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Disclosure of Child Sexual Abuse: Impact of Interviewers' Attitudes & Children's Collaboration during Forensic Interviews

par

Jennifer Lewy

Département de psychologie

Faculté des arts et des sciences

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Résumé

L'*agression sexuelle* (AS) commise envers les enfants est un sujet complexe à enquêter et les allégations reposent souvent exclusivement sur le témoignage de l'enfant. Cependant, même quand l'enfant divulgue une AS, il peut être réticent à révéler certains détails personnels et gênants de l'AS à un étranger. Étant donné qu'il n'est pas toujours possible d'obtenir le consentement de filmer et qu'il est relativement difficile de mesurer l'attitude non verbale de l'enfant et celui de l'enquêteur au cours des entrevues d'investigations, cette recherche a été novatrice dans sa création d'échelles verbales de telles attitudes. Afin de déterminer la corrélation de l'attitude des enquêteurs et la collaboration des enfants, 90 entrevues d'enfants âgés de 4 à 13 ans ont été analysées. Les entrevues ont été enregistrées sur bande audio, transcrites et codifiées à l'aide des sous-échelles verbales d'attitudes soutenantes et non-soutenantes des enquêteurs ainsi que d'attitudes de résistance et de coopération de la part de l'enfant. La proportion des détails sur l'AS fournie par les enfants a également été calculée.

Afin de comparer les entrevues avec et sans le protocole du *National Institute of Child Health and Human Development* (NICHD), une MANCOVA, contrôlant pour l'âge de l'enfant et la proportion de questions ouvertes, démontre tel qu'attendu que les entrevues avec le protocole obtiennent plus de détails fournis à la suite des questions ouvertes que les entrevues sans le protocole. Cependant, aucune différence ne ressort quant aux attitudes de l'enfant et celle de l'enquêteur. Afin de trouver le meilleur prédicteur de la quantité de détails dévoilés par les enfants, une analyse de régression multiple hiérarchique a été faite. Après avoir contrôlé pour l'âge de l'enfant, l'utilisation du protocole et la proportion de questions ouvertes, la résistance de l'enfant et l'attitude non-soutenante de l'enquêteur expliquent 28 % supplémentaire de la variance, tandis que la variance totale expliquée par le modèle est de

58%. De plus, afin de déterminer si la collaboration de l'enfant et l'attitude de l'enquêteur varient en fonction de l'âge des enfants, une MANOVA démontre que les enquêteurs se comportent similairement, quel que soit l'âge des enfants. Ceci, malgré le fait que les jeunes enfants sont généralement plus réticents et coopèrent significativement moins bien que les préadolescents. Finalement, une régression multiple hiérarchique démontre que le soutien de l'enquêteur est le meilleur prédicteur de la collaboration des enfants, au-delà des caractéristiques de l'enfant et de l'AS.

Bien que l'utilisation du protocole NICHD ait permis des progrès considérables dans la manière d'interroger les enfants, augmentant la proportion de détails obtenus par des questions ouvertes/rappel libre et amplifiant la crédibilité du témoignage, l'adhésion au protocole n'est pas en soi suffisante pour convaincre des jeunes enfants de parler en détail d'une AS à un inconnu. Les résultats de cette thèse ont une valeur scientifique et contribuent à enrichir les connaissances théoriques sur les attitudes de l'enfant et de l'enquêteur exprimées lors des entrevues. Même si les enquêteurs de cette étude offrent plus de soutien aux enfants résistants, indépendamment de leur âge, pour promouvoir la divulgation détaillée de l'AS, de meilleures façons de contrer les attitudes de résistance exprimées par les jeunes enfants et une minimisation des attitudes non-soutenantes lors des entrevues sont nécessaires.

Mots clés: agression sexuelle envers les enfants, entrevue d'enquête, protocole du NICHD, âge, résistance, soutien, non-soutien, coopération, caractéristiques de l'agression sexuelle, caractéristiques de l'enfant**.**

Abstract

Child Sexual Abuse (CSA) is a complex subject to investigate and an alleged victim's disclosure is crucial as it may be the only substantial evidence for investigators to establish their case. However, even when CSA is revealed, children may be reluctant to reveal personal and often embarrassing details to a stranger during a forensic interview. As it is not always possible to obtain consent to film and it is relatively hard to measure children's and interviewers' non-verbal attitudes during forensic interviews, this doctoral dissertation was innovative in its creation of verbal scales of such attitudes. In order to determine whether interviewers' attitudes correlates with children's collaboration during forensic interviews, 90 children ranging from 4 to 13 years of age were analysed. Interviews were audio taped, transcribed and then codified using verbal subscales of interviewers' supportive and non-supportive attitudes as well as children's cooperative and reluctant attitudes. The proportion of details provided by the children in regards to the SA was calculated.

To determine if differences exist between *National Institute of Child Health and Human Development* (NICHD) Protocol and Non-Protocol interviews, a MANCOVA was conducted controlling for children's age and the proportion of open-ended questions. As expected Protocol interviews obtained significantly more details from open-ended prompts than Non-Protocol interviews. However, it showed no differences according to children's and interviewer's attitudes. To find the variable that has the greatest impact on the quantity of detail disclosed by children, a hierarchical multiple regression analysis was conducted. After controlling for children's age, NICHD Protocol and proportion of open-ended questions which are known to increase the quantity of details disclosed; children's reluctance and interviewers'

non-supportive attitudes contributed to an additional 28% of the variance, when the total variance explained by the model as a whole was 58%.

Moreover, to determine whether children's collaboration and interviewers' attitudes vary according to the child's age-group a MANOVA was conducted. It revealed that interviewers behaved similarly irrespective of children's age, even though younger children were generally more reluctant and cooperated significantly less than pre-adolescents. Finally, to determine which variables regarding child and SA characteristics, as well as interviewers' attitudes, will have a greater chance at predicting children's collaboration, a hierarchical multiple regression analysis was conducted. It showed that an interviewer's support was a stronger correlating variable than children's and SA characteristics in predicting children's collaboration.

While we believe that the development of the NICHD Protocol has enabled considerable progress in the way children are interviewed leading to more details obtained from free recall strategies, and thus leading to more credible testimonies. However, adherence to the Protocol is simply not sufficient to convince young reluctant children to talk in details about the SA to a stranger. This dissertation results have great scientific value as it enhances the theoretical underpinnings of the attitudes expressed by both the child and the interviewer during forensic interviews. Although, interviewers in this study did offer more support to reluctant children, regardless of their age, researchers need to find better ways to deal with young children's reluctance as well as encourage practitioners to minimize non-supportive attitudes.

Keywords: child sexual abuse, forensic interview, NICHD Protocol, age, reluctance, support, non-support, cooperation, sexual abuse characteristics, child characteristics.

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CSA	Child sexual abuse
M	Mean
NICHD	National Institute of Child Health and Human Development
SA	Sexual abuse
SD	Standard Deviation

Dedication

Je tiens à dédier cette thèse aux membres de ma *famille*, qui ont dans le passé, le présent et qui continueront j'espère dans le futur à me donner la joie de vivre, et la force de faire du mieux que je peux de jours en jours. Merci à mes parents *Viviane et Jacky* qui sont toujours disponibles et soutenants. Merci à ma fratrie *Jeremy*, *Jonathan*, *Dina,* à ma grand-mère *Oma Jacqueline* ainsi qu'à ma tante *Jessie*, pour vos nombreuses visites, même si vous habitez dans des pays voire même des continents différents. Je vous sens toujours proches de moi parce que vous avez une place unique et très importante dans mon cœur.

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Voici un petit extrait adapté du livre « Je t'aimerai toujours » par Robert Munsch

Je vous aimerai toujours, la nuit comme le jour et tant que je vivrai votre bébé, sœur, petite-fille, nièce, femme, mère, tante et maintenant PSYCHOLOGUE je serai et sachez que je le resterai pour l'éternité, mais le prix a augmenté ;-)

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I am still unsure whether it was mentally harder to prepare for the arrival of my twins in May of 2010 and/or to complete my doctoral thesis. It seems like it definitely took longer to conceive and deliver my thesis, but with great effort, support and time I have succeeded to do both. The latter, however, would have not been possible without the help and the devotion of my supervisor, *Mireille Cyr*.

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Comme le dit *Boris Cyrulnik*, souvent nommé le pape de la résilience, et victime d'AS durant son enfance, «*Je ne me sentais pas assez fort pour parler, c'est vrai, mais les gens n'étaient pas assez forts pour m'entendre …on se tait, car on sait que les questions des autres ne seront jamais les bonnes* ». C'est justement pour cette raison que j'ai décidé de me spécialiser tant en recherche qu'en clinique auprès de jeunes victimes d'AS et j'espère de tout cœur pouvoir aider les enfants dont les paroles sont gelées. Ce projet de recherche dont l'écoute de plus d'une centaine de témoignages réels d'enfants-victimes d'AS m'a permis de développer une plus grande ouverture d'esprit, sensibilité et capacité d'écoute nécessaire quand on travaille avec des enfants polytraumatisés. J'ai pu appliquer cela dans mon travail clinique auprès d'une clientèle carencée suivie à «*Batshaw Youth and Family Centres*» ainsi que plus récemment à la *clinique sociojuridique* de *l'hôpital Sainte-Justine*.

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Please enjoy the reading,

Bonne lecture,

Buena lectura,

Veel leesplezier,

קריאה מהנה

Introduction

1. Child Sexual Abuse: Definition, Incidence, and Prevalence

1.1. Definition. The definition of *Child Sexual Abuse* (CSA) varies across countries, provinces and even regions depending on the laws, religion and culture of their inhabitants (Putnam, 2003; Trickett, 2006). Tourigny and Baril (2011) were able to assemble the main elements found in the literature review to define CSA, which we have freely translated from French into English and summarized as the following: *CSA is a situation in which a child is subjected to a sexual act with or without physical contact by a person exerting control, manipulation or authority*. It is a widely acknowledged worldwide societal concern (Chae & Ceci, 2005; Pereda, Guilera, Forns, & Gomez-Benito, 2009a; Poole & Lamb, 1998; Stoltenborgh,Van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011) that often requires early intervention to prevent the short and/or long-term impact on a child's development (Briere & Elliott, 1994). CSA may, indeed, influence a child's affective and cognitive growth which can impair his/her social and academic functioning (Briere & Elliott, 1994; Putnam, 2003). The effects of CSA, however, vary considerably from victim to victim and there are no specific psychological symptoms particular to CSA (Kendall-Tackett, Williams, & Finkelhor, 1993).

1.2. Incidence. The Youth Protection Department reported that 0.09% of children were sexually abused (SA) between 1998 and 1999, accounting for more than 1,500 children in the province of Quebec alone (Tourigny et al., 2002). Even though, younger victims are known to make fewer allegations and give fewer details when questioned than their older counterparts (Hershkowitz, Horowitz, & Lamb, 2005, 2007; London et al., 2005, 2007), according to

Canadian police reports, in 2005 CSA incidents occurred five times more often than adult SA (Statistics Canada, 2007). Unfortunately, most perpetrators are familiar to the children they victimise which may increase the number of children who fail to report their victimization promptly, if at all (Finkelhor, Hotaling, Lewis, & Smith, 1990). As such, CSA incident rates, only represent the tip of the iceberg as a great proportion of children disclose belatedly or refuse to do so at all (London, Bruck, Ceci & Shuman, 2007; Statistics Canada, 2008). Indeed, Hébert, Cyr, Tourigny, McDuff, and Joly (2009) revealed that in the province of Quebec only 21% of adults had reported SA as a child within one month of the incident, 58% disclosed after approximately five years, and 21% refused to report being abused as a child at all. Similarly, based on 11 retrospective studies, just over one-third of adults who had suffered from CSA appeared to have disclosed the abuse during childhood (London, Bruck, Ceci, & Shuman, 2005). As a result, it is difficult to pinpoint exactly how many children are victims of CSA.

1.3. Prevalence. In order to determine the prevalence rate of CSA in Quebec, Tourigny, Hébert, Joly, Cyr, and Baril (2008) conducted a phone survey with over 800 adults. From this sample, 16% of the adults (22% percent women and 10% men) reported being sexually abused prior to their 18th birthday. In the United States, similar results were published by Finkelhor (1994) estimating that 20% of women and 5 to 10% of men were sexually abused before their 18th birthday. Additionaly, Pereda et al.'s (2009b) meta-analysis, reported the prevalence of CSA in 22 different countries and showed similar statistics, as 19.7% of women and 7.9% of men had suffered SA prior to their 18th birthday. More recently, Stoltenborgh et al., (2011) combined 217 publications between 1980 and 2008 and completed a comprehensive meta-analysis of prevalence figures of CSA. They conclude that the global prevalence of CSA is estimated to reach almost ~13% based on self-report studies with a total of 9,911,748

participants. As expected, cases of self-reported CSA were more common among female (~18%) than among male participants (~8%). Hence, researchers' findings converge and indicate that CSA is relatively stable over time but remains an ongoing global phenomenon, affecting significantly more girls than boys.

2. Magnitude of CSA Disclosure. CSA disclosure[1] is crucial as most cases lack physical or medical evidence, the offence typically occurs without witnesses and perpetrators often deny the charges (Cyr, Wright, Toupin, & Oxman-Martinez, 2000; Cyr & Dion, 2006; Faller, 1996; Poole & Lindsay, 1998). Consequently, children's disclosure usually comprises the central and unique evidence of CSA (Kendall-Tacket, Williams & Finkelhor, 1993; Lamb, Sternberg, & Esplin, 1998; London, Bruck, Ceci & Shuman, 2007). More specifically, details revealed during the forensic interview, is crucial for investigators as it is sometimes the sole proof enabling justice to be served (Pipe, Orbach, Lamb, Abbot, & Stewart, 2013). As such, it seems important to consider both child and SA characteristics in research on CSA as they may represent motivational factors that make some children reluctant to disclose details during SA. Indeed, research has shown tremendous individual differences in a child's capacity to evoke events, depending on their gender, age, as well as the nature of the child-perpetrator relationship. (Pipe, Lamb, Orbach, & Cederborg, 2007).

3. Child and SA Characteristics Affecting Children's Disclosure

3.1 Children's Gender. Consistent gender differences reported previously in the prevalence rates of CSA may be due to higher instances of SA among girls than boys and/or

[1] The term *Disclosure* will hereupon be used to refer to what is revealed during formal investigation, unless otherwise specified.

boys' more reluctant attitude towards disclosing their CSA experiences (Romano & De Luca, 2001). Indeed, boys in general seem more reluctant than girls to disclose information regarding SA (Ghetti & Goodman, 2001; Gries, Goh, & Cavanaugh, 1996; Levesque, 1994). Girls also tend to provide richer responses (i.e., more detailed) than boys (Lamb & Garretson, 2003). Moreover, older boys make significantly fewer allegations when the SA is perpetrated by a parent or parent-figure as compared to girls. This difference was not found in cases of physical abuse, demonstrating the important impact of a child's gender, age, and the victim-perpetrator relationship especially in cases of CSA disclosure (Hershkowitz et al., 2005, 2007).

3.2 Children's Age. Moreover, age is a static and important variable that has a tremendous impact on the quantity of details disclosed during CSA interviews (Hershkowitz, Horowitz, & Lamb, 2005; Lamb, Sternberg, & Esplin, 2000; Sternberg, Lamb, Davies, & Westcott, 2001). According to Lamb, Hershkowitz, Orbach, and Esplin (2008) younger children may misunderstand the purpose of the forensic interview or the abuse itself, thereby failing to disclose all pertinent information. Preschoolers may also lack the cognitive, communicative and emotional ability to understand and describe their abuse experiences (Lamb et al., 2008). However, Goodman-Brown, Edelstein, Goodman, Jones and Gordon (2003) showed that older children more often delay SA disclosure because they may feel more responsible for the incident and believe they could have prevented the abuse and, as a result, try to keep it secret. Furthermore, adolescents may be more willing to withhold information than younger children because of their amplified awareness of the consequences of disclosure. Or, perhaps some of the younger non-disclosing children later decide to disclose. Although age has a significant impact on the quantity of detail revealed by children, researchers'

findings differ on the direction of that impact and more comparative research of different age-groups is needed. Moreover, age in itself does not determine children's ability to recount personal traumatic experience(s) but rather serves to summarize the influence of a number of interrelated psychological factors (i.e., cognitive or emotional variables such as language and memory capacity; Lamb, Malloy, & Rooy, 2011). Hence, the importance of operationalizing what exactly is being measured when we talk about the impact of children's age during disclosure of CSA.

3.2.1 Age & Language. Young children as compared to adults have more idiosyncratic and limited vocabularies (e.g., interpret words concretely), and are less effective in coping with misunderstandings. Moreover, they usually have not developed the concept of time (Orbach & Lamb, 2007). Although individual differences exist, language development and communication skills tend to increase and solidify over time, they also seem to be pre-requisites for children to fully remember and recount them to others (Lamb, Malloy, & Rooy, 2011).

3.2.2 Age & Memory. Accoring to Rooy, Malloy, and Lamb's (2011) summaries of studies on children's memories, age is the most important determinant of children's memory capacity. Basically, children are gradually able to remember their experiences for longer and longer periods of time. How well they remember an event depends at least partly on how well they understood the incident and can associate it to other experiences in their memory (i.e., making links with past experiences). Older children may, therefore, be better at encoding new events because they tend to better understand and process the event based on having more knowledge and past experiences. This knowledge is used to generate cues to link the event with other experiences and may therefore facilitate retrieval and thus lead to more detailed

disclosures. Finally, although human memory develops dramatically throughout childhood, it does not work like a video recorder. As such, interviewers need to ensure they establish the optimal conditions for children to remember accurately and provide detailed accounts of traumatic experiences.

3.3 Child-Perpetrator Relationship. Nevertheless, there is a tendency for children of all ages to have higher non-disclosure rates when the suspect is a member of their immediate family. Children may be motivated to withhold information because they have been pressured to remain silent or wish to protect familial suspects, especially caregivers on whom they are dependent (Hershkowitz et al., 2007; Paine & Hansen, 2002; Pipe et al., 2007; Summit, 1983). Hershkowitz et al. (2007) found that children who were suspected victims of parental abuse provided proportionally fewer informative and more uninformative responses (e.g., omission, "don't know," "don't want to talk," "don't remember") leading to fewer details per response, than suspected victims of non-parental abuse.

3.4. Other Factors Affecting Disclosure. As there is a tendency for children of all ages to have higher non-disclosure rates when the suspect is an immediate family member, Hershkowitz, Lanes, and Lamb's (2007) study looked at cases of SA disclosure by extra-familial perpetrators. They found that children were more likely to delay disclosure (ranging from one week to two years) in more severe cases involving intrusive sexual acts (e.g., penetration) and multiple incidents as opposed to single incidents involving non-intrusive acts (e.g., touching over the clothes). Results indicate that it is more difficult for children severely abused by a familiar perpetrator on multiple occasions to confess spontaneously than it is for children abused only once by a complete stranger (e.g., cases of exhibitionism). In addition, children more often expressed fear or shame when the perpetrators were familiar (78%), the

abuse was serious (83%) or repeated (79%). As a result, feelings of distress could have a direct impact on a child's degree of cooperation even when they decide to disclose SA. Overall, the results indicate that children who suffer severe and frequent SA, especially by people who they know, tend to disclose belatedly, hesitantly, and indirectly.

