

## APPENDIX A

### Comments on the investigation and interviewing of children in the Ellis case

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1. I, Graham Michael Davies, am a Professor of Psychology at Leicester University. I am a Fellow of the British Psychological Society and a Chartered Forensic Psychologist. My principal research and professional interests lie in the area of children's testimony. In this connection, I served on the original Pigot Working Party which developed the 'Memorandum of Good Practice on Video Recorded Interviews with Child Witnesses' (Home Office, 1992) and lead the writing team which has drafted the new 'Guidance' which will supersede the Memorandum next year. As part of the Inquiry into aspects of the Ellis case, I have been asked to consider whether 'there are features of the investigation and/or interviews of the children which may have affected the reliability of the children's evidence, and if so, their likely impact' (letter of instruction from Sir Thomas Eichelbaum, 24.7.2000). In this connection, I have been supplied with (i) videotaped records of interviews with all children who were interviewed as part of the original investigation and who gave evidence at trial or depositions; and (ii) complete typed transcripts of these interviews (iii) transcripts of the examination and cross examination of the evidence given by interviewers, parents and children at depositions and trial. My report focuses upon the testimony provided by the 6 witnesses whose evidence led to the convictions against Mr Ellis.
2. My report is divided into three discrete sections as follows:
  - A summary of research findings on the reliability of evidence and vulnerability to suggestion as witnesses of children aged 5-6 years of age (sections 3-17)
  - Comments on the content and style of the interviews with each of the key witnesses, relative to current professional standards and research findings (sections 18-54)
  - More general comments on the investigation as a whole and in particular, issues relating to the reliability and suggestibility of the testimony of the witnesses (sections 55-60).

My report will focus on these procedural matters: it will not attempt to pass judgement on the guilt or otherwise of Mr Ellis nor to pronounce on the reliability of individual children's accounts. I perceive my role to be to provide independent advice and relevant information for others to draw their own conclusions, based on the wider evidence and circumstances of the case.

3. With the exception of one child, who was 7 years old, the remaining "conviction children" were all aged 5 - 6 years old at the time of their interviews. The research literature on the memory capacities of 5 and 6 year old children suggests the following generalities:
  - Children of this age are capable of observing events and recalling them accurately at a later time
  - Children's spontaneous statements will be limited and brief compared to those of older peers, but generally accurate
  - Statements concerning events which are repeated over time are likely to be more accurate than one-off events: the gist of such events is likely to be well recalled, including their temporal sequence
  - Children will show better recall for actions, than descriptions of persons; central features of events will be better recalled rather than peripheral features
  - Recall will be better for actions involving the child directly rather than as a bystander
  - Repeated events which take place in familiar contexts are likely to be better recalled than novel events in unfamiliar environments
  - Information about when events occurred (day, month, year) is likely to be very poorly retained unless linked to a milestone of significance to the child (e.g. a birthday or religious festival)
  - Likewise, the frequency with which events occur is likely to be poorly estimated: most children of this age operate on a 'one; two; many' classification system
  - Elapsed time is generally poorly represented: children of this age have difficulty in estimating the duration of an event and how long ago it occurred.

All statements regarding accuracy assume that interviews with the child take place under conditions which minimise obvious sources of suggestion. In recent years, a great deal of psychological research has been devoted to identifying potential sources of suggestive responding in children in the age range 5-6 years and calibrating their effects.

4. It has long been demonstrated that, under experimental conditions, the reports of children aged 5-6 years may be disproportionately vulnerable to leading or suggestive questioning compared to the testimonies of older children and adults. A more recent finding, from the work of Ceci and his colleagues (e.g. Ceci & Bruck, 1996), is that the impact

of such questioning may spill over into a child's subsequent spontaneous statements, such that the child may claim that a non-existent event occurred and even include spurious supportive detail to back up this claim. There is usually no question of the child's intending to mislead; the statements are made with evident sincerity, but appear to be based on information derived from sources other than direct experience. Some of these sources are listed below.

5. One source of suggestive responding is negative stereotyping: consistent denigration by an adult of another individual in the presence of a child may result in the child reinterpreting and reporting their interactions with that individual in a way which is consistent with the negative remarks.

Leichtman and Ceci (1995) arranged for a stranger, 'Sam Stone', to meet briefly with children aged 3-4 and 5-6 years of age at a nursery school. Subsequently, when the children were interviewed concerning whether he had damaged a book or a toy, all age groups rejected this possibility with 93% accuracy. However, if the visit was preceded by stories about the stranger designed to foster negative stereotyping ('Sam is a clumsy person') 18% of the 5-6 year olds claimed he had damaged something and when pressed, 10% said they had seen him do it and one child stick to their story when gently challenged as to its accuracy.

6. Another source of suggestible responding in children of this age results from post-event misinformation: children recalling events from the past have problems distinguishing what they have seen and heard originally from what they have been told subsequently by others.

Poole and Lindsay (1995) staged science demonstrations for 3-5 year olds at nursery school and subsequently had their parents read them distorted accounts of what they had seen. Many of the children went on to incorporate the new and conflicting information into their answers when questioned about the original events.

7. These effects are more likely when the person relating the misinformation is a reliable adult rather than another child, suggesting that the credibility of the source may contribute to the effect.

Lampinen and Smith (1995) read a story to 3-5 year-olds and then showed them a video of a person talking about the story in a misleading way. The credibility of the person in the video was varied: in one condition the person was an adult, in the second a child, and in the final condition the person was an adult who was introduced as being 'silly'. Participants only incorporated the misleading information into their reports when the incorrect information was presented by the 'credible' adult; participants were not misled by the 'silly' adult or the child.

8. Effects of misleading information do not need to be derived from hearing detailed accounts in the interim: distortions can result from the persistent use of leading questions by the interviewer which result in the misinformation being subsequently incorporated into the child's own version of events.

In the Leichtman and Ceci (1995) study referred to above, some of the children aged 3-4. and 5-6 years who had experienced negative stereotyping went on to be interviewed four times by interviewers who asked leading questions implying that 'Sam Stone' had damaged items at the nursery. Subsequently, the proportion of 5-6 year olds who claimed he had damaged nursery equipment was 38%, decreased to 15% when pressed, and 5% persisted their story when challenged.

9. It is not necessary to repeatedly use leading questions to create memory distortion. In some circumstances, simply the repetition of the same specific question across a number of interviews can cause a child to create a false memory which they may hold with apparent confidence.

Ceci, Huffman, Smith and Loftus (1994) questioned children aged 3-6 years of age on 7 separate occasions about a mix of real events from their lives and false events that they established the child had never experienced (e.g. getting their finger caught in a mousetrap). Over the course of questioning, 32% of the older children claimed to have experienced one or more of the fictitious incidents, sometimes corroborating these admissions with spurious detail. Such effects were increased if the child was encouraged to visualise the experiences as they tried to remember them.

Questioning needs to be direct and specific to obtain the effect: asking the same question but in an open format (e.g. wh- questions: those that begin 'Why, where, when' etc. ) which require the child to construct a response rather than answering 'yes' or 'no' do not produce the same distorting effects (Waterman, 2000).

10. Like all of the factors described above, such effects are not unique to children; similar, but smaller effects have been observed in studies with adult participants. However, the younger the child, the more vulnerable they are to such contamination. Moreover, there are additional modulating factors which can increase or decrease the power of the effect. For instance, the effects of misinformation are increased if along delay separates original observation and subsequent misleading information or if such misinformation concerns peripheral detail rather than central events. Conversely, it is more difficult to mislead a child witness about events they have themselves experienced or have undergone in a similar form on a number of occasions. Preschool children who are more socially assertive and more cognitively advanced are less susceptible to misinformation effects than other children of comparable age (Geddie, Fradin & Beer, 2000).

11. It is important to stress that factors influencing the reliability of the statements of very young children are not based purely on the results of laboratory experiments. In recent years there have been a number of instances where allegations of sexual and/or physical abuse have emerged from interviews with preschool children in day care which have subsequently proven to be unreliable.

In the Kelly Michaels case (State vs Michaels, 642, A 2d 1372,1385-91; New Jersey, USA, 1994) an investigation was sparked into possible abuse in a day-care centre for 3-6 year olds by a suggestive remark made by one child who was having his temperature taken rectally. This led to a school meeting and individual parents questioning their children which was followed by repeated formal interviews with police child protection officials. A total of 19 children gave evidence at trial against Michaels, alleging a range of bizarre sexual practices which had allegedly occurred during school hours. Despite the absence of any supporting medical evidence, Michaels was found guilty. However, the verdict was quashed on appeal, largely on the basis of the highly suggestive interviewing procedures employed and the lack of any corroborative evidence for the various allegations made.

12. Similar apparent miscarriages of justice have occurred elsewhere in other cases of alleged sexual abuse by adult carers of young children, notably the McMartin case in California (see Davies, 1991) and the Orkney Inquiry (Clyde, 1992) Bruck and Ceci (1995) list a number of features which emerged from their review of State of New Jersey vs Michaels which they feel may contribute to possible miscarriages of justice in such cases. In addition to those mentioned above, they instance:

- Interviewer bias: interviewers having a pre-set agenda which they pursue single-mindedly, irrespective of the initial responses of the child. Eventually, some children comply with the interviewer's agenda
- Differential reinforcement: any statement the child makes which alludes to an abuse agenda is reinforced by the interviewer giving verbal and non- verbal encouragement to the child.
- Peer pressure: the interviewer tells children that other children have already provided statements mentioning this child's involvement in various acts: the interviewer looks to the child to confirm their role
- Inappropriate use of anatomical dolls: the ability to see the doll as a model of self develops much later than play with dolls, typically around 4-5 years of age. Demonstrations of actions on and with dolls by developmentally younger children may reflect suggestion rather than accurately mimic real events

13. However, for every case of interviewers eliciting erroneous information from young children, there will be instances where the sometimes bizarre allegations by children turn out to have a basis in solid fact. In the United Kingdom, Fred and Rosemary West committed a series of sexually motivated murders of men, women and children in a house in Gloucester over a number of years. The offences only came to light when a police officer took seriously the statements of a child familiar with the house. In Belgium in 1996-7, Marc Detroux murdered a number of children, including some who were starved to death; statements by children regarding Detroux were initially dismissed by the police, allowing him to commit further crimes. In Australia, in the 'Mr Bubbles' case, young children's allegations against the accused were dismissed as bizarre and implausible at trial, only for a television company to discover 'similar fact' allegations concerning the accused from an earlier period in his life in Papua-New Guinea.

14. What factors might lead an investigator to give weight to the allegations of sexual abuse against adults by young children? Clearly, some factors will be those which apply to all forensic investigations. These will include:

- medical evidence: does the child have a sexually transmitted disease or does examination suggest that sexual penetration has occurred?
- forensic evidence: does the alleged crime scene contain forensic evidence consistent with the child's allegations?
- privileged knowledge: does the child show knowledge of the suspect's house, property or personal appearance which would be unlikely to be acquired, other than by first-hand knowledge?
- corroboration: do statements about tactics and style of abuse from one child coincide with those provided by a second child, where the possibilities of inter-witness contamination of evidence are minimal?

15. In addition, there are a number of more contentious factors which hinge on the very naivete of young children. Children of this age do tell lies, but the lies are not elaborate: usually a simple assertion or denial ('she did it'). Coaching children to tell more elaborate stories is possible, but existing research suggests the deception is normally readily detectable under questioning. Unlike the sorts of experiences children are invited to elaborate upon in experiments, most children aged 4-6 years have a very poor understanding of sexual matters in general and of the mechanics of sexual abuse in particular (Volbert and van der Zanden, 1996). Precocious knowledge, especially when expressed in terms appropriate to the child's current level of understanding (orgasm described as a sneeze or cry of pain; semen as cream or 'wee' etc.), is seen as particularly diagnostic. 'Sexual details misunderstood' forms one of 18 criteria which the German Courts use as part of their system for assessing the credibility of children's evidence in allegations of sexual abuse (Criterion Based Credibility Analysis or CBCA). The system is based on the idea that there are certain features of young children's accounts which would not readily occur to children who were

deliberately setting out to fabricate an account. While the reliability and validity of CBCA is a matter of continuing debate among psychologists, many professionals find the criteria useful in assessing children's accounts (see Davies, in press for a review and Appendix 1 for a brief description of the criteria).

16. In sum, the results of recent research suggest that children of 5-6 years of age are capable of providing accurate accounts of events to which they have been a party. However, particular care needs to be exercised in the questioning of such children. They do appear to be more vulnerable to repeated questioning and suggestion and may come to own beliefs, which though seriously held, have no basis in fact. These problems are likely to be increased when considerable delay occurs between the time the events are alleged to have occurred and questioning, especially when the individual(s) concerned are negatively stereotyped or subject to suggestive comment in the interim. In evaluating a child's statement it is important therefore, to scrutinise very carefully the history of how it came to be made: did the statement emerge spontaneously or only as a result of direct and repeated questioning by parents? Was the name of the suspect suggested to the children as a possible wrong-doer or did the children's statements independently and consistently identify the accused and his actions from the earliest stage?

