

CANADIAN CENTRE for CHILD PROTECTION[®] Helping families. Protecting children.

TEATREE TELLS: A Child Sexual Abuse Interview Guide

protectchildren.teatreetells.ca

Teatree Tells: A Child Sexual Abuse Interview Guide was created by drawing upon the resources of a variety of professionals with many years of clinical and practical experience working with children. The guide has been designed to provide child protection workers with tools that they can use before, during and after a meeting/interview with a child. The guide is meant to supplement and augment the user's existing knowledge about young children, but it is not intended to be exhaustive or prescriptive. Each meeting or interview with a child, each child and each situation will involve the consideration of many different aspects including the psychological and emotional needs of the child, existing legal requirements and impediments, and family and cultural dynamics. Interviewers must adjust techniques and tools to the situation, always taking into consideration existing best practices. Users should also recognize that legal requirements for child testimony may change over time and by situation, so consult regularly with legal counsel to ensure the interview processes and techniques used are consistent with prevailing practice and will not jeopardize effective prosecution of the offence.



© 2013, Canadian Centre for Child Protection Inc. All rights reserved, except one copy may be reproduced for individual use.



TABLE OF CONTENTS

| • | Acknowledgements 1 | l |
|---|--|---|
| • | Canadian Centre for Child Protection 1 | l |
| • | Overview – Teatree Tells: A Child Sexual Abuse Interview Guide | > |

| • | What the Resource Guide Includes4 | Ļ |
|---|-----------------------------------|---|
|---|-----------------------------------|---|

| • | What is Child Sexual Abuse? | .5 |
|---|--|-----|
| • | Scope of the Problem | .7 |
| • | Child Sexual Development and Problematic Behaviour | . 8 |
| • | Signs a Child May Have Been Sexually Abused | 11 |
| • | Impact of Child Sexual Abuse | 12 |
| • | Impact of Technology–Facilitated Child Sexual Abuse On Victims | 13 |

| • | Who Sexually Abuses Children? | 15 |
|---|--|----|
| • | What is Grooming? | 16 |
| • | The Grooming Process | 17 |
| • | Why are Children Vulnerable to Grooming? | 18 |
| • | Offending Behaviour and Technology | 19 |

| • | Eliciting Information When Speaking with Children | 21 |
|---|---|----|
| • | Factors that Impact Children's Memory Abilities | 31 |

| • | Why a Child Might Not Tell | . 38 |
|---|----------------------------|------|
| • | What the Research Tells Us | . 39 |
| | | |

7. MEETING/INTERVIEW METHODS 42

| • | Preparation and Planning | 42 |
|---|--|----|
| • | Creating the Meeting/Interview Map | 47 |
| • | Establishing Rapport | 47 |
| • | The Substantive Stage of the Meeting/Interview: The Topic of Focus | 51 |

| • | Gingerbread Drawings and Boy and Girl Drawings | 57 |
|---|--|----|
| • | Free Drawing Sheet | 61 |
| • | Scale from 1 to 10 for Likes and Dislikes | 62 |
| • | Emotions Poster | 63 |
| • | Who's Who in My Life | 67 |
| • | The People and Pets Who Live with Me | 68 |
| • | I Feel Safe When I Go To, But I Do Not Feel Safe When I Go To, | 69 |
| • | Devices in My Life | 70 |

INTRODUCTION

ACKNOWLEDGEMENTS

The **Canadian Centre for Child Protection** is very proud of the work that went into creating the **Teatree Tells: A Child Sexual Abuse Interview Guide.** We are optimistic that this guide will provide frontline child protection workers with useful tools to enhance meetings/interviews with children 12 years of age and under where sexual abuse concerns exist.

In the preparation of this resource guide, we have been supported by Geraldine Crisci M.S.W. and Tink Palmer B.Sc. Hons, CQSW and offer them our sincere gratitude for their contribution. We are also very appreciative of the advice and feedback received by other professionals including Duane Bowers (Licensed Professional Counselor), Carolyn Thom (Certified Dip. Child Forensic Interviewer, Zebra Child Protection Centre, Edmonton), Bernadette Gallagher (PhD, R.S.W., Ontario Association of Children's Aid Societies), Detective Constable Andrea Gillespie (Toronto Police Service), Pat Sisson (Intake Supervisor, Children's Aid Society of Toronto), and Catherine S. Connell (FBI, Child Adolescent Forensic Interviewer), among others.

Special thanks goes to the tireless efforts of the Canadian Centre for Child Protection staff – their excitement, persistence and dedication to delivering an outstanding resource guide for child protection professionals working with children were evident and appreciated throughout the process.

This resource guide has been created with funding support from the Ontario Trillium Foundation, an agency of the Government of Ontario.

This guide seeks to support child protection professionals in providing safe environments for children, one in which children are able to accurately share their experiences.

CANADIAN CENTRE FOR CHILD PROTECTION

The **Canadian Centre for Child Protection** (www.protectchildren.ca) is a charitable organization dedicated to the personal safety of all children. Our goal is to reduce child victimization by providing programs and services to Canadians. We do this through public awareness activities, as well as our personal safety education program, Kids in the Know (www.kidsintheknow.ca); our national tipline to report the online sexual abuse of children, Cybertip.ca (www.cybertip.ca); our program to help organizations prevent child sexual abuse, Commit to Kids (www.commit2kids.ca); and our national missing children services program, MissingKids.ca (www.missingkids.ca).





OVERVIEW – TEATREE TELLS: A CHILD SEXUAL ABUSE INTERVIEW GUIDE

The **Teatree Tells: A Child Sexual Abuse Interview Guide** is designed to assist frontline child protection workers' discussions with children under 12 years of age about child sexual abuse concerns. This tool may also be helpful for those professionals trained in forensic interviewing.

It includes important information about meeting/interview techniques as well as developmentally appropriate meeting/interview aids that will help professionals enable children to share important information with them regarding child sexual abuse concerns. Talking with preschoolers can be particularly challenging, and for this reason, information about communicating with very young children has been separated from tips for communicating with prepubescent children. This resource is also intended to prompt professional dialogue and reflection within teams about effective practices when meeting with/interviewing children.

This guide outlines: the importance of child protection workers having a good understanding of the dynamics of child sexual abuse; enhancing communication with children through knowledge of child development strategies; and creating a child-centered process for meetings/interviews with children. It also highlights how technology has impacted child sexual abuse and what child protection workers need to know when responding to these concerns. In addition, information is provided to professionals about how offenders may use technology to break boundaries with children in their attempt to sexually abuse them.

The *Teatree Tells: A Child Sexual Abuse Interview Guide* **is not intended to provide or replace forensic interview training**. Professionals must also keep in mind that legal requirements for child testimony may vary by jurisdiction. It is the responsibility of the professional to ensure techniques used are consistent with existing practices and will not jeopardize potential prosecution of an offence.

As the information contained in this guide may require updating from time to time, it is the responsibility of the child protection worker using this resource to ensure that s/he uses the most current information about interview techniques with children where there are sexual abuse concerns.





Background: Teatree Tells Initiative

In 2009, the **Canadian Centre for Child Protection** developed an education resource called *Teatree Tells: A Child Sexual Abuse Prevention Kit.* The *Teatree Tells* initiative was created in response to a research report (cybertip.ca/research) published by Cybertip.ca, Canada's tipline for reporting the online sexual exploitation of children. The research report, titled *Child Sexual Abuse Images: An Analysis of Websites by Cybertip.ca* (2009), found that 82 per cent of the child pornography images analyzed by Cybertip.ca depicted very young, prepubescent children. One of the key recommendations from this report emphasized the importance of educating children 12 years of age and under to help them recognize signs of the abuse process and disclose to a safe adult if they are being harmed or inappropriately photographed. Education was seen as critical in developing children's skills and confidence to possibly disrupt and disclose abuse. *Teatree Tells: A Child Sexual Abuse Prevention Kit* is designed to help teachers, early childhood educators and parents of children 4 to 6 years of age learn more about the issue of child sexual abuse and how to better protect children from victimization. Research has shown that child victims who participate in more comprehensive programs are more likely to report abuse than those who receive minimal one time information (Goleman, 1995).

For more information about the Teatree Tells: A Child Sexual Abuse Prevention Kit, please visit teatreetells.ca.



The Teatree Tells: Child Sexual Abuse Prevention Kit



Downloadable Parent Guide







Posters



Puppet



teatreetells.ca website



The *Teatree Tells: A Child Sexual Abuse Interview Guide* further builds upon this education initiative. It is designed to provide child protection workers with resources and tools that are consistent with the *Teatree Tells: A Child Sexual Abuse Prevention Kit* being used in early education settings across Canada.

The Teatree Tells: A Child Sexual Abuse Interview Guide



GETTING STARTED

WHAT THE RESOURCE GUIDE INCLUDES

The Teatree Tells: A Child Sexual Abuse Interview Guide includes:

- Background information about child sexual abuse
- Information about child development
- Information about how preschool and prepubescent children (3 to 12 years of age) communicate
- A meeting/interview planning map
- Meeting/Interview aids
 - Gingerbread Drawings and Boy and Girl Drawings » Who's Who in My Life >>
 - Free–Drawing Sheet
 - Scale From 1 to 10 for Likes and Dislikes
 - **Emotions Poster**

The importance of this cannot be overstated.

- » The People and Pets Who Live With Me
- » I Feel Safe When I Go To... But I Do Not Feel Safe When I Go To...

For children to be heard,

professionals need to

understand how they

communicate.

» Devices in My Life

Further information on the Teatree Tells: A Child Sexual Abuse Interview Guide can be found at protectchildren.teatreetells.ca.

WHO SHOULD USE THE RESOURCE GUIDE?

The Teatree Tells: A Child Sexual Abuse Interview Guide has been developed as a guide to support frontline child protection professionals working with children 12 years of age and under. This tool may also be helpful for professionals trained in forensic interviewing.

For those individuals who have taken forensic interview training, this guide is intended to provide helpful tips and complement the expertise and practice already acquired. This guide, however, is not intended to replace formal forensic interview training, and we still recommend professionals who interview children take such training. Legal requirements for child testimony vary by jurisdiction, and it is the responsibility of the professional to ensure techniques used are consistent with existing practices and will not jeopardize effective prosecution of an offence.

The Teatree Tells: A Child Sexual Abuse Interview Guide is intended to be used to assist a child protection worker when meeting with a child. It can be used in its entirety or in parts, and should be adapted to the needs of both the professional and the child.

A note about language:

Child Pornography: We recognize that the term "child pornography" may minimize the crime or give the impression that the children being abused are complicit in the abuse. As it is the term used in the Criminal Code (Canada), we will continue to use "child pornography" when it refers to Criminal Code (Canada) offences. The term "child sexual abuse content" more clearly describes the assaults taking place against children.

Child Victim: The use of the term "child victim" in this guide refers to a child who has been victimized by sexual abuse. We recognize that it is important children are not identified by their experience of sexual abuse and this term is not intended to be a label.

UNDERSTANDING CHILD SEXUAL ABUSE

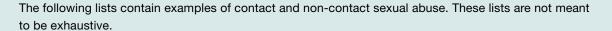
The prevalence of child sexual abuse can be difficult to assess due to issues surrounding under-reporting and the lack of one clear definition of what constitutes child sexual abuse. There is, however, general agreement among child protection and mental health professionals that child sexual abuse occurs more frequently than we may think and is a serious problem in our society.

The impact of child sexual abuse is wide-ranging — from no apparent effects to long-lasting trauma to the child victim. Understanding child sexual abuse (in all of its manifestations), child development and the impact of traumatic experiences upon children can help inform professionals about how to effectively meet with a child, assess her/his reaction and respond accordingly. When professionals have this type of knowledge, it increases the likelihood that children will give them as accurate and detailed an account as possible.

WHAT IS CHILD SEXUAL ABUSE?

The World Health Organization defines child sexual abuse as: "...the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or the social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person."

The sexual victimization of children includes a wide range of behaviours and situations. Offences can vary from non-contact sexual offences (such as exposing a child to sexually explicit acts) to contact sexual offences (such as touching or fondling the genital area). Offences can occur with or without the use of violence, and also may involve the use of technology, for example, the creation of child sexual abuse images through photography or video, and the subsequent dissemination of this content online. (Lanning, 2005)



Non-Contact Sexual Abuse

- Encouraging or forcing a child to masturbate
- Voyeurism (i.e. "Peeping Tom")
- Exposing a child to pornography and child pornography*
- Encouraging or forcing a child to watch others masturbate
- Exposing a child to adults engaging in sexually explicit acts
- "Flashing" or exposing genitals to a child

Contact Sexual Abuse

- Touching or fondling genital area
- Touching or fondling breasts
- Forcing or encouraging contact with another's genital area
- Oral sex or stimulation
- Vaginal or anal intercourse
- Vaginal or anal penetration with an object or finger

*Child pornography deals with child sexual abuse images and material. An offender may be involved in accessing, creating, possessing, and/or distributing child pornography, all of which involve the sexual abuse and/or exploitation of children. While some child pornography offences may involve contact offences (i.e. creating child pornography), others may not (i.e. accessing child pornography).

Child pornography is child sexual abuse. In Canada, child pornography can be an image, an audio recording, a video, a drawing, or a written description about the sexual assault of a child. It often involves real children being sexually abused or posed in a sexualized way. Children of all ages, from infants to toddlers, from school-age children to teens, are depicted in the material.

Key findings from the Canadian Centre for Child Protection's report, *Child Sexual Abuse Images: An Analysis of Websites by Cybertip.*ca, challenge the misconception that child pornography consists largely of innocent or harmless nude photographs of children. Of particular note:

- More than 82% of the images assessed by Cybertip.ca depicted very young, prepubescent children under 12 years of age;
- 57% of the children in the images were under 8 years of age;
- More than 35% of all images depicted serious sexual assaults; and
- 83% of the images were of girl children.

Child pornography is created deliberately and is a permanent record of a child's abuse. Every child sexual abuse image/video represents a crime scene and proof of abuse. This material can be stored in computer folders, on websites, in emails, on file trading systems, and on portable devices such as data storage devices (i.e. USB drives, CDs, DVDs, memory cards for digital cameras, digital picture frames, etc.), cell phones and music players.



SCOPE OF THE PROBLEM

The sexual abuse of children is a serious problem. Most cases of child sexual abuse do not come to the attention of professionals (i.e. doctors, educators, social workers, etc.). The nature of the abuse, its secrecy and shame, the criminal sanctions against it and the young age and dependent status of its victims often inhibits discovery and discourages voluntary reporting (Creighton, 2002; Gilbert, Browne, Ferguson, Webb, & Janson, 2009).

According to researchers, gaining an understanding of the true extent of child sexual abuse, in all of its manifestations, poses many challenges (Finkelhor, 1994; Grubin, 1998; Kelly et al., 1995; Durham, 2003; INTERPOL, 2002). It is the most hidden form of child abuse and the least likely to be disclosed by both child victims and adult survivors. Child sexual abuse occurs across social classes, geographic areas and ethnic and cultural groups. The vast majority of offenders are men, and the majority of victims are girls and young women (though boys and young men are also victimized).

Recent prevalence studies have demonstrated quite concerning findings with regard to the estimated proportion of people who have experienced some form of sexual abuse during childhood. A recent meta-analysis of studies worldwide indicates prevalence rates for penetrative child sexual abuse at 5.3 per cent for girls and 1.9 per cent for boys (Andrews, Corry, Slade, Issakidis, & Swanston, 2002). When considering all forms of sexual abuse, the figure is much larger -25.3 per cent for girls and 8.7 per cent for boys. The results of this study are quite staggering - a quarter of all girls and just under a tenth of all boys will suffer from some form of sexual abuse in their childhood.

Child Sexual Abuse →



Did You Know?

- The majority of adult survivors of child sexual abuse report that they did not disclose the abuse to anyone when they were children (Hindman, 1999).
- According to Statistics Canada, 59% of all victims of sexual abuse reported to police in 2009 were children under the age of 18 years. Of those, 40% were children 11 years of age or under (Statistics Canada, 2011).
- Parents, including biological, adoptive, step and foster parents, were responsible for more than half (59%) of all family-related sexual offences and physical assaults against children and youth victims in 2009 (Statistics Canada, 2011).
- Sexual abuse may have long-term harmful effects on a child, but early detection, with appropriate support and counselling for the child, may help to reduce these effects (Palmer, 2001).

Model in Photo. Intended as illustrative



CHILD SEXUAL DEVELOPMENT AND PROBLEMATIC BEHAVIOUR

While some children who have experienced sexual abuse may not exhibit any behavioural changes, some child victims may begin to act out problematic sexual behaviour. A basic understanding of child development will help you recognize when certain behaviours may be of concern.

Preschool children

The sexual development of preschool children is characterized by exploration. Behaviour is typically based on learning and curiosity. Preschool children are interested in exploring their own bodies and other preschool children's bodies (i.e. looking at private parts, poking and pulling at private parts, and pulling pants down). This type of activity is typically brief, with young children being easily redirected to alternative activities if the other child shows little interest.

This type of behaviour among preschoolers is not about sexual pleasure — preschool children do not understand sexual pleasure and it is completely beyond their level of development. However, if preschool children have knowledge about forms of penetration activities, or have sensory information about sexual activity (i.e. what it feels, sounds, tastes, smells, or looks like), they have learned this information from somewhere (through exposure or experience). While concerning, knowledge of this type of information should not automatically lead the professional to conclude that the child has been sexually abused. It does, however, present a need for the professional to obtain further details from the child as to how and where s/he learned this information.

NOTE: While children do not understand sexual pleasure, they may experience pleasure. Careful consideration should be given to the language used when speaking with children about sexual behaviours. A child may not identify their experiences to the interviewer when a term such as "bad touch" is used if they have experienced the behaviour as pleasurable.

Coercive-based sexual behaviour in preschool children is also a cause for concern. Examples of coercive-based sexual behaviour include: forcing other children to take their clothes off, and forcing other children to engage in sexual games. Coercive-based sexual behaviour is demonstrated in preschool children when they have somehow linked aggression with sexual behaviour in their minds. This type of association is a learned behaviour. Therefore, the question then becomes, "How was this learned?" and "Was it learned through exposure or experience?"





Remember, natural exploration behaviours may be a cause for further follow-up if a child cannot be easily redirected and/or is persistent with the behaviour.

The following example demonstrates when behaviour might be cause for concern:

One child suggests to another child that s/he should pull her/his pants down and the other child is disinterested. If at this point the child initiating the behaviour threatens to hit the other child if s/he doesn't agree to it, this is concerning behaviour.

Keep in mind that it is typical to see coercive behaviour in all areas of preschool development (i.e. social development, language development, etc.), outside of sexual development. If coercive behaviour is combined with sexual behaviour during preschool, it may be something to be concerned about.