Although, children's reluctant attitude to disclose in cases of CSA may be "normal", very little research has been conducted on children's collaboration during forensic interviews. The impact of child and SA characteristics has been thoroughly investigated in comparative research (comparing cases of CSA disclosers to non-disclosers), however, not much information in the literature can be found on children's collaboration to disclose details regarding a traumatic event. As mentioned previously, a detailed disclosure of CSA is critical in preventing future victimization by detaining and prosecuting the perpetrator (Pipe, Orbach, Lamb, Abbot, & Stewart, 2013), children, however, do not always feel comfortable talking to an adult stranger (Lamb, Sternberg, & Esplin, 1998; Yuile, Marxsen, & Cooper, 1999) and some are incapable or reluctant to reveal pertinent details on the SA during forensic interviews (Orbach, Shiloach, & Lamb, 2007). Hence, one objective of this doctoral thesis is to investigate the impact of child and SA characteristics on children's collaboration in cases of CSA disclosure during forensic interviews. The next paragraph will help us define and operationalize children's collaboration during forensic interviews.

4. Children's Collaboration

For the purpose of this thesis we have decided to use the term *children's collaboration* to encompass both children's willingness to cooperate and their refusal or reluctance to do so during forensic interviews.

4.1. Children's Cooperation. It is defined as *a child's decision to readily respond without a fuss to questions or demands asked of him/her by the interviewer*. Thus, it requires the child to not only understand the question but also to choose to respond to it. Furthermore, revealing details about SA incident(s) is a personal, delicate and often embarrassing experience, which makes it normal for children to, at times, express signs of resistance during the interview process. Most definitions are based on work pertaining to client resistance in the field of psychotherapy and they are consistent with classical characterizations of how resistance manifests itself in therapy (e.g., Freud, 1946; Strean, 1990). In order to not misinterpret the concept of resistance used in psychotherapy, the term "children's reluctance" will be used in this thesis.

4.2. Children's Reluctance. It is defined *as an attitude exhibited by the child, demonstrating indirect or direct refusal to respond to the question asked by the interviewer or his/her unwillingness to participate in the interview process*. Furthermore, we believe that children's reluctance encompasses aspects of children experiencing above and beyond "noncompliance" and may at times represent an enactment of healthy mechanisms (e.g., a boundary that differentiates self from other; Bischoff & Tracey, 1995). Indeed, if we view a child's reluctance as an inherent or unconscious thought process striving to avoid thoughts and feelings that causes discomfort (Arlow, 2000) then it is not surprising for children, presumably victims of SA, to express signs of reluctance in front of an adult stranger. Children may convey an overt reluctance to collaborate during the interview process by expressing it directly towards the interviewer (e.g., "I do not want to talk to you, let me go see my mommy") or indirectly, by digressing or avoiding the question (e.g., switching the topic of conversation).

As both children and interviewers contribute to the quantity of details disclosed

regarding the SA incident(s), this doctoral thesis will attempt to enhance our understanding of the techniques and attitudes interviewers use to elicit information, as well as the collaborative role children play during forensic interviews. The subsequent paragraph will provide a summary of the research conducted on the techniques and attitudes used by interviewers that impacted the accuracy and the credibility of children's disclosure, which eventually led to the development of a forensic interview Protocol.

5. Factors Affecting the Credibility of Children's Disclosure

Over the past 30 years researchers have debated the credibility of child witnesses. This uncertainty has led researchers to enhance the understanding of children's cognitive and linguistic ability to disclose information regarding SA. Results showed that young children were, indeed, more vulnerable to suggestive interviews as they had a tendency to be tested by adults whom they perceived to be more intelligent, credible and reliable sources of information (Ceci & Bruck, 1993; Yuille, Marxsen, & Cooper, 1999). A tremendous amount of research has been conducted on children's memory, its accessibility and suggestibility, in order to determine the impact of false memories and the validity of CSA disclosure (Ceci & Bruck, 1993; Pipe, Lamb, Orbach, &Esplin, 2004; Poole & Lamb, 1998; Saywitz & Camparo, 2009). Research showed that the quantity and quality of information revealed by the child is affected by the interviewer's ability (i.e., technique and/or attitude) to elicit information and the child's willingness and ability to express it, rather than the child's ability to remember it (Lamb, Hershkowitz, Orbach, & Esplin, 2008).

The interviewing techniques used during forensic interviews have been thoroughly investigated by researchers over the last two decades (Pipe et al., 2013). Research results

underscore the importance of encouraging children to provide as much information as possible in the form of narrative by asking open-ended questions while avoiding suggestive questions (Cyr & Lamb, 2009; Cyr, Trotier-Sylvain, Lewy, 2011; Jones, 2003; Poole & Lamb, 1998; Warren & McGough, 1996). Indeed, open-ended questions allow the child to *recall* information which is more accurate than information elicited by focused-recognition prompts which may encourage the child to *recognise* one or more options suggested by the interviewer (Dale, Loftus, & Rathbun, 1978; Ghetti & Goodman, 2001; Lamb et al., 2008). Even though the research was clear about the findings in laboratory studies, interviewers still had difficulty applying those guidelines during actual forensic interviews. This consequently led to the creation of a structured interview *Protocol*[2], namely the *National Institute of Child Health and Human Development* (NICHD; Lamb et al., 1996; Orbach, Hershkowitz, Lamb, Sternberg, Esplin, and Horowitz 2000).

5.1. The NICHD Protocol. The NICHD Protocol comprises three unique phases: the pre-substantive, the substantive and the closing phase (see Lamb et al., 2008; Orbach et al., 2000; see Appendix A). The pre-substantive phase of the interview serves as the introduction, rapport building, and memory practice. It is meant to define both the role of the interviewer and the child as well as to set ground rules for the entire interview (e.g., telling the truth, saying "I do not understand, do not know or do not remember" is allowed and correcting the interviewer when needed). With some practice on a neutral or pleasant subject, the child will eventually understand he/she has to respond to open-ended questions by trying to recollect as much valid and detailed information as possible. This will subsequently influence the

[2] The term *Protocol* will hereupon be used to refer to the NICHD Protocol, unless otherwise specified.

substantive phase of the interview where the interviewer will want to obtain as many reliable details regarding the alleged abuse with open-ended utterances. To avoid pressuring or misleading the child, the substantive phase of the interview is initiated by open-ended prompts with other, more directive and non-suggestive prompts, used only when the child fails to respond to these invitations. Indeed, the NICHD Protocol encourages the use of open-ended questions from the beginning throughout the entire interview leaving more specific questions, if necessary, to the end of the interview. Moreover, suggestive questions are strongly discouraged which results in more detailed, valid and credible testimonies. The closing phase of the interview is meant to express appreciation of the child's participation and allows him or her to ask questions. The interview concludes with a discussion on a neutral topic allowing the child to leave the interview on a positive note.

The NICHD Protocol was designed to translate research-based professional recommendations into concrete operational guidelines to elicit accurate and complete testimonies (Lamb et al., 2008). The international use of this Protocol is evident on at least five continents (Australia, Asia, Europe, Middle-East and North-America) and supports the validity and credibility of a wide range of suspected victims' disclosure. It also enables comparative research which allows researchers from different countries to replicate interesting findings (see Lamb et al., 2008, for review). Moreover, Pipe et al. (2013) analyses showed that charges were more likely to be filed by prosecutors when interviewers had been trained to use the Protocol (52.9% vs. 42% before the Protocol was introduced) and that Protocol interviews were associated with a significantly higher rate of conviction yielding guilty verdicts.

While there is no controversy regarding the efficacy of the NICHD Protocol, even with its use, a proportion of children still show signs of reluctance to disclose details during forensic interviews. Furthermore, even in cases of disclosure, children may be reluctant at first to cooperate or may decide to only partially disclose. This may result in important details not being divulged. As mentioned earlier, partial disclosures may have several detrimental implications on the child's wellbeing, the healing process and the prosecution of the offender. As such, more research is needed to tailor the Protocol to young, reluctant victims of CSA. Hence, researchers are currently striving to investigate the impact of variables such as interviewer's attitudes that may be applied by practitioners in the field to alleviate a child's reluctant attitude and enhance his/her cooperation during a forensic interview.

5.2. Interviewer's Attitudes. As the legal system was debating about the reliability of young children's testimony, most of the first analogue studies were intended to determine the impact of an interviewer's non-verbal attitude (e.g., smile, eye-contact and body posture) on a child's suggestibility. One factor found to influence the accuracy of a child's statement was a socio-emotional variable defined by Burleson, Albrecht, Goldsmith, and Sarason (1994) as "social support" and *conceptualized as a form of social interaction or communication that fosters a feeling of well-being in the target*. Numerous studies have shown that social support has a positive effect on the amount and the accuracy of the information provided by especially young children during mock interviews (see Carter, Bottoms, & Levine, 1996; Goodman Bottoms, Schartz-Kenny, & Rudy 1991). Wood, McClure, and Birch (1996) believe that social support reassures the child and therefore is more conducive to accurate reporting. Other proponents expressed concern that support may induce a child to respond in order to please the friendly interviewer rather than answer correctly (see Bull, 1998, for a discussion).

Davis and Bottoms (2002), however, showed that an interviewer's support (expressed by building *rapport, smiling often, maintaining eye-contact, sitting in proximity and using a happy, kind voice*) during mock interviews fostered a sense of self-efficacy and helped even young children resist an interviewer's misleading suggestions about past events, thus increasing the quality of their testimony. Children in a non-supportive atmosphere (in which the interviewer *avoided smiling and eye-contact with the child, used a monotone voice and maintained a formal body posture*) provided fewer correct responses and more errors of commission to misleading questions than did children in a supportive atmosphere. Moreover, interviewer support did not significantly affect the proportion of correct responses to specific questions. It did, however, reduce children's anxiety during the interview and for children under the age of seven, anxiety was associated with decreased free recall accuracy. Davis and Bottoms (2002) concluded that forensic interviewers may help guard against false reports by acting in a supportive, non-intimidating manner. As such, the so called "child-friendly" interviewing attitudes would not lead to the conception of false details to please the socially supportive interviewer, as suggested by Bull (1998).

However, Imhoff and Baker-Ward (1999) hypothesized that an interviewer's "non-supportive attitudes", typically defined as being *intimidating*, *cold* and *more controlling* in their interactions would be more harmful, than a supportive attitude would be beneficial. They concluded that there is no benefit to using a supportive attitude when compared to neutral interviewing styles, arguing that most benefits of a supportive attitude were detected when compared to a non-supportive attitude. Indeed, numerous studies on children's suggestibility and on the accuracy of their reports showed that young children make significantly more errors when interviewers display a non-supportive (vs. supportive) attitude (Almerigogna, Ost,

Bull, & Akehurst, 2007, Quas, Wallin, Papini, Lench, & Scullin, 2005; Walker, 1999).

In conclusion, based on the consistent finding that children's accuracy is either enhanced or unaffected by highly supportive interviewers in analogue studies, Bottoms, Quas and Davis (2007) suggest that supportive interviewer's would probably elicit more true disclosures but not more false disclosures. Hence, to obtain credible testimonies from young children, interviewers are encouraged to use a supportive attitude and avoid a non-supportive, intimidating atmosphere.

Interest in interviewers' attitudes has recently re-emerged in the "forensic field" as they may have a direct impact, not only on the quality, but also on the quantity of details revealed by children (Walker, 1999). Research in the field, however, is hard to conduct as it is not always possible to measure the non-verbal expressions of an interviewer's attitude during forensic interviews (i.e., lack of equipment or consent to film the interview, etc.). Moreover, unlike subjecting children to a specific environment as done in experiments, in real-life settings interviewers may alternate between supportive and non-supportive attitudes. Some interesting field studies, however, have explored both interviewer's attitudes and children's reluctant attitudes to disclose SA during forensic interviews.

6. Field Studies

Herhskowitz, Orbach, Lamb, Sternberg, and Horowitz (2006) conducted the first field study, to our knowledge, that explored the dynamics of forensic interviewers with reluctant children by comparing 50 disclosing to 50 non-disclosing cases of CSA. Children's responses were categorized as either *informative*, providing information as requested or *uninformative* such as *omissions, digressions*, *displacements*, *resistance*, and/or *denials* (see Appendix B for

a more detailed description). Non-disclosers were more uncooperative, offered fewer details and gave more uninformative responses than disclosers. This was evident even at the very beginning of the interview, before the interviewers themselves began to behave differently.

Hershkowitz et al. (2006) believed that although a child may have emotional and motivational reasons to avoid disclosing SA, even an experienced interviewer may be affected by a child's reluctance to be informative. They coded for interviewers' techniques (i.e., prompts) and were the first to define and measure interviewers' verbal attitudes during forensic interviews. *Supportive comments* were intended to encourage children to be informative about neutral topics. By contrast, *unsupportive comments* were intended to exert pressure on children to respond by challenging information they provided or criticizing their behaviour (see Appendix C for a more detailed description).

Results demonstrate that in the substantive phase of the interview, as expected interviewers used less free-recall prompts and more directive prompts towards non-disclosers than they did towards disclosers. Furthermore, interviewers dealing with non-disclosers adhered less closely to the NICHD Protocol providing significantly fewer supportive comments to non-disclosers (vs. disclosers). Children who received more support provided significantly more informative and fewer uninformative responses than children who received less support. In sum, as previously suggested by analogue findings, Hershkowitz et al.'s (2006) study showed that an interviewer's verbal support has a positive effect on both the quantity and the quality of information provided by the child during forensic interviews.

More recently, a study by Katz et al. (2012) compared children presumed victims of SA (disclosers and non-disclosers) on nonverbal reluctant attitudes. Their findings suggest that non-disclosers are significantly more physically disengaged (e.g., getting up and gazing

away from the interviewer more often) than disclosers during the interview. Katz et al. concluded that it is important to identify reluctant attitudes as children may have valid reasons (i.e., feeling ashamed, guilty etc.) for not wanting to disclose all the relevant details. Moreover, early detection of non-verbal reluctant behaviour may encourage interviewers to be more supportive and spend more time building rapport before delving into the substantive phase of the interview. While the rapport between an interviewer and a child is crucial in obtaining CSA disclosure, it is not always easy to establish with reluctant children. Hence, more research is needed to find better ways to detect and deal with children's reluctant attitudes during CSA interviews. Moreover, as reluctant attitudes can be detected even in disclosers, more research in cases of CSA disclosure is needed.

Orbach, Shiloach, and Lamb's (2007) study focused on 70 children (4 to 12 years old; 48 girls and 22 boys) who initially appeared reluctant to disclose but eventually did disclose in the initial forensic interview. Half of the children were "non-reluctant disclosers" as they made allegations in response to the interviewer's open-ended free recall prompts. The other half were "reluctant disclosers" as they failed to disclose abuse in response to free recall prompts and made allegations only when focused recognition prompts were used. As expected, reluctant disclosers were somewhat uncooperative at the beginning of the interview when discussing neutral topics and reported fewer abuse related details in the substantive phase of the interview as opposed to the non-reluctant disclosers. Moreover, they tended to use more uninformative and omission responses (unclear, inaudible, or unfinished responses, request for clarification or failure to respond informatively) than non-reluctant disclosers.

In sum, according to Lamb et al. (2008) interviewers are clearly influenced by children's reluctance to be informative and act as though they are unaware of how important it

is to maintain rapport and be supportive. Furthermore, children interviewed in a friendly and supportive context are clearly encouraged to describe their experiences and tend to provide richer details regarding SA events in response to open-ended prompts, including core details pertaining to the sexual acts. As children may have emotional and motivational reasons to avoid disclosing their SA experience in detail, a better understanding of the factors affecting children's disclosure is needed. Specifically, more research is needed to identify signs of children's reluctant attitudes and find new ways to facilitate children's cooperation and ensure informative responses are obtained during forensic interviews.

7. Conclusion

The challenge of helping young reluctant children disclose details about SA has not yet been solved which indicates the possible risk of further exposing those already vulnerable children to repeated incidences of CSA. Although child and SA characteristics are of great interest to researchers, they are static variables and unchangeable in nature. Moreover, as mentioned previously, adherence to the Protocol does not ensure a child's full cooperation during forensic interviews. In any case, action must be taken to prevent and eventually eradicate CSA. As such, researchers need to investigate other variables that may contribute to children's collaboration during SA disclosure. Conducting an experimental design to investigate children's reluctance is difficult because it would be hard to randomly assign reluctant attitudes to young children. Moreover, unlike experimental research, children and interviewers may alternate their attitudes (e.g., interviewers are not asked to be either supportive or non-supportive) during actual forensic interviews. It is not always possible to obtain consent and measure interviewers and children's nonverbal attitudes (e.g., moving out

of range of the camera).

Hence, the innovative aspect of this thesis was to create "non-mutually exclusive verbal scales" to measure children's and interviewers' attitudes during forensic interviews (see Appendixes B and C). Furthermore, no comparative research, has investigated the impact of these variables in NICHD Protocol and non-Protocol interviews. Finally, researchers have mostly examined specific samples of pre-schoolers, school-aged children or pre-adolescents but none, to our knowledge have studied the impact of interviewers' attitudes and children's collaboration across three age-groups.

8. Doctoral Thesis Objectives

The goal of this thesis is to further the theoretical understanding of both children's (i.e. cooperative and reluctant) and interviewers' (i.e. supportive and non-supportive) attitudes during forensic interviews in order to enhance a child's prolific collaboration (i.e. promoting detailed disclosures) during such interviews. Subsequently, the intent is to adapt this knowledge to applicable measures and determine their practical ramifications on children's collaboration during SA disclosure. More specifically, on a practical level, the goal is to eventually find new ways to encourage young children to talk even when they seem, at times, reluctant to do so.

The first chapter of this doctoral thesis presents an article entitled, "*Impact of Children's and Interviewers' Attitudes on Sexual Abuse Disclosure during Protocol and Non-Protocol Interviews*" which was submitted to *Child Abuse & Neglect*. The first objective of this article is to explore whether the amount of a child's collaboration (whether resistant and/or cooperative) and an interviewer's attitude (whether supportive and/or non-supportive),

as well as the proportion of open-ended and closed-ended details, vary according to NICHD Protocol and Non-Protocol interviews. The second objective is to determine whether known variables such as a child's age, the use of the NICHD Protocol, and/or open-ended prompts will predict a greater amount of detail than children's collaboration and interviewers' attitudes do during forensic interviews.

The following chapter of this doctoral thesis imparts an article entitled, "*Relation between Interviewers' Supportiveness and Children's Collaboration during Child Sexual Abuse Interviews*", which has been submitted to *Child Maltreatment*. The objective seeks to determine whether children's collaboration and interviewers' attitudes vary according to children's age (i.e. pre-schoolers, school-aged children and pre-adolescents). The final objective seeks to determine which variables regarding child (i.e. age and gender) and SA characteristics (i.e. child-perpetrator relationship, frequency and severity of SA), as well as interviewers' attitudes (i.e. supportive and non-supportive), will have a greater chance at predicting a child's collaboration (i.e. reluctant and cooperative) during forensic interviews. Those objectives are all empirical in nature, the results presented in the articles are discussed and their implications will be highlighted in the conclusion.

Article 1

Impact of Children's and Interviewers' Attitudes on Sexual Abuse Disclosure during NICHD Protocol and Non-Protocol Interviews

Jennifer Lewy, Ph.D. Candidate, Department of Psychology, University of Montreal; first author of the article in charge of the conceptualisation of the project involving the elaboration and the development of the scales, codification of the data, statistical analyses, interpretation of the results and the writing of this manuscript.

Mireille Cyr, Ph.D. aggregated Professor, Department of Psychology, University of Montreal; co-author of the article collaborated in the conceptualization and the revision of the entire process of the project as well as in the writing of this manuscript.

Impact of Children's and Interviewers' Attitudes on Sexual Abuse Disclosure during NICHD Protocol & Non-Protocol Interviews

Jennifer Lewy & Mireille Cyr

Department of Psychology, University of Montreal, Quebec, Canada

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Mireille Cyr is a co-chair of the *CIMV* and the scientific director of the *CRIPCAS*.

Requests for further information should be addressed to Dr. Mireille Cyr, Department of Psychology, University of Montreal, P.O. Box 6128 Downtown Station, Montreal, QC, H3C 3J7. Phone: (514) 343-5968. Fax: (514) 343-2285.

