

U.S. Department of Justice  
United States Attorney's Office  
District of Columbia

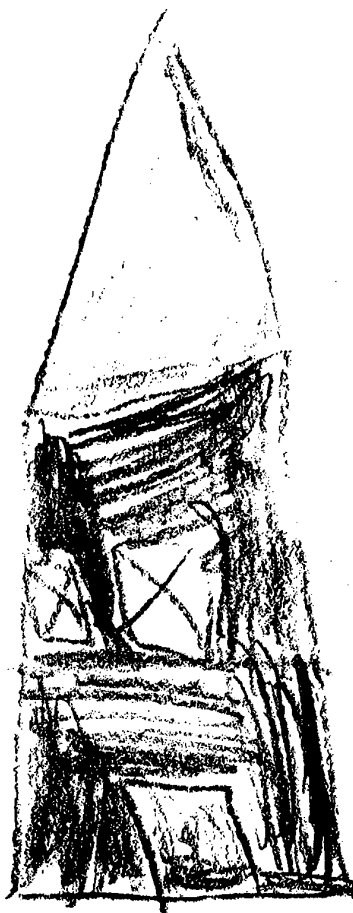


---

# CHILD VICTIMS AND WITNESSES: A Handbook for Criminal Justice Professionals

---

Victim Witness Assistance Unit



C.2

172840

**For additional copies contact:**

**Victim Witness Assistance Unit  
United States Attorneys Office  
District of Columbia  
555 4th Street, N.W.  
Washington, D.C. 20001  
(202) 514-7364  
Fax: (202) 514-9162**

**United States Attorney's Office  
District of Columbia**

**and**

**Office for Victims of Crime  
Office of Justice Programs**

**CHILD VICTIMS AND WITNESSES:  
A Handbook for Criminal Justice Professionals**

**by**

**Kathryn M. Turman  
Chief, Victim Witness Assistance Unit**

**and**

**Kimberly L. Poyer, L.C.S.W.  
Child Interview Specialist**

**Revised, July 1998**





Office of the Deputy Attorney General

Washington, D.C. 20530

Dear Colleague:

Some of the most important cases you may handle during the course of your career as a prosecutor or investigator are those involving child victims and witnesses. The stakes are incredibly high. What happens to these children matters and matters a great deal.

Children who are victims of or witnesses to violent crime are at an increased risk for delinquency, adult criminality, and violent criminal behavior. National studies have shown that being abused or neglected as a child increases the likelihood of arrest as a juvenile by 53 percent and of arrest for a violent crime as an adult by 38 percent. It also places children at significant risk for substance abuse, mental illness, and suicide. Witnessing family violence also appears to have both short and long-term effects on children. Intervening in the lives of victimized children before patterns of behavior, self-esteem, and character are established may be the only real opportunity to prevent future violence in the streets and in our homes.

If the criminal justice system does not take victimization of children seriously, it is unrealistic to expect that our communities will view crimes against children as a serious problem. Children need to know that their lives and well-being are of critical importance to our society and that their safety is a priority. Perpetrators need to know their actions will have severe consequences.

To respond effectively to child victims and witnesses, those of us in the criminal justice system must learn to do things differently. Being involved in a case as a victim or witness is intimidating and stressful for adults; children find it even more terrifying. We must adapt our practice to meet the needs of child victims and witnesses in an age-appropriate and sensitive manner. Doing so will not only make the process less traumatic but will increase the capacity of the child to be an effective witness.

This handbook is designed to help you when you encounter children as victims or witnesses. The information and suggestions presented are based on the knowledge and experience of Victim Witness Advocates and Assistant U.S. Attorneys, but the real authors of this handbook are the many courageous children whom it has been their privilege to know and represent.

Sincerely,

A handwritten signature in black ink, which appears to read "Eric H. Holder, Jr.", is written over the typed name.

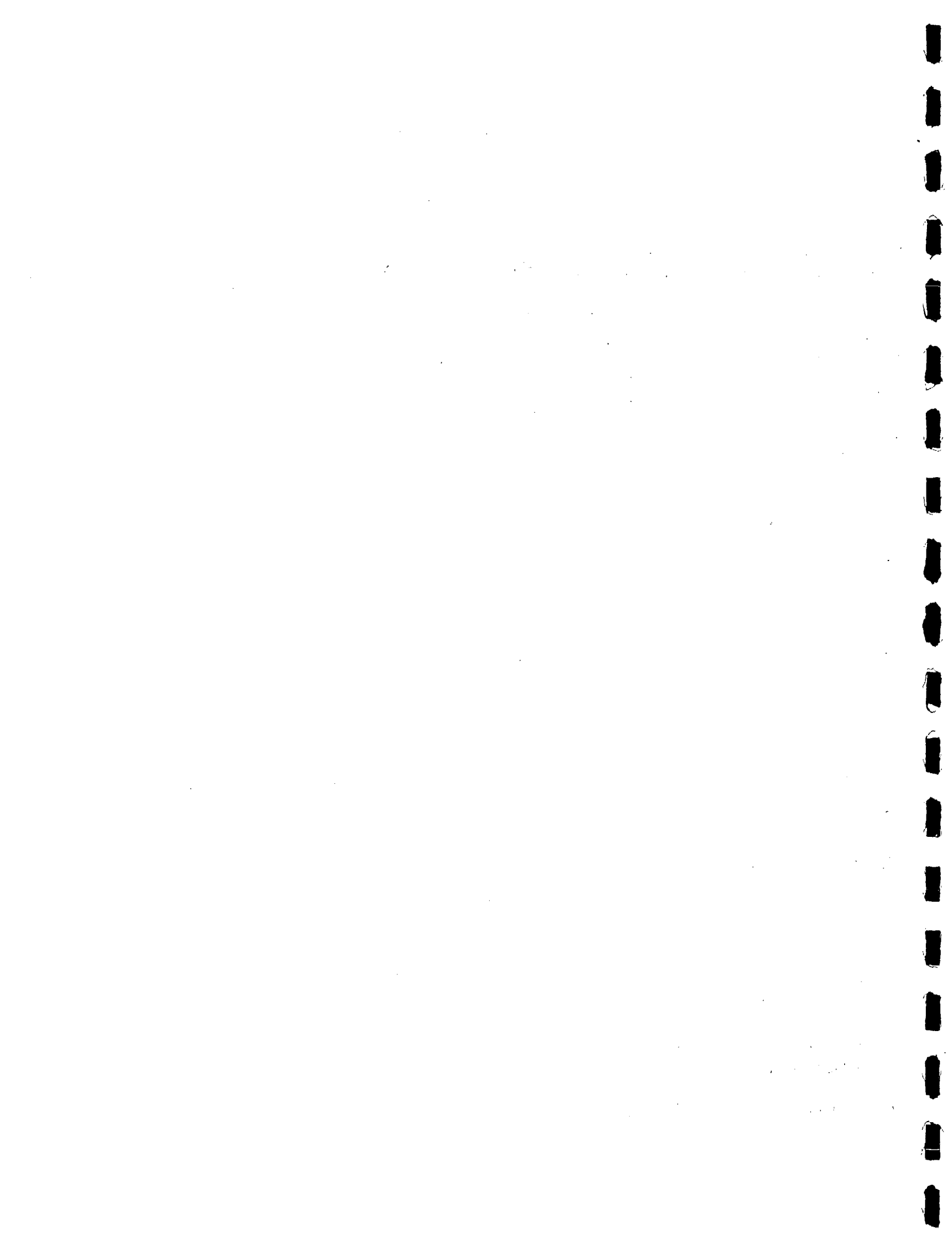
Eric H. Holder, Jr.  
Deputy Attorney General



# Contents

---

Introduction .....	1
Sensitizing Your Practice to Child Victims .....	3
Communicating with Child Victims/Witnesses .....	8
Impact of Trauma on Development .....	8
Stages of Language Development .....	9
Interviewing Child Victims and Witnesses .....	11
Preparing Children for Court .....	15
Using Child Victim Witness Specialists/Advocates .....	19
Trial Preparation of the Severely Traumatized Child .....	21
Educating Juries and Judges .....	25
Victim Impact Statements for Children .....	27
Children Who Witness Violent Crime .....	29
Child Victims of Abduction .....	32
Children and Post-Traumatic Stress Disorder .....	35
Resources for Information and Training .....	37
References .....	38





Many attorneys, judges and other criminal justice professionals in the justice system find it difficult to work with children. Many children find the criminal justice system intimidating, particularly the courtroom experience. Under these circumstances the child can be a poor witness, providing weak testimony and contributing less than needed to win the case. The lengthy process of navigating formal and adversarial criminal and civil justice systems can also damage the child's psychological development in ways that are significant and long-lasting. A number of court-related factors have been identified as stressful for child victims and witnesses:

- Delays and continuances
- Multiple interviews
- Testifying more than once
- Lack of communication between professionals and families
- Fear of public exposure
- Lack of understanding of complex procedures
- Face-to-face contact with the defendant
- Practices that are insensitive to developmental needs
- Harsh cross-examination
- Sequestration of witnesses who may be supportive to the child
- Placement that exposes the child to intimidation, pressure or continued abuse
- Inadequate preparation for testifying

- Lack of evidence other than the testimony of the child<sup>1</sup>

It is clearly in the best interest of the child and criminal justice system to handle child victims and witnesses in the most effective and sensitive manner possible. A number of studies have found that reducing the number of interviews of children can minimize psychological harm to child victims (Tedesco & Schnell, 1987) and that testifying is not necessarily harmful to children if adequate preparation is conducted (Goodman et al, 1992; Oates et al, 1995; Whitcomb, Goodman, Runyon & Hoak, 1994). Having a trusted person to help them prepare for court and to be with them when they testified has also been found to reduce anxiety in children (Henry, 1997).

To ensure children receive special assistance, it is important all professionals working with child victims and witnesses tailor their practice to children and take advantage of the skills and services of victim-witness advocates and child interview specialists.

Studies indicate the participation of victim-witness advocates in child sexual abuse cases appear to increase the percentage of guilty verdicts. One study found the conviction rate for child sexual abuse cases almost doubled from 38 percent to 72 percent after offices implemented child victim/witness advocacy programs. The proportion of offenders receiving prison sentences also almost doubled, from 25 percent to 48 percent. Over the same period, prison sentences increased from 9.24 years to 16.48 years (Dible & Teske, 1993). Research consistently suggests that prepared and relaxed child victims and

---

<sup>1</sup> See "Preparing Children for Court: An Interdisciplinary View" by Julie Lipovsky and Paul Stern, *Child Maltreatment* (vol. 2, no. 2, May 1997.)

witnesses are more credible, enabling prosecutors to present stronger cases and win more convictions.

Working effectively with child victims is time-consuming and emotionally demanding. A national survey of prosecutors found that of all cases, child abuse and adult sexual assault required the most time and resources.<sup>2</sup> While some adults have a natural ability to relate comfortably to children, many do not, especially to children whose lives and experiences are different from their own. With training and guidance, however, almost all professionals can develop skills that improve their ability to work with young victims and witnesses.

This handbook aims to assist the prosecutors, judges, court personnel and other professionals in the criminal justice system whose responsibilities and concerns bring them into contact with our youngest victims.

---

<sup>2</sup> See the *National Assessment Program: 1994 Survey Results* (National Institute of Justice (NIJ), U.S. Department of Justice, Washington, D.C.)