Children from 6 to 12 Years of Age

Following the preschool years, children move into the privacy-boundary stage of sexual development. It is typical for children from six to eight years of age to seek privacy. Beyond the age of eight, children gradually move into the latency stage of sexual development. This stage is a time of exploration, and while sexual curiosity is present, children become very self-conscious about their behaviour. The latter part of this stage, ages 10 to 12, moves to having "crushes" and children becoming more concerned about body image. They also can develop an intense admiration for adults of the same sex.

Similar to preschool children, coercive-based sexual behaviour in school-aged children is also a cause for concern. If two children are engaging in sexual behaviour, look at exactly what happened and the dynamics between the children. The person who witnessed the behaviour/activity should be spoken with directly to obtain the details surrounding what occurred. The circumstances that formed the setting for the incident(s) are also very important to understand as you attempt to determine whether or not there is cause for concern. Some important information to obtain includes:

- What happened?
- Who started it?
- Where did the child(ren) learn the behaviour?

(G. Crisci (personal communication, May 3, 2011); Johnson, 2003; Bancroft, 2003; Gil & Johnson, 1992)

NOTE: While it is far more common to have older children engage younger children in inappropriate sexual behaviour, it is possible to have the reverse. Information about the context in which the behaviour occurred should be considered carefully.

Self-Stimulation versus Masturbation

Self-stimulation is a normal activity for children under the age of 12, but it can be misinterpreted as a sexual behaviour. It is important to understand that for preschool children, self-stimulation is a self-soothing behaviour — the motivation being self-comfort/regulation instead of sexual arousal.



Where there would be concern around self-stimulating behaviour is if the action appears to be persistent and is interfering with a child's daily activities. Normally, if a child is engaging in self-soothing behaviour, s/he can be easily redirected. However, if it is difficult to redirect a child, then certain questions should be asked. It makes sense to inquire whether there is something going on in the child's life that is causing her/him anxiety, or to feel more anxious than usual. This behaviour could be attributed to multiple factors (i.e. the child generally has anxiety, the child isn't feeling well, a significant person in the child's life is ill, etc.). A child may have a variety of worries that result in self-soothing (outside of concluding the child has been sexually abused).

Important information to find out includes:

- How long does the self-stimulation go on for?
- Are you aware of any issues in the child's life that could be causing anxiety and hence more frequent self-soothing behaviour?
- Can the child be redirected away from self-stimulation? (If "no," there may be reason for concern. Explore the situation further.)

It is important to acknowledge that preschool children do not understand the difference between what is socially appropriate behaviour versus what is socially inappropriate behaviour — their behaviour is driven by meeting their own needs. Parents/primary caretakers are responsible for socializing preschool children and setting/ reinforcing boundaries. Keep in mind that it is easier for young children to comply with social norms when adults set boundaries in a friendly and simple way. When adults yell or get angry with children for socially inappropriate behaviour, they can inadvertently reinforce the exact behaviour they are trying to change.





SIGNS A CHILD MAY HAVE BEEN SEXUALLY ABUSED

While some children who have been sexually abused may be asymptomatic, other children who have been sexually abused may display a variety of behaviours. It is important to note that these behaviours may also be observed in a child who has not been sexually abused, but may still signal s/he is in distress. When interviewing a child, it is important to explore various reasons for why this behaviour may be occurring and avoid drawing conclusions that the behaviours are a result of sexual abuse.



NOTE: When sexual abuse is experienced in the early years (from 3 to 7 years of age), there is a correlation with acting out in a sexually inappropriate manner in the later years (from 8 to 12 years of age). *G. Crisci (May 3, 2011*)

Behaviours that should be further explored include, but are not limited to, the following:

• Advanced sexual knowledge: The child has sexual knowledge beyond her/his stage of development. This may include sensory information about certain smells, sounds, tastes, and/or explicit visual details of sexual activity.

• Withdrawn/depressed: The child becomes increasingly withdrawn. S/he resists playing with friends and withdraws from activities previously enjoyed.

- Sleep disturbances: The child wakes up distressed from nightmares or night terrors, or the child begins bedwetting that wasn't previously a problem.
- Clingy: The child becomes extremely clingy. S/he resists doing things independently that s/he previously enjoyed.
- Decline in school performance: The child's performance at school declines and her/his grades drop.

• Shows distress around a particular adult: The child shows distress or resistance to spending time with a particular adult. S/he has expressed dislike for the adult.

- Excessively seeks time with a particular adult: The child excessively seeks time with a specific adult who seems to favour the child, giving her/him extra attention, gifts or privileges.
- Aggressive: The child seems agitated and acts out aggressively towards others (e.g. yelling, hitting, and putting others down).
- Self-destructive: The child is physically harming her/himself and sharing feelings indicating a lack of self-worth (e.g. "I wish I was dead," "I should not be alive," "What's the point in living?").
- Secretive: The child seems more withdrawn and avoids sharing information that would typically be shared. S/he avoids answering questions or becomes defensive when information is sought in relation to a particular adult or situation.

• **Physical symptoms:** The child shows physical signs of abuse in the genital region (e.g. pain, bleeding and discharge) or complains of stomachaches, headaches, loss of appetite, or increased appetite.

- Excessive self-soothing: The child is excessively engaging in self-soothing behaviour and cannot be redirected to other appropriate activities.
- Fixation on pornographic material: The child repeatedly talks about or wants to look at pornographic material.
- Sexually acting out: The child acts out sexual behaviour on peers, animals, etc.
- **Toileting issues:** The child is bed-wetting, soiling clothes (after having been toilet trained) or exhibits other behaviours associated with toileting.

 \frown

When considering if there is cause for concern, one must explore whether there is:

- A change in the child's typical patterns of behaviour(s)
- An increase in the frequency of the behaviour(s)
- A persistence in the behaviour (lasting longer than one month)
- A behaviour newly associated with certain situations or individuals. This may include a child who uses new vocabulary for private parts or sexual acts/situations, or demonstrates fear around someone who s/he was previously comfortable being around.

It is important to note that changes in a child's behaviour may signal a child is in distress. A variety of factors could be causing this distress, and should be further explored. This is necessary regardless of whether or not sexual abuse is believed to be the reason.

IMPACT OF CHILD SEXUAL ABUSE

Our understanding of the impacts of child sexual abuse on children's emotional and psychological well-being has grown rapidly over the past 20 years. Child victims may feel grief, guilt and fear. They may display an inability to trust, cognitive confusion, lack of mastery and control, repressed anger and hostility, blurred boundaries and role confusion, pseudo-maturity and failure to complete developmental tasks, depression and poor social skills (Palmer, 2001). Corresponding knowledge on how children are affected by online sexual abuse is, on the other hand, very sparse (this will be discussed further in the section titled *"Impact of Technology-Facilitated Child Sexual Abuse On Victims"* on p. 13).

The degree to which a child internalizes experiences of sexual abuse is unique to each child and dependent on a number of factors including: 1) the nature of the abuse; 2) the circumstances in which the abuse occurred; 3) the modus operandi of the offender; 4) the nature of the child's previous life experiences; 5) the degree of support given to the child within the home environment; and 6) the child's natural built-in resilience (Palmer, 2001).

As a general rule, the impact of the trauma is increased if one or more of the following factors are present:

- The abuse takes place over an extended period of time.
- The trauma involves an acute assault by a stranger.
- The offender is a significant person in the child's life (i.e. father, uncle, someone in a position of trust) with whom the child has an emotional attachment.
- The abuse is severe (i.e. invasive, pervasive, and includes pain and suffering).
- The offender threatens the physical safety of the child and/or the child's significant caregiver(s).
- The child's previous life experiences have not been positive (e.g. emotional and physical neglect, domestic violence).
- The child receives little or no support from key family members, is not believed by significant caregivers and has few, if any, social networks to turn to for support.
- The child's natural built-in resilience is low. Personal resilience is a complex quality to conceptualize because it is innate to each individual and may be affected by such factors as the child's concept of self, the nature of the child's relationships with primary caregivers from infancy, and the child's personality composition (e.g. shy/timid versus bubbly/ outgoing/extroverted).

(Taskforce on the Health Aspects of Violence Against Women and Children, 2010).

12



Appropriate reactions to a child's disclosure of sexual abuse are critical, as they affect the severity of her/his overall trauma. *Finkelhor*, 1984

In 1995, Finkelhor and Berliner created a conceptual framework for the impact of sexual abuse on children. They described four trauma-causing factors: betrayal, powerlessness, stigmatization and traumatic sexualization.

- Betrayal: occurs when the offender is in a position of trust, and claims to love the victim. A child may learn not to trust anyone as a result of this betrayal.
 - » Consequences: can include relationship problems, feelings of isolation, a lack of respect for rules and for individuals who are perceived as in a position of authority, involvement in criminal activity and vulnerability to re-victimization because the child loses the ability to judge who can and can't be trusted.
- Powerlessness: occurs when the abuse is repetitive, when force/threats are used, and/or when a child feels that there is no escape. A child may feel that s/he has no control over anything in her/his life.
 - » Consequences: can include always being on the run, 'spacing out,' panic attacks, nightmares, flashbacks, attempts to gain control (sometimes through obsessions and compulsions, sometimes through aggression) and eating problems.
- Stigmatization: occurs when the victim is made to feel dirty when told that s/he has provoked the abuse. A child may feel worthless.
 - » **Consequences:** can include self-hatred and shame, self-neglect, substance misuse (including alcohol), depression, self-harm and feeling that life is empty or meaningless.
- Traumatic sexualization: occurs when the victim is given incorrect information about sex, sexuality and intimacy. A child may be made to feel that s/he only exists to be used by others and that her/his body belongs to anyone who wants it.
 - » Consequences: can include a fear of intimacy, confusion about sexual identity, flashbacks during sex, sexual promiscuity and an increased vulnerability to being exploited.

THE IMPACT OF TECHNOLOGY-FACILITATED CHILD SEXUAL ABUSE ON VICTIMS

The growth in the production and dissemination of child sexual abuse images and material has been exponential in the past 15 years. The accessibility and anonymity of the Internet has played a major role in how easily images/ videos are shared and exchanged among offenders. Typically, the propagation of this content, once it is uploaded on to the Internet, is vast and near to impossible to control.

When children know that the abuse has been photographed or videotaped, the existence of this material creates another layer of trauma for the victim, over and above the contact offence. The fear or guilt a child may experience as a result of sexual abuse may be exacerbated when images/videos have been taken. Children may fear that the images/videos could be seen by people they know (such as parents, other family members, and friends) and/or that the content will be posted online for anyone to see.

Offenders may instruct a child on how to behave/look when images/videos are being taken (i.e. telling them to smile) and thus images/videos may portray a child as being a "willing" participant or "enjoying" the abuse. Viewing images/videos where a child is smiling or appears to be an "active" participant in the abuse may help offenders rationalize and justify their actions, contributing to the offender's cognitive distortions that the child willingly took part in the abuse and "liked" it. Offenders may use these images/videos to manipulate the child



into believing that anyone who sees the images/videos will think the child "wanted" it to happen. How the child believes s/he is portrayed in the content may intensify her/his feelings of guilt or self-blame.

The impact this has on the child's ability to disclose what occurred is discussed in more detail in the section titled *"Impact of Technology-Facilitated Child Sexual Abuse on Disclosure"* on p. 39.

Technology and the Internet changed child sexual abuse by enabling the images/videos to be:

- Distributed widely to large audiences around the world
- Accessed simply, without requiring the use of physical mail or hand-delivery
- Taken with higher-quality, less-expensive, and more portable cameras
- Transported easily with the use of laptops, USB drives, cell phones, and other small storage devices
- Taken with devices other than traditional cameras, such as webcams, portable video cameras, cell phones, and cameras built-in to computers
- Accessed and distributed in a way that appears private and anonymous
- Altered simply and quickly with image-editing programs
- Reproduced endlessly
- Broadcast live, as the abuse is taking place
- Available to those who have not (or have not yet) committed a contact sexual offence against a child
- Used as a networking or trading tool among offenders
- Replaced or moved if the website or other Internet platforms are shut down or otherwise blocked
- Encrypted, password-protected, or otherwise hidden
- Created virtually



idel in Photo. Intended as illustra



4.

OFFENDING BEHAVIOUR

WHO SEXUALLY ABUSES CHILDREN?

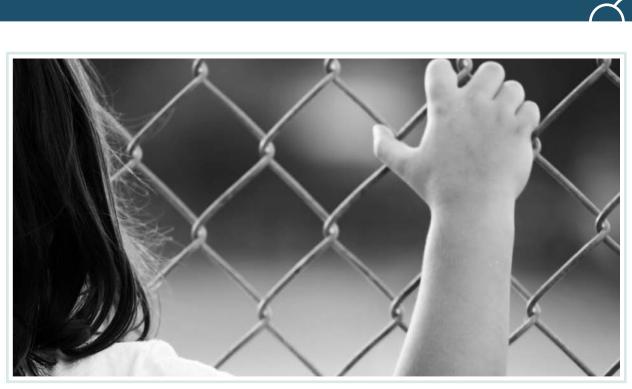
Individuals who sexually abuse and exploit children come from all walks of life and cannot be easily identified. It is essential to pay attention to behaviours and situations that present risk, rather than to focus on an individual's appearance, character, and/or marital status/relationship history. A well-liked individual that contributes to their community is not exempt from having the capacity to sexually exploit or harm a child. If an individual witnesses an inappropriate interaction between an adult and child, regardless of the adult's position within the community, the behaviour needs to be addressed.

The different techniques that offenders may use to manipulate a child depend on their relationship with the child. Offenders who are unknown to the child may use lures (such as telling the child there is an emergency, telling the child they need help, offering to give the child a gift, money or a job, etc.) to gain access to the child. In these situations, it is also more common to see the use of confrontation, threats of force and actual physical force to control the child. In contrast, intra-familial offenders tend to control their victims through private access and familial

authority. Acquaintance offenders, individuals who are in a position of trust or are in the child's/family's close circle of trust, often build relationships with the adults around a child or seek out children who may have fewer adults in their lives. This ensures that the offender's time with the child is welcomed and encouraged. The use of grooming techniques to gain prolonged access to the child and to manipulate the perception of the child and the adults around the child is an important component of the process.

Research reveals that individuals who sexually abuse children usually know their victims in some capacity.





WHAT IS GROOMING?

The process known as "grooming" comprises a variety of techniques used by an offender to access and control potential and actual child victims. The process requires the offender to have access to the child, time with the child and a certain level of interpersonal skills. The goal is to gain the child's trust and co-operation (and is also sometimes used to gain the trust of the child's family), decreasing the likelihood that the child will tell anyone about the abuse. Offenders may use a combination of attention, affection, kindness, privileges, recognition, gifts, alcohol, drugs, and/or money to groom a child for the purpose of lowering inhibitions and increasing the chance of successfully offending against a child.

The purpose of grooming is:

- To reduce the likelihood of the abuse being detected;
- To gain prolonged access to and control of the child;
- To manipulate the perceptions of other adults around the child;
- To manipulate the child into becoming a cooperative participant;
- To normalize inappropriate behaviour;
- To reduce the likelihood of a disclosure; and
- To coerce the child into believing that s/he instigated and is in control of the activity.

Offenders who target young children are more likely to first groom the parents of the child and those adults around the child. This ensures that the offender's time with the child is welcomed and encouraged. For example, the offender may groom parents by offering emotional support, friendship, opportunities for their child, and/or helping them out financially. Trust is built with the parents and adults around the child to the point where they are comfortable leaving the offender to care for and spend time alone with their child.





THE GROOMING PROCESS

Grooming is often a slow, gradual and escalating process of building trust and comfort with a child. It usually begins with subtle behaviours that do not appear to be inappropriate, and that may, in fact, suggest that the individual is very good with children. Many people who have experienced child sexual abuse do not recognize the grooming process as it is happening, nor do they realize that this process of manipulation is part of the overall abuse.

The techniques used by an offender in the grooming process may vary, but follow a fairly common progression. Techniques may include the following. The offender:

- Begins by establishing a friendship and gaining the child's trust.
- Moves to testing the child's boundaries (and the child's ability to protect her/himself) by, for example:
 - » Engaging in roughhousing, back rubs, sexual games, etc.
 - » Making sexual comments or remarks, such as telling the child s/he looks "hot"
 - » Deliberately walking in on the child changing or toileting
 - » Suggesting activities that involve changing or sleeping (e.g. massaging, swimming, sleep-overs, showering, etc.)
 - » Scaring the child to make them feel vulnerable
 - » Telling the child sexually explicit jokes
 - » Teasing the child about breast and genital development
 - » Sharing stories of past sexual experiences
 - » Taking non-sexual, but inappropriate, photos of the child
 - » Faking injuries to receive attention from the child (e.g. back rubs)
 - » Bathing or showering with the child
- Progresses from non-sexual touching to "accidental" sexual touching which usually occurs during play (e.g. tickling and "accidentally" touching genitalia, wrestling in underwear, etc.).
 The child may not identify this as purposeful, inappropriate touching.
- Confuses the child into feeling as if s/he is equally responsible for the contact. Most children
 do not even realize that the contact has changed they may not notice or may simply become
 confused by the contact as it begins to cross boundaries and becomes sexual. This may progress
 to increasingly invasive touching or abuse.
- Becomes more involved in the child's family or home life so that s/he can build trust with other adults involved in the child's life.
- Discourages and prevents the child from telling anyone about what is happening, as the child is made to feel complicit in the abuse.
- Makes the child feel a sense of obligation to (and, at times, protective of) the offender.
- Engages the child in unnecessary physical contact such as unwarranted physical restraint this can serve to normalize the physical contact and may satisfy the offender's need for physical touch with the child.

Often, the goal is to have the child see the offender as a caring adult who can be trusted, and whose direction the child should follow.



WHY ARE CHILDREN VULNERABLE TO GROOMING?

Children are vulnerable to grooming because:

- They are still developing socially and emotionally, and therefore it can be easy to confuse, control and coerce them.
- They are taught to respect and listen to adults.
- They do not have a developed understanding of sexuality.
- They cannot interpret or identify an adult's intent.

According to Lanning (2005), the acceptance of children's vulnerability to grooming needs to be applied to all child victims — meaning a child is vulnerable whether s/he comes from a "stable" or "chaotic" home and whether s/he "does" or "does not" receive enough attention and affection at home. When sexual activity occurs between an adult and a child, the adult is always to blame and is always the offender, regardless of whether the child:

- Said no
- Fought back
- Actively cooperated
- Initiated the contact

- Told someone
- Accepted gifts or money
- Enjoyed the sexual activity

Dynamics of Grooming

Children who have been groomed by an offender often do not believe they are "real" victims because they may have enjoyed and willingly spent time with the individual. As a result, these children are more likely to voluntarily continue to spend time with the offender. Understanding the dynamics of grooming can be very confusing for families and children, as they may not understand how the relationship was manipulated by the offender. This betrayal, the realization that the offender manipulated the relationship all along, can be the most devastating component of the abuse.