Abstract

Objectives: The first objective was to examine the difference between NICHD Protocol and non-Protocol interviews with respect to the interviewer's attitude, the child's collaboration and the proportion of details revealed during Child Sexual Abuse (CSA) interviews. A second objective was to determine the best predictor of the proportion of details disclosed by children during forensic interviews.

Methods: Investigators interviewed a total of 90 children ranging from 4 to 13 years of age. These forensic interviews were audio-taped, transcribed and subsequently codified using verbal subscales to determine interviewers' supportive and non-supportive attitudes as well as children's cooperative and reluctant attitudes. The proportion of details provided by the children during the substantive phase of the interview was used in the analysis.

Results: A MANCOVA showed that interviewers who adhered to the NICHD Protocol during CSA interviews obtained a greater proportion of detail from open-ended prompts as compared to interviewers prior to the Protocol formation. Moreover, a hierarchical multiple regression analysis showed that a child's age accounted for 30% of the variance in the proportion of detail provided by the children during SA interviews. After controlling for variables which are known to increase the proportion of details disclosed by children (i.e., child's age, NICHD Protocol and proportion of open-ended questions), children's reluctance and interviewers' non-supportive attitudes contributed to an additional 28% of the variance. More specifically, two standard multiple regressions revealed that (1) children's refusal to collaborate and elaborate on the subject and (2) interviewers' controlling and doubting attitudes correlate negatively with the proportion of details revealed by the children.

Conclusion: Results indicate that in order to promote detailed disclosure of CSA, interviewers should decrease their non-supportive attitudes and learn to deal more effectively with children's reluctant attitudes during forensic interviews. If these results can be replicated, future studies could use sequential analyses to determine whether a child's lack of details disclosure leads interviewers to become more controlling and doubtful of the child's answers or vice-versa.

Key words: child sexual abuse; forensic interview; children's reluctance; interviewers' support; NICHD Protocol.

Impact of Children's and Interviewers' Attitudes on Sexual Abuse Disclosure during NICHD Protocol & Non-Protocol Interviews

Investigators have few tools to solve cases of Child Sexual Abuse (CSA) outside of the testimony proffered from underage victims, because individuals who commit CSA often minimize or downright deny their crimes and medical evidence is rarely available, (Cyr & Dion, 2006; Faller, 1996; London, Bruck, Ceci, & Shuman, 2007; Poole & Lindsay, 1998). Hence, the more the child gives details about the perpetrator and the sexual abuse (SA) the easier it will be to convict the alleged perpetrator and prevent a recurrence of abuse (Pipe, Orbach, Lamb, Abbot, & Stewart, 2013).

Research has shown that the proportion of detail revealed during forensic interviews, strongly correlates with the child's age (Hershkowitz, Horowitz, & Lamb, 2005; Lamb, Sternberg, & Esplin, 2000; Lamb, Hershkowitz, Orbach, & Esplin 2008; Sternberg, Lamb, Davies, & Westcott, 2001). Indeed, numerous studies both in analog (Fivush & Shukat, 1995) and in forensic contexts (Alridge & Wood, 1999; Dion, Cyr, Richard, & McDuff, 2006; Lamb et al., 1996; Sternberg, Lamb, Hershkowitz, Esplin, Redlich, & Sunshine, 1996), demonstrate that younger children tend to provide briefer narratives and fewer details than older children probably due to their less developed cognitive and verbal abilities.

In the last three decades a considerable amount of research was conducted on the impact of interviewing techniques and the accuracy of details disclosed by presumed victims of CSA (Davies, Westcott, & Horan, 2000; Hershkowitz, 2001; Lamb & Fauchier, 2001; Sternberg, Lamb, Esplin, Orbach, & Hershkowitz, 2002; Sternberg et al., 1996). Researchers agree that the most central factor affecting a child's credible detailed disclosure is the open-

ended (vs. closed-ended) questioning type corresponding to free recall (vs. recognition) retrieval strategies (Dale, Loftus, & Rathbun, 1978; Hutchenson, Baxter, Telfer, & Warden, 1995). Moreover, details obtained from free-recall memory are considered more accurate and reliable, regardless of the child's age (Lamb et al., 2008). As it was hard for interviewers to change their old habits, researchers in the forensic field decided to develop a standardized and structured Protocol (Lamb et al., 1996; Orbach, Hershkowitz, Lamb, Sternberg, Esplin, & Horowitz, 2000). With the objective of enhancing children's testimony, the NICHD Protocol offers guidelines to interviewers for employing "best practices", by using open-ended questions and invitations as much possible when interviewing alleged victims (Orbach et al., 2000). It also allows children to practice responding to free-recall probes and retrieval cues when describing neutral events in the pre-substantive phase of the forensic interview thereby preparing them to disclose more detailed information in response to open-ended prompts during the substantive phase of the interview (Lamb et al., 2008; Sternberg, et al., 2002).

While the NICHD Protocol has been proven to be beneficial, it is still difficult to coax a victim to discuss a SA incident. Oftentimes children are shy, feel intimidated or simply do not want to disclose details during forensic interviews (London, Bruck, Ceci, & Shuman, 2007). Consequently, children need motivation and trust in order to reveal personal and often embarrassing details of a SA incident to a stranger. Even though a child's reluctance to disclose certain details regarding a traumatic event may be normal, and especially common in cases of SA, very little research has been done to study children's reluctant attitudes during forensic interviews.

For the purpose of this research we have decided to use the term *children's collaboration* to encompass both *children's cooperation* and their *reluctance* to cooperate

during a forensic interview. *Children's cooperation* is defined as a child's decision to readily respond without protest to the questions asked or demands made of him/her by an interviewer. It requires that the child not only understand the question, but also willingly agree to respond to it. Children's *reluctance* is here operationalized *as a behaviour or verbal attitude exhibited by the child who demonstrates a direct or indirect refusal to respond to a question asked by the interviewer or an unwillingness to participate in the interview process*. This definition was initially based on the work done on client resistance in the field of psychotherapy and is consistent with classical characterizations of how resistance manifests itself in therapy (e.g., Freud, 1946; Strean, 1990). The definition was modified to correspond to how a child's reluctant attitudes manifest themselves in the context of forensic interviews. Some children may express a reluctant attitude overtly and explicitly towards the interviewer (e.g., "I do not want to talk to you") or indirectly, by digressing when questioned (e.g., switching the topic of conversation). Because this type of attitude cannot be randomly assigned to children, an experimental design investigating children's reluctant attitudes is hard to conduct.

Herhskowitz, Orbach, Lamb, Sternberg, and Horowitz (2006) were the first to conduct a field study to explore the dynamics of forensic interviewers with reluctant children. They compared 50 disclosing and 50 non-disclosing cases of suspected victims of CSA. The children's responses were categorized as *informative* (providing information as requested) or *uninformative responses* such as *omissions* (unclear, inaudible, or unfinished responses, request for clarifications or failure to respond informatively or at all), *digressions* (responses unrelated to the eliciting prompts), *displacements* (unexpected and irrelevant allegations), *resistance* (verbal expressions or actions indicating unwillingness to provide information) and/or *denials* (claims that something previously mentioned never happened). Disclosers

provided more *informative*, fewer *uninformative* responses and fewer *denials* than non-disclosers. They found that premature questions regarding the abuse itself, correlated positively with more reluctant behaviours from the child and less disclosures in general.

More recently, a study by Katz et al. (2012) compared children presumed victims of SA (disclosers and non-disclosers) on nonverbal reluctant attitudes. Their findings suggest that non-disclosers are significantly more physically disengaged (e.g., getting up and gazing away from the interviewer more often) than disclosers during the interview. Furthermore, Katz et al. concluded that early detection of non-verbal reluctant behaviour may encourage interviewers to be more supportive and spend more time establishing a rapport before delving into the substantive phase of the interview. As it is not always possible to obtain consent and measure children's nonverbal attitudes (e.g., constantly moving and out of range of the camera), one of the objectives of this article was to create a new verbal scale to detect the various types of reluctant attitudes displayed by children during CSA disclosure.

As previously mentioned, the use of appropriate techniques is crucial for forensic investigators. Researchers however, should also be looking at the impact of interviewers' attitudes. An interviewer's attitudes, more specifically, *social support* expressed by the interviewer, was conceptualized as a form of *social interaction or communication that fosters a feeling of well-being in the interviewee* (Burleson, Albrecht, Goldsmith, & Sarason, 1994). Non-verbal signs of an interviewers' *social support* (i.e., smiling, eye-contact etc.) were first explored on a child's suggestibility in laboratory settings. Results from these studies showed that the interviewer's support had a positive effect on the amount and accuracy of the information provided by the children being interviewed during mock interviews (see Carter, Bottoms, & Levine, 1996; Goodman Bottoms, Schartz-Kenny, & Rudy 1991). Indeed, Davis

and Bottoms (2002) demonstrated that support (e.g., smiling, sitting in proximity and using a kind voice) given during mock interviews helped children resist misleading suggestions about past events imparted by the interviewers, thereby increasing the quality of the child's testimony. Most of the analog studies measured non-verbal expressions of support (e.g., open body posture, smiling, etc.) and non-support (e.g., closed body posture, fidgeting, etc.) during mock interviews. However, it is not always possible to film interviews and it is sometimes hard to measure nonverbal behaviours when children are constantly moving out of the range of the camera. Hence, more information on verbal expressions of support and non-support (e.g., encouragements, intimidation, etc.) as well as children's collaboration during real forensic interviews seems necessary to better understand the impact of such attitudes on CSA disclosure.

In a real-life setting, Hershkowitz et al. (2006) looked at the influence of interviewers' high and low support levels on disclosers and non-disclosers. Supportive comments were intended to encourage children to be informative, typically when discussing neutral topics. They were categorized using four exhaustive and mutually exclusive categories: (1) *non-suggestive positive reinforcement*; (2) *addressing the child in a personal way;* (3) *references to the child's emotions;* and (4) *facilitators*. By contrast, unsupportive comments were intended to exert pressure on the child to respond by challenging the information they provided or criticizing their behaviour. These comments were similarly categorized using four exhaustive and mutually exclusive categories: (1) *confrontations* (2) *reference to positive outcomes;* (3) *warnings about negative outcomes; and* (4) *negative references to the child's behaviour*. In both groups higher levels of interviewer support were associated with more informative, and fewer uninformative responses, in both groups. As expected, disclosers

provided more detail than non-disclosers. Although reluctant children might have benefitted from getting more support, they obtained less so than the group of children who made allegations. These reluctant children were also less informative and increasingly more resentful in their responses. Moreover, in a later study, Hershkowitz (2009) showed that support explained 6% of the variance in the amount of detail following open-ended prompts. Interviewers' support showed predictive power for less talkative children and predicted the number of details in older children only. They concluded that older children may need more support as they understand the ramifications and shame of SA. The results from this study are consistent with those from analog studies, indicating the positive impact of support on the quantity and quality of the detail provided by children during forensic interviews. Supportive interviewers tend to give children the reassurance and time they need to respond to the questions. As more supportive comments in rapport-building were found in children who disclosed SA when compared to those who denied it, it seems that supportive interviewers tend to encourage children to disclose abuse in formal investigations (Elliott & Briere, 1994; Lawson & Chaffin, 1992).

In contrast, Imhoff and Baker-Ward (1999) did not find any benefit when supportive attitudes were used compared to neutral interviewing styles. They argued that most benefits of support are detected when compared to non-supportive attitudes (intimidating, confrontational and dominant). Interestingly, they hypothesized that a non-supportive attitude is intimidating and harmful rather than a supportive attitude being really beneficial. Numerous studies on children's suggestibility and on the accuracy of their reports showed that pre-schoolers make significantly more errors when interviewers are non-supportive (Almerigogna, Ost, Bull, &

Akehurst, 2007; Quas, Wallin, Papini, Lench, & Scullin, 2005; Davis & Bottoms, 2002; Walker, 1999).

Although many experimental studies have been conducted on the impact of interviewers' attitudes on children's suggestibility, less is known about the impact of the interviewers' supportive attitude on the proportion of detail revealed by children during real CSA interviews. Unlike experimental studies, which tend to compare supportive versus non-supportive interviewers, in real-life cases interviewers may oscillate during the interview, adopting supportive attitudes at times and at other times non-supportive attitudes. The same is true for children's reluctant and cooperative attitudes. Hence, the main objective of this study was not to categorize interviewers and children but to create two non-mutually exclusive, independent verbal scales to code their attitudes.

Objectives and Hypotheses

The first objective is to explore if the amount of the children's collaboration (resistant and/or cooperative) and the interviewers' (supportive and/or non-supportive) attitudes, as well as details obtained from open-ended and closed-ended questions, vary according to NICHD Protocol and Non-Protocol interviews. NICHD Protocol interviews are expected to elicit a greater amount of details obtained from open-ended questions when compared to non-Protocol interviews. Furthermore, it is expected that Protocol interviews will reveal greater support from the interviewer's and less reluctance from the child than non-Protocol interviews.

The second objective of this study is to find the variable that has the greatest impact on the proportion of details disclosed during forensic interviews. Thus, the aim is to determine whether known variables such as a child's age, the use of the NICHD Protocol, or open-ended

prompts will predict a greater amount of detail than children's collaboration and interviewers' attitudes during forensic interviews. Previous research indicates that a child's age and the use of the NICHD Protocol, as well as open-ended prompts are significantly associated with the amount of detail disclosed by victims of CSA. When controlling for these variables, children's cooperation and, inversely their reluctance to collaborate, are expected to be good indicators of the amount of detail disclosed. Furthermore, it is expected that interviewers employing supportive attitudes will correlate positively with the amount of detail revealed by the children; however no prediction could be made for the interviewer's non-supportive attitudes.

Methods

Participants. Approved by the Ethics Board of the University of Montreal, a total of 90 forensic interviews were conducted with children (67 girls; 23 boys) ranging from 4 to 13 years of age, with a mean age of 8.28 (*SD* = 2.57; median = 8.00). Allegations consisted of sexual touching over the clothing in 7%, sexual touching underneath the clothing in 37%, exhibitionism in 3%, and oral or genital penetration in 53% of the cases. The majority (74%) of children reported multiple incidents. Most suspects (94%) were known to the child. In fact, 54% of alleged perpetrators were members of their immediate family, 11% were members of the extended family; and 29% were acquaintances, the remaining 6% represent allegations against strangers. Police officers and participants signed a consent form and measures were taken to conceal the identity of the victims by utilizing audiotape instead of videotape and by omitting descriptive information (e.g. names, address etc.) from the typed transcripts.

The 90 interviews chosen were selected from a pool of 163 cases of CSA found by police officers to be "substantiated"[3] after thorough investigation. In support of the child's statement they were either in possession of the perpetrator's confession, medical evidence, and disclosure of another witness or another type of corroborating evidence.

Half of the interviews used and adhered to the NICHD Protocol (n=45) and the other half (non-Protocol interviews, n=45) were conducted by the same interviewers but prior to NICHD Protocol training. The police officers received a one week intensive training including daily presentations, discussions and role-playing to practice the proper use of the Protocol. Those 45 interviews were matched based on the child's age, sex, child-perpetrator relationship and the types and frequency of the abuse, as these factors could influence the number of details revealed by the child. No significant differences on these variables were found between both NICHD Protocol and non-Protocol interviews.

From the 163 cases, only 120 interviews were deemed to match on children's age, sex, child-perpetrator relationships, the type and frequency of the abuse, which amounted to a total of 60 paired interviews (adhering or not to the NICHD protocol). From that sample, 15 interviews were excluded because they were second interviews, the child was mentally challenged, diagnosed with a mental disorder, or the pre-adolescent was treated as an adult in the non-Protocol interview (Miranda rights were read to him/her and/or inappropriate language was used by the interviewer), thus leaving 45 paired interviews for a grand total of 90 interviews. Those 90 interviews were conducted by 19 different Quebec police-investigators (11 male and 8 female). Their mean age was 40 years (*SD*= 3.47 years), with, on

[3] The term *substantiated* will hereupon be used to refer to cases in which there was compelling reasons to believe or suggesting that the alleged abuse had occurred.

average, 17 years of service (*SD*= 2.31 years) and two and a half years of experience (*SD*= 1.76 years) in sexual abuse investigations.

More specifically, eight police-investigators (4 male and 4 female) were trained to use the NICHD Protocol in 2003 and 11 police-investigators (7 male and 4 female) were trained to use the NICHD Protocol in 2006. To minimize the impact of timing, experience and maturation, interviews were selected from the same interviewers' pre-post protocol conducted in the year prior to the NICHD training. The police-investigators from 2003 group had a mean age of 38.6 years (SD= 2.1) and a mean number of 17.1 years (SD= 2.2) of service. Members of this group averaged 3 years (SD= 2.2) of experience with sexual abuse investigations. The police-investigators from 2006 group had a mean age of 41.4 years (SD= 4.0) and a mean number of 17.4 years (SD= 2.5) of service. The members of this group had on average 2 years (SD= 1.2 years) of experience with sexual abuse investigations. The slight differences between the two groups were not significant.

The NICHD structured interview Protocol. The NICHD Protocol is a flexible yet structured guide which covers three phases of the forensic interview: the pre-substantive, the substantive and the closing phase (Lamb et al., 2008; Orbach et al., 2000). The pre-substantive phase of the interview serves as the introduction and rapport building stage. It is meant to define both the role of the interviewer and the child, as well as to set ground rules for the entire interview (e.g., telling the truth, saying "I don't understand, know, or remember" is allowed and correcting the interviewer when needed is encouraged). With some practice on neutral subjects, the child will eventually understand he/she has to respond to an open-ended question by trying to recollect as much valid information as possible. This will later apply to the substantive phase of the interview when the interviewer will want to obtain as many

reliable details regarding the alleged abuse as possible. As it is known that Protocol interviews tend to have longer pre-declarative phases than non-Protocol interviews (see Lamb et al., 2008), and because we are mostly interested in the significant details obtained from the declarative phase, codification and analyses were conducted on the declarative phase of the interview.

To avoid pressuring or misleading the child, the substantive phase of the interview is initiated and explored with open-ended prompts. Other, more direct prompts are used only at the end of the interview when the child fails to respond to the invitations and forensical information is still needed. After exploring to whom the child first disclosed the abuse, the closing phase allows the child to ask questions and typically ends with a discussion on a neutral topic to ensure the child leaves the interview on a positive note.

The 45 Protocol interviews were screened to verify their adherence to the NICHD Protocol (see Appendix A). Those adhering to the Protocol interviews need to include the following: interviewer presentation, definition of the children's role and tasks, establishment of four interview ground rules, rapport building, free-recall practice with invitations, a non-suggestive transition to the substantive phase, investigation of one incident with open-ended questions first, verification of one or more incidents, disclosure and closing. All the steps preceding the disclosure and closing phase must have been included for the interview to be classified as a Protocol interview. The coders' inter-rater reliability was assessed on 20% of the interviews and the intra-class coefficient for Protocol adherence was 0.99.

Coding Procedure. All interviews were transcribed from audio recordings and checked to ensure their comprehensiveness and accuracy. Children's disclosure was determined by the amount of quantifiable details they revealed in the substantive phase of the

interview. The victim's details were coded by two graduate students using the *Quality of Interview Content Analysis of Forensic Interviews Codebook* (Lamb et al., 1996; Orbach et al., 2000; translated into French by Cyr, Dion, Perreault, & Richard, 2001). Details were defined as words or phrases describing people, objects, places or events (including actions). Those details were counted only when they were new and helpful in understanding what the victim was trying to convey.

