



CHILD FORENSIC
INTERVIEW
PROTOCOL TASK
FORCE
REPORT
JULY 1, 2018

Rick Scott
Governor

Celeste Philip, MD, MPH
Surgeon General and Secretary

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MISSION:

**To protect, promote and improve the health of all people in Florida
through integrated state, county and community efforts.**

Submitted to:

**The Honorable Joe Negron, President, Florida Senate
The Honorable Richard Corcoran, Speaker, Florida House of Representatives**

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EXECUTIVE SUMMARY

BACKGROUND

Child forensic interview approaches, methods, and practices have evolved over the past 30 years. The purpose of child forensic interviews is to gather information from child victims alleged to have been abused or neglected. Child abuse and neglect has been linked to a variety of short and long-term adverse health outcomes. Significant advances have been made to improve our state's response to incidents of child maltreatment. The Florida Legislature, during the 2017 session, recognized the forensic interview process should be reviewed and recommendations made for improvement.

PURPOSE AND SCOPE OF THE TASK FORCE

In 2017, the Forensic Interview Protocol Task Force was created in the Florida Department of Health, Division of Children's Medical Services to develop a standardized protocol for child forensic interviewing. Task force members researched and focused on effective and consistent ways for child forensic interviewers to elicit accurate information during interviews. A standardized child forensic interview may improve the overall outcome of dependency and court cases statewide, which is vital for victims of abuse and neglect.

FINDINGS/RESULTS

An effective forensic interview process requires specialized trainings, utilization of standardized protocols and practices, a multidisciplinary approach, and collaboration among the professionals responsible for the forensic interview process.

RECOMMENDATIONS

- The environment in which the child forensic interview is conducted contributes to the success of interview
- Specialized techniques should be taken into consideration when conducting interviews of children with special needs
- Video recording is essential during child forensic interviews; these recordings are regularly used in both dependency and criminal court proceedings
- After the underlying case is concluded, forensic interviews should be evaluated by a peer for recommendations
- Jurisdictions throughout the state should consider establishing a protocol to ensure a multidisciplinary approach regarding crimes against children

CONCLUSION

Child forensic interviews are an essential component of the dependency and criminal investigation processes. Video recordings of child forensic interviews are an effective means to decrease the number of interviews and preserve critical evidence in cases of child maltreatment. Additionally, all child forensic interviewers should receive specialized and continuous training throughout their careers. The implementation of an effective forensic interview process requires the efforts of community partners and multidisciplinary collaboration by the professionals involved in the child forensic interviewing process.

SECTION ONE: BACKGROUND

PURPOSE OF TASK FORCE

The Forensic Interview Protocol Task Force was created to enhance the safety and well-being of children who are suspected of having been abused. Forensic Interviewing is a method to elicit accurate information from children during an investigation regarding physical or sexual abuse, neglect or exposure to violence. Children may move to different parts of the state over time, and the forensic interview process needs to be consistent from one jurisdiction to the next. One priority of the Forensic Interview Protocol Task Force is to reach a statewide consensus on recommendations to the various organizations that conduct forensic interviews.¹ There are many accepted practices for conducting child forensic interviews, each of which should be tailored to the unique needs of the child. These practices are critical components of an overall framework for conducting child forensic interviews. This task force is recommending a protocol to serve as Florida's standardized framework.

STATUTORY AUTHORITY

Chapter 2017-153, Laws of Florida, amends section 39.303(9), Florida Statutes (FS), requiring the Florida Department of Health, Division of Children's Medical Services (CMS) to convene a task force to develop a standardized protocol for forensic interviewing of children suspected of having been abused. CMS must provide the standardized protocol to the President of the Senate and the Speaker of the House of Representatives by July 1, 2018.

TASK FORCE MEMBERSHIP

Children's Medical Services, at the Florida Department of Health, serves children who have or are at-risk for special health care needs. Child maltreatment is linked to adverse health outcomes across the lifespan. The Florida Department of Children and Families (DCF) is responsible for investigating allegations of abuse and neglect and determining actions needed to ensure child safety. Child Advocacy Centers (CAC) and Child Protection Teams (CPT) assist DCF by providing medical and other multi-disciplinary assessments, including child forensic interviews. Community Based Care agencies provide case planning and service delivery in collaboration with DCF. Child abuse and some forms of child neglect are crimes. Many times, there is no physical evidence of the abuse; therefore, the child forensic interview is critical in the investigation. Law enforcement agencies and prosecutors rely heavily on forensic interviews when charging and prosecuting child abuse and neglect.

Representatives from various agencies, associations, and organizations were specifically identified in law to form the membership of the task force. These entities are critical partners in

¹ Remarks from Representative Gayle Harrell, Chair of the Children Families and Seniors Subcommittee to the Florida Department of Health Division of Children's Medical Services Forensic Interview Protocol Task Force on January 19, 2018.

protecting the health and safety of children in Florida. The following task force members representing the statutorily mandated entities were appointed in July and August of 2017:

- A representative from the Florida Prosecuting Attorneys Association: Brian Fernandes, Esq., Assistant State Attorney, Fifteenth Judicial Circuit, West Palm Beach, FL
- A representative from the Florida Psychological Association: Lori Butts, J.D., Ph.D., Chief Executive Officer, Clinical & Forensic Institute, Inc., Fort Lauderdale and West Palm Beach, FL
- The Statewide Medical Director for Child Protection: Bruce McIntosh, M.D.
- A representative from the Florida Public Defender Association: Paula Shea, Esq., Assistant Public Defender, Sixth Judicial Circuit, Clearwater, FL
- The executive director of the Statewide Guardian Ad Litem Office: Alan Abramowitz, Esq.
- A representative from a Community Based Care Lead Agency: Roshannon Jackson, M.Ed., Operations Manager, Big Bend Community Based Care
- A representative from Children's Medical Services: Peggy Scheuermann, M.Ed., Bureau Chief of Child Protection and Special Technologies, Florida Department of Health
- A representative from the Florida Sheriffs Association: Sheriff Sadie Darnell, Sheriff of Alachua County, FL
- A representative from the Florida Chapter of the American Academy of Pediatrics: Carol Lilly, M.D., MPH, Division Chief, USF College of Medicine Pediatrics and Local Child Protection Team Medical Director
- A representative from the Florida Network of Children's Advocacy Centers: Cindy Valley, Executive Director, Florida Network of Children's Advocacy Centers