## Sensitizing Your Practice to Child Victims

### Children Make Perfect Victims

Research indicates the rate of crimes against children is two to three times higher than crimes against adults. Because of their age, size and dependency, children are particularly vulnerable. They are victimized in multiple ways: sexual and physical assaults, sexual exploitation (such as forcing a child or teenager into prostitution or posing for pornography), neglect, homicide, and kidnapping. Their assailants are usually their parents but can be other family members, friends, acquaintances, caretakers and strangers. The closer the relationship of the child to the offender, the stronger the feelings of betrayal — particularly as time goes by. The longer the abuse continues, the more difficult it is for the victim to recover.

Every day in this country children witness violent crime—murder, rape, domestic violence, robberies and assaults. Although child witnesses may not suffer physical injury, the emotional consequences of viewing or being within earshot of such acts of violence are severe and long-lasting. Child witnesses to violence often experience many of the same symptoms and lasting effects as children who are victims themselves. Thus, it is extremely important these children are not overlooked and they receive support and services. In working with child victims, it is important to remember:

**ANY child can be a victim.** Child victims come from all backgrounds, all ages, and either sex. Certain children are targeted more frequently, such as children labeled "bad kids," shy, lonely and compliant children, pre-verbal/very young children, and emotionally "needy" adolescents. Children with physical, emotional, or developmental disabilities are particularly vulnerable to victimization.

**ANY adult can be a victimizer of children** — regardless of gender, race, profession, marital status or educational level;

**Almost ANY crime can be committed upon a child.** Many people find it difficult to accept that adults intentionally hurt children and often in terrible, including fatal, ways. A professional with personal doubts about the prevalence or seriousness of child victimization will find it difficult if not impossible to protect and respond effectively to child victims.

### Victimization Has Severe Consequences for Children

Abuse robs a child of childhood. Victims are forced to deal with a range of emotions including fear, loss and shame. Understanding the impact of the crime on that individual child will help develop a theme for the case. Knowledge of victimization and traumatic effects of crime can also explain behaviors or the child's demeanor (affect) at trial that could be misinterpreted by the jury. Use witnesses who can testify about behavioral and personality changes in the child prior to and following the crime, particularly when the victim is a teenager or youngster whose acting-out is commonly associated with victimization and trauma.

Children react to abuse in a number of ways:

- Self-blame
- Embarrassment and shame
- Ambivalence toward the defendant and sometimes the non-offending caretaker
- Depression/withdrawal/sense of isolation often due to rejection by the family, out-of-home

placement and pressure to recant

- Exhibits of opposite extremes: fearful or overly compliant; withdrawn or aggressive; irritable/hyperactive or listless; cold or overly affectionate
- Involvement in delinquency and anti-authority behavior often resulting from reactions experienced when the abuse was disclosed (i.e., disbelief or blame) and a feeling that the system has failed them
- Substance abuse
- Sexual acting out or inappropriate sexual behavior
- Abrupt changes in school performance: grades drop or rise dramatically

Boys and girls internalize witnessing violence and experiencing abuse in roughly the same way (i.e., depression, loss of self-esteem) but may exhibit different symptoms. Both sexes can have learning problems leading to failure in school and a negative spiral toward antisocial or criminal behavior. Boys and girls may have difficulty forming stable, healthy relationships or develop sexual problems ranging from promiscuity or abnormal fear of sex. Boys are more likely than girls to develop aggressive, violent behaviors, recreating their own abuse through abusing others. Girls tend to turn anger and shame inward through self-mutilation, chronic illness, significant weight gains and sometimes, suicide attempts. In recent years, practitioners report increased aggressive and violent behavior among female victims.

Children and adults experience similar emotional reactions including post-traumatic stress disorder. They may regress behaviorally and developmentally, have nightmares, sleep and appetite disturbances, startle easily and have flashbacks. However, while responses may be alike, children usually do not have the coping skills of adults to help them deal with

traumatic events.

Since trauma in children may not be revealed for months or years, caretakers, service providers or support persons should not postpone reporting abuse or providing therapy because they feel the child is "too young" to understand or appears to be unaffected. Professionals should also be alert for signs of dissociative behavior and ensure treatment is provided. While a child's traumatic reaction to victimization cannot be prevented, it can be minimized when assistance is provided quickly.

### **Avoid "Re-Victimizing" Child Victims**

A child's response to victimization can also be significantly different from that of an adult. Child victims and witnesses are particularly sensitive to the way adults treat them. It is important therefore to remember the following:

- Since children usually feel shame about the abuse, professionals should exercise care not to treat them in ways that exacerbate those feelings. Avoid "why" questions and comments that imply blame for the abuse or give the impression they could have done something to prevent it. Children are even more likely than adult victims to blame themselves, particularly when they have a close bond with the abuser. It is common for the perpetrator to tell the child the abuse is the child's fault and the child is bad. Since adults are powerful authority figures, the child is likely to accept that explanation. If the abuser is someone the child trusted and loved, the child will be even more likely to blame himself. It is easier for a child to believe she was somehow to blame than to recognize that an adult who was supposed to protect her intentionally harmed her.
- Since the child may have a close bond with the abuser, particularly if he or she gave the child gifts and attention, professionals should avoid denigrating the defendant.

- Children who have been severely abused or abused over a long period need intensive care, skill and attention.
- Like adults children find it upsetting to talk about traumatic events, but children may also "re-live" the abuse and associated emotions as they talk about it — particularly younger children. Be sensitive to the potential impact of the re-emergence of details of the crime. Re-living the abuse may not only intensify the victim's trauma, it can generate behavior posing additional barriers to successful investigation and prosecution.
- Disclosure of abuse can result in a total upheaval of the child's life. Caregivers and parents often initially disbelieve the child, minimize the acts or withdraw affection. The suspected abuser may be arrested, causing havoc and recriminations. The child may be removed from home and placed in foster care. Social service and legal system responses may feel like punishment, prompting recanting of the disclosure. When reporting has been delayed, find out why. A child victim may have tried to report previously but the report was not documented. The child may have been threatened with personal harm, harm to a loved one or public embarrassment.
- Most children do not make up stories of abuse. False allegations are the exception. Treat children and their disclosures with the respect due the considerable courage it takes for a victim to disclose. Questioning the child's credibility before a thorough investigation can take place is the quickest way to send the child into full retreat. Professionals should not let the possibility of a false report prevent a thorough investigation. Know that it is far more likely a child will lie to conceal abuse and protect the abuser.
- Children disclose abuse and facts regarding traumatic events over time. The more comfortable a child becomes with an adult, the

more likely she is to provide additional information. Take time to build rapport, to find out what matters to that child and to let her know you are sorry about what has happened.

## **Becoming a Child-Friendly Professional**

If professionals feel they have acted in some way to help a child, the job of responding to child victims can be easier. However, adults may unintentionally intimidate or belittle children. Try to remember what you were like when you were the victim's age. What grade were you in? What do you remember about your feeling toward adults — your parents, other relatives, teachers, ministers, neighbors or coaches. What was frightening? How did you feel when you were in trouble? If you can't recall incidents, think about your own children's experiences. Keep in mind how you would want your own children to be treated under similar circumstances.

*Get to know the child.* Take time to build rapport.

Do not jump into talking about the crime. Allow the child a chance to relax with you and the environment.

*Do not assume young victims and witnesses understand your role.* Most beliefs about the criminal justice system come from television and movies with either absurdly heroic or grossly unflattering depictions of prosecutors, judges or police. Introduce yourself and explain your responsibilities in understandable language. Find out why the child thinks he or she is there and try to clarify misunderstandings of the process.

*Life among the giants.* Adjust the way you approach children if necessary. Try to examine your office or interview setting from the perspective of a child, including getting down on your knees and looking around. Do you usually put a small child in an adult's chair? Do you talk to the child victim from behind a desk? If you regularly work with children, you may want to create a special corner containing a child-size

table and chair set or bean bag chair, a bright poster, books and stuffed animals. Keep crayons and drawing paper handy. Some prosecutors make special business cards to give to child victims and witnesses.

**Develop patience.** Examine your expectations. Small children have short attention spans; do you expect them not to fidget? Would you feel comfortable telling a stranger intimate details of your most humiliating sexual experiences? Recognize children are at different levels of intellectual, behavioral, and language development. Make sure you have a basic understanding of what is normal for different ages, of limitations.

**Use age-appropriate language.** Avoid big words and complicated sentences. Keep events in sequence. Find out what words the child uses and use them. Let children know it is OK to tell you when they don't understand what you are saying or asking. Determine whether the child has speech or comprehension problems.

**Do not exhibit surprise or shock.** Children's disclosures may be difficult to hear. Your emotional reactions can range from rage to tears or both, but try to remain composed and matter of fact. Do not stop the child from talking if she wants to tell you about what happened, but do not interview the child on the facts of the case unless it is your job. Praise the child for forthrightness in disclosing or talking about the abuse.

**Give the victim some control.** Victimization leaves children feeling as if their actions and desires are meaningless. To help the child gain a semblance of control, allow them to make choices. Where would they like to sit? What questions would they like to ask? It is important for children to sense some power in a situation that leaves little room for choice.

**Obtain victim assistance for the child.** At the earliest possible opportunity, contact a victim-witness advocate or child interview specialist for assistance. The child interview specialist can conduct or assist with a developmentally appropriate interview in a child-friendly setting. Create a verbatim record of the child's statements if possible.

**Reduce duplication of effort.** Coordinate with local multidisciplinary teams to effectively manage a case that involves several agencies. One of the primary purposes of the Children's Advocacy Centers and multidisciplinary child abuse teams is to reduce duplication of agency procedures and the number of child interviews. Multiple interviews and contacts are not only traumatic for the child, they confuse and exhaust adults. Apparent inconsistencies in a young victim's statements are often caused by the phrasing of questions and differences in the way individuals interpret answers. Jointly conducted or monitored interviews can reduce inconsistencies and improve the quality of information.

**Share information, expertise and experiences.** Take advantage of local expertise. If you are a law enforcement officer or prosecutor with limited understanding of child development stages, consult social workers and therapists who have studied and are experienced with troubled children. Meet with pediatricians and medical examiners. If you are a social worker, consult police officers who can provide guidance on investigation and evidentiary issues. We work better as a team than as lone rangers.

**Be sensitive to children's schedules and special needs.** Children will be less cooperative if they are sleepy or hungry. Do not schedule interviews, witness conferences and testimony during a child's regular nap time. Avoid giving a child sugared snacks or beverages. Does the child take medication? Let the child know it is fine to tell you when she is tired, needs a bathroom break or is frightened.

***Let children know what to expect.*** Children don't like frightening new situations any more than adults and react accordingly. Provide as much information as possible about what will happen. Ask the child about his fears and anxieties; they may be surprisingly simple to alleviate. Let the child know who will be present at meetings and hearings.

***Assess risk factors.*** Leaving a child in an unsafe situation does little to build trust in you or the system. Victim advocates can help monitor the child's situation and alert prosecutors when the child is not supported, when stay-away orders are violated, or when the child is threatened or coerced into recanting. Refer the child for civil protection proceedings if appropriate. It may be necessary to work with law enforcement and other agencies to interview and assess other children known to have contact with the defendant.

***Don't make promises you can't keep.*** The last thing you want to do is confirm a child's belief that adults cannot be trusted. Always be as forthright as possible with child victims and their caretakers.