Each interviewer utterance, defined as a 'turn' in the discourse, was coded according to either (1) invitations (I), which prompt free-recall responses from the victim; (2) directive open (DO), which focus the child's attention on details he or she has previously mentioned and requires expansion to get more information (e.g., how come and why type of questions); (3) directive closed (DC), which focus the child's attention on details he or she has previously mentioned and requires a specific answer (e.g., who and when type of questions); (4) option posing (OP), which focus the victim's attention on details he or she did not mention; (5) suggestive (S), which proposes the expected answer to the victim; and (6) summaries (SM), brief sum-ups of what has been said. For the analyses, a total proportion of details were calculated taking into account the total number of interviewer utterances. In addition, two other proportions were calculated according to the type of questions being asked, namely: proportions of details obtained from open-ended prompts (I, DO, SM) and closed-ended prompts (DC, OP, S). In order to control for the length of the interview and for the impact of open-ended prompts, a proportion of open-ended prompts (I, DO, SM) on all the types of prompts during the substantive phase was calculated. The intra-class coefficient of agreement based on the total score for each interview reached 0.98 for total details and 0.97 for interviewer utterances.

Scales. For the purpose of this study two new scales were developed: (1) the *Children's Collaboration Scale*, which measures a child's reluctant and cooperative attitudes; and (2) the *Interviewers' Supportiveness Sale*, which measures interviewer's supportive and non-supportive attitudes (See Appendix B and C for detailed scales). The elaboration of these scales was based on existing valid scales in combination with the examination of several audio taped interviews of CSA disclosure. The first scale, the *Children's Collaboration Scale* (CCS), was inspired by studies conducted in the forensic realm (Hershkowitz et al., 2006) as well as the *Client Resistance Code* (CRC), developed by Chamberlain, Reid, Patterson, Kavanaugh and Forgatch (1984). The *CCS* helps to quantify the amount of reluctance expressed by children being interviewed. Five different types of reluctant attitudes could have been assigned to the child's response:

1. **Refusing to collaborate** directly or indirectly;
2. **Refusing to elaborate** by using unclear or unfinished responses;
3. **Digressing** from the question;
4. **Confrontational** by justifying his/her refusal to talk or by being impolite; and
5. **Other** by showing anxiety, shyness, confusion or minimizing the incident.

The addition of the five different types of reluctant attitudes comprised the total amount of reluctance expressed by the child for the entire interview. The higher the score, the more reluctant the child was to disclose personal information regarding the SA.

The *Child's Cooperative or non-resistant codification* was used when the child responded without a fuss to the question or demand asked of him/her by the interviewer. Each time the child answered during the interview his or her response was coded as being either reluctant and/or cooperative. Thus, the higher the cooperative score, the more the child

responded to the questions being asked during the forensic interview.

The *Interviewers' Supportiveness Scale* (ISS) which measures an interviewer's supportive and non-supportive attitudes was inspired by Hershkowitz et al. (2006) *Supportive Classification* and by the *Therapist Behavior Code* (*TBC*; Forgatch & Chamberlain, 1982). The *Interviewer Supportive Attitude* was comprised of four items:

1. **Encouragements** using compliments and positive reinforcements;
2. **Respecting the child** by following his/her pace and using his/her name;
3. **Reassuring the child** by normalizing and generalizing the situation; and
4. **Other** by self-disclosing and small talk.

The *Interviewers Non-Supportive Attitude* was comprised of four items**:**

1. **Bargaining** by using positive or negative consequences;
2. **Controlling** the interview by intimidating, speculating and/or interrupting the child;
3. **Doubting** the child's answers and being hesitant, confrontational or persistent; and
4. **Other** by being impatient or minimizing what the child is saying.

Throughout the interviews for each of the 90 children, the frequency of the above-listed items was counted and coded for sequentially. The addition of these different types of supportive and non-supportive items represented the total amount of supportive and non-supportive attitudes expressed by the interviewer. Coders were trained on an independent set of transcripts until they agreed at least 90% of the time regarding the interviewers' and children's attitudes. About 33% of the interviews were coded by both coders to ensure satisfactory inter-rater reliability. The inter-rater reliability regarding the *Interviewer's Supportiveness Scale* was in substantial agreement (kappa = .70) and the *Children's Collaboration Scale* was in moderate agreement (kappa = .58).

Data Transformation. Most variables measuring reluctance, cooperation, support and non-support were not normally distributed and were therefore transformed using Logarithmic computations.

Results

Comparison between NICHD Protocol and non-Protocol interviews. To test for the impact of NICHD Protocol interviews on dependent variables, a one-way between-groups multivariate analysis of covariance (MANCOVA) was performed on the following six dependant variables: interviewer's supportive and non-supportive attitudes, children's reluctant and cooperative attitudes as well as the proportion of details obtained from open-ended and closed-ended prompts. The children's age and the proportion of open-ended questions were used as covariates in this analysis. The preliminary assumption testing was conducted to check for normality, linearity, univariate and multivariate outliners, and multicollinearity, with no serious violations noted. There was a statistically significant difference between Protocol and non-Protocol interviews (see Table 1), on the combined dependent variables (F (6, 81) = 4.94, $p < .001$; Wilks' Lambda = .73; partial eta squared = .27). When the six dependent variables were considered separately, a Bonferroni adjustment was applied (new alpha level was set at .008). Only one main effect was observed. As expected, interviewers using the NICHD Protocol obtained notably more details from the children following open-ended prompts than the interviewer's not using the Protocol (F (1, 86) = 8.19, $p < .01$, partial eta squared =.09). However, the use of the NICHD Protocol had no influence on the amount of details obtained from close-ended prompts, children's collaboration (reluctant or cooperative) and interviewers' supportive or non-supportive attitude.

Factors affecting children's disclosure of details. Pearson's correlation coefficients showed significantly small (r = -.17) to large (r = .69) correlations between children's age, their collaboration, proportion of details disclosed on the SA, proportion of open-ended questions as well as the interviewers' use of the NICHD Protocol and their attitudes with no case of multicollinearity (see Table 2). Moreover, there was no violation of the assumptions of normality, linearity, and homoscedasticity.

A hierarchical multiple regression was conducted to forecast which variable best predicts the proportion of details disclosed regarding the SA by children during the forensic interview after controlling for NICHD adherence, proportion of open-ended prompts and children's age. Children's age (β = .49, p < .001), use of the NICHD Protocol (β = .15, p > .05) and open-ended prompts (β = .13, p > .05) were entered at Step 1, only children's age explained 30% of the variance in children's disclosure F (3, 86) = 12.54, p < .001. Four new variables were introduced at Step 2, namely children's collaboration (reluctant and cooperative), and interviewers' attitude (supportive and non-supportive), which explained a total variance of 58%, F (7, 82) = 16.25, p < .001. Only children's reluctance and interviewers' non-supportive attitude contributed significantly to an additional 28% of the variance in children's disclosure, F change (4, 82) = 13.54, p < .001. In the final model, children's reluctance (β = -.35, p < .001) had a higher beta value than children's age (β = .27, p < .01), interviewers' non-supportive attitude (β = -.22, p < .05), followed by the use of the NICHD Protocol (β = .20, p < .05).

Two standard multiple regressions with the same co-variables were conducted to identify which subscales of (1) reluctance and (2) non-support were significant contributors to these results. Preliminary analyses ensured no violations of the assumptions. Children's

refusal to collaborate (β = -.29, $p < .05$) and to elaborate on the subject (β = -.26, $p < .05$) explained together a total of 30% of the variance in children's detailed disclosure of SA, F (5, 84) = 7.26, $p < .001$. In addition, interviewers doubting (β = -.28, $p < .05$) and controlling (β = -.24, $p < .05$) attitudes contributed together a total of 22% of the variance and have a negative impact on the amount of details revealed by the child, F (4, 85) = 6.05, $p < .001$.

Discussion

Comparison between NICHD Protocol and non-Protocol interviews. The first objective of the study was to explore the differences between NICHD Protocol and non-Protocol interviews on children's collaboration, interviewers' attitudes and the proportion of details revealed by children victims of SA. As expected, interviewers who use the NICHD Protocol had a tendency to obtain more details from open-ended utterances from children in the substantive part of the interview as opposed to interviews where the Protocol was not employed. This result was expected and is important, as interviewers using the NICHD protocol are trained to use more open-ended utterances leading to more accurate and reliable details (Lamb et al., 2008). Furthermore, when comparing protocol and non-protocol interviews, proportions of details are used to control for the number of open-ended questions asked. Hence, the result of this study may indicate that the pre-declarative phase in the Protocol interviews better prepare the children to reveal significant details in the declarative phase of the interview.

Hershkowitz et al. (2006) showed that only 17.4 % of non-disclosers as compared to 56.5% of disclosers were fully informative (responding to all the requests) in the pre-substantive phase of the interview. Moreover, partially informative children were about six

times less likely to make allegations than fully informative children. In cases of CSA disclosure, our result shows no difference in children's collaboration (i.e. cooperative and reluctant) as a function of the NICHD protocol, but children were more informative with NICHD Protocol in response to open-ended question. This result should be replicated and more research is needed to better understand, operationalize and measure the impact of cooperative attitudes expressed by fully or partially informative children during forensic interviews.

Furthermore, when analysing the substantive part of the interview with children who disclose SA, no differences between interviewer's attitudes were found, in Protocol and non-Protocol interviews. Although this is the first study to our knowledge, which compared Protocol and non-Protocol interviews on interviewer's supportiveness, these results differed from Hershkowitz et al. (2006) findings. In their study, open-ended techniques correlated significantly with an increase in supportive comments made to the children, encouraging them to be more cooperative. However, they compared cases of disclosers to non-disclosers and examined only the pre-substantive and the "getting allegation" phase preceding the substantive part of the interview, hence interviewers' supportiveness was based on neutral topics and not on substantive information. These methodological differences could explain the diverse findings. Moreover, as the same interviewers were used for the Protocol and the non-Protocol interviews, the fact that no differences were found could indicate that (1) the NICHD Protocol addresses techniques but does not focus on interviewer's supportive and non-supportive attitudes and/or (2) the attitude is more ingrained in the interviewer (i.e., tone of voice, body language, personality etc.) Those hypotheses could be tested in future research.

Factors affecting children's disclosure of details. The second aim of this study was to determine if the attitudes exhibited by the children and interviewers add a significant contribution (in addition to the child's age, use of the NICHD Protocol and open-ended prompts) in predicting the quantity of details disclosed by victims of CSA. The results indicate that more predictive power is given to a child's reluctant attitudes expressed during forensic interviews followed by his age, the interviewer's non-supportive attitude and then the use of the NICHD Protocol. Furthermore, we believe that due to a large correlation ($r = .65$; $p < .001$) between adherence to the NICHD Protocol and the proportion of open-ended prompts, the latter did not emerge as being significant.

These results seems to be in accordance with the quantitative studies and meta-analyses conducted in the field of psychotherapy, which showed that although techniques are useful, they only account for a portion of the variance (5 to 15%) in predicting the therapeutic outcomes (Norcross, 2002; Wampold, 2001). Although we cannot fully compare both contexts, as investigators tend to get only one chance to create rapport with the child (vs. therapists who have several sessions) and the goal is pre-set (i.e., to obtain a valid and credible testimony vs. a mutual agreement between the client and the therapist), it is important to note that besides the interviewers' techniques other variables such as the child's reluctant attitudes and interviewer's non-supportive attitudes contribute significantly to the quantity of details disclosed by children victims of CSA. Indeed, the more reluctant the child, the less he/she collaborates and the fewer details he/she tends to reveal. More specifically, children who use explicit verbal expressions such as, "I will not talk to you, I want to see my mommy", or exhibit indirect behaviours such as "hiding their face, or going to the door" will reveal less

useful information during the interview. This result concord with Katz et al.'s (2012) study on children's non-verbal expression of resistance during forensic interviews.

The impact of children's collaborative attitudes on the amount of details disclosed. A child's degree of cooperative attitude did not affect the amount of forensically relevant details disclosed. There seems to exist two different constructs: (1) amount of detail (responses relevant for the case); and (2) children's cooperation (responses to questions in general not relevant to the case). Indeed, children's cooperation is not equivalent to the proportion of forensically relevant details the child provides, as there is no significant correlation between the children's cooperation and the details obtained during the forensic interview. This, in turn, means that a child's response could be redundant or uninformative, yet cooperative in nature. More research is necessary to determine what type of cooperative attitude pre-disposes a child to reveal more significant details. For example, child-perpetrator relationship and a child who was previously heard and supported in his disclosure may be important factors, enhancing a child's cooperation. Also, individual characteristics unique to each child may influence his or her cooperation (e.g., language, memory, personality, motivation and maturity).

In cases of disclosure, cooperative or talkative children do not, in general, provide more details, but reluctant children (independent of their age or being interviewed with the NICHD Protocol) tend to give significantly fewer details. If we view a child's reluctance as an inherent or unconscious thought process intended to avoid thoughts and feelings that cause discomfort (Arlow, 2000), then it is not surprising for children, presumably victims of SA, to express signs of reluctance in front of adult strangers. Thus, even in cases where a child discloses the SA he/she may express signs or episodes of reluctance. More research is

therefore needed to better comprehend the role of children's collaboration during real cases of CSA disclosure.

To avoid non-disclosure, researchers have recommended the importance of detecting early signs of a child's reluctance and taking more time to establish rapport before entering the substantive phase of the interview (see Roberts, Lamb, & Sternberg, 2004; Katz et al., 2012). The results of this study indicate that, even in cases where children disclose SA, detection of a child's refusal to collaborate, whether overtly or covertly, is necessary for interviewers to help them reveal as many details as possible. Strategies to detect and deal with occurrences of a child's reluctant attitude should be explored in future research.

The impact of interviewer's supportiveness on children's disclosure of details. The present study also reveals that an interviewer's non-supportive attitude correlates negatively with the amount of detail revealed by a child. It is hard to predict whether an interviewer's non-supportive attitude makes children reveal less details or, inversely, the fact that when children do not provide much detail, this causes interviewers' to become more controlling (i.e., interrupting the child) or more doubtful of the children's answers (i.e., persistent in re-asking similar questions). We hypothesise that as much as detailed disclosures are important to investigators, a lack of details revealed during the interview may potentially cause interviewers to adopt more non-supportive attitudes. In order to determine whether interviewers' non-support is related to children who revealed less detail or if the opposite is true, future research should use sequential analysis. In any case, more research is needed to help practitioners identify and deal with non-supportive attitudes during forensic interviews, especially as this concept and its negative association with children's collaboration (i.e. quantity of details revealed) has not yet been fully examined.

Contrary to our expectations, an interviewer's support did not have an impact on the amount of details disclosed by children. When measuring interviewer's support in the substantive part of the interview with children who voluntarily disclosed abuse, Hershkowitz (2009) showed that interviewer's support was "nearly" but not significant in the prediction of children's general disclosure of details and no differences were found according to children's age or talkativeness. Even though the interviewer's support did explain 6% of the variance in the amount of open-ended details, they failed to predict the disclosure of details from talkative children. As such, we can conclude that once the child decides to disclose SA, support in itself does not correlate significantly with the total amount of information he/she decides to reveal in the substantive part of the interview.

A plausible explanation is that it is more the interviewer's supportive technique (e.g., facilitators) and less so the supportive attitude (e.g., using the child's name), that has an impact on the total amount of detail disclosed by the children. Facilitators were not maintained in the *ISS* as they decreased the alpha score and may represent more of an interviewer's technique than a real attitude. Our results, therefore, do not corroborate with Hershkowitz's (2009) suggestion that "a supportive approach [...] may be associated not only with children's willingness to disclose abuse but also with the richness of information they provide when they do disclose the abuse" (p.179). The way we have measured interviewer's support in the substantive phase of the interview shows that it does not promote more forensically relevant details, however, taking the whole interview into consideration, may reveal a different story. For this study, it was deliberately chosen to only analyse the substantive part of the interview because the pre-substantive part differs significantly in interviews adhering and those not adhering to the NICHD Protocol.

Conclusion. At last, our results seem to be in accordance with Imhoff and Baker-Ward's (1999) hypothesis which indicates that a non-supportive attitude seems to be more intimidating and harmful rather than a supportive attitude being really beneficial - in this case in predicting the quantity of detail revealed by children concerning SA. Although researchers seem to comprehend and, in a way, encourage practitioners to integrate supportive techniques (e.g., facilitators) when adhering to the NICHD Protocol, less is known regarding the detrimental impact of non-supportive attitudes. Consequently, more research seems necessary to detect non-supportive attitudes as early as possible and learn to diminish them, as these attitudes correlate significantly with the quantity of detail revealed by the child. Several analogue studies have shown the negative impact of an interviewer's non-supportive attitude on a child's suggestibility (e.g., making more errors; Almerigogna, Ost, Bull and Akehurst, 2007, Davis & Bottoms, 2002; Quas, Wallin, Papini, Lench and Scullin, 2005; Walker, 1999). To our knowledge, however, this is the first field study conducted on actual cases of CSA to show such a result.

Strengths & limitations. If the results of the present study can be replicated, they may have some practical impact on the elaboration of new guidelines for those interviewing alleged victims of CSA. However, several limitations should be accounted for in future research;

Firstly, it will be important to re-test the validity of the *Child's Collaboration Scale* and the *Interviewer's Supportiveness Scale* and refine them to increase the inter-rater reliability. Also, combining both verbal (e.g., using compliments and encouragements) as well as non-verbal items (e.g., eye-contact, smiling and open positioning; Burleson, Albrecht, Goldsmith, & Sarason, 1994; Almerigogna, Ost, Akehurst & Fluck, 2008) may depict an even more accurate portrait of children's and interviewer's attitudes. Other types of supportive

attitudes (e.g., directly stating the child's reluctance and talking about it) could be added as they may be more beneficial in preventing or countering a child's reluctance and may subsequently increase the amount of detail disclosed. Moreover, we did not differentiate between suggestive and neutral support statements. Thus, future research should measure the difference of such statements on the quality and on the validity of children's responses to ensure that support in itself does not increase a child's suggestibility.

Secondly, to ensure the cases selected for this study were valid, only substantiated cases with disclosure were selected. In doing so, most children in the sample were not reluctant until the end of the interview as they all ended up disclosing some information regarding the SA. As a result, comparing disclosers with non-disclosers could provide different results. It seems important to further investigate whether reluctance expressed by children who disclose and those who do not disclose differs and varies according to children's age. Such information may be necessary for interviewers to be able to detect a child's reluctance as early as possible and potentially prevent partial or non-disclosure.

Thirdly, the statistics used cannot reveal causality so researchers in the future could, with the use of sequential analysis, determine whether interviewers' non-supportive style (e.g., intimidating, confronting and interrupting) leads children to reveal less detail or the fact that children withhold information causes the interviewer to become non-supportive. This knowledge could help promote detailed disclosures on CSA during forensic interviews.

Finally, one of the strengths of the current study was that the same detectives conducted the pre-Protocol and Protocol interviews, thereby not confounding the effects of the interviewer and of the Protocol. The potential disadvantage is that, in order to obtain a larger sample, we needed interviews from different cohorts (2003 and 2006) and we could not match

pre-and post-Protocol interviews perfectly according to the interviewer. A between-subjects design in which the same detectives were randomly assigned to conduct either Protocol or pre-Protocol interviews was not feasible.

In conclusion, a successful interview seems to require more than just the use of a protocol (i.e., interview techniques) or the child's mental capacity (i.e., age). Results of this study, if replicable, demonstrate that in order to obtain detailed disclosure, interviewers need to use the least amount of non-supportive attitudes. A great deal of research has shown the positive impact of interviewer's support on a child's sense of well-being and disclosure in mock interviews, and potentially with reluctant children who hesitate to disclose during forensic interviews. However, contrary to our expectations, in real cases of CSA disclosure we have selected, an interviewer's supportive attitude did not encourage the child to reveal more details. In addition, this is the first field study that demonstrates the need to better understand the detrimental impact of non-supportive attitudes during forensic interviews. More research is also needed on learning how to deal with instances of children's reluctance to collaborate during forensic interviews.