CMS was permitted to designate other representatives. The following five additional members with experience working with children with special health care needs were appointed:

- Kris-Tena Albers, ARNP, MN: Director of Sexual Assault Nurse Examiner (S.A.N.E.) Training and Sustainability Program, Florida Council Against Sexual Violence
- John Harper, BA: Manager, Prevention and Child Protective Investigations, Office of Child Welfare, Florida Department of Children and Families
- Jay Howell, Esq: Jay Howell & Associates, former prosecutor and member of the American Bar Association, Task Force on Child Witnesses, Jacksonville, FL
- Esther Jacobo, Esq: Chief Assistant State Attorney for Operations, Eleventh Judicial Circuit, Miami-Dade, FL and former Interim Secretary of the Florida Department of Children and Families
- Theresa E. Simak, Esq: Assistant State Attorney, Fourth Judicial Circuit, Jacksonville, FL

The task force elected Jay Howell, Esq. as Chairperson and Alan Abramowitz, Esq., as Co-Chairperson.

SECTION TWO: TASK FORCE MEETINGS AND SPEAKERS

The initial task force meeting was scheduled for September 12, 2017; however, it was rescheduled to October 17, 2017, due to Hurricane Irma. Task force meetings were conducted in-person, via webinars and conference calls. Four in-person meetings were held: one in Tampa, one in Tallahassee, and two in Orlando, Florida.

Professional guest speakers provided expertise and insight into various components of conducting child forensic interviews. The list of speakers and participants follows:

- Jackie Sandefer-Gonsen, CPT Training and Quality Assurance and Quality Improvement Coordinator, Florida Department of Health, Division of Children's Medical Services
 - Presentation: Welcome Child Forensic Interview Task Force Meeting
 - Provided input and materials regarding child forensic interviewing
- Brenda Kocher, Voices for Children
 - Presentation: Wagging Tails and Other Indispensable Tools in the Treatment of Trauma
- Kelly A. Swartz, Esq: Director of Legal Advocacy for the Florida Guardian ad Litem Program
 - Presentation: Use of Interviews in Dependency Cases
- Brian Fernandes, Esq., Assistant State Attorney, Fifteenth Judicial Circuit, West Palm Beach, FL
 - Presentation: Prosecution of Child Maltreatment Cases
- Theresa E. Simak, Esq., Assistant State Attorney, Fourth Judicial Circuit, Jacksonville, FL
 - Presentation: Prosecution of Child Maltreatment Cases
- Terry Thomas, Special Agent (Retired)
 - Presentation: Law Enforcement Interviews
- Charles B. Nemeroff, M.D., Ph.D., Director of the University of Miami Center on Aging and Chairman of the Department of Psychiatry and Behavioral Sciences
 - Presentation: Paradise Lost: The Neurobiology of Child Abuse and Neglect
- Esther Jacobo, Esq., Chief Assistant State Attorney for Operations, Eleventh Judicial Circuit, Miami-Dade, FL and former Interim Secretary of the Florida Department of Children and Families
 - Provided input and materials regarding Neurobiological and Psychological Impacts of Human Trafficking Trauma on Child Victims and the Implications of Court Proceedings
- Representative Gayle B. Harrell, Chair of the Children, Families and Seniors Subcommittee, Florida House of Representatives
 - Comments: Purpose of the Task Force
- Marina Anderson, Department of Children and Families Regional Human Trafficking Coordinator
 - Presentation: Special Interviewing Needs of Human Trafficking Victims

- Chief Judge Jonathan Sjostrom, Second Judicial Circuit
 - Comments: Administrative Orders and Dependency Court Proceedings
- Lorena Bueno, Esq., Assistant State Attorney, Second Judicial Circuit
 - Presentation: Administrative Orders and Perspectives
- Travis W. Conradt, Ph.D., Professor Department of Psychology Florida Institute of Technology
 - Provided input and materials regarding child forensic interviewing
- Laura Knudson, Bureau Chief, Trauma Intervention and Special Services, Alachua County Sheriff's Office
 - Provided input and materials regarding child forensic interviewing

The following professional staff of the Department of Health, Division of Children's Medical Services provided input and materials regarding child forensic interviewing:

- Cassandra G. Pasley, BSN, JD, Division Director
- S. Nicole Jordan, LCSW, MS, Child Protection Unit Director
- Patricia L. Armstrong, MSW, CADR Unit Director
- Janet Evans, M.S.P.A., Training Developer/Consultant
- Stephenie Havard, Administrative Assistant II

SECTION THREE: OVERVIEW OF CHILD FORENSIC INTERVIEWING

HISTORY OF CHILD FORENSIC INTERVIEWS

In the 1980s, several high-profile cases involving allegations of child abuse became the subject of considerable analysis because of the interview techniques that were used. In some instances, law enforcement depended on mental health practitioners to interview children because of their ability to establish rapport with children. However, mental health practitioners often used therapeutic techniques that were later deemed inappropriate for forensic purposes, primarily because of concerns regarding suggestibility. The courts scrutinized the interview procedures used in these early cases and concluded that techniques that invited make-believe or pretending were inappropriate for criminal investigations. As awareness of child abuse grew, professionals realized that it might take special skills to interview children.²

