By the way the interviewers did not realize that they were the true subjects of the test. Some interviewers were given full & accurate knowledge of the event. Some were given inaccurate & misinformation and others were given no information about the event. Now going back to police interviews of children which kind of interviewer pre-information do they usually have? Usually , they are given an inaccurate account or an incomplete account. In the Petit, Fagen & Howie study, all interviewers were told to question each child until they found out what happened and they were warned to avoid the use of leading questions, they were flat out told avoid the use of leading questions. The researchers noted that the children were asked an average of fifty questions during the twenty to thirty minute interview. These short interviews put a great deal of pressure on interviewers and interviewees to provide information. Despite the warning to avoid leading questions, thirty percent of all questions were leading and half of them were misleading. Interviewers with inaccurate knowledge asked four to five times as many misleading questions as the other interviewers. Over all the children agreed with forty-one percent of the misleading questions. And children who were interviewed by misled investigators, gave the most inaccurate information. Interviewers with no knowledge should marked rise in their use of leading questions as additional children were interviewed. These interviewers extracted more inaccurate information from the children as their interviews continued (the later as opposed to the earlier interviews). The results of this experimental demonstration showed that interviewer knowledge influences their style of questioning and this influence effects the inaccuracy and accuracy of the children’s testimony.

Next I want to talk to you about the Chester study. This is a study that examines interviewers’ preconceived notions. In a set of experiments conducted by Clark-Stewart, Thompson and Lepore - five and six year old children viewed a staged event that could be considered either abusive or innocent, in other words it was ambiguous. The experimenter’s stooge, Chester, interacted with sets of children by either (1) cleaning some of the dolls in a play room, or (2) handling the dolls roughly in a mildly abusive manner.

The children were interviewed about this event several times on the same day by interviewers who were:

- (1) Accusatory - suggesting that Chester had been playing with the toys rather than working;
- (2) Exculpatory - suggesting that Chester had been working rather than playing, or
- (3) Neutral - nonsuggestive.



When questioned by a neutral interviewer, or by an interviewer whose interpretations were consistent with what the child viewed, the children provided factually accurate reports. But, when the interviewers contradicted what the child had seen, the reports of those children promptly conformed to the beliefs and suggestions of the interviewer. By the end of the first interview, 75% of the children responded in a manner consistent with the interviewer's point of view. Ultimately, 90% of the children answered questions in a manner suggested by the interviewer. After some of the children in this study were told that Chester would lose his job if his boss found out he had played with the dolls. 69% of the children maintained "a secret" when interviewed by a neutral interviewer, but they eventually revealed the secret when asked suggestive questions.

Grice - the philosopher of language described children as cooperative conversationalists. Grice created a theory that he called the principle of cooperativity and we've talked a little bit about this before. At the same time researchers have found that children perceive adult conversation partners as truthful and cooperative and researchers have also discovered that children provide their adult conversation partners with the type of information that they think the adult wants. You can see in this slide that we're giving you a number of scientific citations to help you find some of this research like: Ervin Trips research on wait for me my roller skate and on the acquisition of language. Also citations to the very important linguistic journal Discourse Processes.

Let's talk for a minute about repeated questions. We know that over the course of their development children learn that the adult questions asked repeatedly - often cause children to believe that they haven't responded correctly. In other words, prior learning experiences motivate children to change what they say in response to questions repeatedly asked by adult authority figures. In these interactions children test out various possibilities attempting to identify the reply which brings adult approval. Now in a validator interview - we've all seen this on tape - when the child makes incriminating statements the validator wants to hear more about that, but when the child makes impossible outrageous statements the validator doesn't want to hear anything about that at all. When we watch the video tapes of these interviews, hopefully we video tape, we can tell the difference between an evaluator, they want to know what's happened and they want to know about the fantastic stories, and the validator. I had a case of multiple life counts in the State of Hawaii where the validator was sitting there with the child and the child repeatedly wanted to talk about her sister. The child was three years old and she wanted to talk about how her sister died and so on and so forth. The child never had a sister and every time the child came back to the sister - the validator shut her down and manipulated the child back to incriminating stories about how her daddy had touched her. Maybe this is why - as I was told - the prosecution had never lost a case! We won the case, all three counts.