17. Unlike many child care cases in the United States, in the current case the interviews with the children have been generally well documented with proper record keeping and full videotape records of all the interviews with the six child witnesses whose allegations were upheld by the jury. It is thus possible to examine these interviews with the lessons of previous cases in mind and also to measure them against accepted guidelines for the conduct of such interviews. These guidelines in turn have been developed to counter precisely the kinds of interviewing errors which Ceci and others have identified. At the time these interviews were conducted in 1992, there were no official guidelines in New Zealand for interviewers in cases of alleged child abuse (Sir Thomas Eichelbaum, personal communication, 12/00). However, training in good practice was available and it is possible to assess such interviews against current and contemporary norms. I now turn to the series of interviews with each of these six children.

18. O. This child was interviewed once by Linda Morgan on 12.05.92. when she was approximately 7 years 8 months old. The interview lasts just over an hour; O and Ms Morgan sit side by side facing the camera. As with all the tapes I reviewed, the technical quality and audibility is excellent.

19. O comes across as a socially assured and somewhat precocious child who copes well with the interview situation. There is an absence of explicit leading questions, though many statements about Peter are triggered by reference back to conversations with her parents. While she makes clear her personal dislike of Peter and the reasons for it, only one serious allegation emerges and is not provoked by a reference back: Peter repeatedly touched her in the crotch in the course of play while other carers were not present. She demonstrates this by gesturing to the area between her legs. Her manner is noticeably subdued in discussion of this allegation, which she illustrates with a cupping movement of her hand. She says that this happened "six .... teen times": a literal estimate to which little significance should be attached (see (3) above). She says he desisted when she told him not to. She also volunteers that he did the same thing to Katy and Thomas. Peter peeked at her while she was being assisted on the toilet by Danny. Asked if she would ask Peter to help her in toileting, O replies "Oh no way, I would never choose him". She claims to have had a small cut in her vagina as a result of Peter's sharp nails, though her parents do not recall this. The term 'cut' is often used quite loosely by children of this age and can mean no more than a small scratch which might heal rapidly in such a vascularised region. I am satisfied that the interview itself is well conducted by an experienced interviewer: the truth or otherwise of the allegation rests on the reliability of the testimony of O's parents regarding their prior conversations with O. I could find nothing in the transcript to suggest the hand of an adult in the child's charges.

20. S. S was interviewed three times by Sue Sidey, between 1.5.92 and 3.8.92; she would have been 6 years 9 months old by the final interview.

Interview 1 on 1.5.92. lasts approximately 1 hour 25 minutes with breaks. S is cooperative and attempts to answer all questions but is fidgety and restive for long periods. There are two short breaks toward the end of the interview, but an interview of nearly an hour and an half is asking a lot of the concentration of a child of 6 years, 6 months. S makes three principal allegations: that Peter painted her bottom; that Peter urinated over her face and that Peter took a bath with her at his house, during which he defecated in the water. The import of the painting incident is unclear: it happened after swimming; there were people about and someone took a photograph and these are "at home". As to whether she was undressed, the interviewer leads: "he painted your bottom without your clothes on, right?" in the absence of a spontaneous statement from S. The urinating incident is much more clearly described with some spontaneous detail and she demonstrates with model figures the position of herself and Peter. It happened to Z and Hazel at the same time, but S is inconsistent on the order in which Peter saw the three children. It happened to her 'just once'. As regard the third incident, the interviewer has to prompt S by reference to earlier conversations about the bath and S is vague as to the location: she first says the creche and then Peter's house; earlier in the interview she has twice said nothing untoward happened at his house. She is reluctant to discuss the defecation, but when she does

so, she provides some vivid detail ("the poos were floating around.."). S wants to finish the interview, but the interviewer presses her and says "it would be good if we could just do it before we leave today".

21. In my view, this interview was less successful. It went on far too long, with a hint of coercion toward the end. Given that the main outlines of the allegations were known, it could usefully have been broken up into two shorter interviews. There are also far too many focused questions asking for detail on the key incidents; the incidents described took place between 18 months and over two years previously. A 6 year old is unlikely to remember the colour of Peter's pants, for instance, but if she is asked a direct question, with no explicit reminder that 'don't know' is an acceptable reply, she will provide an answer (Waterman, 2000). There is also a great deal of leading around the bath incident, which may reflect the child's fatigue at this stage of the interview.

22. The second interview took place nearly a month later (28.5.92.) and this time lasts for around 50 minutes. After the necessary preliminaries, the focus returns to the bath incident and various statements made by S in the interim to her parents. S's manner is more relaxed on this occasion though the same restlessness and wandering attention returns after about 25 minutes. S asks for her mother and the interviewer replies: " Maybe we could see Mum after we have finished talking about it, okay?" An early focus concerns what was washed in the bath and the interviewer produces conventional dolls in an effort to elicit the information; some facilitation is necessary for the child to repeat the allegation. The interviewer then moves on to Peter's behaviour with his pet dog which S has mentioned to her mother. Again, some prompting is required for S to repeat the allegation that Peter had put his finger up its bottom, which provides a starting point for exploring whether Peter might have digitally penetrated S. This allegation is eventually confirmed but not before some fairly heavy prompting from the interviewer and an understandable reluctance to confirm from S. Later, the interviewer asks S if it really happened; S replies "that really happened". There are increasing signs of loss of concentration, as the interviewer presses S over whether threats were made about disclosure: S initially says no but later claims Peter did warn her off "else I'll smack your bottom"-hardly an extreme sanction.

23. This is another interview which perhaps went on too long and contained too many focused questions for the age of the memories: the "don't know" and "cant remember" options were never explicitly stated to the child (this would now be standard practice). Little fresh evidence appears to have been elicited, beyond that already disclosed and discussed with her parents in the interim. S and her family were also friends with the Z's, who were aware of the allegations concerning the visit to Peter's house and the creche toilet. As in the first interview, S brought along a book of drawings as an aid to recall; questions inevitably arise about the circumstances under which the originals were produced, though there is now good research evidence that drawing while talking can act as a facilitator to recall by young children (Gross & Hayne, 1999). I understand that this tape was not played at court because of concerns over the use of leading questions about digital penetration. This in retrospect can be seen to have been an important issue, given the subsequent medical examination which supported a history of such penetration.

24. The third interview with S took place over three months later on 3.8.92. and lasts for just over an hour. The coffee table has been cleared away and Sue and S are sitting on the floor with toys. S has come to talk some more about the bath incident. She now says that Peter put his penis into her vagina " a little"; she describes this as " a sexing". Her manner is composed and her tone conversational. There are repeated attempts to reenact the bath incident with miniature figures: they are so small it is difficult to know what is being shown. S now says she drove to Peter's house in a car which was green. This contradicts her statement in interview 1 that she walked there with Peter. This is yet another example of the interviewer asking a series of direct questions with the expectation that S can provide specific answers; when the interviewer asks " Are you sure about the colour or not?" S hedges " I think it was green". There is nothing in this exchange or the later one concerning the 'needles in the bottom' allegation which hints at additional superfluous detail or elaboration of the kind looked for in CBCA analyses. The reference to the needles is heavily facilitated by the interviewer, when S does not remember and the prompt is strongly leading ("What else could have touched it and made it bleed?"). There has been further contact and discussion with Z since the last interview ("Z said it happened as well") and Z is named as having bathed with Peter at the house. Once again the interview is too long for the age and attention span of the child, who asks for her mother after half an hour and begins to roam the room after 45 minutes.

25. It is extremely difficult to interview young children in ways which are non-leading, but nevertheless elicit information on which a jury can reach an informed decision. At times the interviewer shows a proper regard for suggestion (the range of body parts offered to diagnose touching in the bath; the checks as to confidence and certainty). In my view, however, this series of interviews, given the age of the child, are too long and contain too many specific questions, which produce answers of questionable reliability. The interviewer is tempted, at several key points, to ask questions which are leading. This strategy could have been justified if it produced new convincing detail or additional information which could be corroborated, but all too often this is not the case. In my opinion, the allegation of greatest evidential weight is that from the first interview concerning the toilet cubicle incident and the least is that concerning the needles. With regard to the bath, the version in tape 1 seems the least prompted: the later

versions follow conversations with Z and others and the possibility of negative stereotyping from exposure to Ellis's case on TV (see interview 3), notwithstanding the medical evidence.

26. Q. There are three interviews with Q spread over 9 months, all conducted by Sue Sidey, who also conducted interviews with her brother P. The first interview with Q took place on 09.03.92. and lasted for approximately 40 minutes. Q is cooperative and forthcoming throughout. She has come to talk about Peter, who is "a very mean man who wants children to feel all scared". She complains of undue tickling (a complaint mentioned by other children), which occurred first when she was "three or four" (she is now 6 years old); she repeats these dates later in the interview concerning the other allegations. She states unequivocally, with no prompting, that Peter had put his penis in her mouth in the toilets ("he calls (it) drinking games"): "he just holding us on the shoulders to make sure we are still and that". She was "all scared and wanted to tell someone"; told 'Marie' and later mentions telling Jan and Gaye (all creche helpers, whose statements can be checked). Peter's penis "stayed still" in her mouth and she accepts the interviewer's suggestion that it was "floppy and hanging down". Later she says Peter did the same thing to P (her brother), Z and H. She talks of Peter "touching our private parts" and understands and uses the terms anus, clitoris and vagina appropriately. There is an allegation that Peter touched her anus and vagina with his hands over her clothes and directly ("secret touching") while she was using the toilet. This happened "lots of times". She demonstrates rubbing on a doll. The interviewer establishes that this was not during routine toileting. The interviewer elicits an allegation that Peter threatened she would turn into a gherkin if she told anyone; she told her parents, she says, when there was no sign that this had happened by age 5 ("I realised he was not telling the truth"). Peter also took them for walks with his dog, but there were no untoward incidents.

27. This is an interview of appropriate length, that avoids obvious leading questions and over-dependence on specific questions; Q is forthcoming and clear in her allegations, which cannot be traced to any obvious prompting or leading by the interviewer. The allegations are quite explicit. The main question which has to be addressed, in my view, is whether these are real experiences she has undergone, or whether they could have arisen from discussions with her brother, the Z children or her own parents. Careful examination of the evidence and time-scale will be required to answer this question. Certainly, she is frank about having discussed the matter with her parents, as this precipitated the current interview. However, apart from the relatively advanced vocabulary for sexual parts and a reference to 'our' private parts, I could see nothing in the interview that was redolent of coaching. Further, the interview contains some explicit detail, which in my view, a child of this age would find difficult to invent.

28. The second interview with Q takes place nearly 7 months later on 6.10.92: it lasts just over 30 minutes. A more formal interview setting- sitting facing the camera- and Q more thoughtful and softly spoken. The motive and purpose of this second interview is not immediately evident. The interviewer establishes that 'just tickling' but no 'secret touching' took place outside of school (ambiguous in interview 1). Q claims she told Gaye and that Gaye had peeped while Peter put his penis in a child's mouth (it is not clear which child). Q says "... when Peter got out of the toilets, she (Gaye) said don't do that and Peter said 'oh yes, I will' and then he went back in the toilets with the children and started doing it again". Q also denies explicitly being driven anywhere by Peter. She repeats her allegation that Peter put his penis in her mouth. She comes up with a fresh allegation that Peter went with them to "a big room with lots of escalators" where secret touching took place. It is evident that she has discussed this with her mother who has suggested that this must be the City Council Building ("My Mummy thinks that it could have been the City Council or something"). There is a further discussion of the nature of the tickling, which does not elicit any inappropriate touching, nor is there any demonstrated on a doll despite repeated invitations. There is a brief return to who was present when Peter put his penis in Q's mouth. She now names three boys and the two girls, Z and T (H was named previously, but no boys).

29. This again appears to be an interview with no very obvious flaws. The interviewer explicitly cautions Q to tell her only what she knows. The earlier allegation is repeated and a new allegation made concerning secret touching in the big room. However, it is not clear how much this has been shaped and developed by conversations with mother: Certainly, Q seems to have wholly taken on board the idea of it being the City Council Building and rather bizarrely in this context, refers to "little wee kids" working there for the City Council. Given the elapsed time since her period at the creche, a variety of explanations could be offered for this odd remark. It could arise from contamination due to discussions with parents or other children. Alternatively, it could be a source monitoring error: pressure to recall has led to the conflation of two separate memories, one of a visit to a large building and the other of Peter's alleged behaviour at creche. Q is less clear in the second interview about who was present at the times Peter allegedly put his penis in her mouth: "children" when Gaye is supposed to have peeped; toward the end of the interview, a different selection of children is named for the occasion covered in interview 1 (this confusion may be the product of too many specific questions to a tiring child).