In the 1990s, professionals began to appreciate that interview guidance needed to involve more than mere advice about questions and the use of media; child welfare professionals needed advice about the structure of the interview, itself. This necessity derived from the characteristics of the interviewers and the interviewees. Most professionals charged with the responsibility of interviewing children about sexual abuse did not have extensive mental health backgrounds or knowledge about child development. This was especially true of law enforcement, but might also have been true of child protection workers because the usual requirement for the position was a bachelor's degree, which could be in criminal justice. Subsequently, dozens of interview structures were developed, most with a focus on the mandated investigators, child protection and law enforcement, and on forensic interviewers. Some interview structures were developed in academic institutions.³

PURPOSE OF CHILD FORENSIC INTERVIEWS

Child maltreatment jeopardizes child safety and well-being. Maltreatment cases in which the offender is a caregiver fall within the purview of child protective services and may also be investigated by law enforcement. Cases in which allegations do not involve caregivers are investigated by law enforcement. In the mid-1980s, virtually every state in the U.S. amended its child protection laws to foster collaboration between law enforcement and child protection investigators on serious maltreatment cases. Child protection workers and law enforcement often jointly interviewed the child, one or the other taking the lead. In some cases, the child protection worker interviewed the child while law enforcement interviewed the alleged offender and other witnesses. Information was shared through exchange of notes, sharing of interview recordings, or conferring.⁴

² Newlin, C., Steele, L. C., Chamberlin, A., Anderson, J., Kenniston, J., Russell, A., ... & Vaughan-Eden, V. (2015). *Child forensic interviewing: Best practices* (pp. 1-20). US Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

³ Faller, K. C. (2014). Forty years of forensic interviewing of children suspected of sexual abuse, 1974–2014: Historical benchmarks. *Social Sciences*, 4(1), 34-65.

⁴ Newlin, C., Steele, L. C., Chamberlin, A., Anderson, J., Kenniston, J., Russell, A., ... & Vaughan-Eden, V. (2015). *Child forensic interviewing: Best practices* (pp. 1-20). US Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

Forensic interviews are instrumental pieces of evidence in child abuse or neglect investigations and are used in both criminal and dependency courts. Section 90.803(23), FS, provides a hearsay exception for statements made by a child victim. An out of court statement used to prove the truth of the matter asserted is admissible, if it meets the following conditions:

- It is made by a child victim with a physical, mental, emotional, or developmental age of 16 or less describing the act of abuse or neglect,
- The court finds this statement reliable, and
- The child testifies or is unavailable, provided there is other corroborative evidence of the abuse or offense.

This reliability determination is conducted at a pre-trial hearing. In making this determination the court must read, watch, and/or listen to the forensic interview. The court must then consider the physical, mental, and developmental age of the child; the maturity of the child; the nature and duration of the abuse; the relationship of the offender to the child; and the content of the statement.

When reviewing forensic interviews, the court considers whether the child is using age appropriate language, whether leading questions are being asked of the child, whether the child can distinguish truth and lie and agrees to tell the truth, and whether the statement is in the child's own words. Courts also look for evidence of false allegations and coaching. Once a court determines there are sufficient safeguards of reliability surrounding the statement, and that there is other corroborative evidence, the court will make specific findings of fact on the record regarding the admissibility of the forensic interview. In many criminal child abuse prosecutions, the most compelling evidence is the videotaped forensic interview; due to criminal trials often occurring years after the abuse is first disclosed. With this passage of time, children grow up and memories fade. The forensic interviews, many of which are video recorded, memorialize the disclosure. When the victim who is now older sits in a court proceeding with strangers and the abuser, the child may struggle and be hesitant to testify; the video of the forensic interview will be available as evidence. The jurors will see the victim, at a younger age in a child-friendly environment talking to a non-judgmental person. The jurors will hear the victim talk about the abuse suffered in his/her own words and pace, which can be very persuasive.

The forensic interview also aids in plea negotiations which negates the need for a trial. In dependency court, forensic interviews can be used as evidence in shelter hearings, dependency cases and termination of parental rights proceedings. The parents are often present at these proceedings, and the forensic interview can ensure that the child does not have to testify in front of his/her abuser. In addition, the forensic interview can be used by other professionals to aid in the recovery of the child's trauma, which may serve as the beginning of the child's healing.

Whether used in criminal court or dependency court the admissibility of the forensic interview is dependent upon its quality. If the forensic interview is not conducted in a manner that will meet the legal standard, then compelling evidence is lost. Electronic recordings are the most complete and accurate way to document forensic interviews, capturing the exchange between the child and the interviewer and the exact wording of questions. Video recordings make the interview process transparent, documenting that the interviewer and the multidisciplinary team

avoided inappropriate interactions with the child.⁵ Hearing an account of the abuse in the child's own words provides an additional opportunity for the court to evaluate the veracity of the child's statements.

DIFFERENCES BETWEEN CHILD FORENSIC INTERVIEW AND CLINICAL ASSESSMENTS

The requirements of child forensic interviews are different from clinical assessments. The primary goal for conducting child forensic interviews is to gather information that will either corroborate or refute allegations of abuse, neglect, or violence and consider all reasonable hypotheses. Additional goals include allowing the child to verbally describe event(s) and elicit a complete and accurate account of events told by the child. This helps to determine if abuse, neglect, or violence occurred and if the child is in imminent danger. Maintaining an impartial and objective position is important while asking questions and gathering information during the child forensic interview. These interviews are conducted by a variety of disciplines.

Conversely, a clinical assessment has a therapeutic focus and is intended to assess the child and provide treatment of symptoms. These assessments are typically conducted by therapists, licensed medical health care professionals, psychologists and psychiatrists.