***Don't forget the supportive caretaker.*** The child needs support from caring family members. Keep the needs of nonoffending parents or caretakers in mind and make them partners in assisting the child. Let them know where they can get help for themselves such as therapy and other resources, and what to expect in the criminal justice process. Maintaining regular contact with the family or caretaker reduces the adults' distress, which is likely to reduce the child's anxiety. A victim advocate may be the best person to coordinate the communication, as long as prosecuting attorneys keep the advocates informed about the status of the case.

***Be aware of the child's understanding of disclosure and testimony.*** How a child perceives the meaning or significance of his or her

testimony is a complex issue but one that is important to recognize. If the defendant is a family member, the child may be very aware of the consequences to the family of sending him or her to jail or breaking up the family. A child may fear that the case will be lost and it will be his or her fault. It is important to remind the child that the responsibility for the outcome of the case lies with the prosecutor, not the child.

***Find alternative sources of support.*** If supportive family members are not available or are unable to meet the child's needs, an advocate or a therapist must develop alternative supportive relationships for the child. While these arrangements may not fully compensate for the loss of family support, it is critical for the child to have someone who is supportive available.

## Communicating with Child Victims/Witnesses

Prior to working with child victims, professionals need to have a general understanding of the developmental stages of children so expectations and questions are consistent with the information the child can realistically supply. Adults must adapt their language and approach to the child's level of understanding. Attorneys, in particular, need to remember that legal terminology and concepts must be explained to the child victim in a way he can understand. Also, it will help if professionals adapt to the child's comfort level by sitting in a chair comparable to the child's, sitting on the floor, going for a walk or engaging in whatever activity is most likely to put the child most at ease.

Young abuse victims need to talk to specialists about the irrationality of abuse and the suddenness of catastrophic violence and injury. While this kind of discussion is most appropriate between a mental health professional or victim advocate and the child, prosecutors and investigators may encounter a child who wants to air her feelings, not just the facts of the case. Respect the importance of this communication.

Understanding how children think, learn, and express themselves will enhance communication and credible testimony, and can guide the provision of services to the child.

Some important concepts to remember about communicating with children include the following:

- Children develop language skills in "layers." Fully developed language concepts do not appear until adolescence.
- Most young children cannot follow complex or multiple sequences in a question. Ask one question at a time. Do not refer to more than one event at a time. The question, "Do you remember the day you told me about the man hurting you?" will confuse most children. Are you asking

whether they remember being hurt by the man, if they remember what day it was, or if they remember telling you about it?

- Young children tend to repeat the end of a prior sentence if they are unsure of an answer. This is often taken as confirmation of a positive response when, in fact, it represents no response at all.
- Pronouns can be confusing. Use specific names when referring to people, places or things.
- Children usually measure time relative to meaningful events rather than by abstract concepts of dates and numbers. Use points of reference: *around Thanksgiving, when it snowed, on your birthday, when "Sesame Street" is on TV*, etc.
- Adult terms for physical characteristics do not necessarily mean the same thing to a child. Specify the information sought. Draw a picture of the child or have them draw themselves and name their body parts. Re-state the words the child used to ensure their vocabulary is understood.
- Age is a difficult concept for children—"old" to one child may be 16 years and to another, the tallest person in the room.
- Children usually pick the literal interpretation of a phrase or word. If their answers surprise you, re-phrase the question until you are confident the child understands what you are saying.

### Impact of Trauma on Development

It will help to understand how victimization impacts on the ability of children to communicate.



**0 to 2 Years.** Children communicate through physical activity and depend on physical human contact for reassurance. Normal reactions to trauma can include crying, biting, throwing things and other agitated behavior. A child that has been repeatedly physically abused may pull or shy away or begin crying in the presence of the abuser or someone who resembles the abuser.

**2 to 6 Years.** Reaction to trauma may include: re-enacting the traumatic event over and over, separation anxiety, withdrawal from normal activities or interaction with family, depression, regression in skills already learned (such as toilet training, feeding self, wetting the bed). Sleep disturbances with nightmares, loss of appetite and acting out/aggressive behavior are common.

**6 to 10 Years.** Reactions to trauma can include a sense of loss, inability to concentrate, and an increase in imaginative skills that may lead to the embellishment of the traumatic event (myth-making). Physical symptoms may be evident such as headaches, stomachaches, dizziness, difficulty in controlling behavior, regression, mood swings, sleep and/or appetite disturbances. Depression may become more obvious to parents or caretakers.

**10 to 14 Years.** Emotional outbursts or temper tantrums or other acting out behaviors are common. While more physically and emotionally independent from family, the child often moves back and forth between child-like and adult-like behaviors. Puberty and hormonal fluctuations cause emotional mood swings and confusion over impending sexuality. Reactions to trauma may include: regression to child-like behavior, anger, extreme euphoria or depression, theatrical portrayal of the traumatic event, becoming judgmental about their own behavior, emergency of psychosomatic illnesses, withdrawal from family and school activities, a sense of unfairness about what has happened, and/or minimization of traumatic event.

**12/14 to 18 Years.** Reactions to trauma include the same responses experienced by adults as well as anger at adults/parents for failing to protect him and shame for failing to protect herself. The child may also exhibit eating and sleeping disorders, depression, psychosomatic illnesses, inappropriate behavior (especially sexual in nature), a strong tendency to be judgmental, sullenness, moodiness, or withdrawal. High-risk behavior is common such as drug and alcohol abuse, promiscuity, or running away from home. Trauma symptoms may also emerge in fits of rage or foul language employed for shock value.

## **Stages of Language Development**

Children develop language in stages just as they mature physically. Children have different expressive skills (what they can communicate to others) compared to their receptive skills (their ability to understand what others are saying.) Fully developed language concepts do not appear until late adolescence. Children's language develops in the following stages:

### **13-24 Months Old**

#### **Receptive Skills:**

- Basic, single word comprehension
- Responds to simple commands
- Identifies familiar objects

#### **Expressive Skills:**

- 10-50 word vocabulary
- Begins to combine words

### **2 Years Old**

#### **Receptive Skills:**

- Recognizes many nouns
- Understands simple questions
- Can follow a story with pictures
- Understands "in" and "on"

#### **Expressive Skills:**

- 50-200 word vocabulary
- 2-3 word sentences and phrases
- Identifies body parts
- Uses "what" and "where"

### **3 Years Old**

#### **Receptive Skills:**

- Understands 3 element commands
- Understands opposites
- Understands "off," "out (of)," and "away (from)", but this does not mean the child understands penetration

#### **Expressive Skills:**

- 40-1,500 word vocabulary
- Uses 4-5 word sentences
- Can tell a story
- Uses past and present tense
- Asks "why?" questions
- Uses the pronouns "my," "yours," "theirs," "mine" and "his/hers"

### **4 Years Old**

#### **Receptive Skills:**

- Understands 4 element commands
- Can link past and present events
- Understands "toward," "up," "down," "in front of," "next to," and "around"
- Understands comparatives (more, bigger)

#### **Expressive Skills:**

- 2,700 word vocabulary
- Can define simple words
- Con conversationally mature (can take turns talking)

### **5 Years Old**

#### **Receptive Skills:**

- Understands 5 element commands
- Can follow a story without pictures
- Enjoys jokes and riddles
- Can comprehend 2 meanings of a word
- Understands "beside," "ahead," and "behind"
- Appropriate grammatical responses to "what," "where," and "who" should be acquired by age 5 years-6 months.

#### **Expressive Skills:**

- 5,000 word vocabulary
- Correct use of all parts of speech
- Can use logic in recounting story plots
- Corrects their own errors in speech

### **6 Years Old**

#### **Receptive Skills:**

- Asks for motivation and explanation of events
- Understands time intervals (months, seasons)
- Begins right and left differentiation

#### **Expressive Skills:**

- Uses formal adult speech patterns

### **7 Years Old**

#### **Receptive Skills:**

- Can use language alone to tell a story sequentially
- Reasons using language
- Can discriminate between "this" and "that" when no external referent is available
- Can distinguish between "before" and "after"
- Begins to understand contrasts between verbs "come" and "go," and "bring" and "take"

#### **Expressive Skills:**

- Uses adult speech patterns

### **8-10 Years Old**

#### **Receptive Skills:**

- Begins to differentiate between "tell" and "ask"
- Can accurately match pronouns to prior or following noun (>10)
- Gives appropriate cognitive responses to "why?" "how?" and "when?" (>10)
- Understands more abstract concepts of cause and affect
- Begins to understand the concept of secondary gain

## Interviewing Child Victims and Witnesses

---

Interviewing a child about traumatic events he has experienced or witnessed can be challenging. The most important factor to consider is the child's developmental status. Children are not a homogeneous group. Within similar developmental parameters they can vary in their language, cognitive, social, and memory abilities as well as emotional maturity. The interviewer must assess the developmental level of the child and adapt the interview to the individual child. The use of developmentally sensitive techniques is essential to obtaining reliable information from the child.

A forensic interview is a critical part of the investigative process. It is conducted to gather factual information from a child in order to determine if that child was the victim of a crime or if that child witnessed a crime against another person. A therapeutic interview is conducted as part of an assessment by a mental health professional for the purpose of designing and providing treatment to a child victim.

Professionals conducting forensic interviews should use consistent methods and should follow a tested protocol. To be effective and legally defensible, any forensic interviewing protocol should include techniques based on updated research.

The forensic interview is divided into several distinct phases through which the interviewer should move in a sequential and organized manner. The interviewer may want to obtain background information before interviewing the child. It is usually helpful to interview a caretaker to learn how a disclosure occurred, the child's family situation and structure, the child's developmental level, and any behavior changes. The interviewer should provide the caretaker with basic information about how the interview will be conducted. It is generally not a good idea for the caretaker to be present during the interview with the child.

If possible, the interviewer and the child should be alone. Many jurisdictions have facilities which allow observation through a two-way mirror or by closed-circuit television. Many jurisdictions allow for videotaping of interviews. Professionals should work out the best method for interviewing children given the resources, case law and statutes in their jurisdiction.

It is extremely important that professionals who interview child victims have adequate training. Cases involving very young children (under age six), severe abuse or violence, and children with developmental disabilities require an experienced, highly trained interviewer. Children's Advocacy Centers and hospital-based child protection teams are frequently a good source for experienced interviewers and training. Also, training on interviewing is usually offered at regional and national child abuse conferences. See the section at the end of this handbook for training and informational resources.

### **Suggested protocol for forensic interviewing of child victims/witnesses**

(1) **Rapport Building:** Rapport building is a crucial phase of the interview because it lays the foundation for what is to follow. Rapport building creates an emotional connection between the child and the interviewer. Introduce yourself and your role in a way the child will understand. For example, you can say, "My job is to talk to kids about what has happened to them." Let the child know if the interview is going to be taped or viewed by other professionals. To get to know the child, introduce neutral, non-threatening topics such as school, social contacts, and recreational interests. It is important to introduce the use of open-ended questions to elicit information. During this phase of the interview, begin to assess the child's level of cooperation, body language, and affect (emotional expression).