30. The third interview with Q occurs after a further three months on 9.12.92 and lasts for just over 54 minutes. Q and the interviewer sit side- by-side and carry out various craft and art activities as they talk: this arrangement seems to work well and Q is absorbed for most of along session (Interviewer: "Q I know you are getting tired" after 35

minutes). Q has told her Mother more things and Q begins by describing walks with Peter to the park and Art Centre. When asked whether she liked the walks, Q twice says "they were good". The interviewer turns the conversation toward "mean things Peter has done". There are more references to the room with the desks: Peter, Jeremy, R and P were present but no other "big people": she went there "just once" and had to run around the room. The interviewer raises Peter putting his penis in her mouth which Q says happened in the big room and the interviewer moves to correct her ("it happened at the toilets in the creche, right?") but later Q says it happened at both sites. The interviewer attempts to raise the issue of secret touching involving a group of men, which evidently she has heard about via her parents, but Q thinks she is still talking about the 'big room'. After some facilitation, an incident involving sexualized touching by three men is elicited in response to a series of direct questions. A "man with black hair" touched her vulva with his penis; the other men did so too; she had been too scared to tell earlier. Other children were present, including L and later, P. In response to a series of focused questions, Q draws and describes "Peter's friends" but the descriptions are skeletal, normative and lacking in any distinctive detail.

31. In my view, interviews 2 and 3 are of limited evidential value. Q's account in interview 3 of the meeting with the three men seems implausible: lacking in detail or incident. There is nothing in the descriptions of the incidents with the three men which has not already been mentioned in the earlier interview. In the absence of external validation or mutual corroboration, I found these particular accusations unconvincing. In interview 3, the interviewer emphasises to Q the importance of correcting her if she misunderstands anything Q tells her and the warning about telling the truth is given at the beginning and again, significantly perhaps, toward the end of the interview. The interviewer picks Q up when she alleges the men were standing and she sitting when the penis was placed in her mouth and Q then says they were squatting down. Interview 3 is also somewhat longer than the earlier two tapes and Q appears tired and restless as the interview wears on. If the incident with the three men did not have a basis in reality, it is unclear where it came from: Q and her family have been in touch with the Z's in the interim and is presumably aware of the ongoing legal proceedings against Mr Ellis. It is noteworthy that the Prosecution chose to show only interview 1 at trial and not to use interviews 2 or 3.

32. X.' X was interviewed five times over a 5 month period, in the first interview by Linda Morgan and subsequently by Sue Sidey. He was just over 6 years old at the start and 6 years 7 months old at the time of the final interview. The first interview lasts for around 45 minutes. The early part provides a developmental check: X seems a bright and alert little boy. Truth, Lies and promises is followed by some dilatory discussion of his early schooling in which Peter figures. Initially he says "He was alright when I did go there... and now he's not". She raises what he has told his mum and dad and he says "he fiddled with my rude parts". Appropriately, she then goes on to establish what for X is, and is not, a 'rude part'. She then goes through a series of direct questions which elicits that Peter 'wobbled his dick' in the toilets. X says it happened when he was three, when he "done poos in his pants" and had to get changed. Peter assisted X in this. Later the interviewer elicits from X that he was lying on a board at the time, later still, the interviewer establishes through models that the board was outside the toilet and X says "I was just a baby then", but no further detail of the incident is forthcoming. He repeats an allegation made by his parents, against John, but seems to have no personal experience of this ("cos my Mum and Dad told me"). The interviewer establishes that X has also told Robert, his brother and Pauline Selby.

33. It is not clear when this single incident involving Peter took place. X says he was three, but the mention of a board suggests nappy changing, but he talks about 'a poo in his pants'. Even if aged three, X is talking about an incident from the dawn of his memory, so that there is unlikely to be significant detail retained and X resists the interviewer's invitations to elaborate on his initial allegation. It is also evident that the story has been told several times to parents and others aware of the main thrust of the allegations against Mr Ellis, so that there is some risk of elaboration on what could have been a routine aspect of toileting, carried out clumsily. I was generally impressed with the quality of this interview which included necessary checks on X's comprehension and was not judgmental or accusatory (for instance, the interviewer asked X what aspects of Peter he really liked).

34. Interview 2 lasts just over an hour and takes place nearly three months later, the first of a group of three carried out in as many days, by Sue Sidey. After the usual developmental checks and truth checked lies, X says he has come to tell some more about what Peter did to him. He swore at him; "he made me go in the bath with him". "It was upstairs in some room" in Peter's house. Peter's friends were present, one beginning with R: "something Like Robert". There was also an old man with a beard ("I think so anyhow"). There were other children there. He got in the bath with Peter; he made him eat poos ("he ah-made me eat his pons-ah, no, no, he made me eat my poos and then he said next time you come here I'll eat mine and he didn't"). This happened "about twice". "He made me touch his penis a long time" and white stuff came out. He shows how he dipped his penis but says his hands stayed still. The white stuff went in the toilet and the floor. It happened at the creche and at the house; no one else was about. His penis was hanging down; when the interviewer queries whether the penis was sticking out he says "yeah it was".. He was "too scared" to tell anyone else. In response to the question "did any other part of you touch Peter's penis or not?", X says "No, he put his penis up my bum". The interviewer fetches a miniature bath and some figures and invites X to

demonstrate how this occurred. He says Peter put his penis in his bum, but that Peter did not move. Afterward, they went back to the nursery and a teacher asked if they had a nice walk: Peter said "oh yeah, we had a good walk".

35. X goes on to allege that they drove to Peter's house; Peter drove and "one of his friends was in the back"-the old one. When the interviewer suggests this was Robert, X corrects her: the old one was not Robert. There were two or three men waiting at the house. There were other children, but he can only remember Jimmy (later in the interview he mentions Z and Y). Peter put his penis up his bum and "white sticky stuff" came out. X initially says no one else did anything to him but later he says Robert "done hurt me the same way as Peter" and demonstrates on a conventional doll, pointing to its bottom. Robert did this to X, not in "Peter's house, it was one of his friends". Robert had not undressed but just taken down his pants and Robert had done the same. It took place on the bed or on the floor; the curtains were closed and the light was on. His penis did not go in the "poo hole" but just in "the crack" between his buttocks. Initially he responds negatively to the question as to whether anyone else had done that to his bum but then almost immediately mentions "three other guys and one of them was old". X needs to go to the toilet. When he comes back he says Peter watched and took photographs of "all the nasty things". In response to the question: "Where else could a penis go?", X says "He put it in my mouth as well"; it tasted yucky. Later he says it made him sick "and I spewed", but it is unclear whether this is a result of the alleged incident with Peter. The second time he did it, X says he pushed his penis away.

36. Interview 2 described above is long, but X shows no overt signs of distress: he talks as he plays, first at the table and later on the floor. There are few obvious leading questions but there are a lot of direct, focused questions, but on this occasion, a good deal of relevant detail is elicited (the interior of 'Peter's friends' house; the appearance of the three men). The allegations are generally plausible, given the known mechanics of abuse, and the circumstances seem reasonable, with the exception of the claim that Peter himself drove to his house. X has clearly discussed his claims with various members of his family, but there is little indication of a rehearsed account: production is consistent, plausible but unstructured (all positive CBCA criteria). The only hint I could detect of possible parental influence was his frequent references to his penis, whereas 'dick' had been his preferred term in interview 1. I could see no indication that the style of this interview was oppressive or accusatory: X was very much in control.

37. Interview 3 took place the next day and lasts, again, just over an hour. X and the interviewer are sitting either side of a large floor cushion. After preliminaries, X has some more things to tell about "What Peter did to me". He relates how Peter drove him to a library which had a trap door. Peter's mother was there. When asked whether it was close to shops, X says it was, then says he is not sure. He alleges Peter "tried to make me go up and hurt children". His friends were there: Timmy, Y, Z and Daniel. They went through a trap door, below the building was a maze, but they did not enter it. There were women present and two men called Spike and Boulderhead. Peter kicked and punched him and put a stick up his bum, causing it to bleed: "he stuck a burning piece of paper up my bum five times, so that means it (his bum) bleed ..uh..ten times". Spike, Boulderhead and 19 of their friends put their penis in X's bum. X and his friends were tied up. They were given yucky pills to take by Peter's mother, who tried to get them drunk on beer. By 12.30, X is getting visibly restless. Peter put a needle in his hand; he did the same to the other kids. The interviewer produces a female anatomical doll and X identifies its vagina. He has seen his mother's vagina and also the two women at the library ("They just pulled their pants down to show us for some stupid reason"). The women kicked and punched the other children. By 12.50 X is tiring (Int: "I know your very tired aren't you. X: "Mm. Its boring just sitting here with no one in it"). After a break for consultation, there is more discussion of whether the friends did anything to each other; X says he punched Y in the balls and kicked his bum.

38. The fourth interview is again over an hour long (1h., 10m.), the setting as for the previous interview. After truth and promises. X says he wants to talk about "the things Peter's friends did to me". The location is now specific: "The two storied house in Hereford Street". Marie, Gaye and Andrew were there, and Robert and Peter. The kids were in the middle of a circle and had to kick each other; Peter and his friends and family were playing guitars. "Marie, Gaye and Jan pretended to sex". X demonstrates with dolls; he briefly juxtaposes the dolls but seems embarrassed and puts them down. They pretended to be cowboys. The interviewer asks whether he was describing a game at creche: "No, it wasn't a game-and the kids in the middle were naked". The children were encouraged to hit each other under threat of being stabbed; photographs were taken. Andrew put needles up the children's penises. Minutes later he says Andrew did not put the needle in his penis but in his bum. Later he returns to this theme and talks of needles in "the kids' penises and vaginas". They put the children in an oven and Peter pretended to eat him. This was in the building with the trapdoor. Spike drove them there in a black car. Peter put his penis in his mouth in this building. The girls hurt each other too; they went back to the creche in an old grey car. The interviewer asks whether the kids touched the boy's penises "Cos I heard the kids had. ..." he says he saw kids putting penises in each other's mouths. At one point the interviewer asks: "So what stopped you telling me about this yesterday". X: "I just remembered". He talks about Timmy and Y being involved. X is plainly restless and complains of feeling sick and drinks a glass of water. There is a brief discussion about Marie and Gaye "sexing" then shortly after this, the interview closes.

39. The final interview with X takes place over two months later. X and Sue Sidey sit side by side with X colouring and drawing as he speaks in an easy conversational tone. The interviewer establishes that he wants to talk about a trap at the creche. Peter would push kids down it: it led to Room 20: he has seen the room recently. This happened "when I was about four". Peter's mother would hang them up from hooks on the ceiling in cages. Various children had burning paper and sticks placed up their bums. At this point, the interviewer interjects "are these things that really happened or things that you think might have happened?" X says they really happened. There was another trap in the Womble area: a little ladder and tunnel. Room 20 was entered by a secret door. You went up a ladder through a secret door to get to Gaye's office: "most of the creche" knew about this secret way. Peter's mother kicked them: that was how he got this big bruise on his leg; when challenged he turns it into a joke. The interviewer asks "Is there any other stuff that you've been telling that's not true?" X says no. Robert took photos with a video camera. Other named kids had sharp sticks and burning paper on their bums and various creche staff were involved and he produces a list of names when requested. The interviewer asks "Where does the trap go?" and X says "It just goes in the ground and I've been watching the news lately and I've heard the police have found it".

40. These later videos show a gradual spiral into more elaborate allegations embracing a wider and wider circle of helpers and teachers at the creche. A child may disclose more information over a number of interviews as trust is established between interviewer and child and the effect of any threats or prohibitions made by the abusers) weaken. However, such elaboration may have other causes of the kind highlighted in the earlier sections: repeated requests to recall may lead to construction of nonfactual accounts, with the young child unable to distinguish between their retrieved memories, self-generated imagery and content derived from other, later sources. In X's case, it emerged at trial that all the video sessions were preceded by extensive discussions with his parents, who admitted to asking him very direct, but not leading questions. This was contrary to the advice they were given at the first briefing session and that there was also contact with other parents and notes were compared. It is also accepted that X was taken to various addresses, perhaps in an effort to jog his memory. The addresses certainly figured in his subsequent interviews, but not in ways which increased the credibility of the accounts. He also seems to have followed developments on television news or at least heard or been questioned about them: his last interview seems to have been triggered by the news of police investigation of trap doors at the nursery. Some themes from his earlier videos reappear in the later ones: the grey car; the burning paper and sticks up bums; strangers who hurt children. The only new themes concern the 'circle game', the presence of secret passageways and the hanging of children in cages from the ceiling. Clearly, the police investigation explored carefully the creche and other named properties with these allegations in mind and certain traps and air spaces were found at 404 Hereford Street and the creche. This might be construed as broadly consistent with some of X's allegations, but no forensic links could be established between these areas and Mr Ellis or the children involved. Other explanations need also to be considered. Secret passageways are the stuff of children's fiction (interestingly, they also figured in the testimony of children in the McMartin case, referred to earlier) and cages containing children might reasonably be traced to a similar origin. However, the circle game, with its quite detailed description, is an unusual theme, which I would be at a loss to explain in purely fictional terms.

