



“And they gave me a shot, it really hurt” – Evaluative content in investigative interviews with young children^{☆, ☆☆}



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ABSTRACT

Research is scarce on the suitability of the evidence-based components of child investigative interviews when used in non-forensic contexts, such as social work or school, particularly in relation to children's reports on emotional content.

This explorative study investigated to what extent a structured forensic interview protocol aids children in verbalizing negative emotional experiences of distress or discomfort. To do this we assessed and compared children's displayed distress during a video-recorded health visit with the verbalized distress in interviews 2–4 weeks later about this visit. The children, aged 4 and 5 years (N = 26), were interviewed with a forensic interview protocol. The recorded visits were coded for level of distress and children's statements regarding distress along with the interviewer questions preceding them were analyzed qualitatively.

The results showed that 46% of the 4-year-olds and 39% of the 5-year-olds displayed discomfort or distress during their health visit. In the interviews, open-ended questions were posed to all children. These questions were sufficient to aid only some children (n = 6) to share evaluative content. However, none of the children who displayed distress or discomfort during the visit verbalized such experiences after an invitation only. Most children who described negative experiences did so in response to evaluative questions.

The results suggest that more research is warranted on how and when evaluative questions should be posed and whether this differs depending on severity of experience or the child's age. The need for protocol development and its suitability when used in other fields of practice is discussed.

1. Introduction

Over the past decades, research on methods to elicit reliable reports from children has increased dramatically and there is now a general agreement on a set of core evidence-based principles for interviewing children (Faller, 2015; Lamb, Orbach, Hershkowitz, Esplin, & Horowitz, 2007; Lyon, 2014). These principles have mainly been derived from experimental research within the forensic field focusing on cognitive factors related to memory and suggestibility (Sales, Fivush, Parker, & Bahrack, 2005). However, less attention has been paid to children's emotional reactions and the best ways to help children describe these reactions (Ahern & Lyon, 2013; Lyon, Scurich, Choi,

Handmaker, & Blank, 2012). The purpose of the present study was to examine the extent to which a structured forensic interview protocol aids young children in verbalizing their emotional experiences.

1.1. Investigative interviews

A number of forensic interview protocols focus on children's reports and incorporate evidence-based components. One of the most well-researched formats is the National Institute of Child Health and Human Development (NICHD) Protocol. It is a highly structured investigative protocol developed to gain accurate, informative and complete accounts from child witnesses (Brown et al., 2013; Lamb et al., 2007). It

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contains clear and specific guidelines addressing all phases of the investigative interview. One of the main features of the protocol is its instructions on the types of questions to ask children and the timing of each question type. The recommended recall strategy to use is open-ended questions such as “Tell me all about...”. These questions have been demonstrated to be superior in tapping children's free recall (Hershkowitz, Lamb, Orbach, Katz, & Horowitz, 2012; Sternberg, Lamb, Orbach, Esplin, & Mitchell, 2001). When no more information is obtained through open-ended questions, directive questions referring to previously mentioned information by the child can be used. For example, “What color was the nurse's hair?” (if the nurse has been mentioned before). Recognition prompts such as option posing questions and suggestive questions, are to be avoided. These guidelines are not unique to the NICHD Protocol, and are standard in several child forensic interview protocols (Faller, 2015). One of these protocols is the National Children's Advocacy Centre (NCAC) Child Forensic Interview Structure (National Children's Advocacy Center, 2015). This interview structure is used in countries all over the world and is continuously updated to keep up with research-based recommendations (The National Children's Advocacy Center, 2012). However, the rather strict guidelines in forensic interview protocols have also received critique for not being sufficient in relation to younger children (Gross & Hayne, 1998; Saywitz & Snyder, 1996). Even though adhering to the guidelines will increase the accuracy of children's statements, for example by posing mainly open-ended questions, the reports of young children are still often brief in comparison with reports of older children (Baker-Ward, Gordon, Ornstein, Larus, & Clubb, 1993; Nelson & Fivush, 2004).