**(2) Developmental Assessment:** During the interview, you should evaluate the child for her language and speech and adapt your language and vocabulary to fit the child's. Determine if the child understands prepositions and the concept of time. The interviewer needs to know and understand words the child uses for all body parts including the genitals. Show the child anatomical pictures or a hand-drawn picture of a "gingerbread" figure and ask her label the body parts. Anatomically-detailed dolls can also be used, but it is critical that interviewers have thorough training on how to use these dolls. The use of anatomically-detailed dolls can cause many problems in court. Drawings have been found to be less problematic. Let the child know it is important for you to know what they call their own body parts. Start with the head and finish with the toes. It is important to use the child's words. Hide any surprise or shock you may feel about her choice of words!

**(3) Assessment of Competency:** An assessment of the child's competency should be conducted for children less than age 9, developmentally disabled children, or in specific cases where a child's credibility has been questioned. The Federal Rules of Evidence cover the following elements of competency:

- Does the child understand the difference between truth and fantasy and appreciate the obligation to tell the truth?
- Does the child have sufficient "mental capacity" at the time of the incident to observe and record accurate impressions?
- Does the child have sufficient memory to retain an independent recollection of the observations?
- Can the child communicate this memory and understand simple questions about the incident?

During the interview, three areas need to be assessed:

- Can the child differentiate between "truth" and "lie?"**

During the interview, use words such as "not," "true," "fib," "make-believe," "false," "lies," "real," "not real," and "stories." Do not ask if the child knows what the truth means. Children may understand the concept but not be able to articulate it in words; indeed, truth is a concept adults may find hard to define. Instead ask if he knows what a lie is and have him try to explain it. If the child cannot do this on his own, give him some examples such as: "Did you eat breakfast today?" or "If I said I saw a dog flying an airplane, would that be true or not real?" Try several of these until you feel confident the child can discriminate between a truth and a lie.

- Can the child understand and explain the consequences of truthfulness and deception?**

The interviewer can ask questions such as: "What may happen if a person tells a fib?" or "What do your parents say about telling the truth?"

- Will the child be truthful in his responses?**

Ask the child for a commitment to be truthful in his responses. It may be helpful to make a pact that each of you promises to always tell the truth to each other.

**(4) Bolstering to Reduce Suggestibility:** This step should be done with all children. Explain to the child that she is not allowed to guess or approximate her answers during the interview. Explain that some questions may be asked twice but that the interviewer is not looking for a different answer. Anyone can be suggestible if questioned inappropriately, coercively, or in a suggestive manner. This is the time to let the child know she should tell you if she doesn't understand the question or can't remember, and that she does not have to provide an answer for every question.

**(5) Eliciting Information:** Information should be gathered using the most open-ended techniques that are developmentally appropriate for the child. A questioning continuum should be followed when eliciting information. The types of questions used

and information needed are tailored to each individual interview. During the interview you need to understand what happened, when it happened (often difficult), how it happened, and where the event occurred. Have the child describe the events in her own language. Chronology and sequencing of the event can be difficult for some children and can be developmentally impossible for children under the age of 5. It may be easier with children under age 8 to start with the most recent event and work backwards. Try to frame recall around major events such as: school, birthdays, holidays, seasons, family changes, and trips or vacations. Prompt the child with phrases such as "Tell me more," "Then what?" and "What else?" Throughout the interview, repeat the child's statements and make sure the two of you are communicating the same thing.

It is very important to use developmentally appropriate words during this part of the interview. Be careful to ask only one question at a time and wait for the child's answer. Do not interrupt the child and be aware of your pace and length of your phrasing. Avoid multiple choice questions, double questions, reversed questions ("Did he touch your pee-pee or did he not touch your pee-pee?"), and phrases which put blame or action on the child ("When you put your hand on his pee-pee...") To help the child clarify his statements use phrases such as "I'm confused", "I don't understand. Did you say...?"

#### *(6) Closure*

When closing the interview it is important to restate the child's narration. "Let's make sure that I remember correctly everything you told me. First you said..., and then you said..." Children often feel powerless so asking questions that allow them some control in the process can be helpful. "What else should I have asked you today?" "Did I forget to ask you something?" If the child has become upset during the interview this is the time to help him regain his composure. Give the child an opportunity to express questions, worries, or concerns about the interview. Thank the child for participating in the interview process rather than for making a disclosure

of abuse. Allow the child to ask you questions, and give the child permission to return at a later date if she remembers additional information.

## Preparing Children for Court

Every witness needs some preparation prior to testifying. To bring a child into the complex and often stressful process of testifying in court without careful preparation is unthinkable. A child who knows what to expect and is prepared for his or her role will provide more credible testimony.

Child victims and witnesses require extra time and special effort to prepare for court. There are two primary methods of preparing a child: individual preparation by the prosecuting attorney and through a group process focusing on general orientation programs, such as court school. Individual preparation involves getting to know the child so that he or she feels comfortable with the prosecuting attorney, helping the child become familiar with the courtroom environment, explaining the process of testifying, and addressing issues of personal safety and control. tend to provide more credible testimony.

Preparing a child for court includes preparing the court for the child. Prosecuting attorneys should take responsibility for ensuring that the child feels safe and that barriers to the ability of the child to communicate effectively in the courtroom are eliminated or minimized. Judge Harry Elias of the North County Municipal Court in Vista, California, strongly encourages prosecuting attorneys to bring to the attention of judges the special needs and concerns of child victims and witnesses and to suggest steps that can be taken to enhance the ability of the child to tell the truth.

Do not underestimate the potential impact of the re-emergence of crime details. This re-victimization may both intensify trauma and generate behavior that hinders successful investigation and prosecution. The following steps can ease the process:

- A first step in trial preparation is to gather as much corroborative information as possible. Lack of evidence other than the testimony of the

child is a source of significant stress. In almost every case some corroborative evidence is available. FBI Agent Ken Lanning believes that such evidence is more frequently present than many investigators may realize (Lanning, 1996). Investigators need to try to confirm as much as possible of the child's statements. If the child said the abuse happened in a room with yellow walls and no windows, investigators should photograph the yellow walls and the absence of windows.

- Try to limit continuances in each case unless it is in the best interest of the particular child or the cause of justice. Encourage speedy resolution of child victim cases, arguing the federal statute if necessary.
- Children should be familiarized with the court environment and prepared as much as possible for potential problems. The Victim Witness Assistance Unit (VWAU) has child-sized judges robes for the child to try on, a coloring and activity book about court, and a wooden model of a courtroom with moveable figures. A courtroom tour will help reduce a child's anxiety. A child advocate can assist with a courtroom tour before the trial and refer the child to a court school program, such as the Kid's Court program operated by the U.S. Attorney's Office in the District of Columbia.
- Prior to the trial, survey the courtroom from the child's eye level to identify obstacles.
- Make sure the child realizes that her testimony will NOT be the deciding factor in establishing guilt. Reassure the victim she is not at fault and that responsibility for the crime lies with the offender.

## **Helping Children Feel Comfortable in Court**

***Ensure the victim's safety in the courtroom.*** If possible, arrange for the child and supportive caretaker to wait in a secure place where they will not encounter the defendant and defendant's family. If a separate waiting area is impossible, have a victim-witness advocate remain with the child and caretaker and monitor the situation.

***Schedule the child's testimony in keeping with the child's age and routine.*** Young children are accustomed to naps and meals at certain times. Make sure the child has something to eat before testifying, but discourage candy or sweetened soft drinks. Be sensitive to an older child's school and exam schedules when scheduling testimony. Young children must not be expected to wait for extended periods of time before testifying.

***Introduce the child to the judge in person or by photo.*** The Victim Witness Assistance Unit usually has a photo of the judge that can be shown to the child prior to trial. Some judges are willing to meet with the child prior to trial and show them around their courtroom. Explain that the judge is in charge and why the judge wears a robe. If discussing different crime locations confuses the child, use photos or a model to clarify locations.

***Know how to communicate with the child.*** If the child is very young or developmentally disabled, determine how best to communicate with him from caretakers or involved professionals. Use that information to establish competency. When the child's developmental functioning is a concern, a trial brief about child development should be used to advise the court on courtroom examination of a child witness. Make sure the child understands that he or she should ask for clarification if a question is unclear.

***Identify the child's fears.*** If the child fears the

defendant, remind her she only has to look at the defendant when asked to make an identification. You may want to position yourself away from the defendant and instruct the child to keep her eyes on you. This allows the child some control over the situation and will help keep her focused. During a pre-trial tour of the courtroom, the child can be encouraged to identify "safe" places to look if looking at the defendant is too frightening. Teach children about deep breathing for relaxation. A victim-witness advocate or therapist may be able to help the child learn this and other methods of relieving anxiety.

***Consider alternatives to live testimony.*** If the child would be too traumatized by seeing the defendant in the courtroom, consider making a motion for her to testify via closed circuit television. The use of closed circuit television has advantages and disadvantages. It may help reduce trauma and enable the child to testify more effectively, but it often isn't as compelling as a child's live presence in the courtroom. Prosecuting attorneys should weigh the advantages and disadvantages of testimony via closed circuit television on a case-by-case basis.

***Request that objections be argued outside the hearing or presence of the child.*** Explain that objections do not mean the child has done something wrong.

***Be sensitive to the need for the child witness to take breaks during testimony.*** Because of limited attention spans, children should be interviewed over short periods with breaks built into the process. Encourage the child to say when he is getting tired, upset or distracted. You will probably need to tell the child several times that he can say "stop please" if a break is needed.

***Whenever possible, arrange the courtroom to be less intimidating for the child witness.*** This may include installing a child-sized chair since sitting in a "big person's chair" can be uncomfortable

and distracting. Placing the chair next to or in front of the witness stand may make the courtroom seem smaller.

***Request the presence of an appropriate, available support person of the child's choice during testimony.*** If support people are allowed in the courtroom, have the child indicate where she would like them to sit using the mini-court model or a courtroom visit. This will also allow the child to locate support people more easily upon entering a courtroom. Prepare several support people identified by the child in case the defense subpoenas the child's key person. If the child's primary support person is also a witness, it may be possible to have that person testify prior to the child's testimony.

***Allow the child to hold or carry in her pocket a small object for comfort.*** As long as it does not distract, a treasured possession can help allay fears of everything being so "different." The child may want to hold a stuffed animal, book or doll. One advocate gives child witnesses a dirty penny to rub while on the stand and says most children will rub the penny until it is clean and shiny. If the child loses focus while talking about abusive events, the advocate suggests rubbing the penny and wiggling toes at the same time. For some reason, these small assignments help prevent dissociation.

***Prepare the child for the worst.*** Again, assure the child that blame belongs to the defendant and the judge, not the child, is responsible for the sentence. Focus on the trial itself and testifying as victories. Plan a little party after court proceedings to celebrate, even if the child failed to testify. The toughest outcome is when the child must return to the abuser and there is no easy way to prepare a child for that event. One can only hope she learned some adults believed and tried to help her, and that disclosure will be attempted if abuse reoccurs.

## Language and Children in Court

Words and phrases common in adult vocabulary may be unfamiliar to children. This is especially true of legal terms and jargon. If a child does not understand a statement, she can lose concentration and become confused. Become familiar before trial with the child's vocabulary. For instance, many children say "story" instead of "lie" and "promise" instead of "swear." Some states, like California, allow children to use a simplified oath.<sup>3</sup> Identify the child's names for body parts and any nicknames the child calls the defendant or others in the case.