OFFENDING BEHAVIOUR AND TECHNOLOGY

While there have been no large-scale studies published conclusively addressing whether or not those who possess or access child pornography are also at risk of committing contact offences, the research that is available suggests there may be a correlation. For example:

- In one US study involving 155 offenders convicted of possession, receipt, or distribution of child pornography, 85% admitted to also having committed at least one contact sex crime against a child — crimes that were previously not known to law enforcement. Offenders admitted to an average of 13.6 victims each (Bourke & Hernandez, 2009).
- According to Lanning (1992), offenders who were preferential child molesters reported "almost always" collecting child pornography and/or child erotica.
- According to a 2010 study (Seto, Hanson, & Babchishin) one in eight online offenders (12%) had been arrested or charged with a sexual offence in the past, but one in two (55%) online offenders admitted to a contact sexual offence in studies that involved self-reports. It was also revealed that 4.6% of online offenders committed a new sexual offence of some kind during a 1.5 to 6 year follow-up, with 2% committing a contact sexual offence and 3.4% committing a new child pornography offense.
- In April 2010, the National Society for the Prevention of Cruelty to Children (NSPCC) published a study containing an analysis of media reports of court cases over the previous 20 months. They found that 100 sex offenders (who were subsequently convicted) had circulated over 2 million child sexual abuse images. One out of four of the sex offenders had held positions of trust, including teachers, clergymen, medical personnel and police.





Offenders Involved in Online Child Pornography: Considerations

In cases where an individual is arrested for possessing, accessing, creating and/or distributing child pornography, there may be no known contact offences. As described in the section *"Offending Behaviour and Technology"* (p. 19), the available research suggests that there may be a correlation between accessing/ possessing child pornography and the risk of committing contact offences. Given this information, Child Protection Services may become involved in these situations to:

- 1. Assess the possibility that children who the offender has had unsupervised access to may have been victimized; and/or
- 2. Assess the risk to children who the offender presently has access to or is seeking access to.

It may be necessary to interview any child who an offender has had unsupervised access with in order to assess the possibility that child may have been victimized. Information contained in this resource guide will assist the professional when conducting the interview (see *"The Importance of Questions Tied to Technology"* (p. 33) for more information).

Conducting a risk assessment in situations where an individual has been charged with a child pornography offence is complex. When a child protection worker is gathering information to assess the risk to the children within the home, it is important not to solely rely on information provided by the offender or the non-offending family members. The offender may attempt to minimize the seriousness or harm, deny involvement, blame others or normalize exposure if questioned by family members as to her/his involvement. This may sound like:

- "It was just a picture, what's the big deal?"
- "It was a pop-up."
- "I thought they were 18."
- "I was curious."
- "I didn't mean to look at it."

Obtaining details from law enforcement about the nature of the offender's charges will highlight any inconsistencies and missing information reported by the offender.

When gathering information for your risk assessment, consult with law enforcement. Consider discussing the following:

- What is the focus in the collection of child pornography? Incest? Violence?
- What are the ages of the children in the images/videos?
- What is the gender of the children in the images/videos?
- What is the severity of the images? Do they involve sexual posing? Sexual acts? Extreme sex acts?
- How was the individual accessing the images/videos?
- How many images/videos were in the individual's collection?
- Did the individual have memberships to child pornography sites?
- Did the individual create any written child pornography content?

This information will assist the professional in understanding the nature and severity of the content as well as the extent the offender went to in accessing the content. It can be used to challenge the offender's minimization of the online offences and help the family comprehend the nature of the offender's activities.



Children can provide valuable information about what they are or have been experiencing in their lives. Professionals working with children are responsible for understanding how children communicate in order to help them accurately share their experiences. This section includes concrete information that will assist professionals in preparing for meetings/interviews with children. This includes information about child development, how to effectively communicate with children, factors that impact children's memory and the importance of questions tied to technology.

ELICITING INFORMATION WHEN SPEAKING WITH CHILDREN

In order to elicit information when speaking with children, Anne Graffam Walker (1999) reminds us that we need to approach each child as an individual with unique experiences. Children need to be asked questions in a way that they can understand, with adults bearing the responsibility for accurately interpreting what has been said. This includes acknowledging and being aware of the fact that even children of the same chronological age can reach different stages of development at varying times. For a child to share accurate information about her/his experience, it is necessary to understand how s/he communicates, and ensure that the meeting/interview process meets the child's needs and is developmentally appropriate.

Did You Know?

About Children:

- If adults ask the right questions in the right way, children of all ages will likely tell them what they know.
- When constructing a question for a child, take the child's age and add one this will be the maximum number of words you can use when questioning the child (e.g. for a six-year-old, a question should have no more than seven words).
- Children do not consider the intent of adults. For example, if an adult is manipulating a child for sexual access, it is likely the child will comply. Children do not understand where such interactions may lead to.
- Children two and three years of age can often recall and report past experiences accurately.
- Preschool children can have an exceptionally detailed memory.
- If a preschool child is asking an adult lots of "why" questions, it usually means s/he likes them and wants to keep the adult engaged in a conversation.
- Preschoolers often consider any verbal indiscretion a lie (i.e. if an adult makes an honest mistake, the child will assume the adult is lying).



Remember:

- Most children respond well to an interviewer with a friendly demeanour.
- When adults raise their voice, children think they are in trouble.
- Children six to twelve years of age are more self-conscious than preschoolers, and more prone to embarrassment.
- If an adult is not able to keep a preschool child's attention and the child is not listening, saying the child's name can help refocus her/his attention.

(Graffam-Walker, 1999; G. Crisci, personal communication, May 3, 2011)



22



Language Tips for Talking with Children

The following section provides language tips for communicating with preschool and school-aged children for the purpose of assisting child protection professionals when meeting with/interviewing children. As children have a limited use of vocabulary and language, this may create barriers when talking with children, and it is highly recommended that professionals read through these guidelines in advance of speaking with a child about any concerns.

General Tips for Communicating With a Child:

- Keep language simple and age-appropriate.
- Speak slowly and allow the child time to process the information.
- Use concrete terms.
- Use names instead of pronouns such as he, she, and they.
- Stop at regular intervals to ask the child if s/he has any questions.
- Only ask questions that are purposeful and necessary in order to get the information you need from a preschool child.

Concrete/Literal

Preschool Children:

- Preschool children use and interpret language very literally. For example, if a child is asked, "Are you in preschool?" during a meeting/interview, a child under five years of age is likely to say "No," simply because at that moment, s/he is sitting in the meeting/interview room versus being at preschool.
- Preschool children usually do not know that they "don't know" something. Therefore, it is ineffective to ask questions such as, "Do you understand?"

Children 6 to 12 Years of Age:

- Children can be confused by abstract language, sarcasm, irony, or proverbs.
- From ages 10 to 12, children can still interpret language very literally. It is effective to continue to use concrete language with this age group.

Cognition

Preschool Children:

- Preschool children can know exactly what happened but be unable to explain it. The receptive language (comprehension) of a young child is greater than the child's expressive language (spoken language).
- Preschool children do not have a developed sense of time and duration. For example, if a fouryear-old child is asked how long s/he spent at someone's house and it was two hours, s/he may respond that s/he was there for two days because that is how long it felt.



Preschool children do not have a developed understanding of age. For example, if a child
is asked when a situation happened, and it was yesterday, the child may respond, "When I
was little." Up until around the age of eight, if a child is asked how old another child is, they
will typically judge the age of the child by her/his height and size. For example, if a child is
interviewed about an incident allegedly perpetrated by a teenager who is short in stature, s/he is
likely to say the person was "little" if asked the teenager's age.

Children 6 to 12 Years of Age:

- Children tend to provide an answer to a question, even if they have no knowledge on the subject. Reassure them that it is okay if they do not know the answer to a question and emphasize that it is very important not to pretend to know the answer.
- Children need more time than adults to process information and formulate answers. Allow for adequate time.

Simple Sentences

Preschool Children:

• Preschool children do best with simple sentences: subject, verb, and object. For example, "Mommy was in the kitchen."

Children 6 to 12 Years of Age:

• Avoid "If then" sentences, as well as complex and compound sentences with children 6 to 12 years of age.

"Wh" Questions

Preschool Children:

- Preschool children can answer "who?", "what?", "where?" questions and many children can also answer "how?" questions.
- Preschool children often associate "why?" questions with being in trouble. Use caution with this type of question.
- Avoid "when?" questions as preschool children have a very different sense of time.
- Preschool children do not typically notice the actions of others, as they are too egocentric. For example, if you ask a child what someone else was doing at the same time s/he was there, the child likely won't know.
- Preschool children do not have cause and effect thinking which is necessary for understanding "why" anything happened.

Children 6 to 12 Years of Age:

- Children of this age can still associate "why" questions with being in trouble.
- By the age of 10, children have cause and effect thinking, can answer "why" questions and understand consequences.
- Children of this age cannot be expected to have a stable understanding of time until mid-teens. It is better to tie "when" questions to temporal indicators or event signposts such as asking if school was out, if it was before breakfast, or after lunch, etc.



"Some" vs. "Any"

Preschool Children:

• Preschool children tend to have a different understanding than adults when it comes to the words "some" and "any." If you ask a preschool child if **anyone** was with them (and it is confirmed that there was someone with her/him), it is likely that the child will respond "No" because s/he does not perceive the person to be "just anyone." Yet if you ask a preschool child if **someone** was with her/him, the child will likely accurately respond "Yes," and tell you who it was. Avoid using the word "any" (e.g. "anywhere," "anyone," "anything") and replace with "some" (e.g. "somewhere," "someone," "something") when speaking with preschool children.

Colour

Preschool Children and Children 7 Years of Age and Under:

 Until the age of eight, children's description of colours may not be consistent. Avoid using colour identification when asking children questions or making statements to assess their understanding of right and wrong.

Children 8 to 12 Years of Age:

• Children 8 to 12 years of age typically have acquired a stable knowledge of colours and are able to describe them consistently.

Counting Incidents

Preschool Children and Children 6 to 12 Years of Age:

• Children cannot reliably speak to how many times something has happened. For example, if you ask a child how many times something happened and it occurred more than once, s/he is likely to say "a million times!" To get an idea of how many times something happened, ask the child if what s/he just shared happened some other time? If yes, then ask again, "Did it happen some other time?" Following your discussion, add up how many occasions the child stated the behaviour happened. Other questions that may help you understand how many times something happened include "Did that happen more than one time?", "Tell me about the last time that happened.", "Tell me about the first time that happened.", and "Tell me about a time that it happened differently (i.e. different place, time of day, etc.)."

Sequencing

Preschool Children and Children 6 to 12 Years of Age:

 Children can have difficulty sharing experiences in chronological order. Information will likely need to be pieced together by the professional following the completion of the meeting/interview.

\frown

Idiosyncratic Language

Preschool Children and Children 6 to 12 Years of Age:

- Children use language to share an experience by describing how it felt as opposed to describing what happened. For example, the child may say "He stabbed me in the bum."
- Children will replace or make up words for the ones they do not know. For example, the word "hamsterholder" could be used in place of the word "cage."
- Offenders sometimes use idiosyncratic (distinctive) language to describe abuse so that if a child discloses, the likelihood of being understood is reduced. For example, the offender may call a male child's genitalia a "golf club" or "sword."

Do You Remember?

Preschool Children and Children 9 Years of Age and Under:

• "Do you remember" is not a good phrase to use with preschool children and children nine years of age and under because it demands recall memory for retrieval which is still not fully developed. Preschool children will become very confused because they interpret everything literally and concretely. For example, when a four-year-old was asked, "Do you remember going to the park with Jack?", the child answered "no" because he never forgot about going to the park with Jack.

Category Words

Preschool Children and Children 6 to 12 Years of Age:

- Children are not proficient at categorizing words and often think in terms of more specific words. This can include categories such as relatives, relationships, actions, time, sequence, places, as well as measurements such as speed, distance, dimension, or quantity. For example, while being questioned, a child may deny s/he was touched, but describe that s/he was "tickled," "licked," "kissed," or "washed." A child may deny having moved, but acknowledge that s/he was driven to or walked to another location. A child may deny having clothes removed, but acknowledge that s/he had her/his pants removed.
- Errors of under-extension happen when a word is used correctly, but in a way that is too limited. For example, a child may deny the abuse took place because the child was asked if it occurred at the neighbour's house when it occurred in the neighbour's apartment.
- Errors of overextension happen when a child over-generalizes the definition of a certain word. Examples include a child using the word "truck" to describe any vehicle with wheels, a child using the word "puppy" to represent all furry animals, or a child referring to a "shoulder" as a private part because it is covered by clothing.



Prepositions

Preschool Children:

- Preschool children make mistakes with prepositions such as "in," "between," "on," "above," "below," "behind," "in front," "before" and "after," etc.
- For some prepositions, prompt children by using routine activities as cues for memories and time sequencing (for more information on memory, see the section titled *"Factors That Impact Children's Memory Abilities"* on p. 31).

Children 6 to 12 Years of Age:

• Children understand prepositions by around age five and a half.

Pronouns

Preschool Children and Children 6 to 12 Years of Age:

- Avoid pronouns (he, she, they, them, etc.) during the interview as children can easily become confused about subjects. Instead, use the names of people and places. For example, "Who was in the kitchen?" rather than "Was she there?" Once the child has identified the person, the professional should use the person's name.
- When a child is using pronouns, always clarify the subject the child is referring to. Children can jump to new subjects without indication. For example, if a child says, "He was in the basement," the interviewer should ask, "Who is 'he'?" as the child may now be referring to a completely different person or event.

Context

Preschool Children and Children 6 to 12 Years of Age:

- Children may shift their thoughts, and consequently, their responses without warning. This can result in children sharing what appears to be inconsistent information. However, it may simply be information shared out of sequence or about a different experience or event. Interviewers need to clarify with the child that s/he is responding to questions about the current topic.
- Children may become confused by questions if the interviewer does not first provide a context. Provide a context for each question by referring to the context already established by the child. For example, if the child mentions an incident at the park, the interviewer may follow with a question beginning with "At the park...".
- Inform the child any time you intend to change topics. For example, "Now we are going to talk about...".

Word Order

Preschool Children and Children 6 to 12 Years of Age:

• If you use a passive action statement such as "You said your mom was hit by your dad," the child may visualize the scene as mom hitting dad, and respond with "no." With preschool children, this misinterpretation can be avoided by using an active action statement such as "You said your dad hit your mom." Repeating what the child actually stated is important.

(Graffam Walker, 1999; Crisci, (personal communication, May 3, 2011))



Supportive Interactions with Children

Supportive interactions with children should only serve to make the child feel more comfortable. Speak honestly with children and explain what is going to happen. Providing direction and letting the child know what is expected of her/him will help her/him feel more secure.

Keep in mind:

- Children have a limited ability to concentrate.
- Children should be encouraged to ask questions, and to tell you if they do not understand a question.
- Children should be advised that they are not in any trouble, no matter what they say.

According to research done by Lamb and colleagues (2008), in a total sample of 100 children, it was found that high levels of support for children during meetings/interviews were associated with children providing more information.

Supportive interaction includes:

Using non-suggestive positive reinforcement

This includes positive responses to the child's behaviour that is unrelated to the content of the interview or to any other substantive issues. For example, "You are speaking really clearly. That is very helpful." as opposed to "You are telling me really good information."

Addressing the child in a personal way

This includes using the child's name. For example, "Katie, tell me everything about that."

Validating the child's emotions

This includes showing empathy in response to the child's expression of positive or negative emotion during the interview. For example, "I understand that this is difficult." Ensure that you are validating the child's emotions using her/his own words (e.g. only use the word "difficult" if that is how the child has described the situation).

Facilitating

This includes using non-suggestive encouragement. For example, "Mmm hmm," "Aha," "Okay," or echoing the child's last words to encourage her/him to continue talking.

28



Unsupportive interaction includes:

Confrontations

This includes getting angry with the child.

Challenging information

This includes challenging what the child is saying by referring to what was heard from an external source. For example, "But your teacher said that _____ happened."

Referencing positive outcomes

This includes using conditional statements that positive outcomes will only follow if the child co-operates. For example, "The only way for you to feel better is to tell me about it."

Warnings about negative outcomes

This includes making conditional statements that negative outcomes will follow if the child does not cooperate. For example, "We can't help you if you won't tell us."

Negative references to a child's behaviour

This includes reprimanding the child's behaviour during the interview. For example, "That's enough, sit still!"

(Lamb, Hershkowitz, Orbach, & Esplin, 2008)

Things the Child Protection Worker Should Avoid During a Meeting/Interview:

- Modifying a child's statement by putting it into the interviewer's own words
- Using forced-choice questions restricting the responses that can be given by the child
- Over-talking
- Interrupting
- Not responding
- Rapid topic changing (i.e. what is referred to as "topic hopping")
- External distractions (e.g. intercom, fire drill)
- Biased mindset/auto-pilot thinking
- Physical contact with the child
- Telling the child to look at you
- A room full of toys, distractions and other people



Special Considerations When Talking with Children with Communication and/or Cognitive Difficulties

Research has shown that children with disabilities are at an increased risk of experiencing sexual abuse (National Clearinghouse on Family Violence, 2005). Children with disabilities have notable strengths and can provide important information about what happened to them. A guideline developed by Michael Lamb and his colleagues in *Tell Me What Happened: Structured Investigative Interviews of Child Victims and Witnesses* (2008), for meeting with/interviewing children with disabilities outlines the following:

- 1. Provide extra time during the rapport-building phase of the meeting/interview to help the child feel comfortable and safe. Children with disabilities often experience more anxiety and confusion before and during the discussion.
- 2. Identify a support person who can be present during the rapport-building phase to help bridge an introduction between the child and the professional.
- 3. Provide support to the child and enough time for the child to process questions.
- 4. In all meetings/interviews, ask short questions using simple vocabulary. Sentences can be adapted to the limited attention and verbal capabilities of the child.
- 5. Keep the pace of the meeting/interview slow.
- 6. If a forensic interview is being conducted and there have been multiple incidents of abuse revealed, focus on one incident at a time. Begin by using open-ended questions, then direct questions, and when necessary, questions that involve multiple options before switching focus to another incident. When possible, divide the interview into two sessions to allow for a broader examination of the allegations.



30



FACTORS THAT IMPACT CHILDREN'S MEMORY ABILITIES

Over the past few decades, research has shown that considerable amounts of information can be obtained from young children. This section will provide readers with information intended to enhance their knowledge and understanding about children's susceptibility to memory errors and suggestibility. It will also outline strategies that are research-based and are designed to enhance the accuracy of children's accounts of events.