⁵ Newlin Faller, K. C. (2014). Forty years of forensic interviewing of children suspected of sexual abuse, 1974–2014: Historical benchmarks. *Social Sciences*, 4(1), 34-65.

SECTION FOUR: FORENSIC INTERVIEWING PROTOCOLS AND PRACTICES

As used in this report, the term “protocol” refers to the overarching framework and supportive processes that provide the foundation for effective forensic interviews. A standardized protocol outlines the need for advance preparation and collaboration of critical partners, considers the environment in which the interview is conducted, establishes parameters for communicating with the child and provides review of the results.

COMPONENTS OF A STANDARDIZED PROTOCOL

1. Preparation for the Child Forensic Interview

a. Training

Many specialized training programs have been developed for forensic interviewers. These programs are needed for professionals who conduct forensic interviews. Most professionals are not customarily taught forensic interview practices during their professional training. Often, interviewers may have limited training in child development, children’s memory and suggestibility, linguistics, and the neurobiology of trauma, (referenced in [Appendix A](#)). Nationally, forensic interview training programs range from two days to 40 hours. These are often sponsored by state agencies responsible for interviewing children. These forensic interview training programs are often specific to an interview structure or protocol.⁶

It is essential that individuals who conduct child forensic interviews complete a recognized training program in child forensic interviewing prior to conducting interviews.

b. Collaboration with Partners in the Protective Investigation

In preparation for the interview, the forensic interviewer must clarify and focus on the goals of the interview. The specific role of the interviewer should not only be clear to the interviewer, but also to others directly involved in the case.⁷

Multi-disciplinary teams, composed of representatives from a variety of professions, occupy a key role in the forensic interview process. Typically, these teams are assembled to improve information sharing and coordination between agencies, recognizing the potential for serious consequences of poor cross-agency communication.⁸

⁶ Newlin Faller, K. C. (2014). Forty years of forensic interviewing of children suspected of sexual abuse, 1974–2014: Historical benchmarks. *Social Sciences*, 4(1), 34-65.

⁷ Silvosky, J. (2000, March). *The Difference Between Forensic Interviews & Clinical Interviews*. The Center on Child Abuse and Neglect.

⁸ Herbert, J. L., & Bromfield, L. (2017). Better together? A review of evidence for multi-disciplinary teams responding to physical and sexual child abuse. *Trauma, Violence, & Abuse*, 1524838017697268.

Collaborating partners in the child forensic interview process may include any of the following individuals or agencies: Child Protective Investigators, the Child Protection Team and Children's Advocacy Center staff, law enforcement, prosecutors, courts, and child dependency agencies. Specific issues or questions that any of the collaborating agencies want addressed may be clarified during the interview preparation process.

c. Planning for the Interview

Obtaining demographic and social information about the child and family prior to the interview is recommended. Knowing the names of family members and others close to the child can facilitate understanding the child's description of events. If language is a potential barrier, then a trained interpreter is essential.

2. Child Friendly Environment or Setting for the Interview

- a. Special consideration should be given to the physical space in which the child forensic interview will be conducted. A child-friendly space is important to reduce the child's anxiety about the interview process. Not only the interview room, but the reception or waiting area should be child-friendly. This may mean providing child-sized furniture and children's books or games to make the child feel comfortable in the surroundings while waiting for the interview. It is recommended that there not be toys or games or other distractions (e.g., paintings or pictures) in the interview room, that could divert the child's attention away from the interview process.
- b. The facility and the interview space should be appropriate for diverse populations and ages of children, and should be accessible for people with disabilities.
- c. Any recording devices should be unobtrusive so as not to distract or intimidate the child.

3. Communicating with the Child

a. Phases of the Interview

i. Building Rapport

The relationship between the interviewer and the child in the child forensic interview is important. The interviewer should establish a rapport with the child. The Rapport Building Phase of the interview typically involves introductions with age-appropriate explanations of the procedures for the interview, a review of the interview instructions, and the importance of telling the truth.

Rapport building includes asking questions about the child's interests, activities and friends. The interviewer should be aware of considerations such as the child's age, developmental capacity, and cultural influences. The interviewer can also use this time to informally assess the child's language skills and developmental or cognitive abilities.

ii. Substantive Phase

The purpose of the child forensic interview is to attempt to obtain a truthful and clear narration of the event(s). This involves the child's narrative description of the events, and clarification of information provided by the child. Closure Phase

It is important to provide a sense of closure for the child when the interview is completed. This involves being attentive to the child's social and emotional needs, transition to non-substantive topics, and allowing the child to ask questions.

b. Types of Questions

i. Approach

The way the interviewer interacts with the child can influence the child's disclosure of information. The approach of the interviewer, the wording of questions, and the interviewer's verbal and non-verbal communication can impact how the child interprets and responds to questions.⁹ The interviewer should be at eye-level with the child and use a neutral tone of voice and facial expression. Showing surprise or shock when the child reveals details of the maltreatment may cause the child to interpret these reaction as having said something "wrong" and disrupt the course of the interview.

Many children do not spontaneously disclose maltreatment. There are many reasons for this, such as fear of being separated from family, fear of getting someone in trouble, fear of retribution, or conflicted feeling about the alleged abuser. The interview should provide an atmosphere that encourages trust and makes the child feel comfortable to encourage an accurate disclosure.

⁹ Silvosky, J. (2000, March). *The Difference Between Forensic Interviews & Clinical Interviews*. The Center on Child Abuse and Neglect.

ii. Asking Questions

Once the interviewer has established a rapport with the child, there should be a smooth transition into questioning. A friendly approach is more conducive to getting the child to respond to questions.

Questions should be framed in a manner that will be clearly understood by the child. This means that the interviewer should use simple words and sentence structure that is appropriate for the age and development status of the child.