You see in the repeated question context, children are testing out various hypotheses by picking up the adult cues. These interactions create vivid mental images for the kids. Consequently kids may initially deny that an experience of sexual abuse happened at one point in time but acknowledged themselves as victims later because of repeated questions. Obviously in response to leading and suggestive question directed to them by

a trusted adult, children contaminate their memories with imagination. Soon children who have been through this process can no longer differentiate the source of the memory, did it actually happen, from their mental image of it from the repeated questioning. This is what's called source monitoring. In fact Ceci and Bruck teach that to the degree that children are subjected to repeated questioning that arouses their imagination they are very likely to confuse actual events and imaginary events. Professor Elizabeth Loftus teaches that confusion between actual events and imaginary events transpires because of what is known as the post-event information effect. You see after witnessing an important event people are sometimes exposed to new information that can actually change their memory even causing non-existing details to become incorporated into the previously acquired memory. To repeat: children change their stories when repeatedly questioned.

Siegel and colleagues describe four experiments with four to six year old children where the kids viewed or did innocuous tasks. Later the children were questioned about the things they did. Across all four experiments they found that children were highly influenced by the social requirements of their experiments. The researchers reported that repeated questioning conveys ambiguity and misleads children to be inconsistent. Garvin and colleagues demonstrated that when children were subtly pressured to express unfounded allegations they complied fifty-eight percent of the time. After exposure to improper interviewing techniques for only 4.5 minutes the children in Garvin's study had error rates closer to sixty percent. When exposed to improper interviewing techniques the children became more compliant as the interview proceeded. These researchers found that children responded more compliantly in the second half of a suggestive interview compared to the first half. In this way we can see that suggestive interviewing techniques have a cumulative effect. These techniques make children more compliant to suggestion as the interview proceeds.

Validators counter that one can't make children say that they were touched, but Ceci and Bruck have demonstrated that skewed interviews can indeed cause children to say that they were touched in ways that they were not. In the pediatrician study children five years old visited their pediatrician. During the visit a male pediatrician gave each child a physical examination, an oral polio vaccine and an inoculation. During the same visit a female research assistant talked to the child about a poster on the wall, read the child a story and gave the child some treats. One year later the children were interviewed four times over a period of one month. During the first three interviews some of the children were falsely reminded that

- (1) the male pediatrician showed them the poster,
- (2) the male pediatrician gave them the treats,
- (3) and the female research assistant gave them the oral vaccine and the inoculation.

During the fourth and final interview the children were asked to recall what happened during their medical visit one year previously. The children who had been misled responded in a very inaccurate manner. More than half of them endorsed one or more misleading suggestions, thirty-eight percent of these children also included non-suggested but inaccurate events in their reports. For example, they reported that the female research assistant checked their ears and nose.

I'd like to talk a little bit more about memory for touching. Pedzek and Rowe demonstrated in another study - that four and ten year old children can be convinced that they were touched on the shoulder when they were actually touched on the arm and vice versa. In another study researchers investigated memories for performed actions compared to imagined actions. For example, did you really touch her nose or did you just imagine yourself touching her nose. Compared with adults - six year old children were far more likely to confuse memories of imagining doing and memories of actually doing. Now still another study illustrated that eight year old children had difficulty discriminating actions that they imagined another person doing from actions they saw another person doing. These were all source monitoring difficulties.