- Control the defense's questions to ensure they are asked in an age-appropriate and sensitive manner. If necessary, ask for a pre-trial motion to mandate all parties use age-appropriate language.
- Use simple, common words and short sentences. Children cannot follow complex questions or monologues. Avoid sentences referring to multiple events or time sequences—e.g., "Do you remember the day you were in my office and we talked about what Mr. Smith did to you?" Instead of, "Did the defendant engage in any conversation with you," try "Did Mr. Smith say anything to you?" When a child misunderstands the question, you are likely to get a surprising or no answer. If you get an unexpected or incorrect answer, ask the question again in a simpler, different way.
- Use tones and volume that will not frighten the child when speaking to him. While it may be normal to speak loudly in a courtroom, the child may think you are yelling at him. The sensitivity of court reporters is important. The constant prodding to "speak up" can startle and intimidate a child.

---

<sup>3</sup> Judge Harry Elias uses the following oath with child witnesses: "Do you promise to answer all the questions to the best of your ability and to tell the truth?"



- Always look at the child when addressing him. The courtroom is strange and new. Children are tempted to look around and become distracted. Seeing the defendant may cause the child to freeze or lose concentration. Keep the child's attention on you.
  
- Many prosecuting attorneys find it most effective to let the child go through the narrative part of their testimony from beginning to end, then go back to clarify details. The more times a jury hears the information from the child, the more likely they are to view the child as credible. Photos, drawings, and models can be used as aids for the child to show how or where something happened. The child should be familiar with the prop and how to use it.
  
- Be certain the child understands the difference between the following phrases: (1) "I don't know (the answer to your question);" (2) "I don't understand (your question);" and (3) "I don't remember (the event you are asking me about)." An inappropriate response may damage the child's credibility.

Just as interpreters are needed in court for non-English speaking witnesses, it is just as important that the child's stage of language development be accommodated during direct and cross examination.

## Using Child Victim Witness Specialists/Advocates

---

Research indicates participation of a victim-witness advocate appears to increase guilty verdicts in sexual abuse cases, suggesting that better prepared and relaxed child victims and witnesses are more credible at trial (Dible & Teske, 1993). Advocates working with child victims and witnesses should have specialized training and experience with abused and traumatized children. A child advocate or a child interview specialist may assist with the following:

- Conducting or helping interview child victims or witnesses, particularly in cases involving very young children, developmentally or physically disabled children, or severely traumatized children.
- Assessing safety issues, the mental condition and developmental level of child. Advocates can make referrals for more in-depth psychological assessment, if necessary, support groups or individual counseling; provide crisis intervention; and make appropriate referrals to other agencies.
- Explaining the legal process to the caretaker and child, including providing appropriate written materials.
- Understanding and providing relevant information to the prosecutor on the child's special needs or fears as well as the child's ability to serve as a witness.
- One-on-one preparation of the child for testimony and referral of the child for participation in the court school program.
- Logistical support for the child victim and family including transportation and assistance with medical appointments and therapeutic arrangements.
- Supporting the victim during trial including accompanying the child to court when she testifies. This is particularly important if parents or caretakers are also witnesses and cannot be in the courtroom when the child testifies.
- Helping the victim and/or caretaker complete Victim Impact Statement(s) for sentencing if desired.
- Serving as a resource and possible expert witness on the dynamics of abuse and offenders, responses of children (including recantation), child development and psycho-social needs of child victims.

## Trial Preparation of the Severely Traumatized Child

The child victim's involvement with the justice system can be healing or damaging. Many children have positive, empowering experiences and view the professionals who handled their cases with affection and gratitude. Others, whose abuse is compounded by insensitive and chaotic system responses as well as long delays before trial, are likely to suffer longer. The combined effects of abuse by the offender and an insensitive justice system are, of course, exacerbated in severely traumatized children.

To establish trust and build rapport with children who are severely traumatized by abuse, prosecutors will need extra time with the child. Prosecutors will also need to consult with allied professionals such as victim-witness advocates, therapists, social workers, physicians and teachers who can offer critical information.

### Impact of Trauma on Cases

Characteristics of severely traumatized children that have a direct impact on the ability of the child to participate in the criminal justice system include the following:

**Memory recall.** Severely traumatized children often have recurrent memories of the abuse that intrude into their daily lives. Since the criminal justice process requires child victims to intentionally recall traumatic events, *the process forces the child to relive the event just as if she were there.* Do not be surprised when children become emotionally upset when asked to do this or try to avoid the process altogether.

**Dissociation.** While some children simply refuse to talk about the abuse, others literally separate themselves from the memory through "dissociation." What begins as a defense mechanism to endure the abuse can become habitual and occur on cognitive, emotional and physical levels. Dissociation can

manifest itself in the child's inability to recall how she traveled from one place to another, remember speaking with a certain professional or, extreme cases, develop a "dissociative identity" or multiple personality disorder. The child suffering from multiple personality disorder may act relatively normal prior to trial but the ordeal of facing the defendant brings forth a "different" child. Some afflicted children have described their experience at trial as "going away" or "floating up" to the ceiling.

**Regression.** Severely traumatized children often exhibit marked and consistent behavioral and emotional regression to earlier stages of development. This will have a direct bearing upon their capabilities at trial—e.g., the eight-year-old witness may have regressed developmentally to age four. If this condition is a possibility, prosecutors and other professionals need an accurate assessment of the child's abilities to understand and communicate.

**Anger.** Traumatized children may be intensely angry and erupt in emotional outbursts. Their rage can focus on professionals working with the child. One prosecutor described his first meeting with a seven-year-old sexual abuse victim who ran up and kicked him in the shin: "And she actually liked ME compared to some other people working with her."

**Inappropriate Affect.** Children who have been severely traumatized often display inappropriate behavior or "affect." Numbness or giggling while describing horrific events are among responses seen in severely traumatized children.

### Recognizing the Severely Traumatized Child

Do not wait until the day of trial or until there is a problem to put together an effective team to assist the severely traumatized child. Flagging difficult cases from the beginning will enable a

multidisciplinary team to assess the child's needs, assemble resources and perhaps experts needed, and develop a strategy for court.

Cases involving any or a combination of the following aspects should be flagged for attention:

- Violence viewed by the child
- Threats of death or injury
- Sadism
- Physical scarring of the child
- Use of ligatures or restraints
- Deprivation of food, shelter or clothing/severe neglect
- Insertion of foreign objects
- Emotional/physical dependence upon abuser
- Ritualized, bizarre repetitive patterns of abuse

Children exhibiting any or a combination of the following aspects should be flagged for attention:

- Trauma bonding" or attachment to the abuser as a result of the abuse. Some children do not understand their victimization because of emotional bonds, favors from the abuser, or some form of impairment.
- Developmental delay
- Inconsistent or no support for the child from family
- Reluctance to disclose or to talk further about abuse
- Very young children—e.g., all pre-school children..

Understanding the impact of the crime on a particular victim will assist the prosecutor in developing a theme for the case. Knowledge of victimization and traumatic effects of crime can explain behavior that may be misinterpreted by the jury. Prosecutors may wish to include expert testimony on behavioral and personality changes in the victim prior to and following the crime. More discussion of characteristics of traumatized victims appears in Section IX of this handbook, "Children and Post-Traumatic Stress Disorder."

Suicidal and institutionalized child victims and witnesses warrant special handling and increased involvement of mental health professionals and advocates. When working with fragile children, be flexible about when and where to meet them. Since routine is critically important to some victims, disturbing it can cause additional trauma. Determine whether victims feel unsafe in certain places and respect their needs wherever possible.

## A Team Approach

To prepare severely traumatized children for court, a team approach is needed. The primary goal is to create an environment in which the child can testify accurately and with as little additional trauma as possible. To avoid surprises at court, team members need special training and experience working with child victims. While the type of professionals required may vary with each case, the team should include all or some of the following:

- prosecutor
- victim-witness advocate
- mental health professional
- parent/caretaker and other support person

## Team Member Roles

Members should be cross-trained so each understands the role of others on the team. The prosecutor is responsible for the content of the child's testimony. Other team members facilitate testimony and create a safe environment in which testifying is possible for the child. Throughout the process, members should maintain communication about the child and course of the case.

**Prosecutors.** Prosecutors have primary responsibility for preparing children for court. Preparation includes: (1) providing information to the child and parent about the process; (2) allaying fears of the child and parent; (3) assisting the child with testimony; and (4) helping the child address the issue of facing the offender in court. Responsibility

includes explaining charging decisions and the outcome of proceedings—rulings, orders—so that the victim, family and other professionals understand their significance.

Prosecutors are responsible for preparing the child for trial with regard to case facts and the types of questions anticipated from all counsel and the judge. In addition, the prosecutor must try to prepare the court for the child. What options will help elicit the truth? Will the parent's presence or absence help the child testify? The child may find it easier if he or she can sit in the parent's or advocate's lap. One prosecutor rued his failure to request special accommodations for a particular child witness when the child stopped talking during cross-examination, ran behind the judge's bench, and crawled under a desk.

Prosecutors may file pre-trial motions to: (1) dispense with oath-giving; (2) request that the child be allowed to testify via closed circuit television; (3) schedule the child's testimony in accordance with the child developmental abilities and routine; (4) ask for multiple recesses to accommodate a child's attention span; (5) arrange for smaller furniture or spatial rearrangements; (6) require the use of simplified, age-appropriate language; (7) permit the child to have a support person; and (8) require a speedy trial if it will help the child.

**Mental Health Professionals.** Therapists and clinical social workers conducting psycho-social evaluations of child victims seek to understand the emotional and developmental state of the child and the child's family support. They may be involved in the prosecution by helping prepare the child for court, providing support for the victim while in court and serving as witnesses. The role of the therapist in the prosecution process, however, differs significantly from traditional therapy in that the goal of a *forensic interview* is to obtain uncontaminated information. It is essential mental health professionals understand how the criminal justice system operates. Interviewing techniques can be therapeutic but must be forensically sound—legally defensible. The

forensic interviewer must take a neutral approach with regard to events.

Clinicians taking notes in forensic settings should use quotes including exclamation points. Notes should contain detailed documentation including descriptions of the child's emotional behavior. Therapists should maintain close contact with the prosecutor and victim-witness advocate.

**Victim-Witness Advocates.** "The busy-bodies of the criminal justice system," the advocate works to create an environment in which the child will be able to testify. Responsibilities include identifying the child's needs and assembling resources; monitoring the child's well-being and impact of the system; and serving as the conduit of information between the prosecutor and the child's therapist. The advocate can be a good source of advice on ideas for helping the child in the courtroom; make referrals for psychological assessment, support groups or individual counseling; and serve as focal point for child's parents, caretakers or other family members.

If the child raises concerns about the defendant or any negative pressure from caretakers, family members or friends of the defendant, the advocate must immediately inform the prosecutor. Advocates should also receive copies of protective/stay-away orders so they can immediately inform the prosecutor of alleged violations.

**Parents and Caretakers.** Non-offending parents and caretakers should be included in the process from the beginning because of the importance of their trust and support. When a child has questions about going to court, he is most likely to consult a parent. Give caretakers as much information as possible throughout the process, if possible in writing for easy reference. Supportive caretakers can usually provide professionals with helpful information about the child, including what concepts and words the child understands and uses. Professionals, particularly advocates and therapists, should be also prepared to address manifestations of parent trauma. Victimized themselves as children or adults, many parents suffer

secondary trauma when a child is hurt.