Generally, children view adults as an authority figure and this can affect their responses to the interviewer. Children often try to figure out the “right” answer to questions posed by adults. To avoid this, the interviewer should explain to the child that there are no “right” answers except the truth of what happened. It is okay for the child to say that they do not remember or understand the question; and that it is okay to correct the interviewer, if necessary.

Open-ended, focused questions are preferred during the forensic interview. These allow children to provide whatever information they think is responsive to the question. The interviewer may re-state what the child has said or ask a clarifying question.

The use of pronouns, to identify individuals, should be avoided when asking questions. The use of proper names helps to avoid confusion. The use of simple descriptive words is less likely to be misinterpreted by the child. If the interviewer is unsure if the child understands a word, the child can be asked to tell the interviewer what the word means. The interviewer also needs to clarify the words that the child uses to describe events, locations, and body parts. Another point for consideration is the child’s perception of time. Younger children, especially, tend to have difficulty with the concept of time. Yesterday may be yesterday or it may be last week or last month. The interviewer should try to connect the time with an event that would be meaningful for the child, such as a birthday, holiday, or school term.

The use of a narrative process for obtaining information is helpful for many children. This process entails the child telling about an event, unrelated to the maltreatment from beginning to end. This is a helpful way for the interviewer to get an idea of the child’s understanding of events and sequencing. The interviewer should avoid asking the child to “tell a story.”

In some clinical or therapeutic settings, children may be encouraged to respond to questions or provide information based on reinforcement, such as stickers or candy. This type of reinforcement should not be used during forensic interviews. This type of reinforcement should not be used during forensic interviews.

c. Unique Needs of the Child

Children with disabilities are potentially at greater risk for abuse and neglect. Care must be taken to consider the age, developmental level, verbal skills, and other unique features of children with special needs. Children with special needs may require individualized techniques. Interviewers should become familiar with the child's disability and mode of communication. The interviewer should meet the child on their level, constantly evaluate and adjust interview techniques to meet the needs of the child. Interviewers need to keep their questions simple and ask as many open-ended questions as possible because children with disabilities tend to want to please and may respond affirmatively more than other children.

d. Use of Technology

Information from the interview may be used in legal proceedings. The interview should be video-recorded, and a written account of the interview can be completed during and immediately after the interview. Video-recording provides the most accurate account of the interview. Video-recording the interview in coordination with all individuals and agencies involved reduces the potential need for additional interviews with the child.

Children may disclose acts of maltreatment in a variety of settings. In some instances, a child may disclose to a person (e.g. parent) but fail to disclose the same acts of maltreatment during the forensic interview. The reverse is also possible, the child may disclose during the recorded interview, but be uncertain when questioned later.

With video-recorded interviews, the forensic team can analyze questions and assess interviewer techniques.

4. Evaluation and Peer Review

Structured forensic interview protocols improve the quality of investigative interviews with children. Supervision, peer reviews, and other forms of feedback should help forensic interviewers integrate the skills they learned during initial training and improve their practice over time. The peer review should be a

formalized process in a neutral environment with established interviewing techniques, and a shared understanding of goals, processes, and purpose.¹⁰

APPROACHES IN CHILD FORENSIC INTERVIEWING

There are some generally accepted practices and principles in child forensic interviewing. The majority of approaches recognize that the child's age, developmental functioning, and cultural influences must be taken into consideration while interviewing a child. In addition, understanding the disclosure process and that children respond to trauma differently is critical; no single disclosure pattern is predominant.

The interviewer's use of narrative practice is also extremely important. Narrative practice, also referred to as narrative sequencing, allows a child to discuss a neutral topic, unrelated to the allegations, in a narrative format. Narrative practice increases a child's informative responses to open-ended questions. The child may be asked to describe their work in school, hobbies, favorite activities, etc.

There are variations in the different approaches to forensic interviewing. Practices vary regarding the most effective way to help a reluctant child transition to the topic of concern. Interviewers often receive training in a variety of practices and use a "blended" approach to meet the needs of children. Care must be taken to consider the developmental level, the verbal skills, and other unique features of each child. Because of these differences, children require individualized techniques.

Generally accepted practices in child forensic interviewing include the following:

- Forensic interviews should be electronically recorded, preferably in a video recording
- Interviewers should have formal initial specialized training and ongoing re-training
- The interview environment should be neutral, objective and child friendly
- Throughout the interview, techniques should be utilized that maximize the amount of information obtained from the child through free recall (recalling an event from memory without being asked questions or given prompts)
- The interviewer should use open-ended and nonsuggestive questioning techniques when introducing suspected abuse and utilize what, who, where, when questions, which are the least leading way of obtaining missing details
- An interviewer should not interrupt a child's narrative response
- An interviewer should ask if an event occurred "one time or more than one time" as opposed to asking a child for a specific number of times, such as "one time" or "five times"
- Interviewers should limit the use of multiple choice questions and questions that introduce information

¹⁰ Newlin Faller, K. C. (2014). Forty years of forensic interviewing of children suspected of sexual abuse, 1974–2014: Historical benchmarks. *Social Sciences*, 4(1), 34-65.