41. R. R was interviewed three times by Sue Sidey over a six month period. R was 5 years 6 months at the start and just 6 years old at the end. Interview 1, which took place on 3.4.92., lasts just under an hour. It is evident that R has not been briefed by his parents as the focus of the interview, but he guesses the creche. They sit on the floor and as they speak, he and the interviewer build a schematic layout of the creche: the use of models to stimulate recall is an acceptable forensic practice with children of this age and can benefit recall, provided it is not linked to suggestive questioning (Davies & Westcott, 1999). It does, however, take some considerable time. R mentions that "mean things" happened at w-: creche, that "Peter said I'd die if you tell" which he now realises was a trick. In response to a specific prompt ("what's the other mean things that you told" (your mum and dad)) he says that (Peter) "did wees in people's faces" and this happened "quite a lot". This happened when the child was sitting in the toilet (he demonstrates this with a model). It seems he was present when this occurred, but he can't remember or is reluctant to tell, who was involved ("because I've just forgotten"). He says he feels angry about Peter, but seems unwilling to talk about any personal involvement. Eventually the interviewer asks another direct question ("I heard that you told mum that Peter had done something mean to you as well") and he then says specifically that Peter did wees in his mouth; he elaborates on this, in response to a series of direct questions: a little went in his mouth and it was "yucky"; Peter was standing up with his pants and undies around his ankles. It happened one time. He claims he told Debbie and that she had told a policeman.

42. This interview is conducted in an orthodox manner and departs from the ideal only in the interviewer's use of prompts concerning what R had told his parents. The danger with this approach is that the child recalls what s/he said to the carer, rather than what actually occurred. It could, however, be justified on this occasion, by the information elicited. The interview is a little on the long side for a child of this age, but R shows no obvious signs of distress or distraction. R is reasonably consistent, but occasionally contradicts himself in response to direct questions. For instance, as regard what happened at the park, R first says nothing happened, then he says the "things with the penis" happened at the park and the creche. The interviewer checks this with a leading question to which he

accedes, but after careful follow up questioning, he says nothing happened at the park. In general, I believe the interviewer did a good job in elucidating R's main complaints and following up any apparent contradictions.

43. Interview 2 with R takes place just over three weeks later and is just over a half hour in length. The setting is more formal with R and the interviewer sitting at a table drawing. The first part of the interview recapitulates some of the allegations made in the previous interview. His allegations are consistent with the previous interview: he still refuses or can't remember any other names beyond L. He saw it happen "looking through the toilet doors". R is again reluctant to talk about his alleged personal experience and the interviewer has to again refer back, this time to their previous interview, to get him to recapitulate his allegation about Peter weeing in his mouth and the answers he provides are consistent with those from interview 1, except that he can't or won't now remember which helper he told. Later, he says he told a helper on two occasions and that the policeman was only told the second time. There is a great deal of repetition of questions in this interview. Repeated questions can be a problem if the child takes this as a signal that the first answer was unsatisfactory or inadequate and that a different answer is desired. However, this does not occur on this occasion and R repeats his answers in a generally consistent way.

44. Interview 3 takes place some 6 months later and lasts just under an hour. R appears very composed and mature for his age. Again, they sit in front of a low table facing the camera. He has come back "to talk about the things and Peter". He has "got lots of things to tell" about Peter's behaviour in the Cranmer Centre. A follow up question then elicits a long statement from R, alleging that Peter had used a ladder to creep into another room where "mean things" took place. These included poking sticks up kids bottoms; he saw it happen and Peter did it to R; L was there. There were other men and women present, black as well as white, some with funny haircuts; their names were Spike, Boulderhead, Yuckhead and Stupidhead. He gives some details about the layout of the building: he claims to have gone on to the roof "every day". At one point, the interviewer reminds R to be sure to say he doesn't remember, rather than make things up-this would have been better said at the beginning. In response to specific questions, R adds a number of details about the stick incident: the sticks were sharp and yellow; he had to keep his in his bottom most of the day; it happened six times and Peter used the sticks to wipe poos on them. In response to a question, R says Peter put his finger in his bottom. As the interviewer returns to the details of the building, R shows increasing signs of restlessness and a wish to terminate the interview. More specific questions are asked which R answers. One illustrates the danger of too many specific questions, especially to a tired child recalling an event from the distant past (Int: "Were did they get their clothes from?" R: "Um, supermarket they bought them" Int: "Just tell me things you remember, okay?"). After further attempts to elicit more details and names, the interview is terminated.

45. The allegations that R makes in this late interview have clear parallels with those made by X. Such a parallelism is either independent corroboration, an example of contamination or elements of both: only careful scrutiny of the timing of the interviews and contacts between the families will answer this question. Certainly, in both X and R's account, there are some implausible elements (the claims about the sticks; keeping them in his anus all day). It will also be important to check X's and particularly R's account against the known architecture of the Cranmer Centre. An accompanied visit to the Centre seems to have occurred, but before the critical interview, rather than after it, which again leaves open the possibility of accounts being fueled by new information. It is not clear, why X or R left matters so late before describing the alleged incidents involving groups of adults. According to their earlier accounts, they had both been threatened by Peter about what would happen if they told-and both told the interviewer about this at an early stage. What motive could there be for such delayed disclosure? In these circumstances-and in the absence of an alternative explanation or external validation-there is a very real risk that large elements of the incident involving adults could be unreliable, driven by repeated requests to recall, the negative stereotyping of Mr Ellis, the conflation of separate and unrelated events and the sharing of information between families. Despite quite intensive questioning, R fails to produce many features of accurate accounts as reflected in CBCA criteria: there is a lack of spontaneous or distinctive detail, other than that elicited from focused questions. The events seem to occur in some parallel universe, divorced from the known routine of the creche. As mentioned elsewhere, the most reliable accounts from young children tend to be those which occur early on, before the opportunities for elaboration and contamination of the kind mentioned above have had the opportunity to occur. I think this is well illustrated in the contrast in R's evidence between the content of interview 1 and interview 3.

46. Z. Z was interviewed six times, all by Susan Sidey, between 27.2.92. and 29.10. 92. Z was 5 years 6 months at first interview and 6 years 2 months by the final interview. The recording quality is excellent and both participants are audible, despite Z's soft voice. Interview 1 lasts 45 minutes; the interviewer and Z sit on the floor while Z plays with a conventional doll as she talks: playing while talking is a good method with children of this age who can find a formal interview situation oppressive, provided that there are not so many toys as to be distracting (Davies and Westcott, 1999). Peter is introduced by Z ("I want to say something about Peter") during truth and lies: Z seems to have a rather uncertain grasp of the formal distinction, but says twice that she "always tells the truth". Z says in response to an open question ("What did Peter do that was nasty?"), Z says "He used to show me his penis in the toilet" Later she says "it stuck out from, in the side of his body...Peter used to move it up and down and stuff but we didn't like that". Soon after, she spontaneously demonstrates the movement on a toy baby's bottle. "Some very

nasty things" happened to Q and P. When the interviewer asked how she knew that, she replies "cos I was watching. I tried to help the little children but they didn't believe me". Later she expands on this and says, with some emphasis, that she had told Marie, who had not believed her. Later she adds that Q and P "used to suck his penis". After 15 minutes, she begins to get restless, asks for a play break which the interviewer accommodates. When the interviewer asks whether Peter's penis went into anybody else's mouth, she replies "in my mouth", adding that it "feeled rough" and "baby stuff came out of it". Later questioning reveals that Mummy has told her about "baby stuff" adding that "me knew the colour and it was plain white". She says that it happened "lots of times"; "only on Mondays and Fridays". Later, she points to the mouth of a doll when asked where Peter's penis went. When asked "where did you get that sick feeling?", Z says "when I got that stuff in my mouth". She says that his penis did not touch her elsewhere. She demonstrates this again with miniature dolls; the demonstration is not clear from the tape, but the interviewer comments "so he put the penis in your mouth". Later she adds that this happened in the "kids toilets" at nursery. Later, the conversation moves to Peter's walks with the children; when asked whether anything she didn't like happened, Z says "No". After more play, the interviewer asks whether "anyone ever told you not to tell or not" to which Z replies "No. Yes. Mum, I said that to my Mum", adding that "he would hurt me and that he would burn his, my parents up". The interviewer returns to touching and Z responds by indicating her groin area and saying "he only touched me here"; when asked, she says it was with his penis. Z shows increasing signs of wanting to terminate the interview (earlier she has complained of feeling sick). The interviewer suggests she may have to come back another day and closes the interview.

47. Interview 2 takes place a day later and lasts 40 minutes. It begins with an extended play session lasting around 25 minutes, at the end of which, the interviewer introduces a pair of anatomical dolls. Z remarks that yesterday she didn't like it here because "it was really a bit too long" (hence the extended play in this session?). The doll's vagina triggers a discussion of Peter having seen her vagina in the toilet. Z mentions Peter's penis and the interviewer asks her "What did his penis see, er do?" In response to an options posing question, Z says Peter's penis was "hard" and to a later, forced-choice question, it was "standing up". Initially, there is some ambiguity as to whether he touched Z with his penis above or below her clothing; later she demonstrates with the dolls and says "yeah" when the interviewer comments "so it went underneath your pants" and when she poses the alternative "Or over the top?" she replies "underneath".

48. The third interview took place three weeks later and followed further discussions with her mother and lasts approximately 35 minutes. Z by now knows the score and interrupts the preliminaries saying "I know a lot of things to do with Peter". The use of 'know' in this context may be significant in that it may not imply first-hand knowledge. She now says Peter took her to his house and they begin to construct a schematic layout of the house with toys (this could be checked for accuracy). When asked "what the worst thing he did to your body?" she says "touching it" and further questions cause her to indicate that he touched her bottom. However, it is not clear whether she is talking about at the creche or Peter's house here. She repeats the allegation again later, adding "everyday" at creche (as indicated earlier, children's estimates of frequency at this age need to be treated with considerable caution). It is clear that she is now definitely talking about the creche. She then repeats her earlier allegation about Peter putting his penis in her vagina, adding under questioning that her own underpants were off and on the floor. Given options by the interviewer, she says she was kneeling and Peter standing up. A little later, she says she was standing too. The interviewer queries this and Z insists that this is correct. The interviewer then fetches first a pair of miniature dolls, then a pair of larger, anatomical dolls. Z clearly juxtaposes the dolls, such that the penis of the male doll is placed in the anus of the female. However, she now says that she was standing up and he was lying down. Z then requests a break, which is given and soon after, asks to go home. There is some more play before the interviewer introduces the topic of Peter once more, but Z evades the question and the interviewer draws the interview to a close.

49. These three interviews contain clear allegations against Mr Ellis concerning events in the creche. It is difficult to see how these could have arisen as a result of defective interviewing practice. The interviews are, in my opinion, generally well conducted, though there is some leading by the interviewer at critical points. The use of anatomical dolls is appropriate, given the age of the child and they are not accompanied by suggestive questioning. As with a number of the other children, the crucial question concerns the origins of the allegation: is Z talking about a personal experience or relating a coached story? Z has certainly talked to her mother about the allegations in the recent past and this was confirmed at court. The fact that she broaches the topic herself so early on in two of the three interviews is an indication that she has been made aware of the agenda. Her use of adult terms like 'penis' and 'vagina', may also reflect conversations with her carers. In interview 2, she mentions talking to her mother twice, once in relation to the "baby stuff" remark, which clearly reflects adult input. However, the allegations, though vague in some details (the exact position of herself and the accused: who was sitting and who was standing) are plausible, reasonably detailed given the presumed age of the memory, consistent and plausibly enacted with dolls. Much of it does not arise from the kind of specific questions which characterise some other interviews. Given existing research on coaching, it is hard to see how such an account could have arisen from this source alone.