## Key Issues

1. First and last, prosecutors need help determining how much to push a child to testify, especially one suffering Post-Traumatic Stress Disorder (PTSD). While most children can testify after sensitive preparation, some will never be able to do so. Cases involving severely traumatized children are more likely to be negotiated or dismissed. Again, children who cannot testify in the presence of the defendant may be able to testify via closed-circuit television.
2. Since children disclose abuse and facts regarding traumatic events over time, the more comfortable a child becomes with the prosecutor or advocate, the more likely he will provide valuable information. Let the child know you are sorry about what happened. Be cautious using "triggers" such as photos related to the abuse since triggering objects may be devastating to the child. Overused, they can also desensitize a child to the abuse and produce numbness, "a flat affect." If this occurs, a mental health professional can address this inappropriate affect in court.
3. Again, it is critical to know the words, concepts and phrases the child is capable of understanding and communicating. By talking with the child over time about school and daily activities, the prosecutor can get a feel for the child's skills. Therapists, teachers or speech pathologists can assess and provide a report on the child's developmental state and communication abilities.
4. Time is a key issue in both the investigation and prosecution stages. Forensic interviews and other investigative steps should be conducted **immediately** following disclosure of abuse. Do not prolong the process since the child's therapy, other than crisis intervention, should wait until investigation has uncovered sufficient evidence to charge the case. Following the investigation stage, the longer amount of time available for trial preparation can be

beneficial for a severely abused child. The child may disclose more information about the crime during therapy. A delay can also allow a very young child to mature and develop skills needed for trial. Prosecutors will need to examine several factors when considering when to go forward with a case or put a child on the stand. Is the child at risk if the trial is postponed? Can the case be made with existing evidence? Prosecutors may want to review charging decisions after the preparation stage.

5. The victim's greatest fear about going to court is usually the prospect of facing the offender. Reassure the child of her safety. Introduce her to the attending court security officer before trial and solicit the officer's assurance of protecting the child during testimony. If offender identification is not an issue, advocates or therapists can help desensitize the child by showing the child a mug shot of the defendant. One advocate glued a mug shot of the defendant on a doll during trial preparation. The child initially hid the doll but eventually reached a point of pounding the doll with a gavel. Another child covered the defendant-doll's face and genital area with tape. Children can be encouraged to express feelings about the defendant through drawings.

*To inform and change attitudes takes time. When we talk about child abuse, we are generally discussing acts that no one wants to believe humans are capable of committing.*<sup>4</sup>

An important part of the case is providing information on the dynamics of abuse and related issues to judges and juries. Research on physical abuse cases confirms that experienced child abuse professionals believe jurors need more information because jurors tend not to believe that parents or caretakers intentionally harm children.<sup>5</sup> In addition, knowledge about the complex types of child maltreatment has grown tremendously in the last 15 years, particularly in medical and mental health, and it is difficult even for specialists to stay current. Citizens who make up juries usually will have only rudimentary knowledge about abuse and may bring misconceptions and personal biases to the case. Well educated and well intentioned judges may know little of child abuse.

In a field where misinformation abounds, prosecutors are in a strong position and have an obligation to help judges and juries reach decisions that are as well informed as possible. It is important prosecuting attorneys understand and clearly explain the significance of information they present, especially research literature.

*Use literature briefs.* Particularly significant information should be conveyed in a brief with attached articles. If the prosecutor wants an important article brought to the judge's attention, he

or she should make a motion and write a brief relying on information presented in the article. Attach two copies of the article: one for the judge to read for that case and the other for the judge's files for future cases. Provide a copy of the motion, brief and article to the judge's law clerk. Note that the goal of educating judges is not only the case at hand but future cases.

*Use experts when needed.* Used cautiously and in keeping with sound trial strategy, prosecutors can take advantage of an expert's wide latitude in expressing opinions during testimony. It is important to avoid making the expert the focus of the trial, not the child victim. Prosecutors should know as much as possible about the experts they use and have confidence in their professional credibility. The choice of an expert is critical. Child victimization is a multidisciplinary field, and members of several professions legitimately call themselves experts. Four key factors indicate expertise in child victimization:

- Basic grounding in an accepted medical or mental health profession, as indicated by an appropriate graduate degree;
- Extensive, first-hand experience with victimized and non-victimized children;
- Thorough knowledge of the professional literature on child victimization; and
- Objectivity about individual cases.

The expert should offer evidence of and be able to describe specialized training in the area of child victimization, as well as provide evidence of having seen a large number of children in her or his practice. The number of children is arbitrary: 10-20 child victims is not enough to constitute expertise but contact with thousands is unnecessary. Experts should be able to discuss major issues in the field and

---

<sup>4</sup> Stern, Paul. "Thoughts on How Prosecutors Can Inform Judges on Child Abuse and Neglect Issues," *The APSAC Advisor*, Vol.8, no.1, 1995, p. 12.

<sup>5</sup> "Searching for Answers: Criminal Justice Research, Development and Evaluation. National Institute of Justice, 1995 Annual Report to Congress. Page 30.

offer evidence of how they maintain currency with scientific literature. They may describe the relevant professional organizations to which they belong as well as their own research activities, publications and professional meeting presentations. Experts should have a working knowledge of commonly accepted principles in the field of child victimization.

While experts may offer opinions in testimony, they must state whether the opinion is commonly accepted, novel or inconsistent with the field. If the idea runs counter to common wisdom, experts must present credible rationales for their position. Experts can be particularly useful in physical abuse cases in which they are asked to address situations in which the severity or pattern of injury is inconsistent with caretaker explanations. For example, can a short fall from a sofa or bed cause severe head trauma? Other issues that may require experts include:

- Multiple caretaker situations in which it is difficult to ascertain which caretaker inflicted the abuse;
- The significance of the clinical course versus the timing of the injury;
- Intentional versus accidental injury;
- The importance of developmentally appropriate histories of the injured child;
- Common child abuse injuries;
- Burn injuries;
- Bone fractures;
- Pattern of injuries; and
- Force and mechanism of injury.<sup>6</sup>

---

<sup>6</sup> Conversations with Ryan Rainey, Assistant U.S. Attorney, District of Columbia.



## Victim Impact Statements for Children

*Mr. Judge, I want him to be in jail. Please let him stay in jail because he does bad things to kids. I want kids to live their life safe forever. I was four-years-old when he did bad thing to me and to my sisters. I was sad and mad when he hurt me. I told my Mommy that he did bad things to me. I draw a picture of how I felt when he hurt me. A sad face and a angry face. (Victim impact statement dictated by 6-year-old)*

*You should tell Jimmy it was not right to do that to a little girl. It makes me sad, very sad when I think about it. I'm afraid about that thing he did to me. Tell Jimmy bye-bye because he should go to jail. My Mommy and Daddy are mad at Jimmy. I won't play outside anymore if Jimmy gets to come home. (Victim impact statement dictated by 7-year-old)*

*I feel sad because my Dad ruined my life. I feel ashamed and dirty because of the terrible thing he did to me. My Dad hurt me badly. Sometimes I'm too scared to go to sleep at night. I want him to go to jail. Please think about my feelings. (Victim impact statement by 11-year-old)*

*I lost my virginity and to a rapist of all the people in the world. I was planning to wait until I had a husband. I had to grow up faster than I wanted to. . . When he was raping me, I was worried that I would never see my family again. He said something about cutting me up, and it made me think I had to do what he said or I would die. . . I felt ashamed and embarrassed. I felt like everyone knew what happened to me. I tried not to think about it, but I couldn't help it. I had to tell the detectives, the doctor, the prosecutor what happened over and over again. It was embarrassing telling all those people details - every little thing that happened. Since the rape I try to sleep more lightly so I can hear when something is going on. I have nightmares. When I was getting*

*ready to testify, I dreamed that the Judge said the rapist was not guilty. I woke up and got in bed with my mother. In another dream I was asleep and woke up to find the rapist standing over me - looking at me. I'm afraid he's going to come get me if he gets out of jail. (Victim impact statement by 13-year-old)*

*Dear Robert, I miss you. Have a good time in heven. I am on my way there. Have sweet dreams with Jesus. I love you very much. This is your sister, Robin. You are a sweet angel. (Letter submitted as part of a victim impact statement by a young girl whose brother was beaten to death by their father)*

### **In a Child's Words**

A victim impact statement from a child can bring the full impact of the crime home to the judge in a powerful way. It can also be an important step in the healing process for a child. In most states and the District of Columbia, children have the right to present a victim impact statement (VIS) at the time of sentencing or to have an adult present a statement on their behalf. A victim advocate can work with the child to develop an accurate and age-appropriate statement since most children need help. Child victims should not be forced to do a VIS nor made uncomfortable or fearful during the process.

In most cases, the primary impact of abuse is psychological, not financial. Knowledgeable professionals should assess the substantial body of research documenting initial and long-term psychological effects of abuse on children and present this evidence as part of the VIS. The financial impact should cover expenditures for medical treatment and psychological counseling expenditures. Restitution should be ordered for these expenditures, with contingencies for possible future medical expenses related to the crime.

While most victim impact statements are technical documents unlikely to be reviewed directly by children, many children understand and like the idea of writing a letter to the judge describing what happened and how they were affected. Very young children can be encouraged to draw pictures of how they feel about the crime, themselves or the defendant. Victim-witness advocates may wish to ask the child questions and transcribe the answers. Some courts allow audio-taped or videotaped statements by children made during an interview. Oral statements by the child at sentencing can be effective in helping judges understand the crime's impact.

If a severely traumatized or injured child cannot provide a statement or drawing, the caretaker, physician or therapist should prepare the primary statement or present it as part of an information package. Copies of articles on research that documents the short and long-term impact of victimization on children can be attached. Non-offending parents are usually good sources of information on how the abuse affected the child, siblings and entire family. Note that siblings represent often-forgotten secondary victims and should be allowed to participate in the process or do their own VIS. Encourage older children to write a letter to the judge expressing their feelings about the crime and the defendant. Some adolescent victims keep journals, write poetry or do artwork related to their abusive experiences. Copies can be presented as part of their VIS.

## Children Who Witness Violent Crime

In this country children witness violent crime on a daily basis: homicide, rape, assault, and domestic violence. Although child witnesses may not be physically injured during an assault on another person, the long-term psychological impact of witnessing such events can be devastating. Adults often minimize or deny the presence of children at the scene while these crimes are occurring. However, when children are questioned about events they have witnessed or heard, depending on their stage of development, they can provide detailed description of these events.<sup>7</sup> Also, it is not uncommon for adults—even some mental health professionals—to minimize the impact of witnessing violence on children and fail to provide appropriate intervention. Caretakers may mistakenly believe that young children will "forget" about the violent event if they are "left alone" and not reminded of it.

Children need to talk about what they have seen and their perceptions of the consequences. They also need to be free from intimidation and persuasion aimed at getting the child to change his description of events.