1.2. Young children's ability to verbalize emotions

Children are capable of talking about their experiences using emotion terms such as happy, and sad from an early age (Fivush & Baker-Ward, 2005). This ability to use what is called an internal state language, starts to develop around two years of age (Wang, 2008). During the preschool years, children's emotion language becomes more complex, and they are increasingly aware of emotions as internal and subjective experiences (Wellman, Harris, Banerjee, & Sinclair, 1995). Children's inclusion of emotions in their narratives gives us insights into how children make meaning out of and process experiences, particularly stressful ones (Fivush, McDermott Sales, & Bohanek, 2008). Children's accounts of negative events can also contribute to a better understanding of their psychological functioning and wellbeing (Sales et al., 2005). However, young children tend to include few emotion words spontaneously in their narratives, and their emotional reporting is often brief and infrequent (Butler, Gross, & Hayne, 1995; Fivush et al., 2008). This is problematic as the emotional components can provide vital information when children are interviewed about past and present events and experiences. In a forensic context, accounts of subjective mental states, such as the emotions experienced at the time of the event, can be of importance in judging the credibility of children's statements (Vrij, 2005).

1.3. Socioemotional factors in investigative interview protocols

Most investigative interview protocols put emphasis on cognitive factors related to children's memory retrieval (Faller, 2015; Hershkowitz, Lamb, Katz, & Malloy, 2015). However, in recent years, there has been a growing interest in the socioemotional factors that may affect the interview (Hershkowitz, 2009). The NICHD Protocol, for example, has been revised to also encompass socioemotional aspects that may increase children's cooperativeness (Hershkowitz, Lamb, & Katz, 2014). In the revised protocol the interviewer is provided with additional strategies on how to build and maintain rapport with the child. Some of the recommended approaches are to use the child's name, express interest in their experiences, reinforce them positively for their efforts to share information, and to echo and explore emotions spontaneously mentioned

by the children (Ahern, Hershkowitz, Lamb, Blasbalg, & Winstanley, 2014; Hershkowitz et al., 2015). The increased focus on rapport and interviewer support has been shown to increase children's cooperation (Ahern et al., 2014) and valid allegations (Hershkowitz et al., 2014). To our knowledge, no studies have examined the effect of the revised protocol on children's use of emotional language. Nevertheless, Ahern et al. (2014) discuss the need for future work that explores interviewer inquiries into children's emotional states.

1.4. Evaluative content in investigative interviews

Within the forensic field there is a lack of research on how the interviewer can relate to children's emotional experiences. Studies have shown that children seldom mention their reactions to abuse spontaneously in interviews (Katz & Barnett, 2014; Lyon et al., 2012). This was also explored by Westcott and Kynan (2004), who analyzed transcripts of investigative interviews with children aged 4–12 years. They concluded that only 20% of children spontaneously spoke about their emotional reaction to the abuse and 10% mentioned their physical reaction. For children under 7, the numbers were even lower with 5% expressing their emotional reaction and none of them their physical reaction. To better understand when children produced evaluative content, Lyon et al. (2012) instructed interviewers to add “how did you feel?” as a follow-up question. They showed that ‘How’-questions containing evaluative content, such as “how did you feel?”, were the most successful in eliciting evaluative answers. Several researchers argue for the importance of helping children share their reactions to abuse as the evaluative content is a vital part of a coherent narrative (Lyon et al., 2012; Snow, Powell, & Murfett, 2009; Westcott & Kynan, 2006). This, in turn, is a significant criterion when the credibility of statements is judged. Thus, the extent to which witnesses include descriptions of their reactions to an event can affect their credibility (Lyon et al., 2012). However, most forensic protocols do not include any specific guidelines on how to ask children questions about their emotional, physical or cognitive reactions to their experiences.

1.5. The dissemination of core investigative interview components

Although the components derived from the research on forensic interview techniques are mainly used in investigative interviews, they have begun to emerge in other contexts worldwide (Poole & Dickinson, 2013). For example, it has been discussed that they should be implemented in semi-structured interviews in various fields, such as with children in foster care (National Board of Health and Welfare, 2015), in the social services more generally (Cederborg, 2005) or in school settings (Brubacher, Powell, Snow, Skouteris, & Manger, 2016). This is not surprising, as other research arenas for child interviews have not seen a systematic methodological development equivalent to the forensic field. However, simply adopting forensic interview techniques in other areas is not without challenges. There is a scarcity of research on the suitability of forensic interview components when used in other contexts, such as social work or child health care settings, where not only the reliability of children's statements, but also the scope of their emotional experiences is of importance.

1.6. The current study

The current explorative study made use of a situation with high ecological validity which at the same time offered the advantages of an experimental situation. The child's regular child health visit was videotaped and 2–4 weeks later the child was interviewed about this very situation. Thus, we were able to compare observed signs of distress or discomfort in a clinical setting with what was later verbalized in interviews with the children conducted according to a forensic protocol.

In Sweden, more than 99% of families with children up to age six utilize the child health services and families with children aged

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