50. The fourth interview takes place just over a week later and lasts around 40 minutes. Z takes the interviewer through the preliminaries, after which the interviewer leads "I know you have been to some places with Peter. Where are all the places you've been with him?" There are references to Peter's car: "Peter hasn't got a flash car ....he has a white one like this" (it emerged at trial that Z had seen a white car on TV featured in a news report). Later attempts to elicit more information on 'Peter's car' are unsuccessful or diverted by Z. When pressed by the interviewer as to where Peter went with her, Z says that he took her "Nowhere else just to the beach and Willowbank", but the interviewer insists "Because I think you've told that you have been to his house before" (reference to an exchange in interview 3). Z says "OK, what I'd like to do is make Peter's house". She goes on to say that Peter lives alone and has "lots of friends, bad friends" but when she asks how she knows (a shrewd question) replies "because mummy told me". The interviewer asks what his friends were doing and Z says "showing the penis and 'gina". She is invited to name Peter's friends and gives some names and in response to a series of direct questions says that "Joseph... teased me with his penis". The interviewer is interested in Joseph but Z keeps returning to Peter. A further request for names produces more names. When asked a direct question ("how many other big men's penises have you seen?") she replies "lots" but then adds "but not as many". There follows a confused passage where the interviewer tries to elicit more detail and it is unclear whether Z is talking about Peter or the "other men". There is a short break as Z is showing signs of restlessness, before a renewed attempt to obtain more information on 'Joseph', but Z gives nothing of significance: for instance when asked how often Joseph's penis touched her, she replies "Only once, every day he did different things", but when asked what 'other things', she replies "Nothing else". Shortly afterward, the interview is brought to a close.

51. There is nothing in this interview which convinced me that Z visited Peter's house or was assaulted by a man called Joseph. It begins in confusion: the first exchanges make it unclear whether Z is talking about what she has personally experienced or what her mother has told her (signified by the use of 'know' as opposed to 'remember'). At one point, she says Peter took her to the park and Willowbank only, but the interviewer presses her on her visit to his house. As I noted above, it was not clearly established in interview 3 that Z had actually visited Peter's house and most of her comments referred to activities at the creche. The interviewer then asks her to name the people involved and she twice provides a list of names, but this could simply be a response to the demands of the question, rather than having any basis in reality. All subsequent information is derived from forced-choice or direct questions and there is no supporting detail or spontaneous comments of any substance. In one revealing passage, the interviewer wants to talk about Joseph, but Z continues to bring the conversation back to Peter. In conclusion, I felt that the solid evidential content of this interview was minimal and there was some confusion by both parties. A visit to Peter's house may have occurred, but this was not satisfactorily established in this interview.

52. Interviews 5 and 6 took place 7 months later on consecutive days: 28 and 29.10.92 respectively. Interview 5 lasted about 40 minutes and interview 6 barely 20 minutes. At the start of Interview 5, Z announces "....my mum said I don't have to do too much tacking because I haven't got much things to tell you". Later she says she wants to talk about "Peter's friend and people who hurt you... and about Peter's mother". "Peter's friends touched me in my private places and I didn't really like it and hit me". The interviewer cautions Z to tell her if she can't remember and that it is better to say this than make things up. New names are mentioned by Z (not the ones mentioned in interview 4) including 'Andrew'. The interviewer tries unsuccessfully to get Z to describe Andrew. Z says Andrew hit Z and touched her vagina with a knife. This happened when Peter and his other friends were present, but later she says it took place in the toilets at the creche: she doesn't know why Andrew was there. She cannot describe the knife beyond saying it was "very, very sharp". Later, she says the friends "had gone away" and only Peter was there and he laughed. The interviewer presses Z to describe the friends and when she does not, she cautions her about only telling what she remembers. Later the issue of the knife is revisited. Z repeats the allegation, but now in relation to Peter ("I only know that Peter has"): it was at the same time as Andrew. Z can say little about Peter's mum ("she had grey hair"): "she just kicked me and hit me like this". According to Z, this happened 17 times and Marie, Gaye and Debbie, helpers from the creche, were present. Later the interviewer asks "What's it feel like having to remember these things?" and Z replies "Not very good, but I can't remember anything much now". When the interviewer pursues the location of this alleged assault, Z says "I can't remember at the creche, I said that a million times... That's all I can remember Sue". Z wants to terminate the interview and after a further question, the interview is closed.

53. Interview 6 starts again the following afternoon. Z says defensively "she told the truth yesterday". The interviewer invests sometime in trying to elicit from Z a clear distinction between truth and lies. Z says "I haven't got much to tell you", but makes a fresh allegation against Gaye, claiming that she touched her on the bottom (later her vagina) with a knife at creche. Gaye had asked her to take her clothes off Later Z is asked whether "anyone else has put a knife on her vagina before, she replies "No". This seems to contradict what she has alleged in relation to Andrew and Peter. The interviewer again asks about the knife, but Z can only describe it as "a normal sharp knife". Later, the interviewer again asks about other people who touched her vagina with a knife. Z is getting increasingly restless. At first she says "I can't remember" but then repeats her allegation against Andrew and Peter. The interviewer asks whether the allegation against Gaye really happened and Z does not answer; the interview concludes shortly afterward.

54. In my view, these two late interviews subtract from, rather than add to Z's credibility as a witness. The allegations are not accompanied by any clear details, the locations of the incidents are unclear and she appears to be inconsistent regarding who and what was involved. The interviewer, does a good job in elucidating the inconsistencies in these allegations, through open-ended questions; her gentle remonstrance to Z to stick to what really happened indicates that perhaps her own sense of the credible is being strained. I am not surprised that these two tapes were not used at trial. They do not, however, in my opinion detract from the earlier allegations, made some months before, in interviews 1, 2 and 3 against Mr Ellis concerning incidents) in the toilet at creche, for reasons I have given above.

55. What conclusions can be drawn from this review of the content and conduct of the children's interviews and, more widely, of the methods used in the investigation? I will confine my concluding comments to four main issues which I believe are central to consideration of the children's testimony:

- The age of the children and the age of the memories
- The style and quality of interviewing assessed against current standards
- The bizarre elements in some of the accounts
- The risks of contamination

56. The age of the children and the age of the memories The first point to make is that these are very young children recalling events which allegedly occurred to them a year or 18 months previously. Even though all of the 6 children who are the subject of this review come across as bright and alert in their interviews, they cannot be expected to provide the kind of detailed and spontaneous accounts which are so useful from the point of view of making judgements on reliability. Young children forget events more rapidly than older children or adults. Accounts will inevitably be schematic and some prompting will probably be necessary to elicit even the most basic details: we cannot and should not expect a vivid and detailed account in these circumstances and nor in general do we get one from any of the children. On the other hand, we should expect (following CBCA) to be able to fit the jumbled pieces of the child's narrative together to form a coherent account which is consistent with the known events in the child's life, those of significant players in the story and the setting and movements should correspond to documented reality. Judged by these criteria, I suggest that this is much easier to fulfill this for the alleged events at the creche, than for those incidents which allegedly occurred at locations away from the creche. All the children reviewed chose to tell about events at the creche in their first interviews and some, when asked, explicitly denied that Mr Ellis had done anything untoward on any walks or visits outside of the creche. Virtually all the allegations concerning events outside the creche emerged in later interviews, often after considerable delay. It is evident that this made for an even longer delay between the original events and recounting them and gave even greater opportunities for cross-tack between families and their children. Of course, as I have noted earlier, such a delay could have been due to a reluctance by the children to discuss the matter earlier, born of personal shame and the threats which the children said they received from the alleged abuser. This possible explanation would have added credibility if the investigation turned up any positive proof that the children had indeed visited Mr Ellis's house or indeed any of the other locations with him (there is some supporting evidence, e.g. Tronson's deposition regarding 404 Hereford Street). Likewise, if they displayed privileged knowledge, which they would have been unlikely to have acquired other than through such a visit. Conversely, evidence that such visits were physically unlikely to have taken place—for instance because of the distances involved or the lack of access by Mr Ellis to a vehicle—would be likely to reduce the credibility of the allegations.

57. The style and quality of interviewing assessed against current standards As I have noted, the interviews were conducted before the introduction of national standards for interviewing. However, judged by today's standards, the quality of interviewing stands up surprisingly well. There is an attempt to set ground rules during the rapport stage (in hindsight, the necessity of children to tell only what they remembered and to make explicit the 'don't know' option could have been more heavily emphasised from the start), to minimise suggestible questioning and use open-ended questions whenever possible. There are few of the gross violations of interviewing practice of the kind recorded by Bruck and Ceci(1995) in the Michaels' case. Children are not fed tidbits of information from other children (though the use of the same interviewer for all but two of the interviews left open this possibility). Children are not refused breaks until they tell what the interviewer wants to hear, though some of the interviews do go on too long in my opinion and requests for the children to see their carer or to terminate the interview are on occasion temporarily set aside. It is noteworthy that some of the more bizarre and inconsistent claims tend to occur toward the end of long interviews. Children are sometimes asked leading questions or referred back to earlier allegations made by them; most Codes of Practice strongly discourage the former, but allow the latter. Of more concern, in my view, is the frequent use of direct, closed or multiple choice questions in some interviews, where the age of the child and age of memory would be unlikely to provide an accurate response. Such questions can produce accurate information where the witness's memory for the event is vivid and detailed. However, as Waterman's work (2000) has shown, where there is no memory as such, closed questions can produce answers, particularly from young children, which have no correspondence to reality. A young child's readiness to answer such questions could prompt the interviewer

to ask further questions of this type. I hasten to add that this is not a fault unique to these interviews: many studies have reported a preponderance of direct as opposed to open-ended questions in investigative interviews (e.g. Davies, Westcott and Horan, 1999). If there was one major weakness in the investigation, it was the sheer number of interviews that some children underwent over an extended time period. Most Guidelines recommend one, or at most two interviews per child, though the new Guidance currently being developed in the United Kingdom does acknowledge that very young children of the kind involved in the current investigation may require a number of shorter interviews conducted over a limited time period. The risks of suggestible responding with spaced multiple interviews have already been documented, in particular the adverse effect of repeated questioning concerning one key incident. One can sympathise with the interviewers. They were dealing with very young children: this fact alone might have pointed to the need for a number of shorter interviews rather than a single long interview. However, in my view it did not justify interviewing the child again after a delay of anything up to 6 or 7 months. I can also appreciate they were under some pressure from parents and carers, but based on my reading of the case material, little of value came out of these late interviews: they tended to devalue the earlier interviews given by the children. In sum, while mistakes were made (hindsight is a wonderful thing), the general standard of interviewing was good and exceptional for the time the interviews were made, particularly given the age of the children interviewed. Mistakes were made, but these were insufficient in my view, to explain the content of the allegations made by the children, particularly regarding events at the creche. As regard alleged events outside the creche-on walks, at Mr Ellis's house and elsewhere- the repeated use of specific questions, sometimes after initial denials that anything untoward had occurred, may have contributed to confabulations by some witnesses, though as I have noted, both X and S provided plausible accounts of outside events, which could not readily be attributed to undue prompting or inappropriate questioning.

58. The bizarre elements in some of the accounts All but one of the accounts contains material which could be regarded as bizarre or fanciful. Such evidence may be merely implausible or incredible. Among the implausible elements are the accusations of group sex made against the creche workers and children being placed in an oven or hung from cages in the ceiling. As the West and Detroux cases demonstrate, nightmarish happenings can occasionally occur, but their frequency is fortunately very low indeed and accordingly, strong and convincing corroboration would be required, beyond the simple accusation of an eyewitness, whether child or adult. By incredible accusations, are meant those which defy the laws of nature or at variance with the known facts. In this category I would place such accusations as needles being placed in children's penises or vaginas and of a child being forced to stay all day at the creche with a sharpened stick in his anus. Even supposing this were possible, abuse of this kind would be likely to be readily detected by carers. While I understand medical evidence consistent with sexual abuse was found for three of the children, there were no indications to support the view that any of the children whose interviews I examined had signs of injury consistent with physical abuse of this kind.

59. If it is accepted that at least some elements of a child's accusations are unbelievable, where does this leave the more credible elements? In terms of law, such bizarre material is bound to decrease the credibility of a witness in the eyes of a jury. However, some pilot research on young children in abuse cases suggests that such bizarre material can crop up in their evidence alongside telling and accurate testimony: the presence of bizarre elements is not in itself proof that the whole of the child's testimony is tainted (Everson, 1997). Dalenberg (1996) examined the testimony of a sample of 644 children involved in sexual abuse investigations of whom 2% included fantastical elements in their testimony. Rates of inclusion of such material were no higher among a group whose testimony was corroborated by confessions or medical evidence compared to the evidence of those where corroboration was lacking. The highest rates of inclusion of bizarre material was among the youngest children and those suffering the most severe and prolonged abuse.

