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Forensic Interviews of Children Who Have Developmental Disabilities

Part 1 of 2

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Developmental disabilities³ can hinder an individual's ability to understand and communicate effectively. As a result, conducting investigative interviews with children who have developmental disabilities poses challenges to even the most experienced professional. Of great concern is often the perception that the child will appear confused and inconsistent in his/her disclosure, thus presenting as a poor witness. We suggest, however, that the interview's outcome may be more directly attributed to the extent to which the interviewer accounts for the child's developmental and cognitive needs.⁴ Many children who have disabilities are competent to communicate about their experiences, if interviewed appropriately. The following article and its companion suggest recommendations for professionals to consider before, during and after such a forensic interview.

Before the Interview

Determining the unique needs of the child to be interviewed is critical to adequate preparation and may provide the information necessary to maximize the child's abilities throughout the interview. The interviewer's preparation will limit the number of adjustments the child must make,⁵ thereby minimizing stress to the child and enhancing the child's ability to tell what (s)he knows.

First and foremost, the multidisciplinary team process is integral to meeting the needs of every child interviewed as part of a child abuse investigation. In addition to sharing basic referral information regarding the child's disclosure, the multidisciplinary team can work together to obtain additional information regarding the child you are preparing to interview. Each team should decide which member will make contacts with collaterals to learn about a child's abilities and disabilities. Careful questioning of parents and caregivers is recommended as either may be in a vulnerable state and some may not perceive their child as "disabled". If the child has a social worker in the developmental disabilities unit of your local county or state agency, s/he can be an excellent resource for information about the child's functioning. It is important to inquire if the child has ever received a learning evaluation. If so, request a copy of the most

recent evaluation or Individual Education Plan (IEP). This information is extremely valuable in understanding the child's abilities and any accommodations (s)he may need. The interviewer or team member should also ask if the child receives special services in school, has classes in a resource room, is on medication or receives medical care from a specialist.

Parents and/or caregivers are often able to provide helpful information, however, the greatest resource may likely be the child's school.⁶ Parents may minimize their child's difficulties or be biased based on limited experience with other children. The circumstances of a case may necessitate an investigative interview with the child prior to making contact with the family. In addition, school personnel may possess a greater understanding of the child's comprehension and communicative abilities. A classroom teacher, special education teacher, resource specialist or speech instructor can be a valuable source of information.

It is possible that a school professional may not be available, and if the allegation involves a school employee, contact with school personnel may not be appropriate. Consider respite workers, therapists, transportation aides or other professionals involved in the child's care. It may also be helpful to contact a professional who has expertise in the child's particular disability. Although information specific to the child you are interviewing is necessary, general knowledge can also be valuable. Explore the following areas:

1. Disability: What is the child's primary disability and when was it first noticed? What are the effects for this child? Does this child have any secondary or tertiary diagnoses or medical needs? It will be helpful to educate yourself about the disability in general, however, continued assessment is necessary to determine how it may affect this individual child in the interview process.
2. Physical needs: Does the disability affect the child physically? Does the child use a wheelchair, walker or other adaptive equipment? Does (s)he wear glasses or contacts?
3. Cognitive abilities: What is this child's cognitive or developmental age equivalent? At what grade level is (s)he performing? Does (s)he work independently or with an aide?
4. Expressive/receptive language abilities: How does

this child best communicate, understand and comprehend language?

Does (s)he:

- Use communication boards, pictures or other augmentative communication tools?⁷
 - Use sign language,⁸ read lips or wear a hearing aid? If so, be aware that the use of language in children who are hearing impaired or deaf is highly variable.⁹ An extensive inquiry regarding the child's communication needs is necessary with this population. Explore additional questions: Does this child communicate through gestures, American Sign Language or signed English? It is crucial to meet with interpreters for the deaf prior to the interview to discuss the child's needs as well as educating interpreters to the unique and specific demands of the forensic setting.¹⁰ The interpreter should be educated regarding this child's communication style, as well as idiosyncratic signs and name signs for family members, friends, and the alleged perpetrator.
 - Read Braille? Utilize a guide dog?
 - Have impaired or idiosyncratic speech?
 - Engage in echolalic speech?¹¹
 - Indicate (s)he does not understand questions asked?
 - Have a processing delay? If so, the interviewer may need to slow the pacing, allowing additional time for the child to process each question and respond.
5. Attention: Does this child struggle with staying on task? How does (s)he show that his/her attention is waning? What strategies may help with staying on task or redirection? The family or school may use a cue or phrase that can be very successful in re-engaging an active child. Some children will need to remain active throughout the interview. The interviewer should not feel the need to have the child seated at all times. If the child continues to respond to questions while engaged in other activities such as moving around the room or drawing a picture, there is no need to re-engage him or her. However, if the other activity is overly distractive, the interviewer should redirect the child.
6. Other questions to ask: Learning more about additional needs of this child can be crucial to a successful interview. What else is important to know about this child? Are there any (other) classroom accommodations made for this child? What is this child's daily routine? Will this child need assistance toileting? Does the child have any special dietary needs? Does this child receive medication or treatments during the day? Does the child experience seizures?

Families and children can be at the interview facility for several hours, and preparations may need to be made in advance of the child's arrival. If the child uses adaptive equipment for mobility, prepare your facility. Facility staff should ask themselves: Will large equipment fit through the door? Are there hazards to navigate like small hallways, stairs, or furniture? Remember, the child's needs should always be the first priority.¹²

Interviewers will need to spend additional time preparing for an interview with a child who has a developmental disability. If the child is safe, the team may decide to wait a day or so for the interview in order to adequately prepare. As in any case, the team can work together effectively to determine the best needs of the child and proceed accordingly. The additional time spent in preparation for an interview with a child who has a disability will inevitably benefit the child, which in turn will benefit the

investigation, resulting in positive outcomes for all involved. Please refer to part two of this article for continued discussion of recommendations to consider during and after a forensic interview.

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- ³ According to the Centers for Disease Control and Prevention, developmental disabilities are a diverse group of severe, chronic conditions that are due to mental and/or physical impairments. People with developmental disabilities have problems with major life activities such as use of receptive and expressive language, mobility, learning, self-help, and independent living. Developmental disabilities begin anytime during life up to 22 years of age and usually last throughout a person's lifetime. (Source: <http://www.cdc.gov/ncbddd/dd/default.htm>).
- ⁴ Erickson, K., Perlman, N., & Isaacs, B. (1994). Witness competency, communication issues and people with developmental disabilities. *Developmental Disabilities Bulletin*, 22(2).
- ⁵ Bourg, W., Broderick, R., Flagor, R., Kelly, D. M., Ervin, D. L., & Butler, J. (1999). *A child interviewer's guidebook*. Thousand Oaks, CA: Sage Publications.
- ⁶ Follow state data and privacy practices when obtaining information from educational systems. For more information, refer to APRI Update Volume 16, Number 4 that can be found at http://www.ndaa.-apri.org/publications/newsletters/update_volume_16_number_4_2003.html.)
- ⁷ Augmentative Communication is an alternative means of expression for people who cannot speak, or whose speech is highly limited. It can include techniques or communication aids that are standardized or specially tailored to an individual. Augmentative communication can include the use of sign language, language boards with drawings, pictures or symbols and electronic devices that speak in response to input such as keyboards, touch screens, or the push of a button. For more information, see <http://www.asha.org/public/speech/disorders/Augmentative-and-Alternative.html>.
- ⁸ For more information, see Registry of Interpreters for the Deaf, <http://www.rid.org>.
- ⁹ For more information on prosecuting cases involving deaf children, see Tiapula, S. (2005). Learning to Read the Signs: Prosecution Strategies for Child Abuse Cases with Deaf Victims and Witnesses, *Update*, 18(5).
- ¹⁰ For more information on the use of interpreters in forensic interviews, see Hiltz, B., & Anderson, J. (2002). Using interpreters in forensic interviews. *Update*, 15(12).
- ¹¹ Echolalia is the repetition or echoing of verbal utterances made by another person. This repetition can be immediate or delayed and may be pervasive. For more information, refer to Heffner, Gary J. (2000). Echolalia and Autism. <http://groups.msn.com/TheAutismHomePage/echolaliafacts.msnw>.
- ¹² CornerHouse Child First Doctrine.

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