In light of these results, it is essential for future research to analyze both a child's reluctance to disclose information regarding SA, as well as the impact an interviewer's non-supportive attitude has in such situations. Hopefully this knowledge will educate interviewers on the importance of detecting a child's reluctant attitudes during a forensic interview. This will, in turn, trigger the interviewer to modify their attitude in order to elicit a more collaborative disposition from the children being interviewed. The critical impact of such concepts, if replicable results are found, should eventually be incorporated into a revised version of the NICHD Protocol. It is, indeed, of paramount importance that researchers strive

to improve procedures that will encourage reluctant victims of CSA to divulge more comprehensive and detailed information during forensic interviews.

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Table 1

Proportion of Details, Interviewers' and Children's Attitudes as a Function of Protocol & Non-Protocol Interviews

	Non-Protocol		Protocol	
	M	*SD*	M	*SD*
Child's Cooperation	211.49	*96.69*	207.78	*112.57*
Child's Resistance	.27	*.78*	.60	*1.01*
Proportion of Open Details	.93	*.62*	1.40	*.66*
Proportion of Closed Details	.97	*.40*	.96	*.50*
Interviewer's Support	1.50	*.58*	1.66	*.68*
Interviewer's Non-Support	.64	*.58*	.54	*.86*

Table 2

Correlations between Children's and Interviewers' Variables as well as Proportion of Open-Ended Prompts during Declarative Phase

Variables	1	2	3	4	5	6	7	8	
1. Child's Age	-	.45***	-.30**	.49***	.01	-.19*	-.17*	.10	
2. Child's Cooperation		-	-.01	.08	-.02	.33**	.36***	.12	
3. Child's Resistance			-	-.53***	-.18	.69***	.31**	.18	
4. Child's Proportion of Details				-	.24*	-.46***	-.46***	.28	**
5. Interviewer's use of the NICHD Protocol					-	.13	-.07	.65	***
6. Interviewer's Supportive Attitude						-	.46**	.18	
7. Interviewer's Non-Supportive Attitude							-	-.20	
8. Proportion of Open-ended Prompts								-	

*$p < .05$. **$p < .01$. ***$p < .001$. (2-tailed).

Article 2

Relation between Interviewers' Supportiveness and

Children's Collaboration during Child Sexual Abuse Interviews

Jennifer Lewy, Ph.D. Candidate, University of Montreal; first author of the article in charge of the conceptualisation of the project involving the elaboration and the development of the scales, codification of the data, statistical analyses, interpretation of the results and the writing.

Mireille Cyr, Ph.D. Professor, University of Montreal; co-author of the article collaborated in the conceptualization and the revision of the entire process of the project as well as in the writing of this manuscript.

Relation between Interviewers' Supportiveness and Children's Collaboration during Child Sexual Abuse Interviews

Jennifer Lewy & Mireille Cyr

Department of Psychology, University of Montreal, Quebec, Canada

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Mireille Cyr is a co-chair of the *CIMV* and the scientific director of the *CRIPCAS*.

Requests for further information should be addressed to Dr. Mireille Cyr, Department of Psychology, University of Montreal, P.O. Box 6128 Downtown Station, Montreal, QC, H3C 3J7. Phone: (514) 343-5968. Fax: (514) 343-2285.

Abstract

Objective: The objective of this study was to gain insight into how child and abuse characteristics, as well as interviewers' supportive attitudes, relate to children's collaboration (cooperation and reluctance) during sexual abuse disclosure in forensic interviews.

Method: A total of 90 children ranging from 4 to 13 years of age were interviewed by police officers. Interviews were audio taped, transcribed and then codified using verbal subscales to determine interviewers' support and non-support as well as children's cooperative and reluctant attitudes.

Results: A MANOVA revealed that interviewers behaved similarly irrespective of a child's age, even though younger children were generally more reluctant and cooperated significantly less than pre-adolescents. Younger children were significantly more likely to digress when questioned than school-aged children who, in turn, digressed more often than pre-adolescents. In addition, hierarchical multiple regressions showed that interviewer support was a better predictor than child and abuse characteristics of both a child's cooperation and his or her reluctance during SA disclosure. More specifically, cooperative children received more supportive encouragement and interviewers were more reassuring and respectful of reluctant children during the interview.

Conclusion: Interviewers' support seems to be a stronger correlating variable than child and SA characteristics in predicting children's collaboration. As previously suggested by researchers, interviewers in this study, in general, tend to offer more support to reluctant children, regardless of their age.

Key words: child sexual abuse, forensic interview, children's reluctance, interviewer support, children's age.

Impact of Interviewers' Supportiveness on Children's

Collaboration during Child Sexual Abuse Forensic Interviews

Over the years, researchers have improved forensic interviews by tailoring techniques and adapting language to children's cognitive abilities (Saywitz & Camparo, 2009). However, a proportion of children remain reluctant to cooperate during forensic interviews (Hershkowitz, Orbach, Sternberg, Lamb, & Horowitz, 2007; London, Bruck, Ceci, & Shuman, 2007). Although technique is an important variable to consider in forensic interviews, researchers are looking for new ways to help reluctant victims of sexual abuse (SA) cooperate during the interview. Even when children disclose incidents of SA, there may be moments of reluctance during the interview. Partial disclosure may have several detrimental implications on both the child's well-being and the prosecution of the offender. Full, valid disclosure of CSA is critical in stopping SA, preventing future victimization and prosecuting the perpetrator. This study's sample is represented solely by substantiated cases with disclosure highlighting the importance of children's cooperation during SA disclosure.

For this article we have decided to use the term *children's collaboration* to encompass both *children's cooperation* and their *reluctance* to collaborate during a forensic interview. *Children's cooperation* is defined as a child's decision to readily respond without protest to the questions asked or demands made of him or her by an interviewer. It requires that the child not only understand the question, but also willingly agree to respond to it. Revealing details about incidences of SA is a personal, delicate and often embarrassing experience which makes it understandable that children express signs of reluctance during the interview process. Children's *reluctance* is hereby operationalized *as a behaviour or attitude exhibited by the child which demonstrates a refusal to respond to a question asked by the interviewer or an*

unwillingness to participate in the interview process. This definition was initially based on the work done on client resistance in the field of psychotherapy and is consistent with classical characterizations of how resistance manifests itself in therapy (e.g., Freud, 1946; Strean, 1990). The definition was modified to correspond to how children's reluctant attitudes manifest themselves in the context of forensic interviews. Some children may express a reluctant attitude directly and overtly towards the interviewer (e.g., "I do not want to talk to you, let me go see my mommy") or indirectly, by digressing when questioned (e.g., switching the topic of conversation). Even though a child's reluctance to disclose certain details regarding a traumatic event may be normal, and especially common in cases of SA, very little research has been done to study children's reluctant attitudes during forensic interviews. Because this type of attitude cannot be exclusively assigned to children, an experimental design investigating children's reluctant attitudes would be impossible to conduct.

However, Orbach, Shiloach, and Lamb's (2007) field study focused on 70 children (4 to 12 years of age; 48 girls and 22 boys) who, at first, appeared reluctant to disclose but eventually did so in the initial forensic interview. Reluctant children were less communicative than non-reluctant children throughout the entire interview. Even when the reluctant children disclosed abuse, they had a tendency to give fewer details in general and utilized more uninformative, omission responses (e.g., "don't know", "don't want to talk", "don't remember") than non-reluctant disclosers did. Moreover, Katz et al.'s (2012) study's aim was to see if differences could be detected in the nonverbal behaviours of disclosing and non-disclosing children presumed victims of SA. Their findings suggested that non-disclosers were significantly more physically restless (e.g., getting up and gazing away from the interviewer more often) than disclosers during the interview. Although Katz et al.'s results are

relevant, it is not always possible to measure nonverbal reluctant behaviours when children are unsettled and move out of the camera's range. Consequently, an innovative aim of the present study is to create diverse verbal subscales of reluctance.

Furthermore, child and SA characteristics may represent motivational and developmental factors which make some children reluctant to disclose crucial information regarding the SA (Pipe, Lamb, Orbach, & Cederborg, 2007). In order to contribute to our understanding of children's disclosure of SA, the present study will examine the impact of both child and SA characteristics on children's collaboration during disclosure in real forensic interviews. Research on the combined influence of variables such as age, child-perpetrator relationship, type and frequency of SA during children's disclosure is limited. Most studies either compared cases of disclosure to non-disclosure or focused on the impact of SA characteristics in cases of non-disclosure. Indeed, Pipe, Lamb, Orbach, Sternberg, Stewart, and Esplin (2007) examined the impact of child and SA characteristics on non-disclosure rates in children who are presumed victims of SA.

Age seems to be a good predictor of children's SA disclosure rates, as non-disclosure rates tend to decrease with age (Pipe et al., 2007) and, inversely, disclosure rates tend to increase with age (Hershkowitz, Horowitz, & Lamb, 2005). Research indicates a linear trend where preschoolers are less likely to make allegations than school-aged children and, subsequently, less likely than older children (see Gries, Goh, & Cavanaugh, 1996; Wood, McGlure, & Birch, 1996). It has long been known that younger children may misunderstand the purpose of the forensic interview or the intent of the abuse itself, and, as a result, fail to disclose information. However, Goodman-Brown, Edelstein, Goodman, Jones, and Gordon (2003) revealed the opposite pattern wherein older children may feel more responsible for the

incident, believing they could have prevented the abuse and, as a result, may try to keep the abuse a secret. In addition, pre-adolescents may be more willing to withhold information because of their increased awareness of the consequences of disclosure. Although age has a significant impact on the quantity of detail revealed by children, researchers' findings differ on the results and more comparative research according to varied age-groups is needed.

There is a strong tendency for children of all ages to have higher non-disclosure rates when the suspect is a member of the immediate family. According to Hershkowitz et al. (2005), this is even more frequent in the youngest group of children as they tend to be dependent on the abuser for survival. In extra-familial incidents Hershkowitz, Lanes, and Lamb (2007) demonstrated that older children (10-12 years of age) were more reluctant to disclose information, or delayed the disclosure of information more often than school-aged children (7 to -9 years of age). The reason given was that they were either embarrassed of not having prevented the abuse or more aware of social norms and taboos. It appears clear that no matter at what age the child is being sexually abused, his/her relationship to the perpetrator has a negative impact on SA disclosure. Furthermore, children were more likely to delay disclosure in severe cases involving intrusive sexual acts and multiple incidents committed by a familiar perpetrator as opposed to single incidents involving non-intrusive acts committed by a stranger (Hershkowitz et al., 2007).

In addition, a child's gender may be related to disclosure, with boys, in general, appearing more reluctant than girls to disclose information regarding SA (Hershkowitz et al., 2005, 2007; Ghetti & Goodman, 2001; Gries et al., 1996; Levesque, 1994). In particular, older girls (11 to 14 years of age) suspected of being victims of SA are more likely to make allegations than boys. Older boys were more unwilling than same aged girls to disclose SA

when the suspect was a parent or a parental figure. Hershkowitz, Orbach, Lamb, Sternberg, and Horowitz's (2006, 2007) study showed that girls provided more detail per response than boys. Gender differences in disclosure rates, however, are not consistent (see London, Bruck, Ceci, & Shuman, 2007). A child's age, gender and abuse characteristics (frequency, severity and child-perpetrator relationship) are variables that could potentially affect the child's collaboration during SA disclosure and, consequently, are worth investigating. To our knowledge, no studies have examined the impact of children's age-groups on children's collaboration in cases of actual SA disclosure. For this reason the first objective of this study is to determine whether, in cases of SA disclosure, a linear relationship can be established for children's reluctance and cooperation according to three age-groups: pre-schoolers, school-aged and pre-adolescents.

Finally, the way children are prompted to disclose may influence their willingness to reveal information (Gries, Goh, & Cavanaugh, 1996). As such, the interviewer's attitude is central to this study. Interviewers' support was first explored in the context of children's suggestibility in laboratory settings and conceptualized as a form of social interaction or communication that fosters a feeling of well-being in a person (Burleson, Albrecht, Goldsmith, & Sarason, 1994). Researchers first measured non-verbal expressions of supportive (e.g., open body posture, smiling etc.) and non-supportive attitudes (e.g., closed body posture, fidgeting etc.) during mock interviews. Results from these studies showed that the interviewer's support had a positive effect on the amount and accuracy of the information provided by the child being interviewed (see Carter, Bottoms, & Levine, 1996; Goodman Bottoms, Schartz-Kenny, & Rudy, 1991). Indeed, Davis and Bottoms (2002) showed that support given during mock interviews helped children resist misleading suggestions about past

events imparted by the interviewer, thereby increasing the quality of the child's testimony. More information on verbal expressions of support during real forensic interviews seemed necessary to better understand the impact of such attitudes on children's collaboration and, subsequently, on SA disclosure.

In the context of real-life forensic interviews, Hershkowitz, et al. (2006) compared 50 cases of disclosers and non-disclosers for which there was compelling evidence that the child, aged between four to 13 years, had either been physically or sexually abused. One objective of the study was to look at the influence of the interviewer's high and low support levels on disclosers and non-disclosers. Supportive comments were intended to encourage children to be informative, typically when discussing neutral topics. By contrast, unsupportive comments were intended to pressure the child to respond by challenging the information they provided or by criticising their behaviour. Higher levels of interviewer support were associated with more informative, and fewer uninformative, responses in both groups. Disclosers, as predicted, provided more detail than non-disclosers. Although reluctant children might have benefitted from getting more support, they were given less support than the group of children who made allegations. The reluctant children became less informative and increasingly more resentful in their responses. The results from this study tend to agree with those from analogue studies, indicating the positive impact of support on the quantity and quality of the details revealed by children during forensic interviews. According to Lamb, Hershkowitz, Orbach and Esplin (2008) children interviewed in a friendly and supportive environment are encouraged to provide rich and detailed information on the SA. In contrast, intimidating non-supportive interviewers can evoke denials or false disclosures (Lamb, Sternberg, Orbach, Hershkowitz, & Esplin, 1999; Poole & Lindsay, 1998).

It should be noted that most analogue studies compared supportive versus non-supportive interviewers, designating them mutually exclusive categories. In reality, however, interviewers could oscillate during the interview, at times adopting a supportive attitude and at other times a non-supportive attitude. The aim of this study is to create two non-mutually exclusive, independent verbal scales in order to code supportive and non-supportive interviewers' attitudes, not to categorize interviewers as being either supportive or non-supportive. Finally, to our knowledge, few studies have measured the impact of interviewers' supportive and non-supportive attitudes on children's collaboration during actual forensic interviews.

The focal point of the present study is to better understand children's instances of reluctance in cases of disclosure of SA and the impact of supportive and non-supportive attitudes given to them during the interview. This study seeks to determine whether child and SA characteristics, or interviewers' attitudes, are most related to children's reluctance and cooperation during forensic interviews. The first objective is to analyze the impact of different age groups on children's and interviewers' attitudes to determine if a linear trend between young, school-aged and pre-adolescents exists in regards to children's collaboration during forensic interviews. It is expected that pre-adolescents will be more cooperative than younger children and that the latter will demonstrate more reluctance to cooperate making use of tactics such as digression. To date, not enough convergent research exists to make a prediction in regards to the school-aged group. Furthermore, whether interviewers' supportive and non-supportive attitudes will change according to a child's age is also currently unknown.

The second objective is to predict the best correlates of a child's collaboration (reluctant and cooperative) during forensic interviews. It is expected that children's

characteristics (age and gender), SA characteristics (frequency, severity and child-perpetrator relationship) and interviewers' (supportive/non-supportive) attitudes will be important correlates in explaining children's attitudes. More specifically, older girls (vs. younger boys) and/or children abused once (vs. more often), less (vs. more) severely and/or those abused by someone other than an immediate family member (vs. immediate family member) are expected to cooperate more and show less reluctant attitudes, especially when interviewed in a supportive (vs. non-supportive) manner.

Methods

Participants. A total of 90 forensic interviews with children (67 girls; 23 boys) ranging from 4 to 13 years of age, with a mean age of 8.28 (*SD* = 2.57; median = 8.00) were analysed. These interviews were conducted by 19 different Quebec police-investigators (11 male and 8 female). Their mean age was 40 years (*SD*= 3.47 years), with, on average, 17 years of service (*SD*= 2.31 years) and two and a half years of experience (*SD*= 1.76 years) in sexual abuse investigations.

In order to determine if differences exist in children's and interviewers' attitudes according to a child's age, our sample was divided into three age groups: pre-schoolers (3 to 6 years of age, n= 27), school-aged (7 to 9 years of age, n = 31) and pre-adolescents (10 to 13 years of age, n = 32). No significant differences were found in the three groups regarding children's gender (X^2 (2, N = 90) = .45, p =.80), frequency of abuse (X^2 (2, N = 90) = 3.53, p = .17) and type of abuse (X^2 (2, N = 90) = 4.66, p = .10). However, a significant difference (small effect size Cramer's V = .05) was found when comparing immediate family and other child-perpetrator relationships (X^2 (2, N=90) = 6.01, p = .05). In this sample young children were less likely than school-aged and pre-adolescents to be sexually abused by someone other

than an immediate family member. The correlations between our variables of interest and child-perpetrator relationship were all less than .30, indicating there is no need to use this as a co-variable (Frigon & Laurencelle, 1993).

Procedure. All of the chosen cases were corroborated by police officers after their investigation. Allegations consisted of: 53% severe cases of sexual abuse (e.g., oral or genital penetration) and 47% less severe cases (e.g., 3% exhibitionism, 7% sexual touch over clothing and 37% underneath clothing). Most suspects (94%) were known to the child. In fact, 54% of alleged perpetrators were members of the immediate family and 46% were members of the extended family or acquaintances. For the purpose of this study, the child-perpetrator relationship was divided into two groups: immediate family (including biological parents, step-parents, brothers and sisters) and others including the extended family (i.e., grand-parents, uncles/aunts, cousins), acquaintances (i.e., friends of the family or someone the child knows), and strangers). Most of the cases (74%) refer to multiple incidents of abuse (i.e., more than one). The research was approved by the Ethics Board of the *Université de Montréal*. Police officers signed informed consent documents and measures were taken to conceal the identity of the victims by using audiotape instead of videotape and by omitting names and descriptive information (e.g. names, address etc.) from the transcripts. All interviews were transcribed from audio recordings and checked to ensure their comprehensiveness and accuracy.

Scales. For the purpose of this study, new two-dimensional scales were created: (1) the *Children's Collaboration Scale*, which measures a child's reluctant and cooperative attitudes (see Appendix B) and (2) the *Interviewers' Supportiveness Sale*, which measures interviewer's supportive and non-supportive attitudes (see Appendix C). The elaboration of these scales

was based on existing valid scales in combination with the examination of several audio taped interviews of CSA disclosures. The first scale entitled *Children's Collaboration Scale* (CCS) was inspired by research conducted in the forensic realm (Hershkowitz et al., 2006; Lamb et al., 2008) as well as the *Client Resistance Code* (CRC) developed by Chamberlain, Reid, Patterson, Kavanaugh, & Forgatch (1984) for psychotherapeutic purposes. Although the CRC was used to expand the possible behaviour of reluctant children, not all 11-categories of this mutually-exclusive and exhaustive instrument were appropriate and adaptable to the forensic context. The *CCS* helps quantify the amount of reluctance expressed by children being interviewed as more than one type of reluctance could have been assigned to the child's response. *The Child's Reluctance Attitudes* are the following*:*

1. **Refusing to collaborate** directly or indirectly.
2. **Refusing to elaborate** by providing unclear, inaudible or unfinished responses.
3. **Digressing** from the question.
4. **Confrontational** by justifying his/her refusal to talk or by being impolite.
5. **Other by** showing anxiety, shyness, confusion or minimizing the incident.