### *Child Witnesses to Domestic Violence*

While exact numbers are not available, it is clear that each year hundreds of thousands of children witness domestic violence and are present in many domestic violence incidents to which police agencies respond. It is estimated that physical abuse of children is present in between a third and half of domestic violence situations involving abuse of the mother. Children who are present during domestic violence are at an increased risk for being murdered or physically injured. Children who are exposed to domestic violence experience feelings of terror, isolation, guilt, helplessness, and grief. Many

children exhibit psychosomatic complaints such as headaches, stomach problems and other medical problems. Children can experience problems with depression, anxiety, embarrassment, and if exposed to violence for an extended period of time, ambivalence. Children act out what they see and violent behavior can be a manifestation of exposure to domestic violence.<sup>8</sup>

### *Child Witnesses to Sexual Assault*

It is estimated that approximately 34% of rapes occur in the victim's home where children are likely to be present to see or hear the sexual assault of their mothers or caretakers. Depending on the age of the child and their knowledge of sexual activity, their perceptions of the assaults and reactions to it may be significantly different. Younger children may have difficulty understanding the event due to cognitive confusions and may need assistance in clarifying the reality of the event from their own age-related cognitive distortions. Children who are present during a sexual assault are at significant risk for developing Post Traumatic Stress Disorder. Children may have recurrent and intrusive thoughts about the sexual assault. Repetitive play or reenacting the event allows the child to try to master and understand what happened. During these events, loss of control and the inability to protect their mothers may leave children feeling anxious, depressed, vulnerable, and angry. After witnessing a sexual assault children may become more concerned with their own safety and may exhibit more anger and irritability than prior to the assault.<sup>9</sup>

---

<sup>8</sup> See "The Silent Victims of Domestic Violence—Who Will Speak?" by M.H. Rhea, K. H. Chafey, V.A. Dohner, & R. Terragno, *Journal of Child and Adolescent Psychiatric Nursing* (vol. 9, no.3, 1996.)

<sup>9</sup> See "Children Who Witness the Sexual Assaults of Their Mothers" by R.S. Pynoos & K. Nader, *Journal of the American Academy of Child and Adolescent Psychiatry*, (vol. 27, 1988.)

---

<sup>7</sup> See "Emotional Stress and Eyewitness Memory: A Critical Review" by S.A. Christianson, *Psychological Bulletin* (vol. 112, 1992.)

### ***Child Witnesses to Homicide***

Unfortunately children witness many different types of homicide. They may witness the death of a sibling, parent, another relative or friend, or a stranger. Child fatalities occur at a rate of 110 per 100,000 and 77% of the victims are under the age of three. 80 percent of these children are killed by their parents, while another 10 percent are killed by another relative. When a child witnesses the fatal abuse of a sibling, it is highly probable that the child knows the perpetrator intimately. Many times the perpetrator is child's own parent.

Psychic trauma occurs when a person is exposed to an extreme traumatic stressor. The normal response to the event involves intense fear, helplessness, or horror. A child who witnesses a homicide is likely to be traumatized and experience a range of grief responses. The child may have recurrent and intrusive thoughts about the homicide, traumatic or anxiety-provoking dreams, and a diminished interest in activities. Preschoolers who witness homicides they may seem withdrawn, subdued, and quiet. Preschoolers may develop anxious attachments to survivors and tend to have a short period of sadness after the event. School-aged children may exhibit a greater variety of behaviors and may be less cooperative. School-aged children may also have medical complaints after witnessing a homicide.<sup>10</sup>

Adolescents tend to react to homicides in a manner that resembles that of adults with Post Traumatic Stress Disorder. Adolescents may experience feelings of rage, shame, betrayal, rebellion, and develop antisocial behaviors. Just as adults experience a wide range of emotions after a death and grieve in uniquely different ways, children should be afforded the same opportunities to express their grief.

Working with child witnesses starts at the crime scene. A child's developmental level will affect not

only how they react but how much they can communicate about what occurred. Infants and toddlers (age 0-2) are unable to verbally recall an event but can maintain affective (emotional) memories and may present as fearful, anxious, numb, or subdued. Pre-school children (ages 2-6) are unable to sequence events and tend to give information in pieces. Children at this age can be frightened, anxious, mute, or very calm after witnessing an event. School-age children (ages 6-10) can tell you about an event and may experience anger, depression, fear, anxiety, or be quite calm while describing the event. Early adolescents (ages 11-14) can talk about an event and understand the implications. They may be angry, withdrawn, excitable, teary, or emotionally flat while discussing the event. Young adolescents may also complain of nausea, headaches, sleep problems, and crying spells. Older adolescents (ages 15-18) may present very inconsistent behaviors. They may talk like adults but still not understand what they witnessed. Adolescents may have problems anger, violence, withdrawal, and substance abuse after witnessing violent events.

The statements investigators get from children are *extremely* important. Document all statements and the demeanor of the child (e.g., crying, shaking, angry). Document the context of the scene (where was the child, what was going on at the scene while the child was giving the statement). Direct quotes from the child are important. Try to talk to the child in a quiet place away from the confusion of the scene and other witnesses or participants. Investigators should be familiar with laws governing admissibility of statements in their jurisdiction, since several types of statements which may corroborate the child's testimony may be admissible in court.

Cases involving child witnesses often involve complex medical issues and family relationships. These cases often involve a number of people and systems including family members, police, clergy, hospital staff, prosecutors, Guardian Ad Litem, civil attorneys, criminal defense attorneys, child protection agencies, family courts, and therapeutic

---

<sup>10</sup> See "The Child as a Witness to Homicide" by R.S. Pynoos and S. Eth, *Journal of Social Issues* (vol. 40, 1984.)

clinicians. Prosecutors and victim advocates have to be particularly diligent in managing the case and monitoring and providing for the well-being of the child witness. Some helpful strategies include:

- Applying "child friendly" practices when working with children.
- Using *trained personnel* to interview children as soon as possible after the event and using standard interviewing protocols for child victims/witnesses.
- Involving trained advocates and clinicians *immediately* to help manage these cases.
- Preparing children for court in a manner that is *developmentally* appropriate and sensitive to the child's mental health needs. In many cases, it may be necessary to have a clinician assess the psychological capability of the child to testify in court.
- Using a team approach when handling cases involving child witnesses and maintaining good communication with representatives from other agencies involved with the child.

## Child Victims of Abduction

The abduction of a child, by a stranger or a parent, has significant impact on the well-being of the child victim. For the criminal justice professional child abduction cases can be extremely difficult to manage due to the multiple issues encountered with these types of cases. While the abduction of children is relatively rare, most professionals are likely to encounter a few cases during their careers. It is important to understand the scope and nature of these cases, as well as the impact on child victims.

### *Scope and Dynamics of Child Abduction*

The National Incidence Studies of Missing, Abducted, and Thrown away Children in America (NISMA, Finkelhor, Hotaling, & Sedlak, 1990) addressed this problem by attempting to describe the incidence rates of non-family abducted or family abducted, runaway, Thrown away, lost, injured, or otherwise missing children. The determination of accurate rates of incidence for missing children has been complicated and compromised by definition and data collection problems.

Family abductions in which family members took a child in violation of a custody decree/agreement, or failed to return a child following a period of visitation accounted for 354,100 cases. Family abductions where someone concealed the taking or location of a child, the child was taken to another state, or evidence indicated that the abductor intended to keep the child or permanently change custody accounted for 163,200 cases. Most family abductions occur in the context of highly conflicted divorce and custody proceedings, often involving relationships affected by domestic violence. Studies indicate that about half of parent abductors have criminal records and many have a history of violent behavior, substance abuse, or emotional

problems.<sup>11</sup>

Non-family abductions account for 3,200-4,600 cases when the crime of abduction was defined by state laws to include short-term abduction, and/or coercive movement as part of some assaults and rapes. Child victims of nonfamily abductions are the most likely to have experienced sexual and physical assaults. This type of abduction has the highest risk for homicide. Approximately 200-300 cases of non-family abductions fall under the category of long-term, long-distance, or fatal episodes.

### *Managing Child Abduction Cases*

The investigation and management of these cases starts when an abduction is reported. Abductions of children by family or non-family perpetrators present unique challenges to law enforcement agencies, prosecutors, the legal community, therapists, and the families themselves. The complexity of these crimes, including the involvement of civil court orders when family members are involved, require that they be handled differently than other types of criminal cases. Multiple agencies can become involved with the case at certain points and it is imperative that someone take the role of managing communications between all the parties that are involved with the case.

Families of missing children report they would like more positive relationships with law enforcement personnel assigned to their cases. Families also want mental health and social service personnel who understand the unique problems they encounter when their children are abducted.

---

<sup>11</sup> See "Obstacles to the Recovery and Return of Parentally Abducted Children: Final Report" by L. Girdner and P. Hoff, prepared for the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, 1993.

Families want information and support services that continue over the length of their child's disappearance from victim advocates as well as local and regional missing child centers.

### *Impact on Child Victims and Families*

An overwhelming majority of families encounter significant emotional distress at the time of their child's disappearance, and the distress doesn't always end with the recovery of the child. Approximately 50 percent of families of missing children are still in distress two years after the return of their children.<sup>12</sup>

Many abducted children suffer from inadequate schooling, unstable lifestyles, abuse, neglect, and poor nutrition. Children who have been abducted often experience serious psychological consequences upon their return. Fear of re-abduction, guilt, loss of trust, and other psychological problems may manifest themselves in multiple physical complaints. Children can exhibit regression in emotional and behavioral function after their return home. Children who have been physically or sexually abused will have to cope with the impact of those crimes as well as the actual abduction. The length of time a child was with the abductor and the events which occurred during that period are factors which will impact the ability of the child and recovering family members to cope.<sup>13</sup>

It is important to remember that recovered children may appear either apathetic/emotionally numb or euphoric at the time of recovery and reunification. The impact of abduction events on the child may

---

<sup>12</sup> See "Families of Missing Children: Psychological Consequences and Promising Interventions: Final Report" by C. Hatcher, & J. Behrman-Lippert, prepared for the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, 1992.

<sup>13</sup> See "Reunification of Missing Children Project: Final Report" by C. Hatcher & J. Behrman-Lippert, prepared for the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, 1992.

not appear for days, weeks, or even months.

Children who have been gone a long time are more likely to have developed a dependency upon or loyalty to the abductor. Such children may have had to become submissive and cooperative with a controlling abductor in order to survive. They may seem ambivalent about the abductor and what happens to him. Recovered children may also seem ambivalent or angry with recovering family members, depending upon what they were told about left-behind family members. Many children in family abduction cases are told the left-parent died or mistreated them.

### *Handling the Recovery and Initial Contact*

Most abducted children are recovered. How they are recovered and reunited with family members, and how they are handled by the criminal justice system can either positively or negatively impact the child's mental health and affect the ability of the child to participate effectively in a prosecution.

Whenever possible, criminal justice professionals involved in recovery of an abducted child should follow these guidelines:

- Physical and emotional needs of the child come first
- Alert family members as quickly as possible
- Reunion should take place in neutral/private location (avoid media presence)
- Plan for mental health needs of the child by involving victim advocates and other professionals within 48 hours after recovery<sup>14</sup>

---

<sup>14</sup> See "Recovery and Reunification of Missing Children: A Team Approach," edited by Kathryn M. Turman, National Center for Missing and Exploited Children and the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, 1995.

Most recovered children can provide valuable information about the abduction, conditions under which they lived, and information about the abductor. It is important to find out what the child believes about the abductor and the motivation for the abduction. Keep in mind the appearance and name of the child may have been altered during the abduction. For young children, these changes may create confusion about their identity.

The forensic interview of the recovered child should occur as soon as possible, depending upon the physical and psychological state of the child. Principles and techniques for effective and developmentally appropriate handling of child victims/witnesses provided in earlier sections of this handbook should be used in working with abduction victims.