It is important to note the following:

- 1. Children provide more accurate information with open-ended questions, which promote free recall of events, versus focused questions, which only require short responses (Lamb, Hershkowitz, Orbach, & Esplin, 2008). Open-ended questions such as "Tell me everything about that," help children of all ages tap into recall memory and provide more reliable information than focused, closed-ended questions which require recognition memory. Lamb and his colleagues' research (2008) shows that despite knowledge about the effectiveness of open-ended questions with children around the world, the most commonly-used questions are still focused, closed-ended questions during meetings/interviews. Pezdek and Blandon-Gitlin (2008) explain that after opportunities for free recall are provided, it is effective to follow up with props to help children report important details of the experience that have not yet been shared. Keep in mind that with preschool children, props such as anatomically correct dolls or two-dimensional human figure drawings can risk inaccuracy in their accounts (*Bottoms et al., 2009*).
- 2. Children's ability to recall and share information can be significantly impacted if they feel highly anxious or upset during the interview. Establishing a supportive, comfortable environment during the meeting/interview will improve their ability to recall information accurately (*Bottoms et al., 2009*).
- 3. A significant time lapse between an experience and the meeting/interview can cause problems when speaking with children. Pezdek and Blandon-Gitlin (2008) explain that the greatest loss of information occurs in the time immediately after an event occurs. Children's memories of events fade at a greater rate than adults, and this is especially true for preschool children (Bottoms et al., 2009). According to Lamb and his colleagues (2008), increased delays between an event and a meeting/interview are associated with increased rates of forgetting and increased suggestibility.
- Children are more susceptible to false memories of plausible events. However, since sexual abuse is typically not a plausible event for children and they lack associated knowledge, their susceptibility to false memories is reduced (*Pezdek and Hodge, 1999*).
- Repeated experience of the same event strengthens memory and recall. If sexual abuse is experienced repeatedly, the child's memory of the experiences can be quite resistant to suggestion (*Pezdek and Roe, 1995*).
- 6. Certain distinguishing features of a memory help determine whether it is based on real experience, influenced by an external source or by imagination. Children can confuse information they hear for a memory of a real experience. Teaching children at the beginning of a meeting/interview how to distinguish a memory that is from a real experience versus from a suggestion or external source can improve the accuracy of information they provide *(Bottoms et al., 2009)*.



Helping Children Retrieve Their Memories

There are ways to effectively help children activate their memories in order to retrieve and share information. Recall relies heavily on associations and cues that can be used to prompt children's memories. Activating different memory systems helps the child share different pieces of information that will paint a picture about what is going on for them.

It is important to differentiate between the following types of memories when using cues to prompt recall: sensory, emotional, procedural and episodic.

Sensory Memory: Refers to smells, sounds and tactile information (e.g. remembering the feeling of someone's touch on your skin).

• Suggestion: Ask questions to activate sensory memory to help retrieve implicit memories (i.e. information that is stored but not readily accessible to verbalize), such as, "What did you see?", "What did you hear?", "What did you feel?", and "What did you smell?".

Emotional Memory: Refers to how someone felt during an event or situation. **This is the most powerful kind of memory.** Feelings about people or situations trigger emotional memory.

• Suggestion: Use cues during the interview to prompt emotional memory. This includes having the child express her/his feelings about people and places which can help prompt associated memories about events and situations. Remember that younger children may not yet have the capacity to label feelings. Having the child compare the feeling to other events in her/his life will help her/him to convey what s/he felt (D. Bowers, personal communication, October 7, 2011).

Procedural Memory: Refers to muscle memory and deals with what the body does and remembers. For example, actions that are consistently repeated, such as tying shoelaces or brushing teeth, are stored in procedural memory.

• *Suggestion:* Use of cues during the interview to prompt procedural memory such as recalling daily routines (i.e. getting dressed or tying shoelaces) can trigger associated memories about events and situations.

Episodic Memory: Refers to the recall of a location, a special event or an occasion. Episodic memory in children tends to be quite accurate.

• Suggestion: Use context cues during the interview to prompt episodic memory such as music, scents, or the way something felt, sounded, or looked which can trigger associated memories about events and situations.

(Jensen, 2008; Directorate of Immigration of Finland, 2002)

For a child who is abused repeatedly, the abusive events may be stored as procedural memory. For example, a child who is abused in their bedroom by the same offender multiple times a week over a period of time may not be able to differentiate one incident from another. It may be possible to elicit an episodic memory by asking the child if there was a time the abuse may have happened differently (e.g. in a different place, at a different time of day, etc.). A child may be able to recall more specific details with regard to an incident when it has been stored as an episodic memory rather than memories which are procedural in nature.



THE IMPORTANCE OF QUESTIONS TIED TO TECHNOLOGY

Technology is a huge part of our everyday lives and it is increasingly being used in the sexual abuse of children. Technology may play a role in the grooming of a child and/or the commission of an offence. Including questions about electronic devices and technological equipment when interviewing children about sexual abuse concerns will help child protection workers gain a better understanding of what has taken place.

During the interview, observe and document any changes in the child's behavior, voice or volume.

To assist you in this discussion, have the child identify what types of devices s/he is familiar with and describe who uses them, what they are used for, and when they are used (the "*Devices in My Life*" interview aid (p. 70) may be useful in this discussion). For example:

- What do people in your house/family use to take pictures/videos (i.e. cameras, cell phones, tablets, laptops)?
- Who takes pictures/videos in your family?
- What do people in your house take pictures/videos of?
- What rooms in your house do people take pictures/videos in? Do you take pictures in the living room? Kitchen? Bedroom? Bathroom?

If the concerns being addressed involve someone outside of the family home, rephrase the questions above to reflect this (i.e. Who at your daycare takes pictures/videos?).

When it comes to the role of technology in grooming, exposing a child to inappropriate images/videos of other people (including images/videos of adult or child pornography) may be used as a means to normalize inappropriate behaviour. Remember when asking questions about pictures or movies, avoid using words that denote judgement, such as: gross, dirty, or nasty pictures. Consider asking:

- Do you look at pictures or movies with someone?
- Does someone show you pictures or movies?
- Tell me about the pictures or movies? What was in the pictures or movies?
- Tell me who you look at pictures or movies with?
- Tell me where the pictures or movies are kept?
- Have you seen pictures/movies of people without their clothes on?
- Have you ever seen pictures/movies that you didn't like/made you feel uncomfortable?



Taking inappropriate pictures/videos of a child (i.e. pictures of a child in a bodysuit posed in various "gymnastic" positions) is another way technology may be used in the process of grooming a child. These images/videos may or may not have a sexual connotation. The purpose of taking these types of pictures/videos is to desensitize the child and increase the likelihood s/he will comply with requests for increasingly inappropriate pictures.

Examples of questions that may be posed include:

- Who takes pictures of you?
- Has there been a time you didn't like having your picture taken? Is there something about having your picture taken that you don't like?

Offenders may take pictures/videos of children involved in everyday activities in order to normalize and desensitize them to picture-taking/videotaping.

- Have you ever dressed up for pictures in clothes that you don't normally wear? (Consider only asking this to children 8 years of age and older).
- Do you have secrets about pictures?
- Has anyone ever asked you to keep a secret about picture taking?

If the abuse of a child has been recorded (possibly uploaded to the Internet), these images/videos represent a crime scene and proof of abuse. The presence of images/videos may confirm a child's allegations and possibly eliminate the need for a child to testify in court. In addition, images/videos may help identify additional victims, witnesses and offenders (Cooper, Estes, Giardino, Kellogg, & Vieth, 2005) for a forensic investigation. Some questions to consider posing in an attempt to determine if the abuse disclosed by a child has been recorded include:

- Tell me what was in the room when this was happening.
- What did [offender's name] say when this was happening?
- Tell me what [offender's name] was doing with her/his hands when this was happening?
- Where were [offender's name]'s hands when this was happening?
- Where was [offender's name] looking when this was happening? What was [offender's name] looking at when this was happening?
- Tell me where [offender's name] was in the room when this was happening?

Consider visiting the location where the alleged abuse has occurred and taking pictures that can be used as visual support for the child during the interview. For example, if a child has been allegedly abused by a teacher in school, take pictures of various classrooms and facilities within the school. As appropriate, use the pictures to aid in the interview process.



It is important to note that the abuse of a child may be recorded without the child's knowledge. Even if a child does not know whether the abuse has been recorded, s/he may be able to provide information that requires further exploration. This includes:

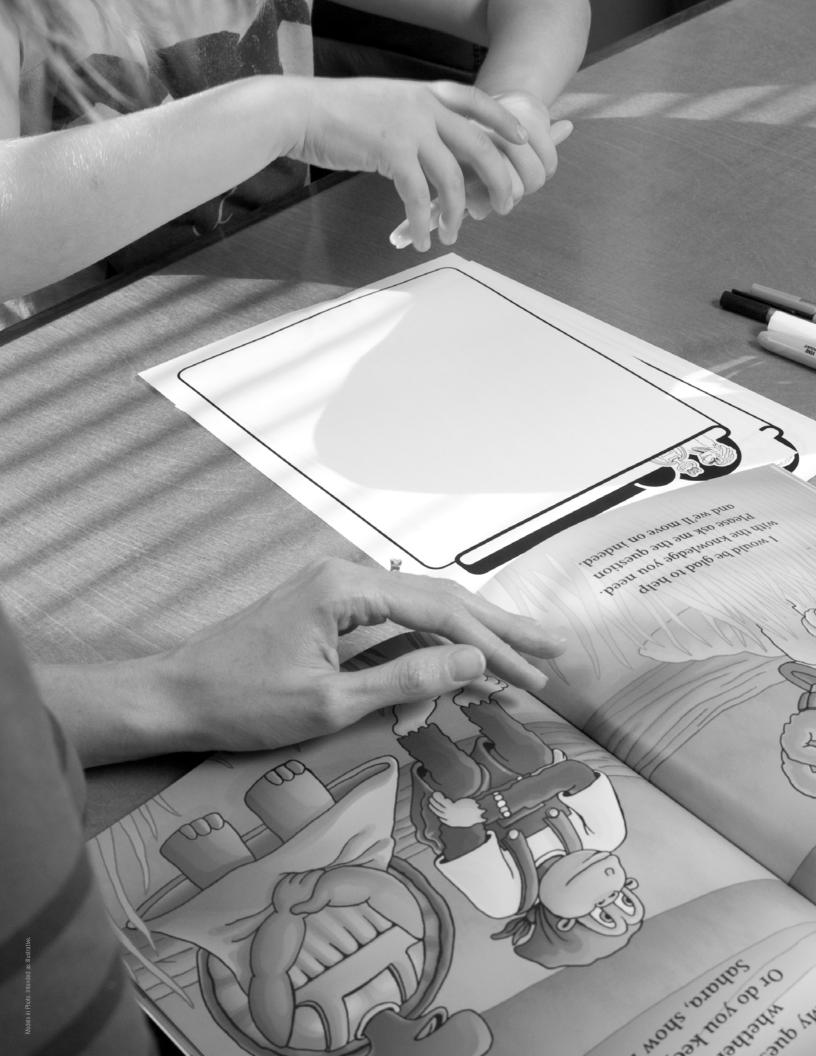
- A description of the presence of a recording device as commonplace;
- A description of being told to look in specific directions, to wear certain facial expressions and/or to pose in a specific way while the abuse is taking place; and/or
- A description of the offender looking in a specific direction while the abuse is taking place.

If a child discloses information that indicates the abuse was recorded, consider asking questions such as:

- Tell me what [offender's name] used to take the pictures/videos.
- Did [offender's name] take pictures/videos with something else?
- Where was the camera/cell phone/tablet, etc. placed in the room when this was happening?
- Where does [offender's name] keep her/his camera/cell phone/tablet, etc.?
- Did you ever look at/see the pictures/videos [offender's name] took?
- Where did you see the pictures/videos? Was someone else there when you saw them?
- Do you know whether anyone else has seen the pictures/videos? (Consider only asking this question to children 8 years of age and older.)

If information is known about the location where the abuse took place, such as child abuse images have been recovered or somebody witnessed the incident, consideration should be given to obtaining photos of the location. This would involve multiple images of different locations that show different aspects of the rooms. These pictures may be used as an aid during the interview.

Note: Under the Criminal Code of Canada, it is illegal to create, access, distribute and/or be in possession of child pornography (child sexual abuse content). Professionals should be consulting with law enforcement who have expertise in online child sexual exploitation if there is any indication that images were produced as a part of the abuse process of a child.



DISCLOSURE

6.

Disclosures happen in many different ways. Child sexual abuse may be accidentally discovered by an individual who walks into a situation where child sexual abuse is occurring or by an individual who comes across child sexual abuse images, videos, writings, etc. On the other hand, a disclosure may happen purposefully, with a child choosing to share information. Although a disclosure can be spontaneous, it is more common for disclosures to begin with "hints" and for the process to span days, months, or even years. Children might imply that something has happened to them without directly stating that they were sexually abused. They may begin by testing the adult's reaction to their "hint" to see if they will be believed or judged. The hints children use may not seem obvious, but if the adult handles things in a supportive manner (without judgment) there is an increased likelihood that they will continue to disclose the abuse.

Consider the following examples of what a disclosure might sound like:

- "What do you think of _____?"
- "_____ is mean."
- "_____ does not pay attention to me anymore."
- "_____ likes boys better than girls."
- "I don't like to go to _____'s house anymore."
- "I don't like _____ anymore."
- "I don't like it when my mom is gone ... I feel scared when she isn't here ..."
- "I'm not comfortable with ..."
- "I'm bad ..."
- "You'll be mad at me ..."
- "_____ gets mad a lot …"
- "_____ did things to me ..."
- "_____ does bad stuff to me that I don't like ..."
- "_____ plays games with me that I don't like ..."

Children are often hesitant, and may seem confused or uncertain during a disclosure. Professionals must be careful not to disregard a child's possible disclosure just because it appears vague, inconsistent, fluctuates and/ or seems unbelievable. During the interview process, if the child does not disclose abuse, or appears hesitant and/or unclear, it does not mean conclusively that the abuse did not occur.

It is not unusual for a child to retract all or parts of what s/he has disclosed at some point in time. This is seen as part of the process of "telling" about events for which the child recognizes or senses there may be personal and emotional fallout for her/himself and those on whom s/he is emotionally dependent. Retraction is more likely if the child feels that the professional and/or people close to the child don't believe her/him.

Myths About the Disclosure of Child Sexual Abuse

- If a child is sexually abused, s/he will immediately come and tell a safe adult, and provide a detailed account of what has occurred.
- A child is more likely to disclose if directly questioned by a parent, or by an adult authority figure who can provide help.
- Disclosure is always a one-time event.

Facts About the Disclosure of Child Sexual Abuse

- The disclosure of child sexual abuse is often delayed — research indicates that only 30% of child sexual abuse victims disclose during childhood.
- Child victims often avoid telling someone about the abuse because they are afraid they won't be believed, and are worried about the disruption a disclosure may cause to their family.

(Hindman, 1999)

For more information about the disclosure of child sexual abuse, see: protectchildren.teatreetells.ca.

WHY A CHILD MIGHT NOT TELL

Child victims can carry an enormous amount of shame about sexual abuse and often do not disclose their victimization. They worry about how a disclosure may affect their family and may be concerned about judgment from others. If the offender provided the child with alcohol or drugs, or exposed the child to pornography during the grooming process, the child may be concerned about getting into trouble for this if they disclose the abuse. Children can be conflicted about what to do – there may be components of the relationship they enjoy and depend on, yet they want the abusive component of the relationship to end. Many children mourn the loss of the relationship with the individual if they are removed from their lives. For vulnerable children who already have a history of not being believed by adults or who have experienced verbal or physical abuse, the idea of taking a risk and disclosing the sexual abuse may be too overwhelming (i.e. they may fear greater punishment).

According to Lanning (2005), child sexual abuse is the crime that is the least likely to be reported to law enforcement. He writes that children who are groomed often feel complicit, guilty, and blame themselves for what has happened. Child victims often fear that adults will not believe their disclosure of abuse. As a result, children who have been groomed may feel a need to describe their victimization in more socially acceptable, sometimes inaccurate, ways that relieve them of their guilt (e.g. a child who was manipulated by an offender into sexual touching, and who may have enjoyed and sought out opportunities to spend time with the offender may say s/he never willingly spent time or approached the offender).

Children who have been groomed and who willingly spend time with an offender may be worried about adults discovering certain behaviour they have been engaged in that they knew was wrong. They may be worried or embarrassed that their families will find out, and as a result, may be reluctant to disclose the abuse or may change information that they feel ashamed about.

Attachment theory helps us to understand why a child may value continuing the relationship with the offender over ending the abuse. Children often fear separation from a primary caregiver more than the abuse, and will do anything to maintain the relationship — even lie. An offender who understands this fear can exploit it by telling the child that they will be separated if s/he tells anyone. (*D. Bowers, personal communication, October 7, 2011*)

Many children who are suspected to have been sexually abused do not report the abuse when interviewed, even when there is clear evidence that they have been sexually abused.



WHAT THE RESEARCH TELLS US

Research examining the disclosure process with regard to child sexual abuse indicates the following:

- A child victim's familiarity with the offender increases the likelihood of disclosures being delayed (Lamb, Hershkowitz, Orbach, & Esplin, 2008).
- Retrospective analyses of child sexual abuse reported in adulthood suggests that both fear of family rejection and fear of disbelief are major factors leading children not to disclose (Lamb, Hershkowitz, Orbach, & Esplin, 2008).
- A parent's reactions or anticipated reactions are likely to affect the child's willingness to disclose abuse (Distel, 1999).
- A retrospective study of child sexual abuse reported in adulthood shows that threats by offenders are associated with a higher likelihood of not disclosing (Lamb, Hershkowitz, Orbach, & Esplin, 2008).
- Children are more likely to delay the disclosure of more severe sexual abuse involving intrusive acts and multiple incidents, as opposed to a single incident involving non-intrusive acts (Lamb, Hershkowitz, Orbach, & Esplin, 2008).

IMPACT OF TECHNOLOGY-FACILITATED CHILD SEXUAL ABUSE ON DISCLOSURE

For a child who is aware that her/his sexual abuse has been or may have been captured in the form of a photograph or video, it can be even more difficult for her/him to disclose. As outlined in the section titled *"Impact of Technology-Facilitated Child Sexual Abuse on Victims"* p. 13, child sexual abuse images/videos create another layer of trauma for the victim, over and above the contact offence. The fear of being exposed and having no control over what happens with the pictures/videos, especially if shared on the Internet, adds to the many reasons why a child may choose not to disclose. In addition, feeling that the images/videos may portray them as a "willing" participant in the abuse may impact a child's decision to disclose the abuse.

It is important to note that it is possible for the sexual abuse of a child to have been photographed or videotaped and the child be unaware that this has occurred. The equipment used to photograph or videotape the sexual abuse may not have been visible to the child (because it was discreetly positioned or the child was simply not aware of it).

If you are aware that child sexual abuse material has been



Model in Photo. Intended as illustrative.

created, however a child has not disclosed the abuse and/or that images/videos were taken, careful consideration must be given to how to proceed with this information. Decisions regarding when, how and at what age the child is made aware of the information about the images/videos, in addition to who shares this information with the child, should be made in consultation with a multidisciplinary team. Consideration should also be given to the individual child's situation and best interests.