Let's turn for a second to the very best suggestive media - anatomically detailed dolls. Anatomically detailed dolls are sold by different manufacturers and as a result - the various dolls are not always comparable to each other. Some of the dolls have oral, anal and vaginal openings, where others do not. Moreover, there is no generally recognized and accepted method for using anatomically detailed dolls when interviewing children. Some professionals video tape children's interactions with anatomical dolls, but others do not. How children respond to dolls can be influenced by the particular doll used or how the child is interviewed as by whether or not the child has been abused. Different professionals can reach different conclusions relying on anatomical dolls when interviewing the same child. So there's no inter-rater reliability, very important concept - with anatomically detailed dolls. A 1989 study by Glaser & Collins systematically reported how ninety-one non-abused children ages two to six responded to anatomical dolls. With little or no encouragement - seventy-four percent of these children spontaneously undressed the dolls. Trained observers concluded that sixty-four percent of the children exhibited various kinds of emotional reactions to the dolls when undressing them. Seventy-one percent of the children touched the anatomical dolls penises, thirteen percent touched the anus, four percent touched the vaginal opening. None of the children in the experiment had been sexually abused. Another study examined how thirty five children between the ages of two and six referred for evaluation of possible sexual abuse interacted with anatomical dolls. The responses of these children were compared with thirty-five children the same age who had not been sexually abused. Of the children referred for possible sexual abuse - thirty of them touched the anatomical dolls genitalia at least once during the interview. But twenty-five of the non-referred children also did the same. Nine of the referred children engaged in sexually explicit play with the dolls, however, five of the non-referred children also responded in this manner. This study found no evidence indicating that anatomical dolls can reliably differentiate between children referred for sexual abuse evaluations and children who have not been abused.

The frequency with which anatomical dolls can lead to these kinds of errors has resulted in one researcher instructing and I'll quote - "anatomically detailed dolls are not useful and should not be used for determining whether or not abuse has occurred". Other reviewers have also deplored the use of anatomical dolls and I'll quote from Woldner, Faust and Dawes - "We are left with the conclusion that there is simply no scientific

evidence available that would justify clinical or forensic diagnosis of abuse on the basis of doll play.”

In a 2000 study by Bruck, Ceci and Francoeur, the experimenters took advantage of seventy naturally occurring pediatric visits to study the effects of anatomically detailed dolls during a post event interview. The visits included an exam in which 35 - three-year-olds were given a genital exam, and 35 others were not. None of the non-genital exam group had their underclothing removed or had their genitalia or buttocks touched during their exam, unlike the former group. Later, the children were interviewed suggestively and were then asked to explain where the doctor touched them. Then, the children were given an anatomical doll and were asked with suggestive questioning to show where the doctor touched them. Before the doll was presented, only 45% of the children receiving genital exam correctly reported that they had been touched on the buttocks or genitals. In contrast, only 50% of the children receiving a non-genital exam said they had not been touched on the buttocks or genitals. When the dolls were presented, the children became even less accurate. Only 25% of the children given a genital exam correctly demonstrated on the doll where they had been touched. 55% of the children who received a non-genital exam incorrectly demonstrated genital insertion and other inappropriate sexual actions. This type of commission error was more prevalent among the girls in this group; 75% of the girls who did not receive a genital exam demonstrated that the pediatrician touched their buttocks or genitals. If this is not bad enough - it gets even worse when we think about interviewer documentation.

One of the real problems with forensic interviewing is the myth that they are accurately documented. Research has demonstrated that experienced therapists do not accurately recall their own behavior during interviews. This comes out of a long line of research attempting to determine whether psychotherapy is of any value. The research also grows out of psychotherapist training programs where the students are video taped and then are asked later about what they said. The research has clearly demonstrated that therapists don't accurately recall their own behavior during the interviews.

For example, - the accuracy of verbatim notes. In a 2000 study the accuracy of verbatim notes was investigated with trained experienced interviewers when they were recording verbatim notes of their interviews. Specifically, this study by Lamb and colleagues, compared the audio-taped recordings of 20 forensic interviews of alleged sexual abuse victims (5 male and 15 female 4- to 14-year-olds with the investigators' verbatim accounts (notes) of the same interviews. 25% of the forensically important details provided by the children were not represented in the investigators' notes. The investigators' notes reflected a total of 806 substantive interviewer utterances, whereas the audio recordings of the same interviews included 1889 substantive utterances, leaving 1083 utterances (57.3%) unaccounted for by the interviewers' supposed verbatim notes. The interviewers' notes misrepresented the utterances used to elicit information from the children. Only 44% of the interviewer utterances were accurately identified in the notes. In particular, there was a systematic tendency to mistakenly characterize interviewer questions as open-ended when, in fact, the questions were close-ended. And, these interviewers specifically failed to record 53% of their suggestive statements, Researcher

Michael Lamb and colleagues noted: “Even when they made contemporaneous verbatim notes, these investigators tended to understate their role in eliciting information and to ignore many of the details, including central details, reported.” The researchers reported that their study raises “... serious questions about the ability of interviewers to recall the content and structure of their interviews with the degree of precision needed for forensic purposes.”