The addition of the five different types of reluctant attitudes comprised the total amount of reluctance expressed by the child for the entire interview. The higher the score, the more reluctant the child was to disclose personal information.

The *Children's Cooperative or non-resistant attitude* was coded when the child responded without a fuss to the questions or demands requested of him. Each time the child answered during the interview his response was coded as being either reluctant and/or cooperative. The higher the cooperative score, the more the child was collaborating by responding to the questions during the forensic interview.

The *Interviewers' Supportiveness Scale* (ISS) was inspired by Hershkowitz and colleagues' (2006) supportive classification and by the *Therapist Behavior Code* (*TBC*; Forgatch & Chamberlain, 1982). The *Interviewer's Supportive Attitudes* are the following:

1. **Encouragements** using compliments and positive reinforcements.
2. **Respecting the child** by using his/her name and following his/her rhythm.
3. **Reassuring** by normalizing and generalizing incidents.
4. **Other** by self-disclosing and small talk.

The *Interviewer's Non-Supportive Attitudes* are the following:

1. **Bargaining** by using either positive or negative consequences.
2. **Controlling** the interview by intimidating, speculating and interrupting the child.
3. **Doubting** the child's answers and being hesitant, confrontational or persistent.
4. **Other** by being impatient and minimizing what the child is saying.

In summary, the frequency of the above-listed items, coded for sequentially in the interviews, were added up throughout the interviews for each of the 90 children. The addition of these different types of supportive and non-supportive items represented the total amount of supportive and non-supportive attitudes expressed by the interviewer. Coders were trained on an independent set of transcripts until they agreed at least 90% of the time regarding the interviewers' and children's attitudes. About 33% of the interviews were coded by both coders to ensure satisfactory inter-rater reliability. The inter-rater reliability regarding the *Interviewers' Supportiveness Scale* was in substantial agreement (kappa = .70) and the *Children's Collaboration Scale* was in moderate agreement (kappa = .58).

Data Transformation. Most variables measuring reluctance, cooperation, support and non-support were not normally distributed and were, transformed using Logarithmic computations.

Results

Preliminary Analysis. The frequency of the dependant variables (non-transformed scores) which included children's reluctance and cooperation, as well as interviewers' supportive and non-supportive attitudes, are reported in Table 1. As expected, *children's cooperation* is the most prevalent variable as the entire sample was represented by children who disclosed at least some content regarding the SA. Interestingly, even though children disclosed information regarding SA, they seemed to, at times, be reluctant to collaborate. Among reluctant attitudes, children tended to more frequently *refuse to elaborate* on the subject, followed by those *digressing* from the questions. Also, all interviewers in this sample used supportive attitudes at some point during the interview. *Respecting the child* was most frequently utilised, followed by the use of *reassurance* and *encouragements*. Non-supportive attitudes appeared seldom but the most common types used were those of *doubting* and *controlling* the child.

Impact of children's age. Table 2 shows the correlations between a child's age and the dependant variables (using transformed and normalized scores). At a univariate level, the child's age, their collaboration, as well as the interviewer's attitude have significantly small (r = -.21) to large (r = -.51) Pearson's correlation coefficients, with no case of multi-colinearity. As expected, the older the child the more they cooperated and, conversely, the younger the child the more reluctant they were to cooperate. More specifically, younger children tended to refuse to cooperate and digressed more often during forensic interviews. In addition, interviewer's attitudes correlated significantly and inversely with the child's age. Interviewers' tended to express more supportive (i.e. use more reassurance and being

respectful) and non-supportive attitudes (i.e. attempting to bargain and control the interview) with younger children.

When children were divided into three groups according to their age, a MANOVA revealed no significant differences between young, school-aged, and pre-adolescents on the combined dependent variables for interviewers' attitude, whether supportive or non-supportive (F (4, 85) = 1.03, p = .10; Wilk's Lambda = .91; partial eta squared = .04). In other words, the interviewer's attitude did not change significantly according to the child's age group. The MANOVA did, however, reveal a significant difference between young, school-aged, and pre-adolescents on the combined dependent variables for children's reluctance (F (4, 85) = 6.38, p < .001; Wilk's Lambda = .76; partial eta squared = .13). Post-hoc analysis revealed that, younger children were generally more reluctant (partial eta squared = .08) and tended to cooperate significantly less than pre-adolescents (partial eta squared = .16; see Table 2). Furthermore, another MANOVA revealed significant differences in the subscales of children's reluctance (F (10,166) = 4.61, p < .001; Wilk's Lambda = .61; partial eta squared = .22). Post-hoc analysis indicated that younger children tended to refuse to collaborate, directly or indirectly, more often than pre-adolescents (partial eta squared =.14). They also digressed from the questions more often than the school-aged children who, in turn, digressed more often when compared with the pre-adolescents (partial eta squared =.28; see Table 2).

Predictors of children's collaboration. Two hierarchical multiple regression analyses were conducted in order to forecast which of the five variables including: children's age and gender, child-perpetrator relationship, frequency and severity of the SA, at step 1, best explained children's cooperation and reluctance to do so during forensic interviews. At step 2, interviewers' attitudes were introduced to predict children's collaboration. If any of these

variables were significant at step 2, standard multiple regressions were conducted to determine which sub-scales accounted for this result.

Predictors of Children's Cooperation. At step 1, four out of the five variables, namely the frequency of the abuse (β = .32), the child's age (β = .29), child-perpetrator relationship (β = .25) and the child's gender (β = -.20), together explained 28% of the variance in a child's cooperation (F (5, 84) = 7.78, $p < .001$). After controlling for those variables and introducing the interviewer's supportive and non-supportive attitude at step 2, the total variance explained by the model increased to 48%, (F (7, 82) = 12.67, $p < .001$). Hence, the interviewer's support (β = .44) explained an additional 20% of the variance in the child's cooperation (F change (2, 82) = 17.35, $p < .001$). In the final model, the interviewer's support recorded a higher beta value (β = .44) than the child's age (β = .40), the frequency of the abuse (β = .34), the child-perpetrator relationship (β = .33), and the child's gender (β = -.19). To determine which subscales contributed to that result, a standard multiple regression revealed that, interviewers who use supportive encouragements (β = .31), predicted 11% of the variance in the child's cooperation (F (4, 85) = 3.73, $p < .01$).

Predictors of Children's Reluctance. At step 1, among the five variables introduced, only the child's age (β = -.34) and the severity of the SA (β = .22) accounted for 17% of the variance in the child's reluctance to cooperate (F (5, 84) = 4.67, $p < .001$). After controlling for those variables and introducing the interviewer's supportive and non-supportive attitude at step 2, the total variance explained by the model was 45%, (F (7, 82) = 11.25, $p < .001$). The interviewer's supportive attitude (β = .49) contributed significantly to an additional 27% of the variance in the child's reluctance, (F change (2, 82) = 21.89, $p < .001$). In the final model, the interviewer's support recorded a higher beta value (β = .49) than the child's age (β = -.21) and

the effect of the severity of the SA was not significant. More specifically, among the subscales, the standard multiple regression showed that 46% of the variance in the child's reluctance to cooperate is explained by the interviewer's supportive attitude, such as respecting the child ($\beta = .48$) and being reassuring ($\beta = .27$; F (4, 85) = 19.99, $p < .001$).

Discussion

The goal of this study was to gain insight on the impact of child and abuse characteristics as well as interviewers' attitudes on children's collaboration during SA disclosure.

Impact of children's age. The first objective was to determine whether interviewers and children behaved differently according to three age-groups during forensic interviews. As expected, a child's age plays a significant role in children's collaboration during SA disclosure. The younger children digressed from the questions more often than the school-aged children who, in turn, digressed significantly more than the pre-adolescents. Despite clear instructions from adults, both in laboratory (Bjorklund & Harnishfeger, 1995) and in real life settings (e.g., seen frequently in classroom), a young child's performance often suffers because their attention repeatedly shifts to information that seems irrelevant to adults (Poole & Lamb, 1998). One explanation for this is that the pre-frontal cortex, in charge of inhibiting unproductive behaviour, is not fully developed in children. It undergoes a developmental spurt after birth and between approximately 4 and 7 years of age, followed by a gradual growth into young adulthood (see Bjorklund & Harnishfeger, 1995, for a review). In addition, younger children have more difficulty than older children in recognizing what topic is under discussion and to remain on topic (Poole & Lamb, 1998). This is the first study, to our knowledge, that shows a linear trend according to age-group, in regards to a child's tendency to digress when

questioned during forensic interviews. Future studies may want to explore whether difficult question (e.g., including temporal concepts) lead to more digression from the questions in younger children.

Moreover, not surprisingly, older children cooperated significantly more and expressed considerably less reluctance to collaborate than younger children during forensic interviews. These differences could be explained by the fact that older children tend to possess greater knowledge and vocabulary to understand questions and express what took place in detail (Lamb, Sternberg, & Esplin, 2000; Lamb, Sternberg, Orbach, Esplin, Stewart, & Mitchell, 2003; Sternberg, Lamb, Davies, & Westcott, 2001), whereas preschoolers may lack the cognitive, communicative and emotional ability to understand and describe abuse experiences comprehensively (Lamb et al., 2008). Similar results were found by Hershkowitz, Horowtiz, and Lamb (2007) but with non-disclosers. This is the first study, to our knowledge, that attempts to show that, even in cases of SA disclosure, overall, pre-schoolers exhibit more signs of reluctance than pre-adolescents to collaborate during forensic interviews. Consequently, it seems important for interviewers to expect more instances of reluctance in younger children and, accordingly, develop new strategies to cope with this reality.

In the preliminary analysis, interviewers tended to be more supportive towards younger children, giving them more helpful instructions and showing respect by using their name and following their rhythm. Nevertheless, interviewers also tended to display more non-supportive attitudes such as bargaining and controlling the interview when dealing with the younger group of children. Although interviewers' attitudes varied at the univariate level according to a child's age, further analysis at a multivariate level did not show such a difference. Hence, interviewers seemed to behave similarly with children regardless of their

age, even though younger children were generally more reluctant and cooperated significantly less than older children. However, it is possible that, with a larger sample, interviewers' attitudes would vary according to a child's age. Therefore, more research appears necessary to better understand this result.

In conclusion, it is important for interviewers to know that younger children tend to digress more often than school-aged children, who in turn digress more than their pre-adolescent counterparts. This reflects normal developmental differences in a variety of processes, including attention, forgetting, and their understanding of conventional rules (Poole & Lamb, 1998). Interviewers should learn, not only to modify their techniques, but to adapt their attitude and expectations, especially when interviewing younger reluctant children.

Predictors of children's collaboration. The second objective of this study focused on determining whether interviewers' attitudes, child or sexual abuse characteristics would be best in predicting a child's collaboration (cooperation or reluctance to do so) during forensic interviews.

Predictors of Children's Cooperation. The best predictor of a child's cooperation was the interviewer's support. Indeed, it surpassed the unique contribution of all the other variables such as a child's age and gender, frequency of the abuse and child-perpetrator relationship. More specifically, in our study supportive encouragement correlated positively with a child's cooperation during the interview. According to Hershkowitz, Orbach, Lamb, Sternberg, and Horowitz (2006), supportive interviewers tend to give the child reassurance and time to respond to the questions being asked. As indicated in their study, more supportive comments were found in children who disclosed SA when compared to those who denied it. Therefore, different types of support facilitate a child's cooperation and may subsequently

lead to more detailed disclosure.

The second best predictor of children's cooperation was the child's age. This indicates, as mentioned previously, that when children decide to disclose information, older children tend to comprehend the questions and willingly respond to them, better than younger children.

The third best predictor of the children's cooperation was frequency of the abuse, demonstrating that when repeatedly abused, children decide to disclose SA incidents and they tend to cooperate more than those who were only abused once. This result was unexpected as Hershkowitz, Lanes, and Lamb's (2007) study found that children were more likely to delay disclosure (ranging from one week to two years) in more severe abuse and multiple incidents, as opposed to single incidents involving non-intrusive acts. Their results also indicate that it was more difficult for children, severely abused by a familiar perpetrator, on multiple occasions to confess spontaneously than it was for children abused only once by a complete stranger (e.g., cases of exhibitionism). A plausible explanation is that initial disclosure is delayed and spontaneous confessions are more rarely found in children abused on multiple occasions. However, once a child decides to disclose SA and has been abused on more than one occasion, they possess more information, thereby increasing their motivation to inform the investigator in order to stop repetitive abuse. In addition, they may feel more competent to respond to the interviewer's questions as they have more information to reveal.

Also, as predicted, children who were abused by someone other than an immediate family member were more cooperative during the interview. This result is consistent with findings on disclosers and non-disclosers (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003; Hershkowitz et al., 2007) and suggests that, if the perpetrator is a member of

the family, even if the child chooses to disclose, he/she may fear negative consequences (e.g., break-up of the family unit), which may subsequently impede his/her degree of cooperation.

Lastly, as expected, girls in our sample cooperated better than boys during forensic interviews. Researchers showed that, in general, girls are more talkative and tend to respond to questions more readily than boys (Hershkowitz et al., 2005, 2007; Ghetti & Goodman, 2001; Gries et al., 1996; Levesque, 1994). According to Lamb and Garretson's (2003) forensic interviews from Britain (n = 118), Israel (n = 327), and the United States (n = 227) investigating abuse cases with disclosure, girls, on average, provide more detail per response than boys.

Predictors of Children's Reluctance. In terms of children's reluctance to collaborate during forensic interviews, as previously mentioned, younger victims tended to be more reluctant during the forensic interview. Moreover, more severely abused children (e.g., penetration) as compared to less severe cases (e.g., touch over the clothing) had a tendency to be more reluctant to reveal information regarding SA. It was expected that more severely abused children would have a harder time cooperating, elaborating and concentrating on the subject. Similarly, Leander's (2010) results showed that a child subjected to severe abuse, such as intercourse, was more likely to deny the abuse than a child in the "touching" category; even though there was evidence proving SA had occurred. However, when an interviewer's attitude is added to the equation, the impact of the severity of the SA tends to dissipate. Although it may be normal for severely abused children to show reluctance to reveal information on a delicate and often embarrassing subject to a complete stranger, an interviewer's supportive attitude may inhibit a child's reluctance or in other theoretical words his/her *psychological reactance* (see Brehm, 1966; Brehm and Brehm, 1981).

The theory of psychological reactance states that a child's perception of threats to his freedom or control may induce his reluctance to collaborate. Hence, we can assume that, in severe cases of SA, when children are interviewed in a friendly and supportive context, they are encouraged to describe their experiences and may feel "comfortable enough" to provide information regarding the severe incident. This demonstrates the positive impact an interviewer's supportive attitude can have on a child's willingness to collaborate during a forensic interview, especially in severe cases of SA.

In addition, an interviewer's support has a greater impact on a child's reluctance to collaborate than does the child's age. In Hershkowitz et al., (2006) reluctant children obtained less support than the group of children who made allegations. In this study, however, interviewers may have consciously or unconsciously noticed the child's reluctance and tried to adapt their attitude by reassuring the child (e.g., normalizing and generalizing the incident) and by respecting the child (e.g., using his name, following his pace, and being empathetic). This result corresponds with Hershkowitz et al., (2008) who showed that an interviewer's support demonstrated predictive power for less talkative children ($R^2 = .17$), who were possibly in need of reassurance. This seems to indicate that interviewers may try to offer more support to reluctant children. The positive correlations between disclosers and cooperation, as well as non-disclosers and those who show reluctance, could guide interviewers to provide additional support to reluctant children before getting into substantive issues. Interviewers may also consider halting the interview and conducting it at a later date (Hershkowitz et al., 2006). The results of this study, therefore, concur with previous research which recommends that more support should be offered to reluctant children (Hershkowitz et al., 2006, 2007; Carter, Bottoms, & Levine, 1996; Goodman Bottoms, Schartz-Kenny, & Rudy 1991; Imhoff

& Baker-Ward, 1999).

According to Lamb, Hershkowitz, Orbach and Esplin (2008) interviewers tend to respond to a child's reluctance in a counter-productive way, placing pressure on the child rather than offering him/her more support. Contrary to these expectations, in this study, an interviewer's non-supportive attitude did not predict a child's reluctance to collaborate. It is encouraging to see that interviewers' non-supportive attitudes did not correlate with children's reluctance to collaborate during the interview. More research is needed to explore interview dynamics and the concordance between the interviewer's attitude and the child's collaboration at different phases of the interview. Furthermore, besides the impact of the child's age, which is maintained after the introduction of the interviewer's support, none of the SA characteristics predict a child's reluctant attitude during forensic interviews. Indeed, our results follow Leander's (2010) findings that the child-perpetrator's relationship affected neither avoidance nor denial of sexual information. These results do not, however, replicate the Hershkowitz, Orbach, Lamb, and Horowitz (2006, 2007) study which showed that children who were suspected victims of parental abuse provided proportionally fewer informative responses and more uninformative responses (e.g., *resistance*) than children who were suspected victims of non-parental perpetrators. A plausible explanation is that, in our study, all children disclosed therefore we are not comparing cases of disclosure to non-disclosure. Hence, once children decide to disclose incident(s) of SA, they do not show more reluctance to talk about an immediate family member versus someone other than an immediate member of their family. Moreover, an "immediate family member" is not necessarily analogous to a "parent", who usually represents the primary caregiver.

Finally, to our surprise, SA frequency did not have a significant impact on a child's

reluctance to collaborate. Leander (2010) showed that children abused for a period of six months or more were significantly more likely to deny that sexual acts had occurred than were children abused on a single or a few occasions. However, they were not more likely to avoid talking about sexual information during the interview.

With many previous studies having compared cases of disclosure to non-disclosure, this study sets itself apart by bringing an innovative viewpoint of a child's collaboration during forensic interviews. The idea of a child expressing some type of "verbal reluctance" during SA disclosure is very probable. Interestingly, once a child decides to collaborate, it seems that the child and SA characteristics have less of an impact on their cooperation and reluctance than the interviewer's supportive attitude. Therefore, in cases of SA disclosure, the interviewer's support seems to be the best predictor of the child's collaboration.

Some limitations can be identified in this study. First, although children in the chosen sample represent the majority of children who disclose, they were not classified as truly reluctant as they all ended up disclosing some information regarding SA. Second, the sample represented young children under the age of 14 years. A comparison with a group of adolescents could yield additional results in regards to their collaboration and interviewer's attitudes. Third, more comprehensive scales could be used which integrate both verbal and non-verbal cues of children's reluctance and cooperation as well as interviewers' supportive and non-supportive attitudes.

Conclusion. In sum, what this study brings to light is that once children decide to disclose information, older girls (vs. younger boys), children who have been more frequently abused (vs. one-time incident) as well as those abused by someone other than a family member (vs. a family member), will be more talkative and, in general cooperate better during

the interview. Moreover, as an interviewer's attitude plays a crucial role in a child's willingness to collaborate during forensic interviews, more research on child-interviewer dynamics is needed. Finally, a child's age appears to be an important factor and needs to be taken into account during forensic interviews. Consequently, special forensic techniques and attitudes favouring a child's cooperation should be developed and adapted to the child's age in order to encourage especially young, reluctant victims to disclose incidence(s) of SA when they have truthfully occurred.