MEETING/INTERVIEW METHODS

Preparation and planning is of key importance in having a successful meeting/interview with a child. Child protection workers using this resource guide will find: 1) an outline of how to prepare a supportive environment for the child; 2) tools for creating a meeting/interview map; and 3) information to consider about establishing rapport with the child. Information about how to practice conversing with the child, what to do if the child will not engage in the conversation, and how to close the meeting/interview is also reviewed.

PREPARATION AND PLANNING

Investing time up front to prepare for each meeting/interview will increase the quality of the session with a child. Preparation is not meant to confine the child protection worker to a stringent plan, but rather, to provide an organized outline for gathering information from the child. Preparation will vary depending upon the nature of the meeting/ interview, the available information, and the amount of time you have to prepare prior to talking with the child. Preparation is the foundation for an interview/meeting with a child about sexual abuse concerns. There are no skills that negate the need to spend time preparing. Prepare twice and interview once.



Model in Photo. Intended as illustrativ



Gathering Information

Prior to talking with the child, gather as much information as possible about the circumstances surrounding the concern(s). Below are examples of what child protection workers should explore prior to sitting down with a child. Keep in mind that this list is not meant to be exhaustive or prescriptive.

1. Collect general information about the allegation(s)/concern(s):

- What is the allegation(s)/concern(s)?
- Who did the child first tell?
- When did the concern(s) surface?
- How did the concern(s) surface?
- Have behavioural changes been observed in the child? This information may be obtained from adults who have regular contact with the child (i.e. parents, teachers, childcare providers).

2. Collect information about the child and the family:

- What is the child's name?
- What is the child's age?
- What is the child's gender?
- Who is the child's primary caregiver(s)? Are there any custody arrangements?
- Who lives with the child?
- What are the family dynamics?
- Does the child have any developmental considerations or medical conditions?

3. Where and when will the interview take place (i.e. date, time, location)?

• When appropriate, consult with the child's primary caregiver so the time doesn't interfere with the child's normal daily routine (e.g. naptime, mealtime, special activities, etc.). For preschool children, it is best to meet with them in the morning and/or after their afternoon nap, if they have one.

4. Does the meeting/interview need to be monitored? If so, how will it be monitored?

- Will a supervisor or colleague observe the meeting/interview?
- Will the meeting/interview be videotaped? Audiotaped? Of note, while videotaping can be greatly beneficial, this practice should be executed in accordance with organizational policy.

5. Document patterns of behaviour:

• Lanning (2005) stresses that the most important patterns of behaviour to identify and document occur during a disclosure process. Gather as much information as possible from individuals involved with the child.



• There is incredible value in conducting a meeting/interview with the person expressing concerns about the child. Take the opportunity to determine how the concerns arose and what the child said or did.

Examples of questions to ask the person who has concerns about the child:

- » Has the child made any concerning statements to you or demonstrated any concerning behaviour?
- » When was the most recent time the child made these statements or demonstrated the concerning behaviour?
- » If the child has made a disclosure to the person, ask them, "How did the subject come up?"
- » If concerning behaviours were observed, ask them, "What was the context in which the behaviours were observed?"
- » Did you have any earlier suspicions or concerns about the child? If yes, what led to these concerns?

Other information from a primary caregiver that may be helpful during a meeting/interview includes:

- » Does the child use any nicknames for family members or close friends? If so, what are they?
- » What names does the child use for private body parts?
- » What are the child's interests or hobbies? (This information can be used to build rapport during the interview).

It can be difficult to corroborate information in custody and access cases where a child has only shown concerning behaviours to her/his parent (typically the primary caregiver). Keep in mind that preschool children will most likely express themselves to a parent. In these cases, speak to the parent and document the behaviours and frequency, the first time there was a concern(s), and/or whether or not any other professionals have been involved with the child to help address the concern(s). Corroborating this information can help determine what is happening and the best course of action for the child.



dels in Photo. Intended as il

44



Preparing a Supportive Environment for the Child

During a meeting/interview, it is important for a child to feel comfortable and supported so that s/he can tell the child protection worker what has happened. When preparing the meeting room, consider the following:

1. Including a Support Person

It is often recommended that interviews be started without a support person as this can influence the amount of information the child chooses to share. Special considerations with regard to support persons may include the following:

- » Support persons should only be used if the child, after initial attempts, has clearly demonstrated and/or articulated a need for that person.
- » Support persons may be present if they are required to aid the child with a communication device.
- » If a child requires a translator, the translator should NOT be a support person, rather a trained professional language translator or professional sign language interpreter affiliated with a credible association.
- » Allowing a support person to be present during the rapport building part of the interview may help facilitate introductions and put the child at ease. Once the substantive stage of the interview begins, the support person should quietly exit the room. If a support person is deemed necessary, expectations surrounding how this will unfold should be discussed in advance of the meeting/interview.

Parents may be reluctant to leave their child during the interview. It helps to explain that children sometimes leave out details or information if a parent is present — especially if they believe it will upset their parent. Taking a few minutes to talk to parents can relieve their anxiety about leaving their child.

If a support person is required, careful thought should be taken as to who that person should be. It should be someone capable of providing the child with emotional support. Also, consideration should be given to any potential legal proceedings down the road when choosing this person. An individual who may be called as a witness in future court proceedings (i.e. a parent), or anyone who may be perceived as having a biased viewpoint should not be used as a support person during a meeting/interview with a child.

If, after considering the potential legal ramifications, the support person is a parent, know that the child will naturally want to protect them. If a parent is unaware of the abuse or some of the details and the child believes this information may be upsetting for the parent to hear, the child may exclude certain information. Keep in mind that the knowledge that a support person is sitting right outside the door can provide enough comfort if a child is feeling distressed.



If a support person will be present during the interview, consider the following guidelines:

- The child should not be facing the support person (i.e. the child should have her/his back to the support person) to avoid seeing her/his reaction, and to avoid any allegation that the support person influenced the child in some way. If the child wants to sit on the support person's lap, this should be permitted as long as the child is facing outward.
- » The support person should not speak unless spoken to.
- » The support person should not answer for or interpret the child's answer without the interviewer's direction.
- » If a child asks the support person something, the support person may answer but should avoid making statements that may be perceived as misleading or suggestive.

2. Allowing for Movement

Children have varying degrees of energy, with preschool children generally having very high energy levels. During a meeting/interview, expect that the child will need to move around the room (i.e. dancing, rocking) and allow for this activity. Telling the child to "sit still" is typically not the best approach. As the child moves around the room, keep smiling and talking to her/him, as this will help calm her/him. Using the child's name can assist her/him in focusing and can prompt the child to look over at your face and answer your question(s). Note that when a child is nervous, s/he may use movement to self-regulate.

Young children learning to process information may use play in combination with movement. They appear to focus, then walk away and play, then return and focus. This is an indication that they are mentally processing the information. Allowing children to walk, draw, write, build with blocks, etc. helps them work through and process the information as they tap into traumatic memories and retell what happened to them (D. Bowers, October 7, 2011).

3. Allowing for Bathroom Breaks

Meeting children's basic needs (i.e. bathroom breaks, providing drinking water) will help you with the flow and focus of the meeting/interview.

4. Scheduling the Meeting/Interview

If at all possible, interview children in the morning, particularly between 9:00 a.m. and 11:30 am. In the early afternoon (1:00 p.m. – 3:00 p.m.) children are usually lethargic and cranky and in the late afternoon (3:00 p.m. – 6:00 p.m.) can still be irritable and sluggish. If you have to interview children in the afternoon, reduce your expectations and increase your patience level.

Getting a child's attention is not usually difficult — however, keeping it can be an issue. Although there is no exact amount of time, most children can focus on one topic for the number of minutes equal to their age plus two minutes. Once the optimal time that the child can focus has lapsed, provide breaks, a change in the activity, or some engagement in physical movement to assist with refocusing the child.



CREATING THE MEETING/INTERVIEW MAP

The purpose of the meeting/interview map is to: a) determine the purpose and objectives of the meeting/interview; b) lay out what information needs to be ascertained; and c) formulate the questions. In order to help children share what they know, they need to be asked the right questions in the right way (see section titled *"Effective Communication With Children"* on p. 21 for more information). Writing and laying out the goals and topics that need to be examined during the meeting/interview will provide child protection workers with an organized visual aid that will help meet the objectives of the meeting/interview with the child.

The meeting/interview map should serve as a guideline, subject to change as the professional follows the lead of the child. The child should always dictate the manner of questioning and it is the professional's responsibility to formulate and adapt the precise questions throughout the conversation.

Considerations for designing meeting/interview questions:

- Determine what you need to know. What is going on for the child? Did something happen to the child? If so, is there a child protection concern and/or does it appear that something criminal may have happened? Is a forensic interview necessary?
- Be sure to thoughtfully consider the time it will take to establish rapport with the child (see section titled "*Establishing Rapport*" below). During the rapport building phase, explore the competency of the child (see section titled "*How to begin: Exploring the Competency of the Child*" below).
- Ask open-ended questions in an effort to obtain more detail from the child's perspective.
- Remember the general guideline is that the maximum amount of words in a question should be the age of the child plus one. With preschool children, for example, the interviewer might ask open-ended questions such as "Tell me about..."; "Tell me more"; "Who was there?"; and "What happened next?".

Access the interview map on p. 53. A sample of the interview map can be accessed at protectchildren.teatreetells.ca.

ESTABLISHING RAPPORT

Setting the Tone

Children can read the body language of adults. It is important to be relaxed, to smile and use a warm, friendly voice when speaking with children. If adults do not smile, children perceive them to be angry and will shut down or say things to please adults and gain their approval. Pay attention to the inflection in your voice as children will notice changes in tone of voice as well. Be cautious with gestures such as winking as they may mean many different things to children who have experienced sexual abuse.

Maintaining the child's dignity is vital throughout the meeting/interview process.

An important element of building rapport and having a successful meeting/interview with a child is coming across as warm, objective and open. It involves leaving stereotypes and pre-conceived notions at the door and being



48

seen as impartial. When first greeting a child, get down to her/his eye level so s/he is less intimidated (this is especially important for preschool children). Stay at the child's eye level until you get a sense that s/he feels comfortable. Start by initiating a casual exchange - this is particularly important if the child is nervous. Two minutes without talking, or simply listening to an adult talk (a monologue versus a dialogue) can build up a wall of anxiety for the child and result in her/him becoming disengaged. The goal is to help keep the child calm.

Upon greeting the child, the child protection worker should make general observations tied to the child's behaviour and demeanour. If at some point changes are observed (e.g. the child responds to questions tied to school with little or no hesitation, providing appropriate details but gives no response or one word responses and refuses to elaborate on information when asked about home life), this can help guide you to the areas/topics that need to be explored further.

Keep an open mind and do not automatically conclude something has happened if the child's behaviour and/or demeanour changes with regard to a certain subject - attempt to explore that area further to see if there is anything to warrant concern.

During the rapport-building phase:

- Pay attention to the child's behaviour.
- Pay attention to the child's demeanour when answering the questions.
- Does the child look to caregivers (if present) for support?
- How does the child interact with and respond to caregivers, parents and guardians (if present)?
- Does the child appear secure? Scared? Anxious? Avoidant?

Use the information that you have gained from interviewing the first person to report her/his concerns about the child - this will help create a bridge between the casual conversation and how you will first introduce why you are there to speak with the child or why the child is there to see you. When explaining to a child the reason you are there, it is important to let the child know that they are not in trouble.

Examples of how you can introduce yourself and why you are interested in talking with the child include:

- "Do you know why I am here to speak with you today?"
- "Did anyone talk to you about coming here today?"
- "I listen to kids all the time about things that happen to them. Kids tell me about all sorts of things that have happened to them including good things and bad things, special things and boring things."

How to Begin: Exploring the Competency of the Child

General questions to ask preschool children

Preschool children can typically respond to the majority of the following questions:

1. How old are you?

5. Where do you sleep?

2. Who is in your family?

3. Who lives with you?

6. Who sleeps at your house?

- 4. What is your favourite toy?
- 7. Do you go to school/daycare?
- 8. Who takes care of you (at home, at school)?



It is important to note that anxiety can interfere with a child's ability to respond to questions.

General questions to ask school-aged children in their early years

Children six to eight years of age can typically respond to the majority of the following questions:

- 1. How old are you?
- 2. Where do you live?
- 3. Do you live in a house, an apartment, etc.?
- 4. Who lives in your (house, apartment, etc.) with you now?
- 5. What are their names?
- Does someone else live there? If yes, who?
- 7. Where do you sleep? Where do you sleepover?
- 8. Who sleeps at your house?

- 9. Who babysits you?
- 10. Do you have some pets? What are their names?
- 11. When is your birthday?
- 12. What grade are you in?
- 13. What is the name of your school?
- 14. Do you like to watch TV?
- 15. What shows do you watch?
- 16. What else do you like to do?

General questions to ask school-aged children in their middle years

Children from nine to twelve years of age can typically respond to the following questions:

- 1. How old are you?
- 2. Where do you live?
- 3. Do you live in a house, an apartment, etc.?
- 4. Who lives in your (house, apartment, etc.) with you now?
- 5. What are their names?
- 6. Does someone else live there? If yes, who?
- 7. Where do you sleep? Where do you sleepover?
- 8. Who sleeps at your house?
- 9. Who babysits you?

- 10. Where were you born? When is your birthday?
- 11. Do you go to school?
- 12. What is the name of your school?
- 13. How do you get to school every day?
- 14. What grade are you in?
- 15. Do you have a favourite subject in school?
- 16. Tell me what you enjoy about school.
- 17. Tell me what you dislike about school.
- 18. What else do you like to do?

Additional questions for children in out-of-home placements

- Tell me about where you are staying now.
- What do you like (dislike) about where you are staying now?
- Who lives with you?
- Is there someone you like?
- Is there someone you do not like?

(Adapted from Anne Graffam-Walker (2008). *Engaging Toddlers (ages 1-3) and Preschoolers (ages 3-5) in the courtroom.* Washington, DC: American Bar Association.)



General Tips for Building Rapport with Children:

- Use positive body language, eye contact, and a relaxed, friendly and warm approach
- Physically get down to the child's level to interact with her/him
- Begin talking the moment you see the child to help her/him stay calm
- Use the child's name when speaking to her/him
- Follow the child's lead

Special Considerations for Preschool Children:

- Allow preschool children to move around the room. If you are not comfortable with movement, the child will likely pick it up.
- It is really important to use affect in your voice with preschool children as they don't respond well to monotone speech.
- From age three and up, children need to know why you are meeting with them. They may otherwise think they are in trouble and may not talk.

Practice Conversing With the Child

Provide the child with an opportunity to talk about information that isn't related to the concerns/allegations. The purpose of this is to give the child an opportunity to practice responding to questions in the same way s/he will be asked to do during the substantive stage of the interview. This also provides the professional with a baseline for how a child talks about her/his non-traumatic experiences. It also demonstrates the child's ability for short- and long-term recall of events.

The key to establishing rapport is to always try to have the child talking more than the interviewer. Questions for producing as much free narrative as possible from the child may be framed as, "I want you to think about what you did at recess...please tell me everything about that." and then "Tell me more about...". Keep in mind that "do" or "did" questions don't seem to produce as much free narrative.

Have the child talk about an important event in her/his life (e.g. a birthday party, a great day at the beach, a favourite event during summer vacation). Keep in mind that the event chosen should be a real experience, rather than about a television show, movie, book, etc. Practice should include responding to open-ended questions, using effective memory and communication strategies (see the section titled *"Factors That Impact Children's Memory Abilities"* on p. 31).

Sample questions might include:

- "I want you to think about your birthday now tell me everything about that." (Make sure to frame the question).
- "I want you to think about trucks. Tell me everything about trucks."
- "I want you to think about a special day you've had. Tell me everything about that special day from the beginning to the middle to the end."



Remember that preschoolers cannot engage in a conversation (i.e. talk about the weather, then talk about their school day), so your questions need to focus on one thing (i.e. tell me about your birthday) in order to gauge their ability to respond to questions.

The way children are prompted during a meeting/interview will influence the information they choose to share. When children are interacted with in a friendly context and are clearly and firmly encouraged with open-ended prompts to describe their experiences, they will provide rich and detailed information, including more core details about their experiences. Interviewers who are intimidating and ask inappropriate questions can evoke denial or false information.

What if the Child Will Not Talk to the Child Protection Worker?

If a child will not talk to you, be patient and continue trying to build rapport. If the child still refuses to speak to you, end the meeting/interview for that day. When ending the meeting/interview, avoid becoming frustrated or placing responsibility on the child as the reason why the conversation is finishing. Stay calm and be supportive — in the event that another opportunity arises to speak with the child you want to make sure to speak to her/him in ways that are warm and open. Consider letting the child know that you may speak with her/him on another day. End the conversation by thanking the child for her/his time. You may also want to discuss some basic safety strategies (i.e. identifying safe adults) with the child prior to ending the meeting/interview.

It may take more than one meeting/interview with a child to establish rapport. You cannot force a connection with a child. It is best to keep negative or unsuccessful interactions short to avoid creating negative experiences and associations — reschedule the visit for a better day. You know rapport is being established when the child engages by asking you questions, bringing you toys, etc.

If a child will not talk to the worker, always end the meeting on a positive note. Kind statements such as "You have very nice manners," "It was very nice to meet with you, would it be alright if I come back?", "You didn't do anything wrong and you are not in any trouble," and "Do you have any questions for me?" can reassure the child that you are there to help and provide support.

SUBSTANTIVE STAGE OF THE MEETING/INTERVIEW: THE TOPIC OF FOCUS

At this point in the meeting/interview, the child protection worker begins transitioning to the topic of focus. You can bridge between the practice conversation to the reason why you are talking with the child by using statements such as:

- "You have been telling me about _____. Now I am going to ask you some questions about _____."
- "Tell me everything about what your mom and dad said about why I am here."
- "Tell me everything you know about why I am here today."



Depending on the concern, you may want to start by talking about people who are in the child's life (see the interview aid titled *"Who's Who in My Life"* on p. 67) to better understand the child's perception of who the nice (safe) people are and who the not so nice (unsafe) people are in her/his life. Continually repeat what the child says, using her/his words to verify that you have heard her/him correctly. Follow the child's words and form your next question based on what the child has just said.

Once the bridge is made to the topic of focus, start again with open-ended questions, such as, "Tell me everything about when you were out for recess yesterday.", "Tell me everything about pulling down your pants at school.", "Tell me more." and "What else?". At some point you may need to ask more focused, non-leading questions such as: "Who was there?", "What happened?", "Where were you?", "How do you know that happened?" and "What could you see with your eyes?". Follow the focused question(s) with another open-ended question such as, "Tell me more about that."