60. The risks of contamination A major concern in this and in all investigations involving abuse allegations within groups of all ages is that witness's evidence will be contaminated by discussion between them or their carers. According to the agreed timetable, Mr Ellis had been suspended in the previous November and Susan Sidey had already conducted a number of interviews with children in December which had failed to turn up any statements consistent with abuse. It is not possible to comment on the content or conduct of these interviews in that, with one exception, no tapes of them were submitted as evidence. In any event, I am satisfied that the investigators were aware of the risk of contamination and at the meeting on March 31, warned parents of this danger and of using direct and leading questions with their children (see Ms Crawford's evidence). Unfortunately, this warning probably came too late for some parents: despite the good advice provided at the meeting on March 31, some parents readily admitted in their anxiety to find out what, if anything, had happened to their children, they pressed them for information subsequent to and perhaps prior to the March meeting, using precisely the procedures which they had been warned against. As I have noted, there is certainly indications in the transcripts of the video-recorded interviews that children had discussed matters with their parents in varying degrees: only one of the 6 children seems to have turned up at their interview apparently entirely unbriefed as to its purpose. Such consultation between parent and carer does not in itself invalidate evidence: if every witness, whether adult or child, who had discussed the content of their evidence with a loved one prior to trial were excluded from testifying, there would be precious

few trials. Nor are one or two leading questions alone likely to change radically the perspective of the testimony of even a small child. Of more concern, is cross-talk between families, against a background of persistent accusation against a suspect. In my analysis of the tapes, I have already indicated that some of the more improbable incidents reported by two or more children may have their origins in such cross-talk. I am also satisfied that the unsupervised visits of children to various locations of alleged events may also have coloured the accusations made in the later interviews. Careful scrutiny will be required of the timetable to establish which parents and children were in contact at what times and how this relates to the information provided at interview. In conclusion, I should add that I do not think that cross-talk alone is sufficient to explain the similar accusations made against Mr Ellis, particularly in relation to incidents in the creche toilets. This is more redolent of natural variations on a theme, rather than the simple glib repetition of basically the same accusation relayed between a number of children. There is a degree of detail in some of these accusations which is not in itself proof of the charges against Mr Ellis, but does mean, in my view, that such accusations deserve to be taken seriously. They need to be studied in the wider context of the investigation. For instance, do the toilet facilities at the creche correspond in their layout and construction to those described by the children? Did the physical layout of the creche afford sufficient privacy to ensure that abuse of the kind described by the children could have taken place? Where children specify that other children were present, does the evidence of these children corroborate their allegation? These are issues which are beyond my remit, but which the wider inquiry will wish to consider.

Graham Davies  
4 January, 2001

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## **Criteria-based content analysis (CBCA)**

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### **General characteristics:**

- (1) Logical Structure Is the statement coherent? Is the content logical? Do the different segments fit together? (Note: Peculiar or unique details or unexpected complications do not diminish logical structure)
- (2) Unstructured Production Are descriptions unconstrained? Is the report somewhat unorganized? Are there digressions or spontaneous shifts of focus? Are some elements distributed throughout? (Note: This criterion requires that the account is logically consistent.)
- (3) Quantity of Details Are these specific descriptions of place or time? Are persons, objects, and events specifically described? (Note: Repetitions do not count.)

### **Specific Contents:**

- (4) Contextual Embedding Are events placed in spatial and temporal context? Is the action connected to other incidental events, such as routine daily occurrences?
- (5) Interactions Are there reports of actions and reactions or conversations composed of a minimum of three elements involving at least the accused and the witness?
- (6) Reproduction of Speech Is speech or conversation during the incident reported in its original form? (Note: Unfamiliar terms or quotes are especially strong indicators, even when attributed to only one participant.)
- (7) Unexpected Complications Was there an unplanned interruption or an unexpected complication or difficulty during the sexual incident?
- (8) Unusual Details Are there details of persons, objects, or events that are unusual, yet meaningful in this context? (Note: Unusual details must be realistic.)
- (9) Superfluous Details Are peripheral details described in connection with the alleged sexual events that are not essential and do not contribute directly to the specific allegation? (Note: If a passage satisfies any of the specific criteria 4-18, it probably is not superfluous.)
- (10) Accurately Reported Details Misunderstood Did the child correctly describe an object or event but interpret it incorrectly?
- (11) Related External Associations Is there reference to a sexually-toned event or conversation of a sexual nature that is related in some way to the incident but is not part of the alleged sexual offenses?
- (12) Subjective Experience Did the child describe feelings or thoughts experienced at the time of the incident? (Note: This criterion is not satisfied when the witness responds to a direct question, unless the answer goes beyond the question.)
- (13) Attribution of Accused's Mental State Is there reference to the alleged perpetrator's feelings or thoughts during the incident? (Note: Descriptions of overt behaviour do not qualify.)

### **Motivation-Related contents:**

- (14) Spontaneous Corrections or Additions Were corrections offered or information added to material previously provided in the statement? (Note: Responses to direct questions do not qualify.)
- (15) Admitting Lack of Memory or Knowledge Did the child indicate lack of memory or knowledge of an aspect of the incident? (Note: In response to a direct question, the answer must go beyond "I don't know" or "I can't remember".)
- (16) Raising Doubts About One's Own Testimony Did the child express concern that some part of the statement seems incorrect or unbelievable? (Note: Merely asserting that one is telling the truth does not qualify.)
- (17) Self-Deprecation Did the child describe some aspect of his/her behaviour related to the sexual incident as wrong or inappropriate?
- (18) Pardoning the Accused Did the child make excuses for or fail to blame the alleged perpetrator, minimize the seriousness of the acts, or fail to add to the allegation when the opportunity occurred?

## **APPENDIX B**

### **GRAHAM MICHAEL DAVIES**

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**DATE OF BIRTH:**

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**PRESENT POSITION:**

Professor of Psychology  
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**PREVIOUS POSTS:**

1987-89 Professor and Head of Department of Psychology, Polytechnic of East London  
1977-87 Senior Lecturer in Psychology, Aberdeen University  
1967-77 Lecturer in Psychology, Aberdeen University

**QUALIFICATIONS:**

BA. (Hons) Psychology, 1964  
PhD, 1970  
FBPsyS, 1983  
Chartered Psychologist, 1988  
DSc, 1990  
Chartered Forensic Psychologist, 1993

**RESEARCH GRANTS AND CONTRACTS:**

Grants from SSRC; ESRC; Home Office Research Department; Home Office Scientific Research and Development Branch; Scottish Home and Health Department, Home Office Research and Planning Unit. Grants have dealt with various aspects of eyewitness testimony and identification in adults and children, e.g. (1) Photofit system; (2) Fundamental research on face identification processes, (3) Children as Witnesses, (4) Training in and evaluation of investigative interviewing, (5) Facilitating children's evidence at court (6) producing new guidelines for the interviewing of children and other witnesses in criminal proceedings.

**PUBLICATIONS:**

Include:

Perceiving and Remembering Faces (Academic Press, 1981); Identification Evidence: A Psychological Perspective (Pergamon, 1982); Memory in Context (Wiley, 1989); Child Witnesses: Do the Courts Abuse Children? (BPS, 1989); An Evaluation of the Livelihood for Child Witnesses (Home Office, 1992); Memory in Everyday Life (Elsevier, 1994); Videotaping Children's Evidence: An Evaluation (Home Office, 1995). Child Abuse: Training Investigating Officers (Home Office, 1998) and Interviewing Child Witnesses Under the Memorandum of Good Practice: A Research Review (Home Office, 1999). Over 100 articles in refereed journals

**CONSULTANCIES:**

National Science Foundation (USA) Law and Social Sciences Program; British Section of the International Commission of Jurists; Erickson Institute, Chicago, Illinois; Home Office Working Party on Children's Evidence; Lord Chancellor's Department Working Party on Therapy for Child Witnesses in Legal Proceedings; British Council (Child protection procedures in the Kingdom of Jordan)

**OVERSEAS PROJECT EXPERIENCE:**

Spain: Acciones Integradas link with the Tenerife University. Italy: Erasmus Student Exchange: University of Padua. Canada and Germany: NATO Collaborative Award: with Victoria University, the University of British Columbia and Keil University, for research on the application of Psychology to the training of Police officers. Invited study visits to Australia, Sweden, Holland and the United States to discuss research and advise Government agencies on provisions for child witnesses.

**PROFESSIONAL INVOLVEMENT:**

British Psychological Society: Division of Criminological and Legal Psychology: Chair, 1992-95  
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**RELEVANT PUBLICATIONS IN LEARNED JOURNALS:**

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# APPENDIX C

## MINISTERIAL INQUIRY

### "Ellis Matter"

PERSONAL THOUGHTS
INTRODUCTION
CHILD SEXUAL ABUSE WITHIN MULTI-VICTIM MULTI OFFENDER CASES
CARRYING OUT INVESTIGATIONS IN MULTI VICTIM MULTI OFFENDER CASES
THE ISSUE OF CONTAMINATION
THE ELLIS INVESTIGATION
DEVELOPING A PROTOCOL FOR INVESTIGATIONS IN MVMO CASES
SUGGESTED BEST PRACTICE MODEL FOR THE PRE-INVESTIGATION STAGE
SUGGESTED BEST PRACTICE MODEL FOR THE INVESTIGATION STAGE
"HOW TO APPROACH THE TOPIC OF SEXUAL ABUSE AND WHAT TO SAY IF YOUR CHILD DISCLOSES"
(A HANDOUT FOR PARENTS)
DEALING WITH PARENTAL INTERFERENCE
INTERVIEWING CHILD COMPLAINANTS IN MVMO CASES
BEST PRACTICE MODEL FOR INVESTIGATIVE INTERVIEWS
INTERVIEWER CHARACTERISTICS
INTERVIEWING CHARACTERISTICS
ASSESSMENT OF RELIABILITY OF THE EVIDENCE IN RESPECT OF THE CHILD COMPLAINANTS RESULTED IN CONVICTIONS
CHILD Z
CHILD R
CHILD O
CHILD Q
CHILD S
CHILD X
CONCLUDING REMARKS
REFERENCES

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### Personal Thoughts

It struck me last night as I began to write this report, that when all is said and done nearly a decade will have passed since the first child's disclosure and the beginning of the "Ellis" investigation. The magnitude of the impact on everyone involved has not escaped me. My role of providing a clinical opinion so many years after the fact on whether or not there were features of the investigation and or the interviews of the children which may have affected the reliability of the children's evidence and impacted on the convictions at trial, is testimony to the highly conflictual views that existed then, and still exist today alive with respect to what happened at the Civic Creche, and how the matter was investigated.

The discovery of child sexual abuse affects us all deeply, and the personal costs of investigating and prosecuting child victimization is high for everyone involved. I have no doubt that this was particularly true for the individuals who were swept up in this experience. I have spent over seventy hours viewing the videotaped child interviews, reading and rereading the evidence proffered at the depositions hearing and at the trial. I feel as though I have been transported back in time, totally immersed in this case as a silent observer. I have given great thought to this report, and appreciate its importance. I hope that what I have to offer in the way of an opinion is helpful in this inquiry, and provides insight into methodology and procedures which will be of assistance in the future with similar cases of such dimension.

Louise Sas  
February 23, 2001

# INTRODUCTION

## Child Sexual Abuse within multiple victim multi offender cases

Multiple victim child sexual abuse is defined as the sexual abuse of numbers of children by the same offender or by a group of offenders. In such cases, the abuse typically spans many months or even years and frequently victimizes children from many different sectors of a community. There are a number of different types of multi victim cases that have been identified in the clinical literature. Although the types are not necessarily always mutually exclusive, it is important to appreciate their particular characteristics.

Residential abuse is defined as a pattern in which abusive activities are focussed within institutional and residential schools where children and offenders reside together. In Canada there have been a number of notorious residential abuse cases, the most highly publicized case is the abuse of young boys in the early 1970's by Christian brothers in Mount Cashel Orphanage in Newfoundland (Hughes, 1991). This case came to light in the last ten years.

Abuse within the context of a sex ring is yet another type which has been well described by Burgess and Grant (1988) in their evaluation of children traumatized by sexual exploitation. Their analysis determined that this pattern of abuse involves many distinct levels; "solo rings" in which there is one offender and a series of victims; "transition rings" in which there are multiple offenders and multiple victims and the exchange of children and pornography; and finally "syndicated sex rings" which are organizational structures that recruit children, produce pornography, deliver sexual favours, make a profit, and have an established network of customers, many of whom come from a long distance.

As a researcher in "Project Guardian" (Sas, and Hurley, 1997 ) which was a multi victim multi offender case in London, Ontario where I live (60 young boys aged 8 to 17 and 80 adult male offenders), I developed an understanding of how child sexual abuse is perpetrated within the context of sex rings. I also learned how difficult it is to conduct an investigation of such proportions. I discovered that dealing with the media hype surrounding Project Guardian, the challenge of interviewing reluctant victims who did not want to disclose despite being captured on pornographic videos, and the task of organizing the massive amount of evidence in the case, demanded a high level of expertise. There were literally hundreds of interviews.