- Interviewers should communicate with multidisciplinary team members and balance requests with the need to maintain legal defensibility and the child's ability to give more information¹¹

STRUCTURES AND PRACTICES REVIEWED BY TASK FORCE

A general request for information on forensic interviewing practices was requested from various organizations throughout the nation. The following thirteen organizations responded and provided information on existing forensic interview practices:

1. American Professional Society on the Abuse of Children (APSAC)
2. ChildFirst
3. The Cognitive Interview
4. CornerHouse
5. The Forensic Interview Practice used in North Carolina
6. The Forensic Interview Practice used in Texas
7. Florida Department of Health Forensic Interview Practice
8. National Children's Advocacy Center (NCAC)
9. National Institute for Child and Human Development (NICHD)/Revised NICHD
10. Recognizing Abuse Disclosure Types and Responding (RADAR)
11. Step-Wise Approach to Interviewing Children: The Next Generation
12. Ten Step Investigative Interview Process
13. Wisconsin Forensic Interview Guidelines

A brief overview of forensic interview practice models commonly used in Florida is below:

AMERICAN PROFESSIONAL SOCIETY ON THE ABUSE OF CHILDREN (APSAC)

APSAC's comprehensive clinics offer intensive training experience and the opportunity for participants to experience personal interaction with leading experts in the field of child forensic interviewing. The model features a structured narrative interview approach, which emphasizes best practices based on research and the best interest of the child. Participants receive a balanced review of several forensic interview practices and learn how to develop customized narrative interview approaches based on the principles taught in the training.

DEPARTMENT OF HEALTH (DOH) FORENSIC INTERVIEW MODEL

DOH offers a 40-hour training that includes presentations by local experts in the areas of basic skills of forensic interviewing, child development, suggestibility, interviewing persons with disabilities, legal issues and law enforcement concerns. DOH utilizes practicum interviews where students work with volunteer actors to practice the skills they learn in the classroom. The interviews are recorded and made available to the students, along with a critique from the

¹¹ Newlin, Chris, Cordisco Steele, Linda, Chamberlin, Andra, Anderson, Jennifer, Kenniston, Julie, Russell, Amy, Stewart, Heather and Vaughan-Eden, Viola. "Child Forensic Interviewing: Best Practices." *U. S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Programs (OJJDP), Juvenile Justice Bulletin*. September 2015.

training instructor and peers, enabling students to review their own interviews as well as learn from their peers after they leave the classroom. In addition, forensic interviews completed by the students out in the field after they receive training are reviewed and critiqued by the training instructor. The training also involves a recorded 'mock courtroom' to teach skills necessary to be expert witnesses.

NATIONAL CHILDREN'S ADVOCACY CENTER (NCAC)

NCAC training consists of audience discussion, practicum interviews, a review of recorded forensic interviews, experiential skill-building exercises, and participation in a mock court. Participants are immersed in the realistic, unpredictability of children by participating in the only practicum interviews that use child victims, which allows participants to experience, evaluate, and prepare to overcome the spontaneity that only child victims can provide. Each participant receives a recorded copy of their practicum interview.

RECOGNIZING ABUSE DISCLOSURE TYPES AND RESPONDING (RADAR)

RADAR is a structured, child-friendly forensic interview model. The model provides partial scripting for less experienced interviewers and scaffolding for more experienced interviewers. It also offers sufficient flexibility to accommodate different types of maltreatment, child developmental levels and disclosure histories. RADAR emphasizes forensic balance with the dual objective of minimizing interview errors that may contribute to false positive or false negative outcomes. RADAR is adapted from the NICHD Investigative Interview Protocol and the Cognitive Interview. It also comes from eighty (80) years of combined experience in child forensic interviewing by the RADAR model developers. RADAR works best with children who are at a developmental age of at least five (5) years old. A RADAR Jr. model is available for younger children.

Additional information regarding forensic interview practice models can be found in [Appendix B](#).

SECTION FIVE: COLLABORATING PRACTICES AND RESOURCES IN FLORIDA

CHILD FORENSIC INTERVIEW MULTIDISCIPLINARY APPROACH

Research indicates that forensic interviews are best conducted within a multidisciplinary team. A coordinated investigation has been shown to increase the efficiency of the investigation while minimizing system-induced trauma in the child. As outlined above in section four, before the interview, multidisciplinary team members should discuss possible barriers, case-specific concerns, and interviewing strategies. The interviewer should communicate with the team members observing the interview to determine whether to raise additional questions or whether there are any ambiguities or apparent contradictions to resolve. The interviewer often must balance the team's request for further questions with the need to maintain legal defensibility and with the child's ability to provide the information requested.¹²

MULTIDISCIPLINARY TEAM COLLOBORATION

There are numerous agencies throughout the state charged with protecting children from abuse and neglect. Florida's team includes, but is not limited to, the DCF, Child Protective Investigators, law enforcement officers, CPT members, and CAC staff to provide an array of services. CPTs are contracted with DOH/CMS to provide medical, psychological and social assessments to children and their families who are involved in an open DCF investigation due to alleged abuse or neglect. CPT and CAC programs evaluate families, identify risk or safety concerns, and provide recommendations to the referring agency.

DCF INVESTIGATIVE PRACTICE RELATED TO CHILD INTERVIEWING

Section 39.303(4), FS, outlines certain maltreatments that require Child Protective Investigators to refer a child to the appropriate CPT located in their respective jurisdiction. DCF Operating Procedure (CFOP 170-5) further directs child protective investigators to "contact CPT as soon as possible to arrange for a medical evaluation or other CPT services" (e.g., forensic or specialized interview) when the preliminary information obtained supports the reported maltreatment. Information obtained from CPT by the child protective investigator is designed with the purpose of completing a child safety assessment regarding identifying danger threats in the home and the need for emergency shelter placement outside the home to protect the child, siblings or other children in the home.

PALM BEACH COUNTY PROTOCOLS FOR CHILD ABUSE INVESTIGATIONS

Palm Beach County has established protocols for the investigation of physical and sexual abuse crimes committed against children. These protocols detail the interaction between various agencies involved in the forensic interview of children. The protocols include a checklist for the initial response to child abuse, procedures in the follow-up investigation, the rapid response

¹² Newlin, Chris, Cordisco Steele, Linda, Chamberlin, Andra, Anderson, Jennifer, Kenniston, Julie, Russell, Amy, Stewart, Heather and Vaughan-Eden, Viola. "Child Forensic Interviewing: Best Practices." *U. S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Programs (OJJDP), Juvenile Justice Bulletin*. September 2015.

team protocol, and protocols for multidisciplinary partners. The Palm Beach County Child Abuse Protective Investigations Protocol can be found in [Appendix C](#).