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Table 1

Frequencies of Children's and Interviewers' Attitudes as well as Children's Age Correlates

	M	*SD*	*Range*	Age
Cooperative Child	261.64	*125.69*	*69-857*	.41**
Reluctant Child	11.17	*16.64*	*0-106*	-.36**
Refuses to collaborate	1.99	*4.58*	*0-27*	-.43**
Refuses to elaborate	4.09	*6.82*	*0-42*	-.12
Digressing	2.20	*6.89*	*0-53*	-.51**
Confrontational	.72	*1.81*	*0-10*	-.16
Other	2.17	*3.45*	*0-18*	*-.07*
Supportive Interviewer	33.71	*21.51*	*7-116*	-.24*
Encouraging	9.03	*6.94*	*0-36*	.20
Respectful	14.08	*10.79*	*1-56*	-.21*
Reassuring	9.21	*6.45*	*2-34*	-.24*
Other	1.39	*1.95*	*0-11*	-.09
Non-Supportive Interviewer	8.29	*8.26*	*0-37*	-.20
Bargaining	.34	*.89*	*0-4*	-.30**
Controlling	3.24	*4.36*	*0-23*	-.24*
Doubting	3.83	*4.30*	*0-27*	.01
Other	1.08	*1.83*	*0-9*	-.07

**p < .01. *p < .05. (2-tailed).

Table 2

Means and (standard deviations) of Children's and Interviewers' Attitudes as a Function of Children's Age-Groups

	Pre-schoolers n = 27(a)	School-aged n = 31(b)	Pre-adolescents n = 32(c)	F (2,87)$_{difference}$	
Cooperative Child	230.70 (*84.14*)	264.84 (*144.74*)	284.66 (*133.23*)	8.53***	*a<c*
Reluctant Child	14.65 (*15.44*)	12.52 (*21.69*)	6.66 (*10.26*)	3.95*	*a<c*
Refuses to collaborate	2.77 (*4.08*)	2.63 (*6.44*)	.69 (1.86)	7.31***	*a>c*
Refuses to elaborate	4.59 (*9.10*)	4.84 (*5.56*)	2.94 (*5.66*)	.17	
Digressing	3.32 (*4.63*)	2.37 (*9.96)*	.97 (4.42)	6.70***	*a>b >c*
Confrontational	.89 (*1.91*)	1.10 (*2.41*)	.22 (*.49*)	.89	
Other	2.04 (*2.61*)	2.61 (*3.86*)	1.84 (*3.71*)	.07	
Interviewer Support	38.37 (*26.78*)	36.97 (*20.54*)	26.63 (*15.39*)	2.14	
Interviewer Non-Support	7.85 (*7.21*)	9.45 (*10.15*)	7.53 (*7.10*)	2.63	

***$p < .001$. **$p < .01$. *$p < .05$.

Discussion

Since cases of *Child Sexual Abuse* (CSA) often lack physical and medical evidence, acquiring thorough victim's disclosure is critical in the pursuit of justice. However, a CSA disclosure is often an extremely sensitive and difficult undertaking. Even in cases in which children disclose some information regarding *Sexual Abuse* (SA), many are reluctant to reveal all the relevant details that may be necessary in order for the case to be solved. It is not surprising that victims of CSA express some signs of reluctance talking about a personal and delicate subject in front of adult strangers. This can sometimes result in less credible victims and consequently have an impact on the child's safety and well-being.

Hence, to shed light on children's collaboration during CSA interviews, the sample we chose was represented by only corroborated cases of disclosers. Children were, therefore, all *cooperative* and most but not all children, expressed *reluctant* attitudes (e.g., digressing from the question) at some point or another during the interview. All the interviewers (whether adhering or not to the NICHD Protocol) used some type of supportive attitude (e.g., respecting the child, encouragements) and few non-supportive attitudes (e.g., doubting and controlling the child), were used by the selected interviewer's during the forensic interviews.

The main goal of this thesis was to enhance our theoretical understanding of the impact of children's and interviewers' attitudes during forensic interviews (comparing Protocol and non-Protocol), as well as to determine the variable(s) that have the greatest influence on facilitating a victim's collaboration (i.e. reluctance, cooperation and quantity of details disclosed). As part of this effort, the research team participated in a field study which has created innovative verbal scales that may improve the quality of CSA disclosure, specifically

ways in which interviewers' attitudes predict a child's collaboration during forensic interviews. To discuss the results of this thesis, we have regrouped them into three categories: (1) Impact of the NICHD Protocol; (2) Impact of children's collaboration; (3) Impact of children's age and (4) Impact of interviewer's attitudes. Subsequently, we will present the main strengths and limitations of the thesis which may lead to future research, the practical implications and a more general conclusion of the findings.

(1) Impact of the NICHD Protocol. As expected, interviewers who properly use the NICHD Protocol will obtain significantly more forensically relevant details from open-ended utterances than interviewers who do not apply such a Protocol (Cyr & Lamb, 2009; Lamb, Hershkowitz, Orbach, & Esplin, 2008). Due to research on interviewer's support, it was expected that interviewers adhering to the NICHD Protocol would be more supportive in general than those not adhering to the Protocol (Lamb et al., 2008). The results of this thesis indicate that, in cases of CSA disclosure and more specifically in the substantive part of the interview, no differences regarding an interviewer's supportiveness were detected between NICHD Protocol and Non-Protocol interviews. As the same interviewers were used for the Protocol and the non-Protocol interviews, the fact that no differences were found could indicate that the NICHD Protocol addresses techniques but does not focus on interviewer's attitudes and/or that the attitude is more ingrained in the interviewer (i.e., tone of voice, body language, personality etc.) Those hypotheses could be tested in future research.

Furthermore, no differences were detected in children's collaboration (i.e., cooperative or reluctant attitudes). While the NICHD Protocol is a promising tool which has improved both the quantity and the quality of detail disclosed by children during forensic interviews, it should be considered as an evolving device where new, empirically evaluated findings could be incorporated over time (Sternberg, Lamb, Esplin, Orbach, and Hershkowitz, 2002). As such, more research is needed to tailor the Protocol to young, and especially reluctant, victims or witnesses of CSA.

(2) Impact of children's collaboration. Children's collaboration was measured in two different ways: the quantity of details revealed by the child and his or her attitudes (i.e. reluctant and cooperative) expressed during the forensic interview. Unexpectedly, a *child's cooperation* did not have an impact on the quantity of details revealed. Hence, in cases of CSA disclosure children may participate and respond to questions without necessarily providing more relevant details. Nevertheless, as expected, our results demonstrate that in cases of disclosure *older (vs. younger)* children, those *more frequently* abused *(vs. one-incident)* and those abused by a person *other than a family member (vs. family member)* ***cooperate better***. These results are in concordance with the studies of Goodman-Brown, Edelstein, Goodman, Jones, and Gordon (2003), Hershkowitz et al. (2007) and Lamb et al. (2008). Indeed, older children are more independent in general and may be more willing to cooperate to stop or prevent recurrent abuse. Younger victims tend to, not only be developmentally, but also emotionally, more dependent on adults and have fewer sources of support outside of family than older children do. In addition, as expected, our results demonstrate that in cases of CSA disclosure girls cooperate better

than boys. This is in agreement with the studies from Ghetti and Goodman (2001), Gries et al. (1996), Hershkowitz, Orbach, Lamb, and Horowitz (2006), Lamb and Garretson (2003) as well as Levesque (1994).

Also, as we expected, the more the child *refuses to collaborate* overtly or covertly, the fewer details he/she tends to reveal. Our results concord with Orbach, Shiloach, and Lamb (2007) who found that even when reluctant children do disclose abuse they have a tendency to give fewer details regarding the abuse. As such researchers and practitioners alike should view children's reluctance to reveal details regarding the SA incident(s) as a normal defence mechanism (Bischoff & Terence, 1995). In addition, Lamb, Sternberg, and Esplin (1995) noted that children have a tendency to be reticent with unfamiliar adults, making them, at times, uncommunicative witnesses. Research is therefore needed to better equip practitioners to identify and deal with overt and covert episodes of children's reluctance during forensic interviews.

(3) Impact of children's age. Moreover, a child's age plays a significant role in predicting their reluctance to collaborate and, subsequently, the quantity of detail they are willing to reveal concerning the SA during the interview. *Pre-schoolers* are more reluctant to collaborate than *pre-adolescents*, the latter being more cooperative in general throughout the interview. These results are in accordance with previous research which indicates that older children possess more advanced vocabulary to express details on SA incident(s) and to understand the purpose of the interview or the questions being asked of them (Lamb, Sternberg, & Esplin, 2000; Lamb et al., 2003; Sternberg, Lamb, Davies & Westcott, 2001).

On the other hand, young children are accustomed to being questioned and tested by adults whom they believe know more about the subject matter than they do not, and are rarely the sole source of information (Ceci & Bruck, 1993; Yuille, Marxsen, & Cooper, 1999). Younger children may, therefore, appear reluctant and refrain unknowingly from disclosing sufficient detail.

Furthermore, the result of this doctoral thesis is the first to show that a child's reluctant attitude (i.e. digression) during actual forensic interviews varies significantly, and in a linear fashion, according to children's age-group. In essence, *pre-schoolers* tend to *digress from the subject* significantly more often than *middle-school-aged* children who, in turn, avoid staying on the topic more often than *pre-adolescents*. Understanding the linear pattern between a child's age and his/her tendency to digress from the question may help both researchers and practitioners working in the forensic field recognize the importance of developing new strategies to deal with young children's tendency to digress from the questions.

Developmental differences in children are normal and the prefrontal cortex in charge of inhibiting impulsive behaviours is not fully developed until adulthood (Bjorklund & Harnishfeger, 1995). As a result, younger children are more prone to exhibit attention and behavioural difficulties. Moreover, it is harder for them to remain on the topic (Poole & Lamb, 1998). It would be interesting to see if interviewers' more "difficult" questions (e.g., on temporal cues) lead to more digression in younger children. Hence, more research is needed to detect when younger victims (vs. their older counterparts) are digressing from

the question during investigative interviews. Moreover, expecting such an attitude may help interviewers' learn to re-direct those younger children in a supportive way with less frustration. Besides children's developmental differences, another theory could help us understand why younger children appear more reluctant to collaborate and why they have a tendency to reveal less details.

The theory of *psychological reactance* (see Brehm, 1966; Brehm and Brehm, 1981), has received considerable attention within the field of mental health and reactance has been shown to play a useful role in dealing with client resistance and boosting the efficacy of psychotherapy (see Horvath and Goheen, 1990; Dowd, 1990, 1993; Carver, 1991). However, the concept of *reactance* has not been similarly received or widely applied in the forensic field. Even a cursory reading of the Brehms' work reveals its potential for enhancing the understanding of the phenomenon of a child's "non-compliance" or "non-disclosure" as referred to in the forensic field. A wide range of personal events and social influences inherent to CSA, and the manner in which forensic interviews are conducted (i.e. child meets an investigator and has this one-time opportunity to reveal as much information as possible on a delicate and often embarrassing subject) may be capable of triggering psychological reactance in especially young victims of SA. Indeed, even a young child's perception of threats to his/her freedom may induce his/her reluctance to collaborate which may lead to partial disclosure or even non-disclosure during forensic interviews. The theory of psychological reactance may afford professionals new opportunities for improving children's collaboration (i.e. identify and reduce children's reluctant attitudes), and promote "detailed disclosure" of SA incidents during forensic

interviews. More specifically, researchers need to establish new ways to question and re-direct especially young victims in need of constant re-focusing. Such knowledge may encourage interviewers to re-direct those children in a supportive manner instead of trying to desperately control the interview in a non-supportive and antagonistic fashion. Hence, another objective of this thesis was to explore the impact of an interviewer's attitude on the child's collaboration.

(4) Impact of interviewers' attitudes. Imhoff and Baker-Ward (1999) hypothesised that an interviewer's non-supportive attitude would more negatively impact a child's statement validity than an interviewer's support would really be of benefit. Although we did not measure children's suggestibility, the idea of investigating the importance of both the interviewers' supportive and non-supportive attitudes in real forensic contexts was of key importance to this doctoral dissertation. The results from our research illustrate that, in actual forensic interviews, both interviewer's support and non-support are important and play different roles. *Support* given by an investigator during a CSA interview is the best predictor of a child's collaboration and *Non-support* correlates negatively with the quantity of details revealed by the child. Some researchers suggest that when rapport is difficult to establish and the child remains reluctant to cooperate, an interviewer could work on increasing support as it has previously shown to correlate positively with the amount of information provided by children during interviews (Carter, Bottoms, & Levine, 1996; Davis & Bottoms, 2002).

Testing this premise was at the heart of this thesis as both researchers and practitioners are currently seeking new ways to improve CSA disclosure in young reluctant victims. The results of this doctoral thesis indicate that an interviewer's supportive attitude, more specifically the *use of encouragement*, correlate significantly with children's cooperation during the interview process. However, the resulting cooperation does not necessarily increase the revelation of forensically relevant details. Moreover, an essential question of causality remains unanswered, "*do supportive interviewers facilitate children's cooperation or does children's cooperation encourages interviewers to behave more supportively?"* According to Hershkowitz, Orbach, Lamb, Sternberg, and Horowitz, (2006) supportive interviewers tend to provide the child reassurance to respond to the best of their abilities to the questions. Although cooperative children do not necessarily give more forensically relevant details, support may still facilitate a child's cooperation and subsequently result in higher rates of SA disclosure. This hypothesis is in line with Hershkowitz et al.'s (2006) results which showed that more supportive comments from interviewers were found in children who disclosed SA when compared to those who denied it. Furthermore, the results from this dissertation show that in cases of CSA disclosure, an interviewer's support (i.e., using compliments, positive reinforcements) is actually a better predictor of children's cooperation than a child's age and gender, the frequency of the abuse and the child-perpetrator relationship. Although the causal relationship between interviewers' support and children's cooperation needs to be determined in future research, we believe that interviewers may adapt their attitudes according to the child's needs.

We deduct that interviewers seem to, indeed, provide more *reassurance* and show the child significantly more *respect* (i.e. using his/her name and listening without interruption) when the child is reluctant to talk (as it seems less plausible that those supportive attitudes would lead a child to become more reluctant to talk). Furthermore, while interviewers can't erase the complete impact and the degree of severity regarding the SA incident, they can certainly work on improving a supportive demeanour which, in turn, will create an environment in which the child feels more comfortable discussing the incident. It is encouraging to know that the impact of the SA severity disappears when support is added to the equation. This means that when interviewers are able to reassure and respect the child, the severity of the SA seems to lose its impact making children not necessarily more reluctant to talk about the sometimes traumatic incident. To our knowledge, this is the first study to show such a result. More research is, thus, necessary to affirm this key finding.

In addition, it is hard to predict whether an interviewer's non-support makes children reveal less details or, inversely, the fact that children do not provide much details, causes interviewers' to become more *controlling* (i.e., interrupting the child) or more *doubtful of the children's answers* (i.e., persistent in re-asking similar questions). We hypothesise that a lack of details revealed during the interview may potentially cause interviewers to adopt more non-supportive attitudes. In any case, more research is needed to help practitioners identify and deal with non-supportive attitudes during forensic interviews, especially as this concept associates negatively with the quantity of details revealed by victims of CSA and has not yet been thoroughly examined.

In sum, we believe that the results from our research are insightful and offer guidance to researchers, as well as to practitioners who interview alleged victims of CSA. However, strengths and weaknesses found in this doctoral thesis need to be discussed as they could potentially guide future researchers to further elaborate theoretical understanding and offer practical guidelines.

STRENGHTS, LIMITATIONS & FUTURE RESEARCH

The results from this thesis are extracted from a field study using true cases of CSA which has higher external, ecological validity than analogue studies and can therefore be interpreted and generalized to a wider range of sexually abused children between the ages of 4 and 13. However, a major limitation is the non-experimental design of this thesis, which does not allow causal explanations. Hence, we are still unsure whether reluctant children who disclose fewer details lead to non-supportive interviewers or, conversely, whether non-supportive interviewers lead to children's reluctance to disclose details. Is it perhaps a mutually-induced influence? This important and causal type of question could be answered in both analogue and field settings by using sequential analysis (e.g., Markov's chain). Field studies are typically non-experimental and the absence of control over potentially important factors (i.e. the possibility of assessing accuracy of the information revealed from the children) may affect their conclusiveness. Hence, complementary results of both field and analogue studies may be required to draw the most accurate picture.

Moreover, the "non-mutually exclusive" verbal scales used in this study were innovative as they allowed for the fact that both children's and interviewers' attitudes were able to oscillate during the interview, as is expected in the real world. Future research should

however, have one person codify the child's collaboration and another person codify the interviewer's supportiveness to ensure "blind codification" (i.e., no influence of the expected results on the codification process).

It will be important, however, to re-test the validity of the *Children's Collaboration Scale* and the *Interviewer's Supportiveness Scale* and refine them to increase the inter-rater reliability. Other types of supportive attitudes (e.g., directly stating the child's reluctance and talking about it) could be added as they may be more beneficial in preventing or countering a child's reluctance and may subsequently increase the amount of detail disclosed. Moreover, we did not differentiate between suggestive and neutral support statements. Future research should measure the difference of such statements on the quality and on the validity of children's responses to ensure that support in itself does not increase a child's suggestibility.

Furthermore, omitted from this study were non-verbal cues such as body language (e.g., smiles, eye-contact, and body posture). Combining both verbal and non-verbal attitudes would depict a more accurate picture of children's and interviewers' attitudes during forensic interviews. Also, more research is required to establish consensually accepted and recognized measures of traits like children's reluctance as well as interviewers' supportive and non-supportive attitudes. It could be of interest to determine if those attitudes are universal in nature (as facial expressions are) or depend on the child's race, culture, religion etc.

Future researchers could also determine if different types of children's reluctant attitudes are expressed in cases of disclosure and non-disclosure. Reluctant non-disclosers may demonstrate a more overt state like reluctance (e.g., "I will not talk to you"), whereas reluctant disclosers may express more covert traits like reluctance (e.g., signs of anxiety). Therefore, practitioners may first need to recognize the manifestations of a child's reluctant

attitude, both as a state and as a trait. For example, cues for state-like manifestations of a child's reluctance include *refusal to collaborate,* ranging from simple more subtle dissatisfactions with the interview process, (e.g., a child who does not want to sit down), to more aggressive verbal expressions (e.g., a child saying "I do not want to talk to you, let me go now").

Finally, another area of research could be looking at ways to differentiate between reluctant disclosers and those children who have nothing to disclose because nothing happened. More extensive research on non-verbal behaviours or the study of "synergology" may be helpful in detecting such differences. According to Mehrabian (1972) words account for 7%, tone of voice accounts for 38%, and body language accounts for 55% of the "liking" of feeling or attitudes expressed. To ensure effective and meaningful communication, these three parts of the message need to be "congruent". In case of any incongruence between the verbal and the non-verbal message, the receiver of the message might be suspicious and is more likely to trust the predominant form of communication, which to Mehrabian's findings is the non-verbal impact of tone and gestures, rather than the literal meaning of the words. As such, experimental research could see if children's resistance to elaborate on an embarrassing or delicate subject actually evoke such incongruency between their verbal and non-verbal behaviours (vs. answering in a congruent fashion when the child does not know or does not remember what happened). Although such a study is interesting it needs to be replicated and more theoretical as well as experimental research is needed to advance and further apply elements of synergology to the forensic field. As such studies conducted in laboratories are needed where we can manipulate children to either say the truth, "I do not know", "I do not remember", or lie about an incident and then analyse their incongruencies in verbal and non-

verbal behaviours. If clear differences can be found in experimental studies they could later be applied and tested in field studies. In any case, interviewers in the forensic field may already benefit from learning more about the verbal as well as the non-verbal expression of resistance during the interview and eventually with more research and practice be more readily prepared to identify "reluctant disclosers" vs. "actual non-disclosers".

PRACTICAL IMPLICATIONS

On a more practical level, the ultimate or underlying goal of this thesis was to help pave the way to facilitate young, reluctant children disclose their SA incident(s) in detail even when it may be normal for them to be reticent to do so. Although, children's disclosure of SA has thoroughly been investigated by researchers, very little research has been done to date to investigate children's reluctant attitudes during forensic interviews. As such more converging results on children's collaboration during SA disclosure would be necessary, before being able to adapt our knowledge to applicable measures and determine their practical ramifications.