Abuse within the context of ritualistic related activities is another major type described in the literature, and likely the most controversial. Abuse in this category is differentiated by the fact that the abusive activities are said to be linked in some way to organized/systematic abusive practices which often include sadistic, intimidating acts that can indoctrinate, injure and frighten child victims. Hundreds of children and indeed many adults have reported abuse involving multiple perpetrators, inter-generational cults, and quasi-religious rituals complete with human sacrifice, graveyard ceremonies, cannibalism, consumption of blood, urine and excrement (Bottoms, Shaver, and Goodman 1996; Sakheim, and Devine, 1992). However acceptance of the existence of such abuse has divided the professional community. Five years ago, Bottoms et al. (1996) completed a survey study of cases involving alleged ritualistic and religion-based abuse referred to psychologists in the US. They concluded that although many of the acts of child abuse reported did qualify as 'ritualistic', they were in actuality simply examples of pure sadism. Highly organized inter-generational international satanic cults were not believed to exist.

The "Prescott case" which occurred in a small town in south eastern Ontario Canada was the closest example of a multi victim multi offender ritualistic abuse case in Canada (Blisshen and Gummer, undated). I had the opportunity to consult with the investigation team around court preparation of the some of the child witnesses. The case involved horrendous forms of sexual abuse of very young children who had disclosed when they were apprehended and placed in foster care. There was both intra familial as well as extra familial abuse in that case. The evidence involved bizarre settings for sexual abuse such as grave yards, stories of cruelty, forced ingestion of unknown materials and even witnessed animal killings. By 1989, there were at least twenty children and ten adults said to be involved, as the initial children identified others who had also been abused.

The last major type of multi victim child abuse case identified in the literature has been described as community-centred abuse, in which sexual abuse is planned/directed and practised by one offender or a small group of supporting offenders in a community. This type of abuse is usually centred in the offender's own residence, or at the offender's place of employment (school daycare, camp etc). Many children can be involved as victims in such a case as there is easy and legitimate access of the offender to the child victims. The child victims are easily manipulated and are sexually exploited by the offenders within the care-taking role, as the offenders use their position of trust and their relationship with the children to abuse them. In examining the evidence in the Ellis case, it appears that it most closely resembles the community centered type of multi child victim case. However, there (ire some allegations in the Ellis case which came to light which may suggest that there could also have been a - 'sex ring' of sorts involving at the very least pornography, and potentially sadistic even ritualized abuse practices with respect to some child victims.

## **Carrving out Investigations in multi-victim multi offender cases**

Mounting an investigation in a multi-victim multi offender case involves significant challenges. Because of the complexity of the inter-relationships between victims and offenders, investigations which involve numerous child victims are compounded by special issues which may never arise in single offender single victim cases.

The initial challenge in my view once the first disclosure is made, is the task of identifying the pool of potential child complainants, if indeed there is a pool. If we can accept findings in the literature which suggest that most pedophiles ( or pederasts) offend against large numbers of children, then the assumption that there are other child victims beyond the first child that has disclosed, is reasonable. However to automatically take the position that there are always multiple child victims can be dangerous as well.

The inherent difficulty for police in identifying the pool of potential child victims, is that it is almost impossible to do so without causing heightened concern in individuals whose children could be affected. Panic may result in some parents causing them to act inappropriately. Suspicion and negative feelings towards an identified accused person that are generated as rumors fly, can create an environment which makes it difficult to maintain the integrity of the investigation. However even in such a climate, it must be said that the majority of parents do not want to find out that their children have been abused, and it is this reluctance to uncover abuse which can help to balance out the over reaction of the more hysterical parents.

In any event, one question that must always be answered in any multi-victim multi offender case where the majority of complainants have made "confronted disclosures", is whether there are some individual cases which are suspect, influenced by what can best be described as a `contagion effect'. In an MVMO case, it may be possible that a small group parents of complainants or even just one individual can contaminate the evidence gathered in an investigation through their misguided actions (by spreading false rumors, and generally influencing the course of events).

The scope and identity of the complainant population in a MVMO case is determined by the "flood of referrals" which snowballs once the information has leaked that there has been a disclosure. Therefore what transpires after the first disclosure is very important in determining how things will eventually play out. The threat of contamination of children's evidence outside the interview room is always there. This is more likely to occur when there is residential proximity between witnesses and existing prior relationships. The urge on the part of the parents of child complainants to talk to each other about the case and to compare notes is powerful, but can present problems later on and result in challenges in court over contamination. A common Defense accusation is that complainant families through their emotional support of each other and informal sharing of information discussions, can create false disclosures in children. Although this criticism can be totally uncalled for the possibility needs to be considered in every case.

The next challenge is to respond appropriately once the pool of children become identified, and to interview what may be large numbers of children in a timely fashion, in order to determine if they have suffered any abuse. Obtaining accurate information from children in investigative interviews is critical, and forms the foundation upon which the case will rest: Great care must be exercised to follow accepted practice for forensic interviews of children, especially when some children may be very young and more susceptible to suggestion.

It is true that the integrity of a case rests heavily on the quality of the interviews that are carried out, and the neutrality of the interviewers. Maintaining an open mind as more and more children disclose is difficult, but each child's disclosure information must be examined for individual as well as combined reliability.

Another issue which must be dealt with is the media attention, which is more characteristic of a MVMO case than a single victim single offender case(unless the individuals are famous or the circumstances unusual). Handling the media interest in such a case is tricky. Pagnello (1992) described the Prescott investigation as managing in a fishbowl, Early leaks can cause panic which then results in pressure on police by concerned individuals to interview more children than necessary, make premature arrests and `tell all' before the trial. Usually there is backlash from dissatisfied parents, as well as from supporters of the accused (s) which increases as the investigation drags on, and everyone starts to feel quite desperate. Media hype will occur in particular when there are rumours of ritualism or sex rings,(which people find grotesquely scary or despicable) and of multiple victims (which makes everyone with children feel vulnerable).

Within the midst of such pressure, the police are attempting to conduct the important task of sorting through the historical data for corroboration, and obtaining material evidence which supports the allegations of young children who may not be able to accurately remember locations or describe events with sufficient detail. Scene visits with or without child victims, carrying out warrants to search specific locations, interviewing other potential witnesses and taking their statements, will all be arduous because of the sheer amount of work that must be done, and the fact that all these activities generate interest and attention in the community. Complainant parents tend to be hypersensitive, and for professionals the investigation as a whole, will be like working in a fish bowl, or under a magnifying glass. Lastly there is the realistic and pressing need to meet the support and treatment requirements of identified complainants and their families without jeopardizing the integrity of the case, and involving too many people in the `loop'. This is extremely difficult, but in my view providing necessary treatment and support is ethically unavoidable.

Having read all the material sent to me regarding the Ellis investigation, I do not feel that I would be exaggerating if I suggested that each of the challenges described above were present in this case.

## **The Issue of Contamination**

Over the last decade, the professional community has heard a lot about the potential negative effects of alleged contamination of evidence in multiple victim multiple offender (MVMO) cases. This has come mainly from the devastating results in a number of high profile cases in the US that have been written up in the literature, and the subsequent analogue research that has been carried out on the suggestibility of children's memories (Ceci and Bruck, 1995). I have learned from my own experience in two MVMO cases, that these concerns cannot be ignored and require the development of special procedures and standardized protocols as a precautionary measure.

The MVMO case which has received the most notoriety in the literature and in the press, is the "Kelly Michael's case" (State vs. Michaels) in which a young boy, aged three attending a nursery school in the United States, made a spontaneous disclosure to his family physician while she was taking his rectal temperature. In essence, as he was being examined, he said to her "that is what my teacher does to me at school!": Following this disclosure, the nursery school board members were notified by the physician of the child's statement, and they sent a letter to all the parents informing them that a former employee was being investigated for sexual abuse. This child's disclosure led to a massive police investigation of all the children with whom Ms. Kelly had had contact in the nursery while she was employed. By the time the investigation was completed in 1988, there were 113 counts of sexual abuse against Ms. Michael.

Some of the children's accounts were shocking, and included allegations that there had been insertion of eating utensils into their rectums and vaginas. Michaels was convicted on the majority of the counts, and she received a prison term of 47 years. However five years later, in 1993, she was released after a successful appeal. Her convictions were all overturned on the grounds that the interviews of the children who were very young, a) contained questions which planted sexual information in their minds, b) communicated information about what other children had said, and c) demonized the accused. Overall it was concluded that the manner in which the investigation was conducted led to contamination of the evidence and diminished the reliability of the children's accounts.

Another notorious MVMO investigation was the McMartin case, (Montoya, 1993) which began in 1983. Apparently Raymond Buckey, an employee of the Mc Martin preschool was arrested when a parent made an accusation that he sexually abused their child. Following his arrest, questionnaires were distributed to parents of preschoolers where he had worked. These questionnaires implied that Buckey was a potential child molester. Despite the fact that none of the returned questionnaires contained further allegations against him, nor confirmed the existing allegations made by the one child, the parents were urged to have their children interviewed by the police and social services. These interviewers concluded that 360 of the 400 McMartin children had been sexually abused by Buckey and others over the ten year period that Buckey worked at the preschool. Numerous charges were laid. At the lengthy trial however, the jury acquitted Buckey and the seven associates on charges of abuse, basing their decision on similar reasons as the appeal in Michael's case - contamination of the children's evidence.

The two Canadian MVMO cases in Ontario, were much more successful in their sexual abuse prosecutions. In both these cases, the investigations were carried out very cautiously. However in all fairness it should be pointed out that in the first case, the positive court outcomes were also due to the fact that there were a few offender confessions midway through the investigation, which went a long way to corroborating the children's accounts and giving credence to the 'story'. In the second case there was an abundance of corroborative evidence in the form of seized pornographic videos of some of the children, which not only broke the case, but also lent credence to the theory of a 'child sex ring'.

Overall, based on the cases that I have reviewed, it is apparent to me that the stakes involved in mounting such a complex investigation are high. Managing the voluminous evidence in multi-victim multi offender cases can best be described as handling an evolution of dynamic data, fragile and interconnected, and vulnerable to contamination from all sides and on many levels. In the absence of a sound protocol, victims, their families, and the community at large, can face a lengthy, uncoordinated and potentially ineffective investigation which impacts negatively on the outcome of the criminal prosecution, and results in acquittals and increased vulnerability in children who later come into contact with the offender. In the event that an individual is wrongly accused and convicted based on contaminated evidence, there is a miscarriage of justice.

From the moment that an allegation of child sexual abuse first surfaces within an institution or community setting, there is the natural tendency on the part of parents and professionals to look for signs of abuse in children who have been exposed to the offender, but who have not disclosed any wrong doing. On the positive side, this can be helpful in uncovering other children who have also been hurt. On the negative side, it can lead to an over-reaction by adults to neutral unrelated events, behaviors and even comments made by children. Sometimes innocuous or irrelevant behaviors can be treated with suspicion and wrongly interpreted as evidence of abuse. Even professionals working in the field, who are more removed and objective than the parents, experience a great deal of pressure to uncover abuse if it has occurred, and view any untoward symptoms with concern. Finally, in the case of the police department, calls to make an arrest and remove the threat are strong. This is particularly true as time goes on and the abuse net widens. The demands on professionals working in a MVMO case are high, as the public responds to news leaks by becoming hyper-vigilant and frightened by the scope of the problem and their own vulnerability.

It has been identified that steps must be undertaken right from the beginning to contain the hysteria and amateur sleuthing. Even though concerned adults will demand to know what is going on, and will assume often incorrectly that there are things that they are not being told which directly affect them, it is important to protect the details of the allegations from all but the investigators.

The problem of course is when an offender is dismissed from a facility pending an investigation and there is information leaked (in the press, or by staff or a parent) about the reasons for the suspension. When this happens, it is almost impossible to stop the hypothesizing and people will go to great lengths to uncover the 'truth'. The way in which the facility (ie. daycare, school, hospital) handles this stage is critical. By the time the police are involved, and the first child(ren) is (are) formally interviewed, 'informed' parents may well have begun their own investigation of their children.

One common characteristic of multiple cases involving children is that the case usually evolves from an initial single victim to potential multiple victims fairly quickly, as some of the children identify other children involved in the abuse, who have not disclosed. It is common knowledge that delayed disclosures of sexual abuse by victimized children are the norm, especially in cases where the offender is in a position of trust, threats have been employed to achieve silence, and the victims are young (Sautier, 1989; Sas et al., 1993; and Sorenson and Snow, 1991). In the Project Guardian case, that I was involved with, there was not one spontaneous disclosure! Not one child ever came forward to describe their abuse, despite the fact that for nearly fifteen years this set ring operated in London. If it were not for the pornographic videotapes involving the children which were found in a river near our city, I doubt that there would have been an investigation at all!