It’s very interesting how this research came about. These interviewers were very well trained interviewers in Israel and they were mandated and taught how to take very good verbatim notes of their interviews. Then the Israeli legislature passed new laws that required every single interview to be audio taped and there was a time period when they weren’t sure should they do verbatim or should they do audio tapes. So they did both and this gave Lamb, Orbach, Sturnberg, Herskowitz and Horowitz plenty of data to compare verbatim notes to actual tape recordings and again their conclusion was that their study raises quote, serious questions about the ability of interviewers to recall the content and structure of their interviews with the degree of precision needed for forensic purposes.

Interviewers and therapists often overestimate the clarity with which they are interacting with the people they see. A 1999 study by Warren and Woodall examined how accurately twenty-seven experienced interviewers could recall details of their interviews with children between the ages of three and five, those are the ages that we typically seen in these cases. The ages of these interviewers ranged from 28 to 53, average age of 40.59. Their experience in forensic/child protective work ranged from 4 to 21 years, averaging approximately 10.9 years. More than half of these interviewers (57%) had earned masters degrees, 30% held bachelor’s degrees, and one had a doctoral degree.

These interviewers reported a range of 3-400 training hours, or a range of 4-6 training days. These interviewers conducted videotaped interviews of children who one month earlier had witnessed two events:

- (1) a magic show and
- (2) a silly doctor visit.

The interviewers were given one of two cue questions for beginning their interviews:

- (1) “I understand that a magician came to visit your school. Tell me what the magician did?” or
- (2) “Tell me about the time you went with Tracy to play silly doctor.”

Except for these cue questions, the interviewers knew nothing else about these two events. After their videotaped interviews with the children ended, the researchers audio-taped their interviews with the interviewers. In comparison to the amount of information children related during their videotaped interviews, the interviewers’ hearsay accounts involved significant information loss. Warren & Woodall explained: quote “We asked our interviewers during the audio-taped session what kinds of questions they had asked to elicit information from the children. Most answered that they had asked primarily open-ended questions.” Unquote But the researchers reported that: quote “We found that most (over 80%) of the questions were specific or close-ended (and 16% were leading). Thus,

it is clear that interviewers are incorrectly remembering their actual questioning styles.”  
unquote

Warren and Woodall concluded: quote “In summary, our results suggest that the hearsay testimony of children’s interviewers is degraded. Even immediately after an interview, important content was omitted by hearsay accounts, and the majority of the verbatim (specific wording and content of questions and answers) was lost. Our results also suggest that interviewers are unlikely to be able to accurately reconstruct verbatim information later.” unquote

Let’s talk for a moment about interviewer modifications. What happens when interviewers mishear what kids say. Walker and Hunt analyzed the types of questions used by protective services workers personnel when interviewing children in cases of alleged sexual abuse. Walker and Hunt found that modifications occurred in approximately three quarters of the interviews they reviewed. With each interviewer making approximately 2.5 modifications per interview. These are modifications found the interviewers re-saying to the child what they thought the child said but were wrong. The children then conformed their statements to the modification.

Following up on the research of Walker and Hunt, Hunt and Borgida used experimental interviews to ascertain how young children ages three to five respond to interviewer modifications. In their study about twenty-three percent of the children incorporated the interviewer modifications into their subsequent responses. Hunt and Borgida explained and I’ll quote, “... in the present study, each piece of modified information was presented only once, in the context of a single interview question. Given this subtle manipulation, the fact that even a small percentage of the modifications were incorporated into subsequent answers should be seen as consequential.” They went on to conclude: quote “This study is consistent with a new trend in research on the testimony of child witnesses, using controlled experiments to investigate specific interviewing techniques found in analyses of actual forensic interviews of children. Such research has demonstrated that commonly used interviewing techniques can have serious, deleterious effects on children’s testimony. Likewise, this study suggests that, despite the possibility that many modifications may reflect accidental mistakes made by interviewers, they can have important effects on investigatory interviews.”