Yet, we have summarized four preliminary practical phases, inspired by the theoretical literature cited in the field of psychotherapy (Beutler & Harwood, 2000; Beutler, Rocco, Moleiro, Talebi, 2001) as well as the more applied research conducted in forensic settings (Hershkowitz et al., 2006, 2007 and 2009), which we believe may help practitioners deal with a child's reluctant attitude during forensic interviews:

Phase 1: detect early signs of a child's reluctant attitude; this phase seems obvious, uncontroversial and should not require too much effort or training (e.g., detecting when a child *refuses to collaborate*, see Appendix B for a more detailed description of *Children's Reluctant Attitudes*).

Phase 2: **acknowledge and reflect the child's reluctant attitude**; this phase is easier said than done, as reflecting an emotional state may come naturally to a therapist or a psychologist but may not be so evident for an investigator. However, by investigating the reason(s) or the motivation camouflaged behind a child's reluctance, interviewers may potentially be able to reassure and support a child's detailed disclosure (e.g., child expresses fear of breaking up his/her family). The interviewer may defuse the immediate consequence of resistance and infuse the child with some sense of control, as suggested in the formulation of reactance theory (see Brehm, 1966 and Brehm & Brehm, 1981; Beutler, Rocco, Moleiro, & Talebi, 2001). Though, it may be harder for investigators to directly address the reluctant attitude since they cannot suggest information (e.g., "you do not want to talk because you are afraid of what will happen to your daddy?").

Phase 3: **allow the child to take his/her time to feel more comfortable in order to establish a trusting relationship before delving into the substantive part of the interview**; this phase seems logical at first but has brought more controversy into the forensic field. Unlike psychotherapy, investigators usually have just one session to obtain as much detail as possible from the "alleged" victim. Although it is essential to take time to establish trust and build rapport - or alliance as is called in psychotherapy - it is also crucial to keep rapport building brief in order to ensure that the child maintains his attention and cognitive performance until the end of the interview (Davies, Westcott, & Horan, 2000; Herkowitz, 2009; Katz et al., 2012; Roberts, Lamb & Sternberg, 2004; Teoh & Lamb, 2010).

Phase 4: **monitor their own supportive and non-supportive attitudes throughout the interview**; this again may be easier said than done but by filming some interviews and getting retro-active feedback they may quickly come to detect their "natural" patterns. Moreover, the

results of this doctoral thesis are in accordance with Hershkowitz et al. (2006, 2007), who pinpoint the importance of increasing supportive techniques while avoiding confrontation during interviews in order to enhance rapport-building and encourage reluctant children to disclose relevant information regarding SA. They believe that no harm would be caused by providing additional support to non-reluctant children who were incorrectly identified as being reluctant. We can add to those conclusions that more supportive attitudes such as *respecting the child's pace, using his/her name and reflecting their emotions* should be promoted to ensure the child's cooperation, which can facilitate the effectiveness of the interview process. Furthermore, when reluctant children are interviewed in a *reassuring supportive* context, they are *encouraged* to describe their experience(s) and may feel "comfortable enough" to provide relevant information regarding even the more severe incidents.

Conversely, *intrusive* and *confrontational* interviewers would certainly not help reluctant children disclose details regarding abuse (Hershkowitz et al., 2006, 2007). Our results indicate that interviewers should make a concerted effort to avoid non-supportive attitudes such as being *controlling* (i.e. interrupting the child) or *doubting* of the child's answers (i.e. re-questioning). Such an effort will reduce the likelihood of an intimidating environment and may help assure valid disclosures in terms of both the quantity and the quality of detail obtained (see Appendix C for a more detailed description of *Interviewer's Supportiveness Scale*).

CONCLUSION

When CSA is suspected, alleged underage victims are often the primary and unique source of information (Pipe et al., 2013). As it is hard to change static characteristics such as

children's age and gender, or those pertaining to the SA (i.e. frequency, severity of the abuse, etc.), researchers are constantly looking for new ways to promote children's collaboration during forensic interviews. While we believe that the development of the NICHD Protocol has enabled considerable progress in the way children are interviewed forensically, adherence to the Protocol is simply not sufficient to convince reluctant children to talk. As suggested by Lamb, Hershkowitz, Orbach & Esplin (2008) "the Protocol remains a work in progress and must continue developing to accommodate the results of new research" (p. 17). Hence, more research is needed to ensure the development of new, valid and reliable recommendations for interviewers to apply when interviewing young reluctant children (see Hershkowitz, Orbach, et al., 2007, for further discussion see also Pipe, Orbach, Lamb, Abbott, & Stewart, 2013).

This doctoral dissertation was, therefore, conducted with one of Almerigogna et al.'s (2007) premises which states that an innovative field study should focus on the "dynamic situational aspects of interviews in order to develop more appropriate procedures for interviewing child witnesses" (p. 972). The results obtained support and stress the importance of further investigating child-interviewer dynamics, as an interviewer's attitude plays a crucial role on a child's collaboration during forensic interviews. Indeed, interviewers' support was the best predictor of children's collaboration. As suggested by Davis and Bottoms (2002), researchers should continue to address interviewers' supportive attitudes as they are of significant theoretical interest to psychology as well as an easily implemented intervention that may have measurable effects on the accuracy of a child's testimony. Hence, the theoretical concept of "interviewers' support" and its applied importance has been taken into account by most researchers and practitioners in the field.

However, to our knowledge, no studies in the forensic field have shown the negative

impact of an interviewer's non-supportive attitude on the quantity of detail revealed by victims of CSA. It is encouraging to note that an interviewer's non-supportive attitude was the least frequently detected type of attitude in the forensic interviews we had selected. However, this may have been expected as we were dealing with disclosers only. As such, more comparative research is needed to detect if interviewers' non-supportive attitudes are more frequently found in non-disclosers versus disclosers. Our findings emphasize that research should continue on this matter in order to shed light on the specific supportive attitudes that should be adopted and, especially, on the non-supportive attitudes that should be avoided. If the results we found are replicated, forensic interviewers will then need to be trained to recognize and minimize non-supportive attitudes in order to promote detailed disclosure of CSA.

In addition, the role of a *child's reluctance* during forensic interviews clearly merits further attention. In so doing, researchers may move toward a fresh perspective and an opportunity to adjust their own ideology and practice in ways which can benefit investigators and children alike. Furthermore, a child's age appears to be an important factor and needs to be taken more thoroughly into account during forensic interviews. Consequently, special forensic techniques and attitudes favouring a child's cooperation and minimizing a child's reluctance should be developed and adapted to the child's age in order to encourage especially young, reluctant victims to "fully" disclose incident(s) of CSA when they have truthfully transpired. Due to individual differences, reluctance-based strategies might be expected to prove more effective with some children than with others. In addition, there will be certain children for whom no strategy will work to encourage their talkativeness or the quantity of details disclosed. Along with empirical evidence establishing the involvement of a child's reluctant attitude towards a full SA disclosure, research is needed to identify the extent to

which such strategies would or would not work, and with whom, for example according to children's age (i.e., being more directive with younger children who have a normal tendency to digress from the questions). The modest expenditure of time and effort which would be required to address children's reluctant attitudes during forensic interviews *proactively*, and perhaps even employ it (e.g., identify, describe, and discuss it openly), should be more helpful than the cost of dealing with it *reactively* (e.g., partial or non-disclosure, sending a victim of CSA back to his perpetrator, having to re-schedule another interview, etc.). Fortunately, interviewers can and should learn to adapt and modify their attitudes to fit children's needs, increasing the chance of obtaining their cooperation and reducing their reluctant attitudes during the interview process.

Finally, in this doctoral thesis we have attempted to demonstrate that, because young children are often the only source of information regarding SA incident(s), and that it is normal for them to feel reluctant to disclose certain embarrassing details to a stranger, it is only by enhancing the quality of forensic interviews that we are likely to improve our ability to protect those young and vulnerable victims of CSA.

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Appendix A

Grille d'adhésion au protocole du NICHD

 # de K7 : **# d'enquêteur :**

Enfant dévoile: Oui/Non **Adhère au guide :** Oui/Non

Q #	Cocher	Question
I		**Phase pré-déclarative**
1		Présentation de soi
2		Règle de la vérité
3		Règle : je ne comprends pas
4		Règle : je ne sais pas
5		Règle de corriger l'enquêteur
6		Choses que tu aimes faire (établissement de la relation)
7		Invitation générale d'un événement spécial ou hier/aujourd'hui (entraînement de la mémoire épisodique)
8		Segmentation de temps
9		Invitation avec indice/ Dis-moi tout sur…
II		**Transition vers le contenu déclaratif**
10		Je veux parler de ce pourquoi tu es ici aujourd'hui.
10.1		Je comprends que quelque chose t'es arrivé. Dis-moi…
10.2		Dis-moi pourquoi tu penses que [ ] t'amené ici aujourd'hui.
10.3		J'ai entendu que tu avais parlé à (un professionnel). Dis-moi de quoi vous avez parlé.
10.4		Je vois [j'ai entendu dire] que tu as des [marques, blessures, bleus] sur ton/ ta/ tes [ ].

10.5		Est-ce que quelqu'un a fait quelque chose que tu n'as pas aimé ?
10.6		Est-ce que quelque chose t'est arrivé à [lieu/ moment de l'incident présumé]
10.7		Est-ce que quelqu'un t'a fait quelque chose que tu penses qui n'était pas bien ?
10.8		Est-ce que quelqu'un [l'allégation sans mentionner le nom du présumé agresseur]
10.9		Ton [professionnel] m'a dit /m'a montré [ ]. Est-ce que quelqu'un [allégations].
10.10		**Dis-moi tout sur ça.**
11		Après, qu'est-ce qui est arrivé ?
12		Pense à cette [journée-là / nuit-là] et dis-moi tout ce qui s'est passé depuis [ ] jusqu'à [ ]. (segmentation de temps)
13		Parle moi plus de [personne/objet/activité]. Tu as parlé de [personne/objet/activité]. Dis moi tout sur ça.
14		Est-ce que c'est arrivé une fois ou plus d'une fois? Si plus d'une fois : Parle-moi de [dernière, première, autre fois] où il est arrivé quelque chose.
15		Pause
III		**Phase de clôture**
16		Dévoilement : est-ce que quelqu'un d'autre sait ce qui s'est passé ?
17		Est-ce qu'il y a d'autre chose que tu penses que je devrais savoir/ que tu veux me dire? Merci …

Appendix B

Children's Collaboration Scale

The ***Children's Collaboration Scale*** (CCS) was used to sequentially code a child's reluctant (R1-R5) and cooperative or non-reluctant attitude (NR) throughout the interview. It is derived and combines items from:

I. ***Children's Responses*** used by Hershkowitz, Orbach, Lamb and Horowitz's (2006), to explore the dynamics of forensic interviewers with (reluctant/non-reluctant) disclosers and non-disclosers. Three categories of children's uninformative responses were maintained in this study: (1) **omissions** (unclear, inaudible, or unfinished responses, request for clarification or failure to respond informatively or at all); (2) **digressions** (responses unrelated to eliciting prompts); and (3) **resistance** (verbal expressions or actions indicating unwillingness to provide information). Displacements (unexpected and irrelevant allegations) and denials (claims that something previously mentioned never happened) were not coded, as they are not frequently found in cases of CSA disclosure, which was the chosen sample in this study. We maintained **informative** responses (providing information as requested) and renamed it cooperative; and

II. ***Client Resistance Code*** (CRC) developed by Chamberlain, Reid, Patterson, Kavanaugh and Forgatch (1984) and used to categorize client behaviours as resistant or non-resistant (see Bischoff & Tracey, 1995, for a review of CRC face and content validity). The CRC consists of 11 mutually exclusive and

exhaustive categories of resistant behaviour and two categories of non-resistant behaviour. Five categories of resistant responses were relevant to the forensic context and included in the present study: (1) **challenging** (confronts, challenges or complains); (2) **defending others**; (3) **sidetracking** (off topic); (4) **not responding to a question** (> 5 second); and (5) **avoids answering.** The following categories were not included because the context of forensic interviewing did not fit the definition: defending self, blaming, pushing his or her own agenda, disqualifying, disagreeing with therapist, and expressing hopelessness. We combined both non-resistant responses in the present study: all responses that are neutral and follow the flow, indicating the client's **cooperation**, or **facilitative responses** (short utterances indicating attention or agreement).

Children's Collaboration Scale

A. Children's Reluctant Attitudes:

R1. Refusing to Collaborate: *(1) directly/overtly by using verbal expression:* child refuses to do what was asked by saying, "I will not talk to you", or demonstrates a desire to end the interview prematurely, "I want to see my mommy now"; child mumbles and talks softly making it hard to converse or gives no response (>5 seconds);

(*2) indirectly/covertly by using actions:* by constantly moving (e.g., going to the door, as reported by the interviewer), not paying attention and refusing to talk (e.g., hiding his/her face; although we did not watch the video such behaviour can be coded when the interviewer says,

"please stop hiding your face or sit in your chair"), derived from *Resistance* in Hershkowitz et al. (2006) and *Not Responding* in CRC.

R2. Refusing to Elaborate: child *repeats* one or two words and then says, "That's it", gives *unclear information,* "It was nearby", or gives *inaudible or unfinished responses* with the intention of not wanting to continue pursuing the subject, "I told you already, can we move on now", derived from *Omissions* in Hershkowitz et al. (2006) and *Avoid Answering* in CRC.

R3. Digressing: child deviates from the subject, "Talk more about your room", child answers, "Did you know that my friend got a new puppy and…", derived from *Digressions* in Hershkowitz et al. (2006) and *Sidetracking* in CRC.

R4. Confrontational: child *justifies his refusal to talk,* "I do not want to talk to you because I do not even know you!", or is *impolite,* "I told you already, and I do not like to repeat stuff!", derived from *Challenging* in CRC.

R5. Other: child displays *anxiety* such as stuttering or somatic complaints, "I have un upset tummy", "I need to pee now…", *shy/uncomfortable,* "I know the word but I do not want to say it", *confused* (e.g., changes responses or hesitates) or *minimizes the incident,* "He just touched me, it did not hurt", derived from *Defending others*, in CRC.

B. Children's Cooperative Attitude

NR. **Non-Resistant**: child cooperates without a fuss by responding to the question or the demand being asked of him/her by the interviewer; derived from *Informative Responses* in Hershkowitz et al. (2006) and *Non-resistant* responses in CRC.

Appendix C

Interviewer Supportiveness Scale

The ***Interviewer Supportiveness Scale*** (ISS) was used to sequentially code the interviewer's supportive (S1-S4) and non-supportive attitudes (NS1-NS4) throughout the interview. It is derived and combines items from:

I. ***Interviewer Supportiveness*** developed by Hershkowitz, Orbach, Lamb and Horowitz's (2006) and consisted of **supportive comments** intended to unconditionally encourage children to be informative, typically about neutral topics. Three of the four categories were maintained in our ISS: (1) **non-suggestive positive reinforcement**, "You are telling very well"; (2) **addressing the child in a personal way**, "Dan, tell me everything about that"; (3) **references to the child's emotions**, "I understand it is very difficult for you to tell me this"; and (4) facilitators such as "ok", "aha", were coded but, as they significantly decreased the alpha score from the scale, they were removed.

By contrast, **unsupportive comments** were intended to exert pressure on children to respond by challenging information they provided or criticizing their behaviour. They were also categorized using four exhaustive and mutually exclusive categories and all items were maintained in ISS: (1) **confrontations**, "…but I heard from the police that … happened"; (2) **reference to positive outcomes**, "If you tell me, we can help you", and (3) **warnings about negative outcomes**, "We cannot help children if they do not

talk", were regrouped together; and (4) **negative references to the child's behaviour**, "Sit still!"

II. The ***Therapist Behaviour Code*** (TBC) was developed by Forgatch and Chamberlain (1982) and used to describe in session therapist behaviour (see Bischoff & Tracey, 1995 for a review of TBC face and content validity). The TBC consists of eight mutually exclusive and exhaustive categories but only four items were maintained in the ISS: (1) **support** (paraphrase, reinforce, agree, humour, empathy, self-disclosure, filling in); (2) **teach** (instruction, commands, suggestions, providing rationale); (3) **confront and challenge** (disagreement, disbelief, disapproval, sarcasm); and (4) **interpret and reframe** (speculate, normalise or speak metaphorically). The following four items were coded as supplementary codes or questioning type but as they did not represent interviewer's supportiveness, they were not maintained in ISS: (1) structure (summarize, modeling or role playing); (2) seeking information (questions or clarification); (3) talk (when the therapist cannot complete his statement); and (4) facilitate (short utterances to encourage the person to continue talking).

Interviewer Supportiveness Scale

A. Interviewer Supportive Attitudes

S1. Encouragements: interviewers adopt a positive attitude favouring the child's feelings of well being by using *compliments*, "You are a smart boy"; *positive reinforcements*, "You are doing very well…"; or manifesting interest in what the child is saying, "Ah, yes…, this I did

not know", derived from *Support* in *TBC* and *Non-suggestive Positive Reinforcements* in Hershkowitz et al. (2006).

S2. Respecting the Child: interviewers demonstrate that the child is important by personalizing the question and *using his or her name*, "Sam tell me more about…", (not coded in case the interviewer is just checking he has the correct name); *respecting his/her rhythm* by following the child's pace without interrupting, "It is ok, you can take your time"; or *being aware of the child's needs* using the child's emotions and paraphrasing when possible, "I see it is hard for you to say the words, would you rather write them down?", derived from *Support* in *TBC*; combining *Addressing the Child in a Personal Way*, and *References to the Child's Emotions* in Hershkowitz et al. (2006).

S3. Reassuring the Child: interviewers tend to *reassure* the child by saying, "All the children I see here talk to me ..."; *normalise and generalise the situation* to make the child more comfortable to talk, "Do not worry, I've heard all kinds of stuff before…", derived from *Teach as well as Interpret and Reframe* in *TBC.*

S4. Other: s*elf-discloses by using humour*, "My son who is your age does the same thing …", laughing at the child's joke or using s*mall talk,* "I had a watch just like this when I was a kid…", derived from *Support* in TBC.

B. Interviewer Non-supportive Attitudes

NS1. Bargaining: interviewers use *positive consequences* to make the child talk, "If you talk to me, you will feel better"; or *negative consequences*, "We cannot help those who do not talk", comes from *Teach* in TBC and combining *References to Positive Outcomes* and W*arnings about Negative Outcomes* from Hershkowitz et al. (2006).

NS2. Controlling: interviewers direct the interview by *intimidating* the child, "Sit down, do not touch this!"; *speculating and interpreting,* "Ah, so he did tell you …"; or *interrupting*, "Wait a minute, we are talking about the last incident now", derives from *Interpret and Reframe* in *TBC* and *Negative References to the Child's Behaviour* in Hershkowitz et al. (2006).

NS3. Doubting: interviewers ask several questions because he or she is *confused or hesitant*, "Euh-Euh…I wanted to know…"; *confrontational*, "But I heard from the doctor something else…"; *persistent* interrogating at least twice on the same subject and putting pressure on the child to change his or her answer, "When was it ?", child says, "At night", interviewer says, "Are you sure it was at night and not during the day?", child says, "I am not sure, maybe it was during the day", comes from *Confronts and Challenge* in *TBC* and *Confrontations* in Hershkowitz et al. (2006).

NS4. Other: interviewers *are impatient and easily frustrated* because the child does not understand or respond correctly, "No, that is not what I asked you!"; *minimizing the incident,* "He just touched you over your clothing, is that right?"; or *behaves in* a *strange way* talking in the third person to a small child, "You know Melanie was not there, can you tell her what happened...", child responds, "Who is Melanie?", derived from *Interpret and Reframe* in *TBC.*