THERAPY ANIMALS AND FACILITY DOGS

The task force reviewed section 92.55, FS, which permits a court to enter an order providing for special protections and the use of a therapy dog for child victims. The Florida Legislature recently provided a statutory basis for the use of therapy animals to assist children in articulating their child maltreatment experiences. The new law allows the judge to permit the use of therapy animals or facility dogs in a court case of abuse, abandonment or neglect. Currently, neither facility dogs or therapy animals (along with their handlers) are permitted in the child forensic interview process due to confidentiality. Section 92.55, FS, provides the following definitions:

Facility dog means a dog that has been trained, evaluated, and certified as a facility dog pursuant to industry standards and provides unobtrusive emotional support to children and adults in facility settings.

Therapy animal means an animal that has been trained, evaluated, and certified as a therapy animal pursuant to industry standards by an organization that certifies animals as appropriate to provide animal therapy.

When available, a therapy animal or facility dog may be considered as a resource to reduce stress and provide support to the child. Scientific research has shown that the presence of such animals significantly reduces physiological and behavioral distress, including a lowering of heart rate and blood pressure, which allows children to feel safer and calmer and to better recollect facts.¹³

Therapy animals are also beginning to emerge in the interview process. The therapy dog may be present at the initial disclosure to authorities and may also be present at the interview site to interact with the child prior to the actual forensic interview. The therapy animal and handler typically do not accompany the child into the interview room.¹⁴

Per the 2017 Florida House of Representatives Final Bill Analysis of CS/CS/HB 151 (also called “Justices Best Friend Act”), at least four circuit courts had implemented formal animal support programs. The Second Circuit began its animal support program in 2006, the Fifth and Ninth Circuits did so in 2014, and the Twentieth Circuit started a program in 2016. The Thirteenth Circuit has also allowed a facility dog in its courtrooms for children in dependency cases. The bill became effective on July 1, 2017. Following the passage of this law, therapy animals and facility dog programs have grown and are expected to become more available.

¹³ Cheryl A. Krause-Parello, Michele Thames, Colleen M. Ray & John Kolassa (2018): Examining the Effects of a Service-Trained Facility Dog on Stress in Children Undergoing Forensic Interview for Allegations of Child Sexual Abuse, *Journal of Child Sexual Abuse*, DOI: 10.1080/10538712.2018.1443303

¹⁴ Conrard, T. W. AP-LS News| February 2016.

SECTION SIX: ADMINISTRATIVE ORDERS

One comprehensive forensic interview is sufficient for many children, particularly if the child made a previous disclosure, possesses adequate language skills, and has a support system. The literature demonstrates the dangers of multiple interviewers repeatedly questioning a child or conducting duplicative interviews. However, some children require more time and familiarity to become comfortable and to develop trust in both the process and the interviewer before disclosing abuse.¹⁵

Section 914.16, FS, requires the chief judge of each judicial circuit to issue an Administrative Order that reasonably limits the number of interviews which a victim of certain abuse offenses must submit to during law enforcement investigations or during the discovery process. The purpose of such orders is to protect the victim from the psychological damage of repeated interrogations while preserving the rights of the public, the victim, and the person charged with the violation.

The task force reviewed and compared the Administrative Orders for each of Florida's twenty circuits. The maps in [Appendix D](#) illustrate a delineation per circuit of the following:

- The year the Administrative Order was issued
- The age requirement for a child to fall within the purview of the Administrative Order
- The number of allowed interviews pursuant to the Administrative Order
- The availability of additional interviews pursuant to the Administrative Order

The task force recommends that the Circuit Chief Judges consider a single Administrative Order that would be adopted by all judicial circuits providing consistency for the protection of child victims. Additionally, the inclusion of a reference to section 92.55, FS, in each administrative order would consistently provide notice to all practitioners of this application.

The task force also received information on the complexity of this issue and comments concerning the importance of incorporating flexibility within these Administrative Orders for certain types of victims, i.e. special needs and victims of human trafficking. The task force received valuable information regarding recent significant developments in the areas of the neurobiology of child abuse, linguistics¹⁶ and trauma informed interviews that have emerged since the original Administrative Order statute became law.

One consistent aspect was the allowance of a single deposition of a child victim. Incorporated into this would be the tenet that interviews conducted by law enforcement or prosecutors are not considered a deposition. The issue of how to define an interview pursuant to Florida law and for

¹⁵ Newlin, Chris, Cordisco Steele, Linda, Chamberlin, Andra, Anderson, Jennifer, Kenniston, Julie, Russell, Amy, Stewart, Heather and Vaughan-Eden, Viola. "Child Forensic Interviewing: Best Practices." *U. S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Programs (OJJDP), Juvenile Justice Bulletin*. September 2015.)

¹⁶ Graffam Walker, A. (2017). Handbook on questioning children: A linguistic perspective (3rd Edition).

the purposes of including this within each Administrative Order requires review. Additional information regarding each Administrative Order can be found in [Appendix E](#).

SECTION SEVEN: RECOMMENDATIONS

The Forensic Interview Protocol Task Force developed recommendations for a state protocol, standardized forensic interviews and child forensic interview video recordings. These recommendations were based on professional input, research, data findings, review of literature and current practices.