If there are protection concerns involving the child and focused questions are not working to solicit information, you may need to ask some direct, closed-ended questions. While it is best to avoid using leading questions, these types of questions may be necessary. The use of leading questions should only be used when absolutely necessary. Always follow up a direct, closed-ended question with an open-ended question.

If there is a disclosure and criminal or other proceedings are brought up against an alleged offender, the interview should be seen as a collection of coherent statements elicited through a well-structured and balanced process. It will benefit the court to know that the child protection worker that interviewed the child used a systematic approach and did not arbitrarily use leading or suggestive questions.

Collect as much information as possible and try to make sense of it after the meeting/interview is over. Leave the logic and sequencing of events to post-meeting work. Preschool children and some school-aged children cannot accurately tell you the order in which a sequence of events happened; all that a child can tell you is the content of what they know.

Teatree's Keep and Speak Secrets storybook and the Teatree puppet can be used during the interview to:

- Help establish rapport;
- Introduce the topic of focus; or
- Assist in engaging a child who will not speak to the worker.





Storybook

Fupp

INTERVIEW MAP

Where possible, map out the interview using information gathered throughout the preparation and planning phase. This should be done prior to starting the interview. Use information learned to formulate additional questions as you move through the interview. Remember, interviews should be flexible and dynamic as new information is provided and should follow the child's lead.

Plan Rapport Building (p. 47)

Consider:

- Introduction
- Explore competency
- Practice conversing
 "Tell me everything about..."
 (e.g. trucks, birthday party)
- Introduce *Teatree* puppet and storybook
- The People and Pets who Live With Me interviewing aid

Bridging:

 e.g. "You have been telling me about... now I am going to ask you some questions about..."

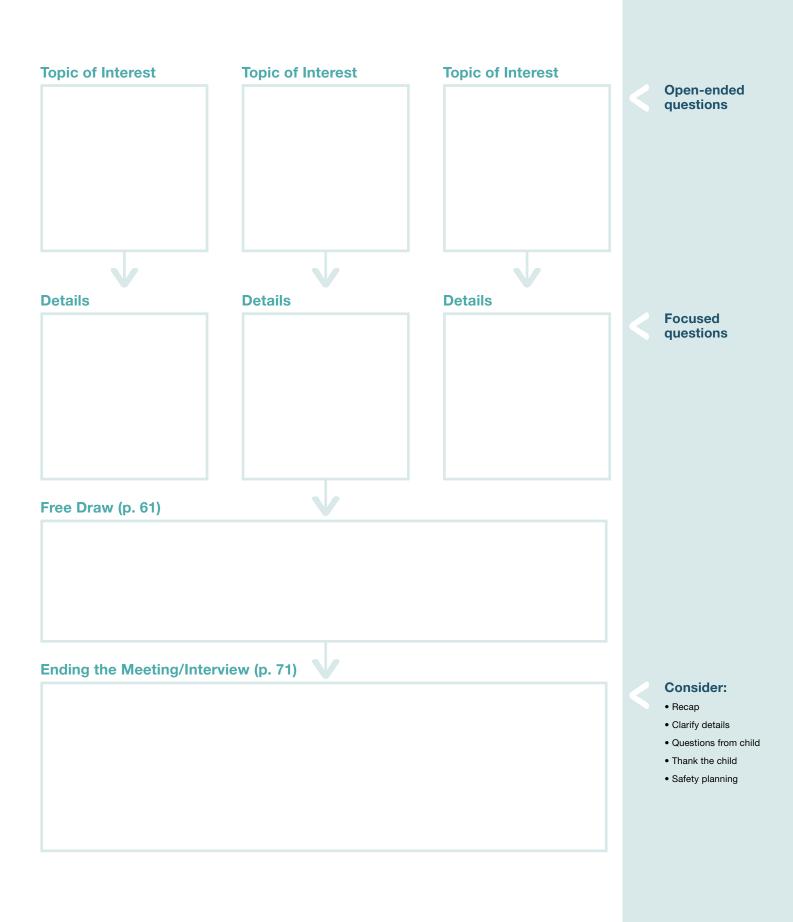
Plan Questions for Topic of Focus: Free Recall (p. 48)

Plan for Transition to Substantive Stage of Interview (p. 51)

Preparation is the foundation of the investigation. There are no skills that negate the need to spend time preparing. Prepare twice, interview once.

Consider:

- Who's Who in My Life? interview aid
- Topic of focus "Tell me everything about..." (e.g. your teacher's worry, etc.)





8.

MEETING/INTERVIEW AIDS

The following aids are intended for child protection workers to use during meetings/interviews with children. They can be used to build rapport and during the substantive stage of the interview. **These aids are meant to help elicit detailed information from the child, but may not be appropriate for all situations.** Accordingly, child protection workers should only use such aids at an appropriate stage in the process based on the interview protocols being used and the legal requirements of the jurisdiction. In many situations, meeting/interview aids are used after the practice and free recall questions have been asked.

Careful consideration and discussion should occur within your organization about how and when to use interview aids.

Gingerbread Drawings and Boy and Girl Drawings

Children can label body parts using the *Gingerbread Drawings* or the *Boy and Girl Drawings* (p. 57–60) aid. This helps to ensure that the child protection worker knows what words the child uses for various body parts. If using this tool to label body parts, start at the top or the bottom of the picture and have the child identify all of the body parts (don't skip the private parts or label them at the end). These aids may also be introduced (or re-introduced) later in the interview if additional details are needed. The anatomical drawings are particularly helpful for young children to help them retrieve details from their memory.

An alternate way to identify body parts is by asking the child questions such as "What part of the body do people wear hats on?", "What other body parts are on someone's head/face?", "What part of your body is used to talk?", "What parts of the body does a shirt cover?", "What parts of the body are used to draw/colour/write?", "What parts of the body are covered by pants/shorts?" "What parts of the body are covered by underwear/bathing suit?", "What parts of the body are covered by socks?"

Free-Drawing Sheet

The *Free Drawing* (p. 61) exercise is effective for memory self-cueing. A study (Lamb, Hershkowitz, Orbach, & Esplin, 2008) was conducted involving 87 Israeli children (ages 4 to 11 years) who were suspected victims of a single incident of sexual abuse by someone who was not a family member. Participants were assigned randomly to the free drawing and no drawing groups. After completion of the open-ended questioning prescribed in the NICHD Protocol, children in the free drawing group were given a white sheet of paper, a pencil, and an eraser, and were prompted to draw as follows:

"You told me nicely what happened to you. Now I'm asking you to make a drawing of what happened, then we'll continue."



For the next 7 to 10 minutes the interviewer echoed what the children said and recorded any retrieval cues that the child mentioned while drawing. After the children stopped drawing, the investigator prompted them to describe the event verbally:

"You told me earlier what happened and now you have made a drawing. The drawing stays here, in front of you. Now tell me everything that happened, from beginning to end as best you can remember. You can also look at the drawing."

The study demonstrated that after children finished speaking in response to this prompt, the interviewer continued questioning them, referring only to details mentioned by the child during their retelling, not those that were drawn. The study provided clear evidence that the free draw, followed by open-ended questioning, prompted children to provide more details about their experiences. The drawings were effective with young children as well.

Scale from 1 to 10 for Likes and Dislikes

The *Scale from 1 to 10 for Likes and Dislikes* aid (p. 62) can be used to gauge how the child feels about certain activities and can be useful to help the child protection worker identify any points of concern to revisit in more detail. When the child tells how s/he likes or dislikes something or someone, s/he can circle how strongly s/he feels by circling a number on the scale.

Emotions Poster

Identifying and labelling feelings can be difficult for some children. The *Emotions Poster* (p. 63–66) can be used to help the child label feelings.

Who's Who in My Life

The *Who's Who in My Life* aid (p. 67) can be used to identify who are the people in the child's life s/he feels safe with and those people who s/he does not feel safe around. As the child identifies people in her/his life, write their name on the line under the circle. Ask the child to make a happy face on the circle if s/he feels safe with this person, and a sad face if s/he feels unsafe with this person.

The People and Pets Who Live With Me

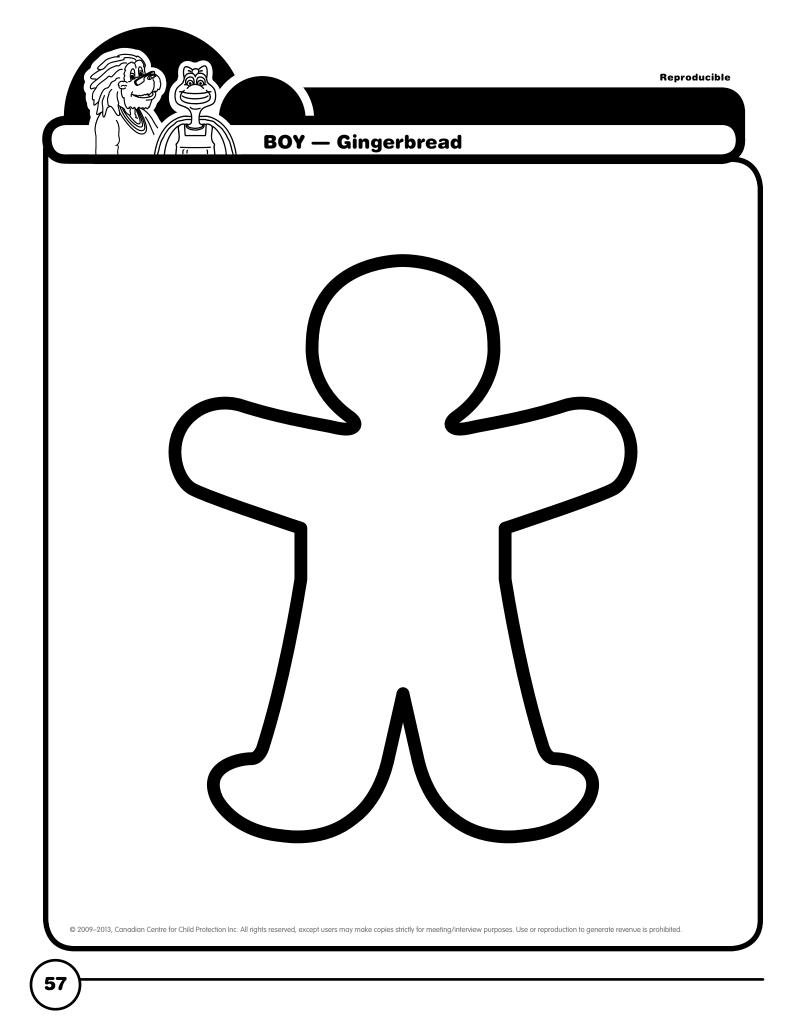
The *People and Pets Who Live With Me* aid (p. 68) can be used to identify the people who live with the child, the dynamics in the home, and who supervises the child. Have the child draw the people who live with her/him, draw the pets that live with her/him and ask the child who looks after her/him most. This aid may also be used to identify the people who visit the child's home, who sleepover at the child's home and/or the people in the places where the child sleeps.

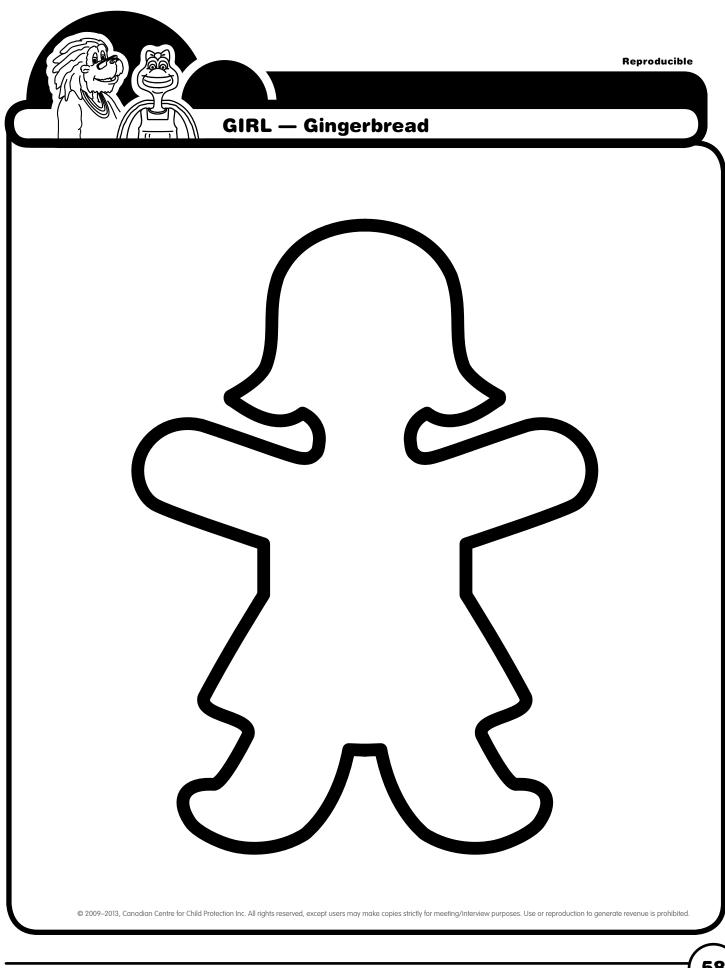
I Feel Safe When I Go To...., But I Do Not Feel Safe When I Go To....

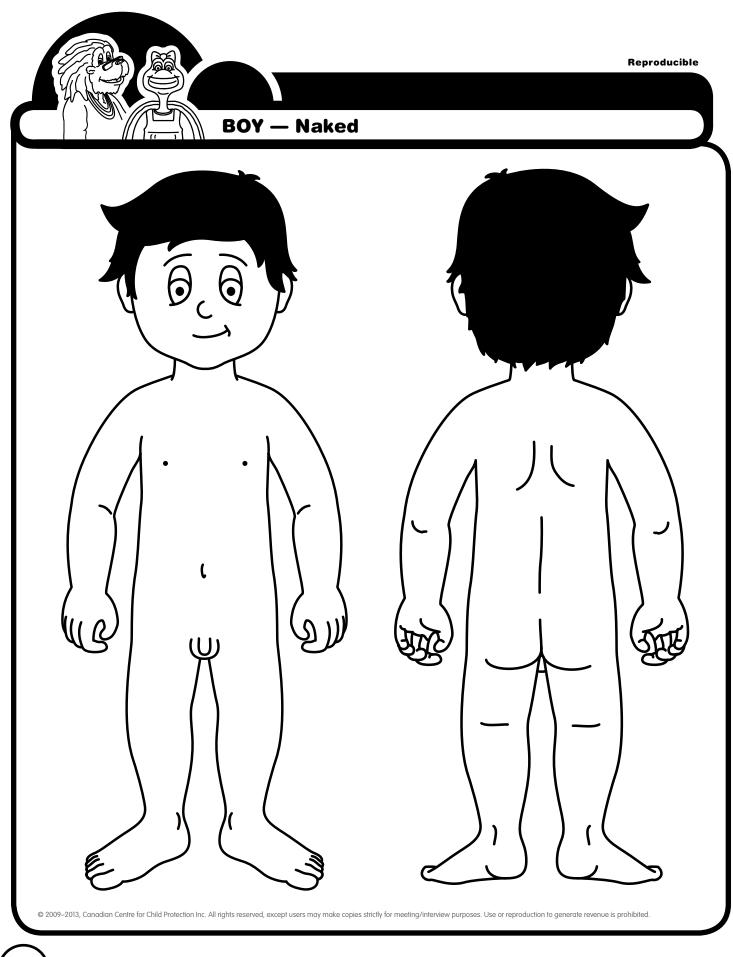
I Feel Safe When I Go To…, But I Do Not Feel Safe When I Go To… aid (p. 69) can be used to help the child express places where s/he goes and feels safe and identify if there is somewhere s/he goes where s/he does not feel safe. Ask the child to draw a place where s/he feels the safest. Ask the child to draw a picture of a place s/he feels unsafe.

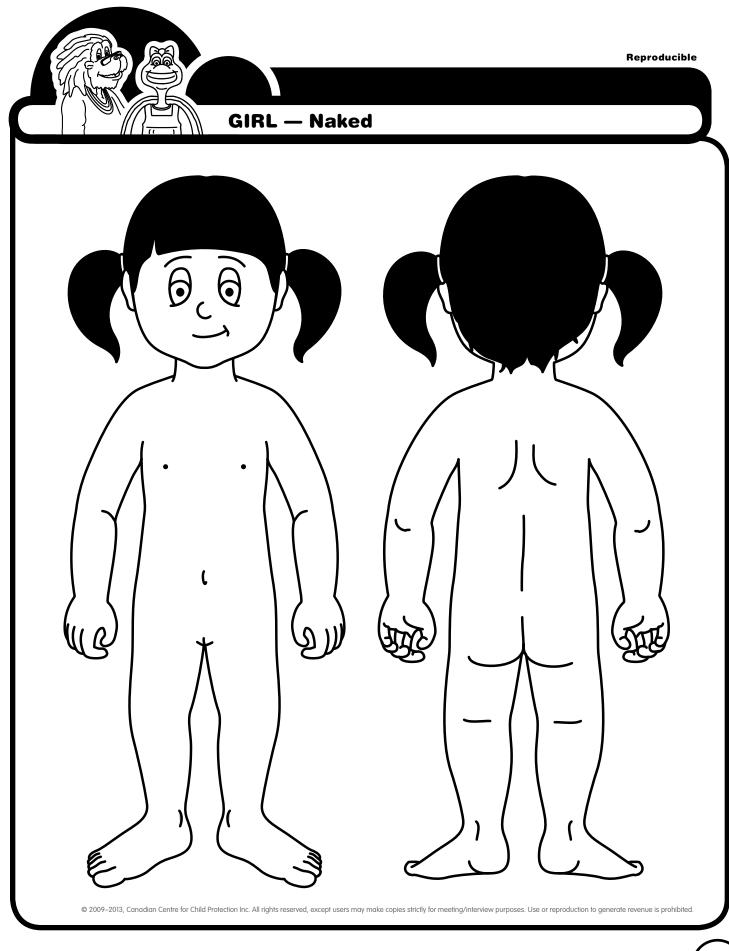
Devices in My Life

Children can identify the devices they are familiar with using the *Devices in My Life* aid (p. 70). The child can then describe who in their family uses these devices, what they are used for and when they are used.