The National Center for Missing and Exploited Children at 1-800-THE-LOST (1-800-843-5678) can provide consultation and assistance with the management of child abduction cases. The Center also provides at no cost a number of brochures and monographs on issues related to child abduction.



## Children and Post-Traumatic Stress Disorder

Post-Traumatic Stress Disorder (PTSD) was originally recognized only in veterans of foreign wars. We have learned that young and old veterans of "domestic combat" suffer the same range of painful effects. Precipitating events can include prolonged violent physical/sexual assaults; a serious—perhaps life-threatening—threat to oneself or one's loved ones; sudden destruction of one's home or community; or seeing another person killed or seriously injured as a result of an accident or physical violence. Children who have experienced prior victimization or stressors are more likely to experience PTSD and to have more severe symptoms.

Like adults, children with PTSD exhibit most of the classic symptoms including nightmares or flashbacks. However, children tend to keep the memory of a traumatic event alive in special ways:

- Children who suffered a single, terrible event can often "re-see" the source of their terror in detail at will, often when relaxed or bored.
- Children who suffered prolonged abuse often block out all or part of the events, but can re-enact them while playing. This repetitive play can ultimately be incorporated into behavioral quirks or problems.
- Children traumatized before age one or two retain a nonverbal memory of the event and may incorporate it into play or behavior.
- Children may reveal markedly diminished interest in significant activities. Young children can lose recently acquired skills such as toilet training or language proficiency. Older children may avoid activities they previously enjoyed.
- Children may exhibit a lack of appropriate affect, responding to situations with no emotion or

intense emotion.

- Children may have a sense of a foreshortened future—i.e., if they have witnessed a murder, they do not believe they will live to adulthood.
- Children may develop persistent symptoms or behaviors not present before the event, such as difficulty falling or staying asleep, irritability/outbursts of anger, difficulty concentrating, hyper-vigilance (overly or unreasonably watchful), and an increased startle response.

Children who exhibit symptoms of PTSD should be referred immediately for mental health counseling by a professional with experience in treating trauma. Crime victims compensation programs in most states and the District of Columbia may cover some or all of the costs of mental health treatment for primary victims.

We ask a great deal of children who have been victims or witnesses to crime when we ask them to participate in the criminal justice system. It is a system designed for adults, not for children. We expect young children to take part in a process which many adults find complex, confusing and intimidating. We want children to answer detailed questions about terrifying events in the presence of strangers and the defendant. If an investigation and a trial are a search for the truth, then we must do everything we can to enable children to tell what happened to them as clearly and completely as possible. The criminal justice system makes accommodations for victims and witnesses who do not speak English or who have a physical handicap, and it also must make accommodations for children. It is important that criminal justice professionals adapt their practice to the special needs of child victims and witnesses. If children cannot participate effectively in the criminal justice system, it may be impossible to protect them from future victimization.

## **Resources for Information and Training**

---

The following professional organizations and clearinghouses provide information on research, best practice, and training opportunities.

### **American Professional Society on the Abuse of Children (APSAC)**

407 S. Dearborn St.

Suite 1300

Chicago, IL 60605

(312) 554-0166

E-mail: APSACAdmn@adl.com

### **National Clearinghouse on Child Abuse and Neglect Information**

PO Box 1182

Washington, DC 20013-1182

(703) 385-7565 or 1-800-FYI-3366

Email: nccanch@calib.com

### **National Center for Prosecution of Child Abuse / American Prosecutors Research Institute**

99 Canal Place, Suite 510

Alexandria, VA 22314

(703) 739-0321

### **National Criminal Justice Reference Service**

1600 Research Boulevard

Rockville, MD 20850

Email: askncjrs@ncjrs.org

### Juvenile Justice Clearinghouse

1-800-638-8736

### Office for Victims of Crime Resource Center

1-800-627-6872

Fax: (301) 251-5212

### **National Center for Missing and Exploited Children**

2101 Wilson Boulevard, Suite 550

Arlington, VA 22201-5302

1-800-THE-LOST (1-800-843-5678)

World Wide Web: <http://www.missingkids.org>

Internet E-mail: [77431.177@compuserve.com](mailto:77431.177@compuserve.com)

### **National Network of Children's Advocacy Centers**

1-800-239-9950

## References

---

- Alexander, E., Chapter on child victimization, National Victim Assistance Academy Manual, Office for Victims of Crime, U.S. Department of Justice. 1996.
- Benson K. From the Mouths of Babes. *Police*, 36-41; October 1993.
- Berliner L. The Child Witness: The Progress and Emerging Limitations. *University of Miami Law Review*, 40:167; 1985.
- Berliner L and Conte J. The Process of Victimization: The Victim's Perspective, *Child Abuse and Neglect*, Vol. 29: 1990.
- Berliner L and Conte J. The Effects of Disclosure and Intervention on Sexually Abused Children. *Child Abuse and Neglect*, Vol. 19 (371-384): 1995.
- Briere J. *Child Abuse Trauma: Theory and Treatment of the Lasting Effects*, Sage Publications, Newbury Park, CA, 1992.
- Bottoms B and Goodman G., editors. *International Perspectives on Child Abuse and Children's Testimony*. Sage Publications, Newbury Park, CA, 1996.
- Child Victim Witness Investigative Pilot Projects: Research and Evaluation Final Report. Attorney General's Office, State of California; 1994.
- Child Victim-Witness Protocol. San Diego Regional Child Victim-Witness Task Force, June 1991.
- Child Witnesses in Criminal Court: A Protocol for Action. Prepared for the State Justice Institute by the Crime Victims Research and Treatment Center, Medical University of South Carolina, December, 1990.
- Deblinger E. Diagnosis of Post-Traumatic Stress Disorder in Childhood, *Violence Update*; 2(4); 1991.
- Dible D and Teske R H C, Jr., An Analysis of the Prosecutory Effects of a Child Sexual Abuse Victim-Witness Program," *Journal of Criminal Justice*, Vol. 21, 1993, pp. 79-85.
- Dixon S. and Stein M. *Encounters With Children: Pediatric Behavior and Development*, Mosby-Year Book, St. Louis, MO, 1992.
- Dziech B and Schudson C. *On Trial: America's Courts and Their Treatment of Sexually Abused Children*, Beacon Press, Boston, MA., 1991.
- Finkelhor D and Browne A. The Traumatic Impact of Child Sexual Abuse: A Conceptualization. *American Journal of Orthopsychiatry*, Vol. 23 (1984): 215-218.

- Flin R. Child Witnesses in Criminal Courts. *Children & Society*, 4:3, 264-283; 1990.
- Gray E. Unequal Justice: The Prosecution of Child Sexual Abuse, The Free Press, New York, NY, 1993.
- Goodman G and Bottoms B., editors. Child Victims, Child Witnesses: Understanding and Improving Testimony. The Guilford Press, New York, NY., 1993.
- Henry J. System Intervention Trauma to Child Sexual Abuse Victims Following Disclosure. *Journal of Interpersonal Violence*, Vol. 12, No. 4, August 1997 (499-512), Sage Publications.
- Herman J. Trauma and Recovery, Basic Books, 1992.
- Investigation and Prosecution of Parental Abduction, American Prosecutors Research Institute, 1995.
- Jones D. Interviewing the Sexually Abused Child: Investigation of Suspected Abuse, Royal College of Psychiatrists, London, 1992.
- King N, Hunter W, and Runyan D. Going to Court: The Experience of Child Victims of Intrafamilial Sexual Abuse, *Journal of Health Politics, Policy and Law*, Vol. 13 (Winter 1988): 1-17.
- Lanning K: Criminal investigation of suspected child abuse; Criminal investigation of sexual victimization of children. In J. Briere, L. Berliner, J.A. Bulkley, C. Jenny, & T. Reid (Eds.), *The APSAC Handbook on Child Maltreatment* (pp. 246-264). Sage Publications (1996).
- Lipovsky J and Stern P. Preparing Children for Court: An Interdisciplinary View. *Child Maltreatment*, Vol.2, No. 2, May 1997 (150-163), Sage Publications.
- Morgan M. How to Interview Sexual Abuse Victims: Including the Use of Anatomical Dolls, Sage Publications; Newbury Park, CA., 1995.
- McGough L and Warren A. The All-Important Investigative Interview. *Juvenile and Family Court Journal*, 45:4, 13-29; 1994.
- Myers JEB. Legal Issues in Child Abuse and Neglect. Sage Publications, Newbury Park, CA., 1992.
- Myers JEB. Paint the Child Into Your Corner: Examining the Young Witness, *Family Advocate*, Vol. 42 (Winter 1988).
- Myers JEB. The Child Witness: Techniques for Direct Examination, Cross-Examination, and Impeachment, *Pacific Law Journal* (April 1987): 804-942.
- National Institute of Justice, U.S. Department of Justice, A New Approach to Interviewing Children: A Test of Its Effectiveness. (Research in Brief), 1992.
- Oates R, Lynch D, Stern A, O'Toole B, & Cooney G. The Criminal Justice System and the Sexually Abused Child, *Medical Journal of Australia*, 162 (647-653), 1995.

- Pence D and Wilson C. Team Investigation of Child Sexual Abuse: The Uneasy Alliance. Sage Publications; Newbury Park, CA., 1994.
- Perry N and Wrightsman L. The Child Witness: Legal Issues and Dilemmas. Sage Publications; Newbury Park, CA., 1991.
- Portable Guides to Investigating Child Abuse. Battered Child Syndrome: Investigating Physical Abuse and Homicide; Child Neglect and Munchausen Syndrome by Proxy; Diagnostic Imaging of Child Abuse; Interviewing Child Witnesses and Victims of Sexual Abuse; Photo-Documentation in the Investigation of Child Abuse; Recognizing When a Child's Injury or Illness is Caused by Abuse; Sexually Transmitted Diseases and Child Sexual Abuse; Burn Injuries; Office of Juvenile Justice and Delinquency Prevention, US Department of Justice, 1996.
- Reviere S. Memory of Childhood Trauma: A Clinician's Guide to the Literature, The Guilford Press, New York, NY, 1996.
- Saywitz K. Questioning Child Witnesses. *Violence Update*, March 1994.
- Saywitz K. Preparing Children for the Investigative and Judicial Process: Improving Communication, Memory and Emotional Resiliency, Final Report to the National Center on Child Abuse and Neglect, U.S. Department of Health and Human Services by UCLA School of Medicine, Department of Psychiatry, 1993.
- Saywitz K. Methods to Increase Developmental Sensitivity: Matching Form of Question to the Child's Language Level. Unpublished lecture materials.
- Saywitz K. Bullying Children Won't Work: Interviewing Techniques that Will. *Family Advocate*, 10, 3, 1988: 16-20;
- Saywitz K. Children's Conceptions of the Legal System: "Court is a Place to Play Basketball" in Perspectives on Children's Testimony (Ceci et al. eds) Springer-Verlag, 1989.
- Whitcomb D. Use of Innovative Techniques to Assist Child Witnesses: Research Brief, Educational Development Center, Newton, MA. 1992.
- Whitcomb D. When the Victim is a Child (Second Edition) Issues and Practices Series, National Institute of Justice, U.S. Department of Justice, 1992.
- Zaragoza M. et al., editors. Memory and Testimony in the Child Witness; Sage Publications, Newbury Park, CA., 1995.