RECOMMENDATIONS FOR STANDARDIZED FORENSIC INTERVIEWS:

- 1. Environment:** The environment where the interview is conducted can make a substantial difference in the success of the interview. Special care should be taken to conduct forensic interviews with children in a child friendly location equipped with the furniture, facilities and atmosphere that adds to the child's comfort.
- 2. Unique Needs of the Child:** Children with special needs require the application of a variety of practice components and specialized techniques. Care must be taken to consider the developmental level, the verbal skills, and other unique features of children with special needs. Similarly, child victims of human trafficking present a set of unique challenges that are now known to professionals. For example, the unique trauma experienced by human trafficking victims may require more interview opportunities to fully disclose the abuse. Understanding this relatively recent research and experience is critical to the success of the forensic interview.¹⁷
- 3. Use of Technology:** The task force strongly recommends video recording of forensic interviews. Video recordings enhance the credibility of the interview and provide essential evidence in criminal and dependency court proceedings. Testimony was presented to the task force concerning the extensive use video recordings of forensic interviews in criminal prosecutions and dependency proceedings. In most jurisdictions in Florida, the forensic interview is regularly introduced as evidence in criminal case prosecutions and dependency court proceedings.
- 4. Evaluation and Peer Review:** Best practices include a component of quality assurance to monitor and improve the interview process. After the underlying case is concluded, the child forensic interview report, video recording, etc. should be subject to random evaluations and recommendations for improvement.
- 5. Community Protocol:** The task force recommends that communities in Florida consider establishing similar guidelines to the Palm Beach County Protocols for Child Abuse Investigations to ensure effective interaction in the response to crimes against children and include multidisciplinary partners existing in the particular jurisdiction.

¹⁷ Caralis, P. and Mezick, B. (2017, May): Whitepaper: A Summary of the Neurobiological and Psychological Impacts of Human Trafficking Trauma on Child Victims and the Implications for Court Proceedings.

6. **Therapy Animals and Facility Dogs:** When available, a therapy animal or facility dog may be considered as a resource to reduce stress and traumatization for children during court proceedings. Scientific research shows that the presence of such animals significantly reduces physiological and behavioral distress, including a lowering of heart rate and blood pressure, which allows children to feel safer and calmer, which provides an opportunity to effectively recollect facts.¹⁸ The use of facility, service or therapy animals can assist the child in articulating their experiences in court settings.
7. **Administrative Orders:** The task force recommends that the Circuit Chief Judges consider a single Administrative Order that would be adopted by all judicial circuits providing consistency for the protection of child victims. Additionally, the inclusion of a reference to section 92.55, FS, in each Administrative Order would consistently provide notice to all practitioners of this application.
8. **Court Proceedings:** Prosecutors in Florida should be aware of the potential for the child to experience additional trauma during criminal case depositions. University researchers, working with experienced Florida state attorneys have recently reported the fundamental difficulties faced by a traumatized child in the environment of a criminal case deposition. This concern is explained in the “Fernandez-Rundle Letter to Florida Bar” and white paper ([Appendix F](#)).

RECOMMENDATIONS FOR CHILD FORENSIC INTERVIEW TRAINING:

1. **Minimum Standards:** Forensic interviews in Florida come from a wide variety of professions, including, but not limited to, social workers, mental health professionals, law enforcement, attorneys, CPT members, and CAC staff. Florida should consider establishing minimum standards for training forensic interviewers. These standards should apply to all professionals who conduct child forensic interviews.
2. **Specialized Training:** Ideally, forensic interviewers should have specialized training. An inexperienced interviewer may impair the child’s ability to articulate their experiences. The interview itself can be challenging and if it is to be successful in securing accurate and comprehensive information, the interviewer’s training must be specialized, current, and repeated or supplemented at appropriate intervals in the career of the interviewer.
3. **Training Components:** The training should include components that address the following; preparation for the child forensic interview, environment or setting of the interview, communicating with the child, types of questions, unique needs of the child, use of technology, evaluation and peer review.

¹⁸ Krause-Parello, C. A., Thames, M., Ray, C. M., & Kolassa, J. (2018). Examining the Effects of a Service-Trained Facility Dog on Stress in Children Undergoing Forensic Interview for Allegations of Child Sexual Abuse. *Journal of child sexual abuse*, 1-16.

4. **Certification Requirements:** The Criminal Justice Standards and Training Commission at the Florida Department of Law Enforcement should examine whether minimum certification, training and re-training requirements are feasible for law enforcement professionals who conduct child forensic interviews. In addition, individual law enforcement agencies in Florida should consider establishing similar certification, training and re-training requirements for officers who conduct child forensic interviews.

5. **Regionalized Training:** Regional training opportunities should be available for interviewers who are unable to travel long distances. Examples of currently available training programs for law enforcement are listed [Appendix G](#).

SECTION EIGHT: CONCLUSION

One of the most powerful and persuasive sources of evidence in any investigation of child abuse, neglect, or exposure to violence is the forensic interview of the child. An effective forensic interview of the child is essential to our state's collective response to crimes suspected of being committed against children.

The video recording of the forensic interview is regularly and consistently introduced as evidence in Florida criminal court prosecutions of child abuse and neglect as well as in civil dependency proceedings where the court is called upon to make consequential decisions in the life of the child. The video recording of the interview provides the most effective preservation of the important evidence revealed in the interview process.

It is critically important that the interview is effectively and competently conducted by a trained and experienced interviewer. The specialized and ongoing training of the interviewer is essential. A strong component of quality assurance and review are decisive factors in an effective forensic interview process.

It is imperative that the communities, agencies and individuals involved in the forensic interview process are vigilant in ensuring that this important process is prioritized and strengthened to safeguard its success.

The implementation of the recommendations in this report will require a coordinated and informed effort in Florida's medical, child protection and child welfare, law-enforcement, mental health, and legal communities. The implementation should be initiated as an organized and thoughtful endeavor, involving all the disciplines in the forensic interview process.