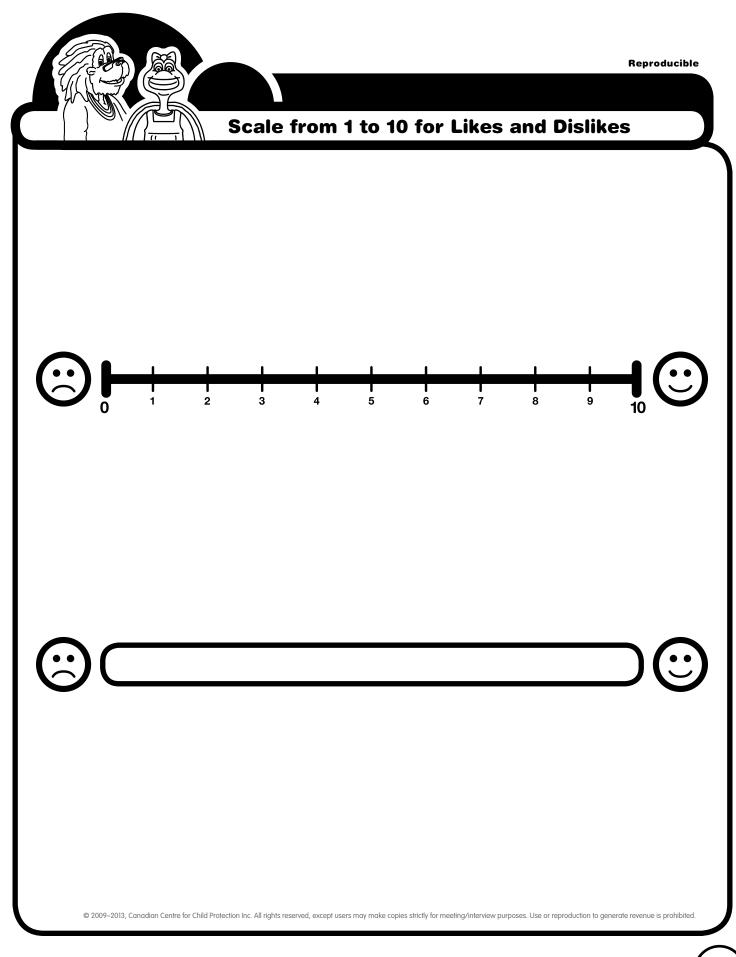


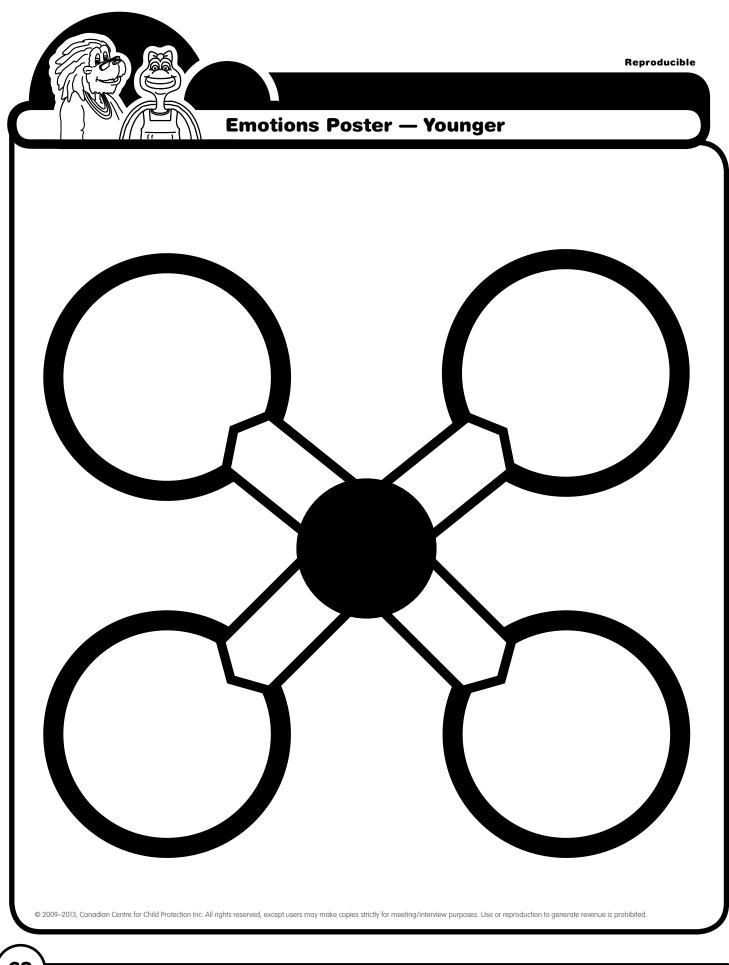


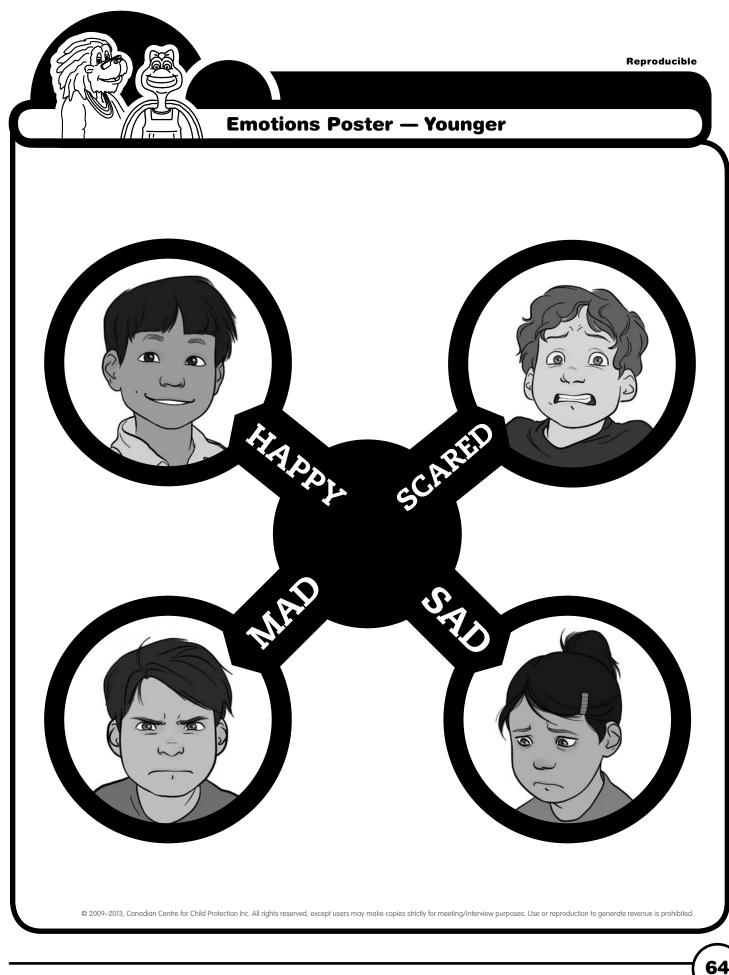
Reproducible

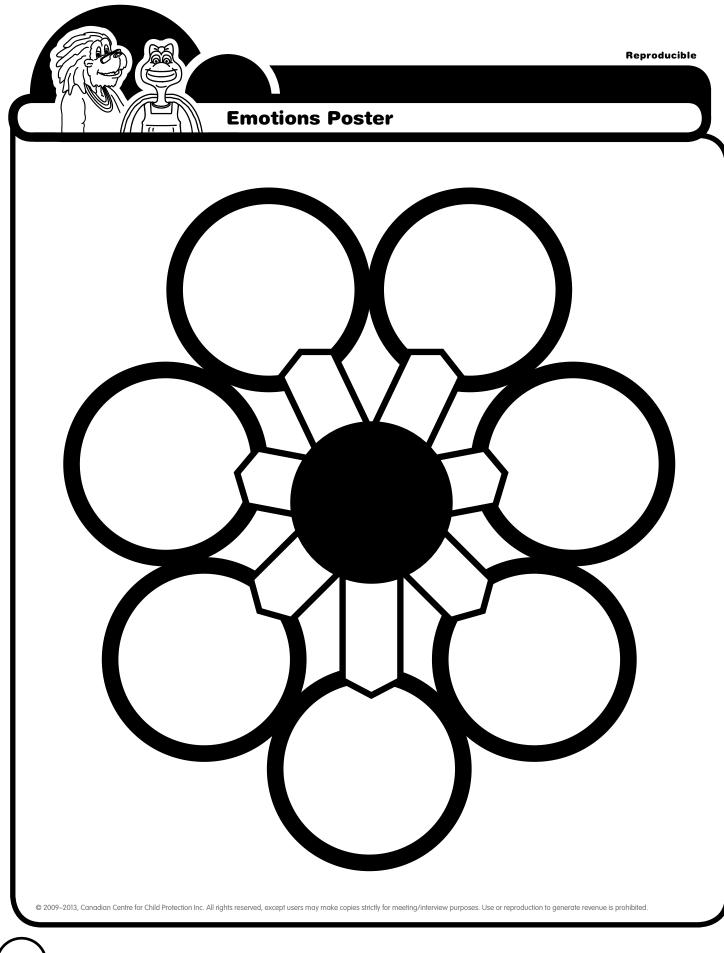
Free Drawing Sheet

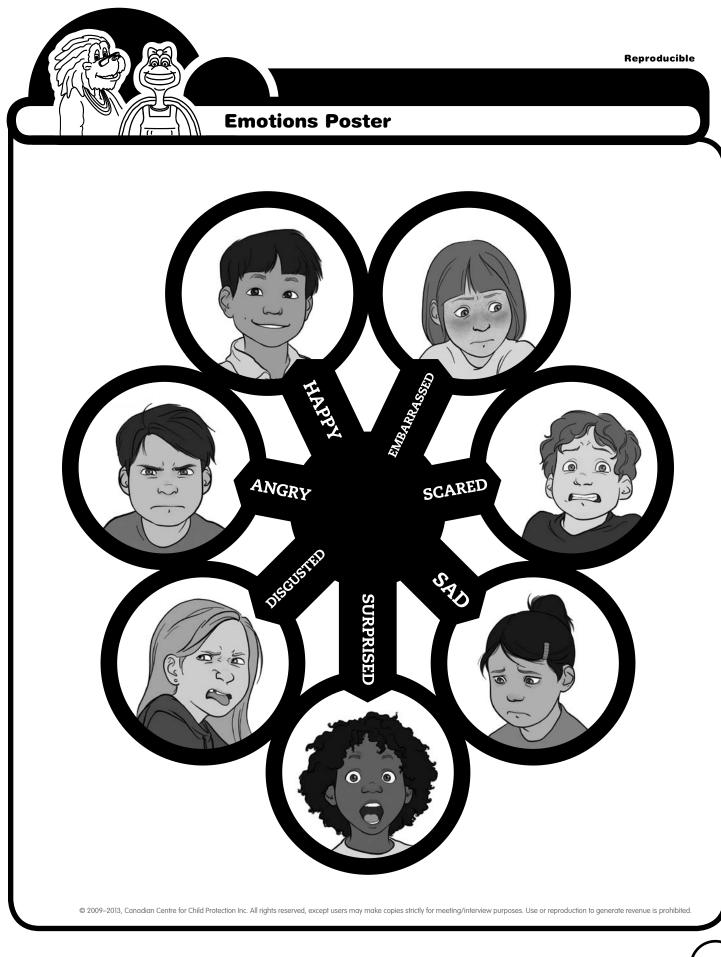
© 2009–2013, Canadian Centre for Child Protection Inc. All rights reserved, except users may make copies strictly for meeting/interview purposes. Use or reproduction to generate revenue is prohibited.

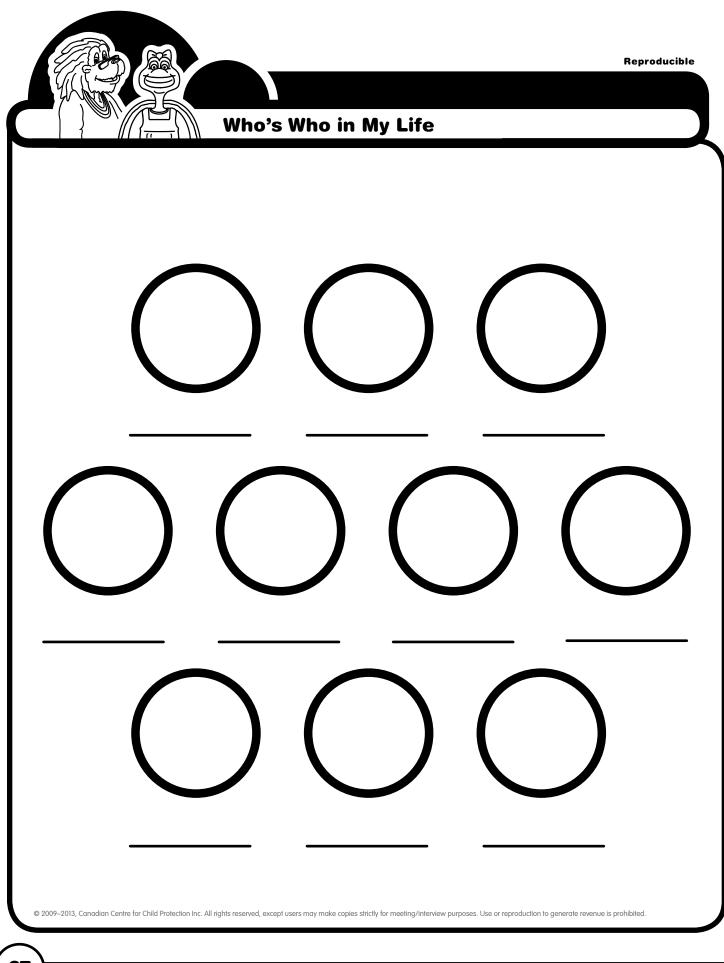


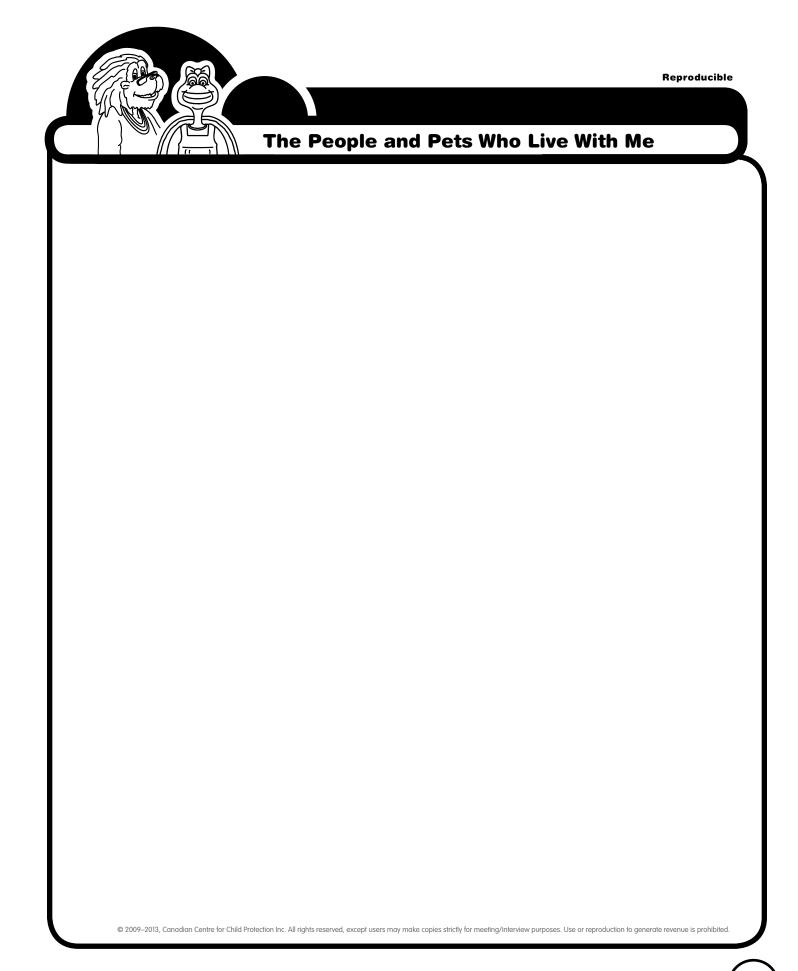


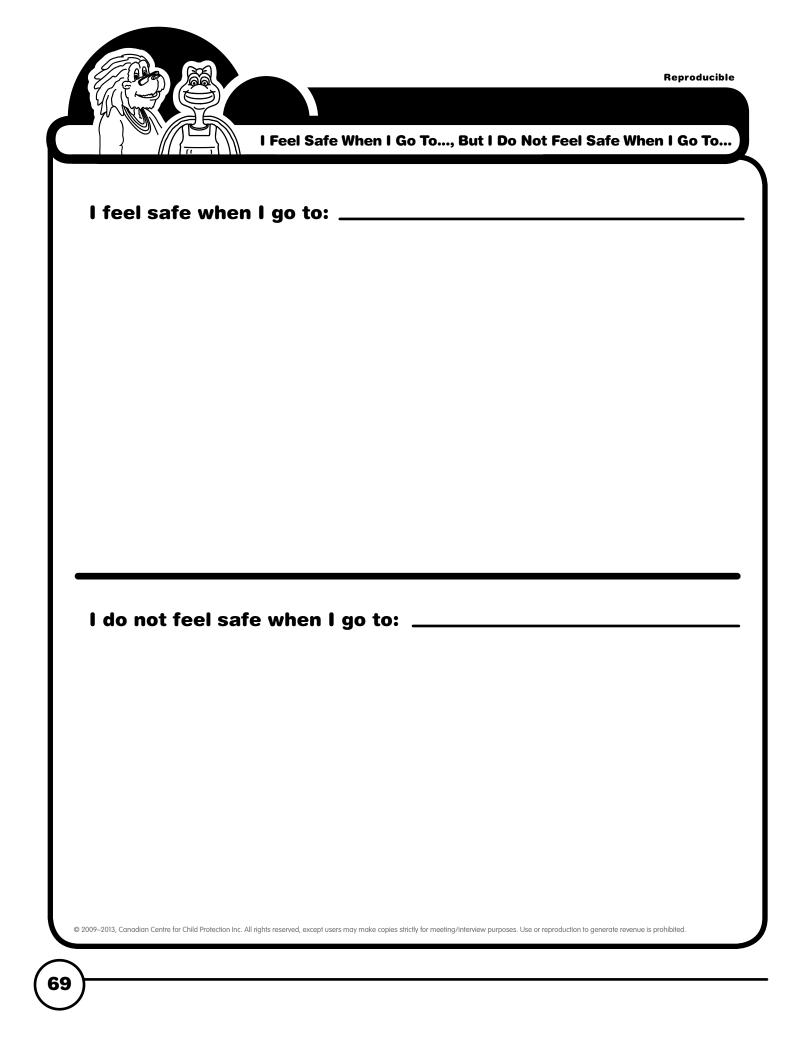


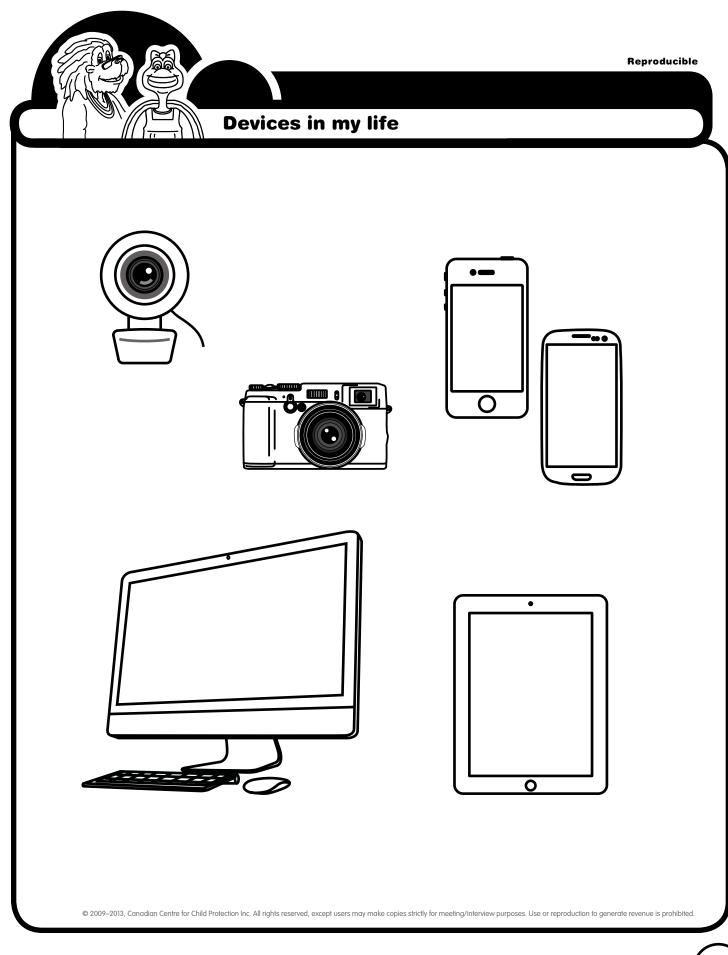














Take your time wrapping up the interview with the child. Avoid rushing out once you have obtained the needed information. Give the child a chance to transition to the final stage of the meeting and allow time for any questions that s/he may have. When proper time is taken to complete the meeting/interview, the child may share additional valuable information. Refer to the forensic interviewing training you've completed to ensure best practice is followed to close the meeting/interview. Consider the following steps:

- Explain to the child that you are going to go through everything the child told you during the meeting/interview to make sure you have all the information correct. Explain that you may need some help with the details.
- Clarify details that do not make sense, being careful not to be suggestive or leading.
- Provide an opportunity for the child to ask you any questions s/he may have about what you've discussed.
- Ask the child if there is anything else that you need to know or that s/he wants to tell you.
- End the interview on a positive note and let the child know that s/he did a good job, thanking her/him for helping you understand what is going on.
- Talk about the next steps with the child. This may include providing her/him with information about what you will do next or who you are going to talk to. The information provided should be developmentally appropriate.
- It is always a good idea to close the interview with age-appropriate safety planning regardless
 of the outcome of the interview. For more information on safety planning, visit
 protectchildren.teatreetells.ca.
- Ensure the child is in the present at the end of the interview (rather than still in the memory of the abuse). To bring the child back to the moment focus the child's attention on something in the room, such as a picture, stuffed animal, or discuss what they are going to do right after the interview, etc.







CONCLUSION

The *Teatree Tells: A Child Sexual Abuse Interview Guide* was created by drawing upon the resources of a variety of professionals with many years of clinical and practical experience in working with children. Utilizing the knowledge of experts in the areas of child development, child victimization and the impact of technology on child sexual abuse was essential in helping us develop this resource.

This guide has been designed to provide child protection workers with tools that they can use before, during and after a meeting/interview with a child and is not intended to be prescriptive. It can be used in its entirety or in parts, can be adapted to the needs of the child who the child protection worker is communicating with, and can be used in a manner consistent with whatever guidelines the professional may be accustomed to.

The *Teatree Tells: A Child Sexual Abuse Interview Guide* provides techniques and aids that are easily adaptable and designed to enhance a child protection worker's ability to properly support children during a meeting/interview. Every child is unique and every child's experiences are different.

When child protection professionals provide a compassionate environment where children are encouraged with open-ended questions to describe their experiences, the result can be the sharing of rich and detailed information that can help workers intervene and effectively protect children.

For more information about the *Teatree Tells* initiative, or for access to additional tools and interview aids, please visit:

PROTECTCHILDREN.TEATREETELLS.CA



Model in Photo. Intended as illustrat

REFERENCES AND RECOMMENDED READINGS

Ainsaar, M., & Lööf, L. Online behaviour related to child sexual abuse: Literature report. Stockholm, Sweden: Robert project.

Alaggia, R. (2005). Disclosing the trauma of child sexual abuse: A gender analysis. *Journal of Loss & Trauma*, 10:5, 453-470.

Allnock, D. (2009). Sexual abuse and therapeutic services for children and young people. London, UK: NSPCC.

American Bar Association. (2008). *Engaging Toddlers (ages 1-3) and Preschoolers (ages 35) in the courtroom*. Washington, DC: American Bar Association.

American Prosecutors Research Institute. (2003). *Finding Words: Half a Nation by 2010*. Alexandria, Virginia: American Prosecutors Research Institute.

Andrews, G., Corry, J., Slade, T., Issakidis, C., & Swanston, H. (2002). *Comparative risk assessment – child sexual abuse*. Final report. Sydney, Australia: World Health Organization.

Baker, A.W., & Duncan, S.P. (1985). Child sexual abuse: a study of prevalence in Britain. *Child Abuse and Negl*, 8, 457-467.

Bancroft, J. (2003). Sexual Development in Childhood. Bloomington, Indiana: Indiana University Press.

Bottoms, B.L., Najdowski, C.J., & Goodman, G.S. (2009). *Children as Victims, Witnesses, and Offenders: Psychological Science and the Law.* New York, NY: The Guilford Press.

Bourke, M.L., & Hernandez, A.E. (2009). The 'Butner Study' Redux: A report on the Incidence of Hands-on Child Victimization by Child Pornography Offenders. *J Family Viol*, 24: 183-191.

Brottsforebyggande Radet. (2007). Vuxnas Sexualla Kontakter Med barn via Internet (Adults' sexual contacts with children via the Internet) report 2007: 11. Stockholm, Sweden: Brottsforebyggande Radet.

Browne, K.D., Hanks, H., Stratton, P. & Hamilton-Giachritis, C. (Eds.). *Early prediction and prevention of child abuse*: a handbook. Southern Gate, Chichester: Wiley.

Canadian Centre for Child Protection Inc. (2009). *Child Sexual Abuse Images*: An Analysis of Websites by Cybertip.ca. Winnipeg, MB: The Canadian Centre for Child Protection Inc.

Canadian Centre for Child Protection Inc. (2010). *Commit to Kids*. Winnipeg, MB: The Canadian Centre for Child Protection Inc.

Cawson, P., Wattam, C., Brooker, S., & Kelly, G. (2000). *Child maltreatment in the United Kingdom: A study of prevalence of child abuse and neglect*. London, UK: National Society for the Prevention of Cruelty to Children.

Cooper, S.W., Estes, R.J., Giardino, A.P., Kellogg, N.D., & Vieth, V.I. (2005). *Child Sexual exploitation: a comprehensive review of pornography, prostitution, and Internet crimes.* Saint Louis, Missouri: G.W. Medical Publishing, Inc.

Creighton, S.J. Recognising changes in incidence and prevalence. In Browne, K.D., Hanks, H., Stratton P., and Hamilton, C.E. (eds.). (2002). *Early prediction and prevention of child abuse: a handbook.* Chichester, UK; Wiley, pp.5-2200.



Cybertip.ca. (2009). *Child Sexual Abuse Images*: An analysis of websites by Cybertip.ca. Winnipeg, MB: Canadian Centre for Child Protection Inc.

DeVoe, E. R., & Faller, K. C. (1999). The characteristics of disclosure among children who may have been sexually abused. *Child Maltreatment*, 4, 217–227.

Directorate of Immigration Finland. (2002). *Guidelines for interviewing (separated) minors*. Helsinki, Finland: Directorate of Immigration Finland.

Distel,N.E. (1999). *Disclosure of childhood sexual abuse: Links to emotion expression and adult attachment.* Dissertation Abstracts: Section B: The Sciences and Engineering, 60(6-B): 2938.

Durham, A. (2003). Young men surviving child sexual abuse: research stories and lessons for therapeutic practise. Chichester, UK: John Wiley and Sons.

Farmer, E. & Owen, M. (1995). Child protection practice: private risks and public remedies: a study of decisionmaking, intervention and outcome in child protection work. London, UK: HMSO.

Finkelhor, D. (1984). Child sexual abuse: New theory and research. New York: The Free Press.

Finkelhor, D. (1985). A sourcebook on child sexual abuse. London, UK: Sage publications.

Finkelhor, D., Hotaling, G., Lewis, I.A., & Smith, C. (1990). Sexual abuse in a national survey of adult men and women: prevalence, characteristics and risk factors. *Child Abuse and Neglect*, 14, 19-28.

Finkelhor, D. (1994). The international epidemiology of child sexual abuse. *Child Abuse and Neglect*, 18 (5), 409-417.

Finkelhor, D., & Berliner, L. (1995). Research on the treatment of sexually abused children: a review and recommendations. *Journal of the American Academy of Child and Adolescent Psychiatry*, 34 (11), 1408-1423.

Finkelhor, D., & Jones, L. (2006). Why have child maltreatment and child victimisation declined? *Journal of Social Issues*, 62 (4), 685-716.

Fleming, J., Mullen, P., Sibthorpe, B., & Bammer, G. (1999). The long-term impact of childhood sexual abuse in Australian women. *Child Abuse and Neglect* 23(2), 145-59.

Geiselman, R. E., Fisher, R. P., Firstenberg, I. Hutton, L. A., Sullivan, S. J., Avetissain, I. V., Prosk, A. L. (1984). Enhancement of eyewitness memory: An empirical evaluation of the cognitive interview. *Journal of Police Science and Administration*, 12[1], 74-80.

Gil, E. & Johnson, T.C. (1992). Sexualized children: assessment and treatment of sexualized children and children who molest. Massachusetts, MD: Launch Pr.

Gilbert, R.C.S-W., Browne, K.D., Ferguson, D., Webb, E., & Janson, S. (2009). Child maltreatment: Burden and consequences in high income countries. *Lancet*, 373 (9657), 682-81.

Ghate, D., & Spencer, L. (1995). The prevalence of child sexual abuse in Britain: a feasibility study for a large-scale national survey of the general population. London, UK: HMSO.

Goleman, D. (1995). Emotional intelligence. New York: Bantam Books.

Goodman-Brown, T. B., Edelstein, R. S., Goodman, G. S., Jones, D. P. H., & Gordon, D. S. (2003). Why children tell: A model of children's disclosure of sexual abuse. *Child Abuse & Neglect*, 27, 525–540.

Graffam Walker, A. (1999). Handbook on Questioning Children: *A Linguistic Perspective*. Washington, DC: The American Bar Association.



Graffam-Walker, A. (2008). *Engaging Toddlers (ages 1-3) and Preschoolers (ages 3-5) in the courtroom*. Washington, DC: American Bar Association.

Gries, L. T., Goh, D. S., & Cavanaugh, J. (1996). Factors associated with disclosure during child sexual abuse assessment. *Journal of Child Sexual Abuse*, 5, 1–20.

Grubin, D. (1998). Sex offending against children: Understanding the risk. London, UK: Crown.

Health Canada. (1997). *Child sexual abuse*. Available online from the National Clearinghouse on Family Violence at: http://www.hc-sc.gc.ca/hppb/familyviolence/childsa.htm.

Hindman, J. (1999). Just before dawn: from the shadows of tradition to new reflections in trauma assessment and treatment of sexual victimization. Ontario, Oregon: AlexAndria Associates.

Hyman, B. (2000). The economic consequences of child sexual abuse for adult lesbian women. *Journal of Marriage and the Family*, 62, 199-211.

INTERPOL (2002). Sexual abuse. Available online at: http://www.interpol.int/public/children/sexualabuse.

Jensen, E. (2008). Brain Based Learning: The New Paradigm of Teaching. Thousand Oaks, CA: Corwin Press.

Jonvlhor, D., & Copiec, K. (2001). Why is sexual abuse declining? A survey of state child protection administrators. *Child Abuse and Neglect*, 25 (9) 1139-1158.

Johnson, T.C. (2003). *Understanding Children's sexual behaviours: what's natural and healthy*. South Pasadena, California: New Harbinger Publishing, Inc.

Kelly, L., Regan, L., & Burton, S. (1991). *An exploratory study of the prevalence of sexual abuse in a sample of 16-21 year olds*. London, UK: Polytechnic of North London.

Kelly, L. Pornography and child sexual abuse in Itzin, C. (Ed.). (1992). *Pornography: Women, violence and civil liberties*. Oxford, UK: Oxford University Press. pp. 113-123.

Kelly, L., Wingfield, R., Burton, S., & Regan, L. (1995). *Splintered lives: sexual exploitation of children in the context of children's rights and child protection*. Ilford, England: Barnardo's.

Kennedy, M.T., & Manwell, M.K.C. (1992). The pattern of child sexual abuse in Northern Ireland. Child Abuse Review 1(2), 89-101.

Lanning, K.V., National Center for Missing and Exploited Children, & United States Federal Bureau of Investigation. (1992). *Child sex rings: a behavioural analysis for criminal justice professionals handling cases of child sexual exploitation*. Alexandria, Virginia: National Center for Missing and Exploited Children.

Lanning, K. (2005). Acquaintance child molesters: A behavioural analysis. *Medical, legal and social science aspects of child sexual exploitation*, 2, 529-594.

Lamb, M.E., Hershkowitz, I., Orbach, Y., & Esplin, P.W. (2008). *Tell me what happened: structured investigative interviews of child victims and witnesses*. London, UK: Wiley.

Massat, C.R., & Lundy, M. (1998). 'Reporting costs' to nonoffending parents in cases of intrafamilial child sexual abuse. *Child Welfare*, 77(4), 371-88.

McGee, H., Garavan, R., de Barra, M., Byrne, J., & Conroy, R. (2002). *The SAVI report: the sexual abuse and violence in Ireland*. Dublin, Ireland: The Liffey Press.

Mullen P.E., Martin J.L., Anderson J.C., Romans S.E., & Herbison G.P. (1996). The long-term impact of the physical, emotional and sexual abuse of children: a community study. *Child Abuse and Neglect* 20(1), 7-21.



Nash, C.L., & West, D.J. Sexual molestation of young girls: a retrospective study. In West, D.J. (1985). (ed) *Sexual victimisation*. London, UK: Gower.

National Society for the Prevention of Cruelty to Children. (2011). *Child abuse and neglect in the UK today*. London, UK: National Society for the Prevention of Cruelty to Children.

Oaksford, K.L., & Frude, N. (2001). The prevalence and nature of child sexual abuse: evidence from a female university sample in the UK. *Child Abuse Review* 10(1), 49-59.

Palmer, T. (2001). Pre-trial therapy for children who have been sexually abused. In Richardson, S. & Bacon H. *Creative responses to child sexual abuse*. London, UK: Jessica Kingsley Publishers.

Palmer, T. Insafe training: What would you do? Presentation 13th September – 15th September 2011 for Marie Collins Foundation, London, UK.

Pezdek, K., & Hodge, D. (1999). Planting false childhood memories in children: The role of even plausibility. *Child Development*, 70, 887-895.

Pezdek, K., & Roe, C. (1995). The effect of memory trace strength on suggestibility. *Journal of Experimental Child Psychology*, 60, 116-128.

Pezdek, K. & Blandon-Gitlin, I. (2008). Planting false memories for childhood sexual abuse only happens to emotionally disturbed people...not me or my friends. *Applied Cognitive Psychology*, 23, 162-169.

Plotnikoff, J., & Woolfson, R. (1995). *Prosecuting child abuse: an evaluation of the government's speedy progress policy*. London, UK: Blackstone.

Prior, V., Glaser, D., & Lynch, M. (1997). Responding to child sexual abuse: the criminal justice system. *Child Abuse Review* 6(2), 128-40.

Sas, L. D., & Cunningham, A. H. (1995). Tipping the balance to tell the secret: The public 224 LONDON, BRUCK, CECI, AND SHUMAN *discovery of child sexual abuse*. London, Ontario, Canada: London Family Court Clinic.

Statistics Canada. (2011). Family Violence in Canada: A Statistical Profile. Ottawa, ON: Statistics Canada.

Saywitz, K.J. & Snyder, L.J. (1996). Narrative Elaboration: test of a new procedure for interviewing children. *Consult Clin Psychol*. 64(6): 1347-57.

Seto, M.C., Hanson, R.K., & Babchishin. (2010). Contact sexual offending by men with online sexual offenses. Sexual Abuse: *A Journal of Research and Treatment*, XX(X), p. 1-22.

Stein, J.A., Golding, J.M., Siegel, J.M., Burnam, M.A., & Sorenson, S.B. Long-term psychological sequelae of child sexual abuse: the Los Angeles Epidemiologic Catchment Area Study. In Wyatt, G.E., & Powell, G.J. (eds.) (1988). *Lasting effects of child sexual abuse*. Newbury Park, CA: Sage.

Stroud, D., Martens, S. L., & Barker, J. (2000). Criminal investigation of child sexual abuse: A comparison of cases referred to the prosecutor to those not referred. *Child Abuse & Neglect*, 24, 689–700.

Stuart, M., & Baines, C. (2004). *Progress on safeguards for children living away from home.* York, UK: Joseph Rowntree Foundation.

Swanston, H.Y., Plunkett, A.M, & O'Toole, B.I. (2003). Nine years after child sexual abuse. *Child Abuse and Neglect* 27(8), 967-84.

Taskforce on the Health Aspects of Violence Against Women and Children. (2010). *Report from the Child Sexual Abuse sub-group: Responding to violence against women and children — the role of the NHS*. London, UK: National Health Services.



Trocme, N., & Bala, N. (2005). False allegations of abuse and neglect when parents separate. *Child Abuse and Neglect*, 29 (12), 1333-1345.

Walker, A., Flatley, J., Kershaw, C., & Moon, D. (eds.) (2009). *Crime in England and Wales 2008/2009: Volume 1. Findings from the British Crime Survey and police recorded crime*. Home Office Statistical Bulletin, London, UK: Home Office.

Yuille, J.C. (2002, June). *Interviewing children who witness crime: The Step-Wise Interview*. 3rd Biennial Children, Families, Communities Conference, Prince George, BC.



Model in Photo. Intended as illustrativ



TEATREE TELLS

Canadian Centre for Child Protection, Cybertip!ca, Kids in the Know and Commit to Kids marks are all registered trade-marks; and MissingKids.ca is a trade-mark of, the Canadian Centre for Child Protection Inc.



protectchildren.teatreetells.ca



CANADIAN CENTRE for CHILD PROTECTION® Helping families. Protecting children.

© 2013, Canadian Centre for Child Protection Inc. All rights reserved, except one copy may be reproduced for individual use.