At the end of the whole suggestibility process is therapy. Unfortunately the commonly used play therapy - can distort and confuse the recall of children by creating source monitoring problems associated with memory. In cases of distorted memory the therapist becomes a source of what the child remembers rather than the event in question. Foley and Johnson investigated memories for performed actions compared to imagined actions. As I explained earlier, they asked questions like - did you really touch your nose or did you just imagine yourself touching your nose and as I said before compared with adults six year old children were far more likely to confuse memories of imagining doing something than memories of actually doing.

Lindsey and colleagues found that eight year old children had difficulty discriminating imagine events from real events and in addition to that pretending is seen as an activity in play therapy that has a significant impact on contaminating children's memories. These are the result of source monitoring problems. Campbell has explained that a play therapist can profoundly distort the memory of a child by suggesting interpretations of what the child supposed encountered or experienced. In response to the therapist influence accept these interpretations as legitimate. They then resort to their imaginations though convinced they are searching for their memories and they invent anecdote about past events which appear to validate the therapist interpretations.

Dr. Lorandos have given you a good overview of the field of suggestibility and the scientific articles that are of real importance. The question however is how can you use these materials.

The first thing you have to do is map out the natural history of the allegation. Your expert doesn't do this for you, you must do it. It starts with discovery - getting all tapes the audio tapes, video tapes, notes, anything that you can from the prosecution. Next you may have to fill in some gaps through investigators going out to gather more information. You may be able to gather more information at a preliminary hearing by questioning the individuals. And lastly you need to prepare transcripts of all of the tapes and video tapes that you have for your experts. When you have all this material together and put in order - this is what you present to your expert.

The next thing is you have to be able to get it into evidence. Not every judge is immediately going to say that you can introduce this testimony. So we have created two motions to assist you. One is a motion to conduct a taint hearing. A taint hearing is a hearing that is held before the trial out of the presence of the jury for the judge to determine whether or not the child should be allowed to testify or whether or not the taint is too great. It also serves the secondary purpose of allowing you to gather more information that can be used at the trial. Both on the issue of suggestibility and on the issue of the case in chief. We have a motion for that as well. We also have a motion having to do with the introduction of suggestibility expert evidence. All of these can be found on our website and they are updated periodically. Let me show you a short film on how to get onto our website to get these motions.

Okay you've got your motions, you have your natural history, you've got your expert, let me ask you what do you think this is going to look like at trial. To be honest, when you talk about multiple researchers and hundreds of statistics and multiple studies - it becomes boring to a jury. Nevertheless, it all needs to be introduced. So how do you make your presentation powerful, it's very simple. What you have to do - is have at least one video demonstration of what you're talking about to show the jury. It is even more powerful if you can integrate the video of actual experiments being conducted - with your expert's testimony. He talks about something and then shows a clip from the video, showing it actually happening. When they see a child changing their story under a certain type of leading questioning it is powerful. But as attorneys you have a problem, where do you get the video. The actual studies are nearly impossible to get. Why?

Because most of the studies have been done at universities and the subjects identities and the tapes are protected, privileged material, confidential material of the universities and they don't just give it out to anybody. If you're lucky enough to obtain some of this information which we have then you're sworn to not give it out to other attorneys or other individuals. There's a secondary source where you can get a video. Television documentaries have aired on a number of the Researchers who have worked in this field. Perhaps you can take clips from those documentaries – and by careful editing, getting rid of the speakers from the television program - just show those portions that have to do with the actual experiment. In this way, you can create a very powerful presentation. A short time ago Dr. Lorandos was my expert witness in a trial. We had planned on using cutouts from a news program featuring Dr. Stephen Ceci, one of the leading researchers in this area. When we got to court unbeknownst to us there was NBC. They were filming the entire three week trial and then reducing it to a one hour television show called Crime and Punishment. We have taken some clips from the show Crime and Punishment to show you from a real case - how you can integrate the testimony having to do with the research along with the video. Take a look at this, Crime and Punishment from NBC and Dr. Lorandos is the expert witness.

Dr Lorandos, I want to focus you on whether you studied suggestibility.

We had to. When I say we, I mean organized psychology. We were shocked at what occurred at some of the famous cases that we've all seen on television.

Are you referring to McMartin?

Well, I wasn't going to name names.....

I asked you to get some footage from the original experimenters.

Yes; this is a study called “The Mousetrap Study” and in this experiment they demonstrated that they could create the memory of events that never happened. What the examiners did was they went to preschools and they'd play a little question game with them and the questions would change from week to week. But, there's one question that is the same every week to week; for ten weeks. And so, this first little piece illustrates the little trap being asked if you ever got your finger caught in a mousetrap.

Have you ever seen a baby alligator eating apples on an airplane?



No.

Have you ever had your finger caught in a mousetrap and had to go to the hospital?

No.

No? Okay.

Okay, stop. We noticed if you just ask them, they'll tell you the truth. You don't have to pound away and say "Tell me more, tell me more, tell me more." Just ask them. But, what happens when they're asked again and again.

You went to the hospital because your finger got caught in a mousetrap.

And it, and it.

Did that happen?

Uh huh

Did it hurt?

Yeah.

So where in your house is the mousetrap?

It's up at our ... down in the basement.

Down in the basement.

It's next to the firewood.

Stop. The experiment is reported. When they did this, they were shocked at the level of detail that the kids would spontaneously create. And they said, "Whoop; time out, we've got to debrief these kids. We've got to tell them that it's just a game; it was just pretend".

In your opinion, does that put to rest whether or not it's possible to implant a belief that you've been sexually molested as a suggestion?

All of these experiments demonstrate quite clearly that we can implant ideas of sexual abuse created as false memories.

I have no further questions at this time.

Cross.

Good afternoon Doctor. How are you doing today?

Fine, thank you.

You talked a lot about false accusations. What about the concept of "false denial"? You would agree with me Doctor that in the area of child sexual abuse, that's a pretty common thing; that kids deny abuse when it actually happens.

No, I would not agree. I think that to say that denigrates children that have been sexually abused. Children that have been sexually abused can tell us if they've been abused. To suggest that they're denying it unless we harangue them and uncover it, harms them and harms us. I wouldn't say that.

Aren't there other reasons though, Doctor that... suggest that the child might not want to tell about sexual abuse – like being ashamed?

Certainly, and no amount of suggestive leading, haranguing question is going to get an accurate story out of them.

Well, what happens then when a kid then turns with a blank stare to you and says, "I don't know what you're talking about."

You mean to the question "What do you mean?"

When a child has already said, "He touched me in my privates."

Okay, and then you say, "What do you mean?"

And what if they don't tell you anything"?

Then they don't tell you anything. You want to stick a suggestible artifact in front of their face and try to manipulate them into testifying about what it is? Like a picture of a naked little girl – How often do they see naked little girls? They don't.

Doctor, if I understand this correctly, you did not review any of the three video tapes in this case at all. Correct? The two with Adrian or the one with David.

That would have adulterated the purpose for me being here.

And you did not review any of the transcripts that discussed what was on these video tapes, correct?

I specifically asked to be kept out of all that and to only talk about the science.

But you can't apply it all to the facts of this case.

That's their job, not mine.

Why didn't you watch the videos?

Because my job is to be as neutral as possible – to help you, to help him, to help this jury understand what the science is. I'll answer any questions that you have about the science to try to help... but to advocate for one side or the other? I'm not here to do that.

Doctor, wouldn't it be an understandable thing if there were problems in these videos, you could point them out to this jury, couldn't you?

I could do that. I've done that in other circumstances.

And you didn't look at the videos in this case, correct?

I believe that was my answer.

Thank you. Nothing further at this time.

If you were to evaluate a tape, and it was the sixth time the child was interviewed, would you want to have the first five interviews also taped, so that you could see them?

Yes, absolutely.

I've no further questions at this time.

We'll take our break at this time, ladies and gentlemen.

Thanks.

I don't know if any of this is making sense. Am I making any (unintelligible).

I think so. He's starting to get really defensive.

I know, but am I coming off bitchy?

No; that's him. I'd say (unintelligible)

Okay

Well was that our 15 minutes of fame, we hope you enjoyed it and we hope that this presentation encourages you to use this research to demonstrate suggestibility in every circumstances in which you encounter it. Thanks very much.