Documented studies of adult survivors support the contention that many children never disclose their abuse because no one has asked. The significance of this finding is that childhood victimization may only come to light when children are confronted with what others have said about them, or when their parents are worried and suspicious about their behavior and ask the right questions. Even then, a good proportion of the children will deny personal involvement, at least initially (MacFarlane and Krebs, 1986). Others will acknowledge witnessing events described to them, but will not admit to being victimized themselves. Finally, a few will make vague disclosures which are potentially diagnostic and cause their parents sufficient concern to request an investigative interview, but then may or may not provide sufficient information to lay a criminal charge.

Potential child victims are often times identified through referrals from concerned parents who as a result of new information, begin to re-examine behaviors and comments and comments by their children in the past. They then question whether their children acted in a particular way because they were abused. Such parents have no doubt been sensitized to that possibility, by having received information informally from other parents, or as part of a formal agency presentation following the disclosure of one child. For some of these parents whose children eventually become complainants, things unfortunately fall into place, and they will begin to understand the etiology of their children's symptomatology (nightmares, toileting problems, sexualized behaviors, unexplained fears, misunderstood comments). In the case of a minority of parents however, they begin to read into every past nuance and innocent behavior of their child, interpreting it as definitive proof that there has been abuse, even if this is not the case.

Some of these parents will ask very direct and leading questions and pressure their children to disclose the abuse they feel has certainly happened. This latter example is of course concerning and carries risks for the emotional well-being of the children, and the integrity of an investigation.

The dilemma of course is what to do as the case evolves, and more and more potential victims are identified. It is not as though one usually knows in advance that there are going to be so many possible victims. In a MVMO case, the decision to conduct multiple interviews is often a reactive one, as the police respond to new developments and unfolding information. In many of the high profile cases I've read about, organized parent meetings occurred early on, and or letters were sent to parents at the outset providing varying amounts of information about the allegations, the progress of the investigation, and directions on how parents should conduct themselves with their children.

In the "Michaels" case, following a letter from the Board of the Day Care, investigative interviews began of all the children with whom the accused had contact with. In the "McMartin" case, 350 of the 400 children attending became complainants following a similar pattern of briefing the parents!

### **The Ellis investigation**

In the 'Ellis' matter, it is my understanding that City Council Board of the Civic Creche made a decision to hold a meeting in early December of 1991, following the first child's disclosure and interview, and the suspension of Mr. Ellis pending the investigation. I understand that this meeting was attended by many parents of children at the Civic Creche, as well as Creche board members, a representative of the police, Detective Colin Eade and a specialist interviewer Sue Sidey. Creche workers other than Mr Ellis were present.

From the information in the evidence it appears that the purpose of the meeting was to inform parents that there had been a comment made by a child that suggested possible sexual impropriety, and that an investigation was under way. The suspended worker was easily identified, as he was the only male worker at the Creche at the time, and it was common knowledge that he had been suspended from his position. This fact could not be kept hidden. In any event, this information was already in the newspaper, an article having occurred in the Christchurch paper the

morning of the December meeting. According to the evidence I read, many parents of complainant children reported seeing the article. Parents decided to come to the meeting to find out more. Those who had not seen the article either knew nothing about the actual purpose of the meeting, or had heard about the allegation through the rumor mill. In the year following the meeting, 118 children were subsequently interviewed.

At first glance the magnitude of the investigation causes alarm bells to ring. This is especially true for someone who does not appreciate the dynamics underlying child victimization in general and child sexual abuse in particular. In my experience, the way in which the allegations evolved in the "Ellis case" is consistent with developments in other multiple child victim sexual abuse cases. The lack of spontaneous disclosures in the children is consistent with the dynamics of secrecy and accommodation that exist whenever children are victimized within the context of a caretaking relationship and there is the opportunity for grooming (Sas et al, 1995).

## **Developing a Protocol for investigations**

It is critical that a protocol exists in every community to handle MVMOs. Because of my mandate in this inquiry, I focused on two central goals in identifying a "Best practices Model" for investigations in multi victim multi offender cases: 1) reducing the risk of contamination of children's evidence on a broad system level, and 2) carrying out sound forensic interviews of young children about potentially traumatic events. At each step in the protocol, I have compared the standards that existed in the "Ellis" investigation to those outlined in a "Best Practices Model" with respect to management of contamination of children's evidence.

The model does not profess to cover all aspects of a criminal investigation, but merely those which impinge directly on the clinical reliability of children's evidence. I will begin by focusing on the first issue, that of contamination on the system level. In order to evaluate the "Ellis" investigation with respect to the two central issues I outlined above, the following checklist for developing a sound protocol was used as a standard. It was adapted in part from recommendations for dealing with multi victim multi offender cases stemming from a conference I attended (IPCA, 1992).

### **Suggested Best Practice model for the pre-investigation stage in MVMO cases**

- 1) At the organizational level an effective documentation system should be in place to alert staff to a possible multiple victim/multiple offender investigation.
- 2) A crisis support team made up of senior police, crown and child protection workers should be in place in a community, the members of which should all have specialized training in the following; the conduction of diagnostic and evidentiary interviews of children, the nature and dynamics of child sexual abuse and in particular multiple/ victim abuse, and the investigation and prosecution of such cases. Additionally, past experience dealing with complex multifaceted cases should be required as the stress on professionals will be intense and the professional demands challenging.
- 3) Established agreements with other community agencies should be in place, so that accessibility to needed resources is immediate, and services such as treatment, victim witness support, court preparation, forensic medical exams, and expert testimony can be arranged expeditiously. Given the scope of these investigations and the magnitude of witnesses that will be involved, children could wait weeks and even months for interviews, medical exams etc, unless there are existing arrangements to expedite referrals. Having available additional resources on call on short notice to meet the overflow, is particularly important because of the potential for contamination of evidence increases as time goes on, and the window of opportunity to collect corroboration narrows.
- 4) An agreed upon media strategy should exist encompassing all the crisis team members and agencies providing resources, and documenting the lines of communication. This strategy should take into consideration such problems as "leaks" and backlash. Ideally one person should be designated responsible for handling the media and general inquiries by the public. This was very effective in the Project Guardian investigation.
- 5) A ministerial response team at the governmental level should be identified to assist financially if needed, and help coordinate access to extra staffing and expertise, if this does not exist in the community.

### **Suggested Best Practice Model for the investigation stage of an MVMO case**

- 1) A lead case manager should be assigned ASAP and the actual structure and identity of the front line investigative team should be determined quickly (including numbers, hierarchy of command, specific roles)

It is apparent that in the Ellis investigation this was done sometime in the early part of 1992. once there was a confirmed disclosure in interview. There appeared to be formal roles assigned to everyone on the investigative team (such as specialist interviewers). It is my understanding that the Crown Solicitor's office was first advised of the investigation in late 1991. There did appear to be a delay in bringing the social worker on board as support for the parents.

- 2) Flexibility will need to be built in, as the time frame for the work will generally expand as well as the work load, as more information is revealed.

No doubt as the number of potential complainants increased and the need for more interviews became apparent other interviewers were brought on board, as well as other staff.

3) Identification of the experts that will need to be involved in the case should be followed up by formal discussions, and decisions should be made regarding medical and psychological assessment needs of child complainants. Children should be referred immediately through pre-existing agreements arranged with other agency resources and professionals.

In reading the evidence at depositions and trial in the Ellis matter, it was obvious that there were quite a few experts involved who either examined the children medically and provided expert testimony on medical findings consistent with abuse, or as in the case of the psychiatrist who was a crown witness, testified specifically about the reliability of the complainant children's disclosures, and generally about children's memory, and abuse symptomatology.

4) Clear communication lines should exist between involved professionals on the case. This should be carried out through regular team meetings for the team staff, and additional meetings if other professionals are invited to present their findings.

It was reported that the investigative team met regularly to review the information and the developments in the case. It was not possible for me to determine the frequency of those meetings or all the participants but it sounded as though there was ongoing communication between members of the investigative team.

5) Clinical supervision should be available to the specialist interviewers throughout the investigation, with respect to two features; diagnostic interpretation of children's disclosures, and general quality of the interviewing style. Because of the volume of interviews the interviewers must carry out, it is important to have an objective expert provide feedback to the team.

According to the evidence I read. I deduced that a specialist psychiatrist provided supervision to the interviewers, but I am not clear how often that was and if all the interviewers received this supervision or only Sue Sidey. In her cross examination, it was clear that the Psychiatrist was certainly aware of the disclosures in the tapes and the demeanor of the children when interviewed. which meant that she must have reviewed all the tapes about which she testified. She was also apparently involved in the decision not to allow an interview with Child X due to her concerns of contamination.

6) A detective should always be involved in the investigative interviews and act as the monitors.

In reviewing the schedule of interviews (used at depositions and trial) provided to me. I noted that Det. Colin Eade was present for twenty-eight of the 57 interviews which is about 50%. I was not clear whether there were other officers as well who functioned as monitors. However, there were some interviews that were monitored by one of the interviewers. Given that these are forensic interviews I feel that it is important for there to be a police presence. The 'notes' sent under the door by Det. Eade were very helpful in assisting interviewers to clarify events with children, so that appropriate charges could be laid.

7) Police should identify the technical assistance that will be required and insure that everything is available as needed

8) An attempt should be made to corroborate any descriptions of children's accounts of places and events through police investigative work. This can include site visits, search warrants of particular properties, seizures of potential evidence etc.

I was very impressed with the amount of effort that went into the Ellis investigation to find the locations the children spoke of and to look for the rooms. Presence of traps doors etc that were described by the complainants and to look for Proof that they were indeed there. The police department made a gallant effort in that regard.

9) Specific measures should be taken to minimize the threat of contamination early in the investigative stage. As soon as possible, it is important to seek to control the delivery of information to the public, especially to the parents of potential child victims. This can be done by handling inquiries on an individual basis with a pre-arranged statement. If a parent meeting has already been organized by a community agency/institution in response to an internal investigation and suspension, it will be necessary to attend that meeting to insure that the correct information is disseminated, Police at this stage should emphasize the very preliminary nature of the inquiry, minimize the risks to children by pointing out that there may not be other complainants beyond those who have come forward, and warn parents not to contaminate the investigation by questioning their children at length.

It would be my opinion having read the evidence given by parents of complainants and professional witnesses for the crown about what was said at the Dec 1991 first meeting, that this was attempted by the Department of Specialist Services unit and the Police Child Abuse Unit staff in the "Ellis" matter.

10) If a meeting has been called, then a hand out sheet should be distributed containing a strong advisory which warns potential witnesses and in particular parents of potential child complainants of the dangers of sharing detailed information about any child's allegations, or any thing else that pertains to the case, with other parents. Parents should also be told that they must not share information with their children about what other children may have said. The police child abuse unit should provide support and direction for parents as to how they should interact with their children around the matter.

In the first meeting in Dec 1991 nothing was provided in writing about the possibility of contamination but it was apparently stressed verbally at the meeting. The fact that some parents testified they remembered clearly being told not to talk to each other about any allegations is positive. The fact that other parents couldn't remember if that was indeed said substantiates the need to have a written advisory given out.

11) A handout containing the phone number of the police child abuse unit should be made available for parents who attend a parent meeting, and can perhaps be made available in other venues in the community. It would not be advisable to have such a handout at the actual facility where the alleged sexual abuse was said to have taken place. This handout should contain the case manager's name for parents to call if they have further questions or concerns about their own children. This will hopefully prevent parents from calling numerous agencies and/or private professionals for advice on whether their child should be interviewed by police.

This was clearly done in the Ellis case, on the first page of the handout (exhibit 9) and the top part of the second page. It appears that this was handed out in March 1992 at the Knox Hall second information meeting and not at the first information meeting in December 1991. In hindsight, it should have been given out in December.

12) There should not be any suggestion in handouts to parents during the early stages of the investigation of the need for treatment or the potential for behavioral upset and distress in their children if they disclose, as this may be premature and may set the stage for a self-fulfilling prophecy in some families where parents are very anxious and they transmit their anxiety to their children.

At the Knox Hall meeting in March of 1992, information for parents was provided on page two of the handout in five boxes under a PLEASE REMEMBER section. Some of the statements caused me some concern. The information contained in the 'Supporting your Child' section probably should have been given on an individual basis to parents who requested assistance as a result of distress or behavior problems in their children following their discussions of the Creche.

The concern with the handout was that it implied that many children would likely need support, because of the development of potential 'problem behaviors', and would likely be asking difficult questions of their parents. The evidence at depositions was that at that point most of the parents at the meeting had not recognized or formally identified their children as having significant problems due to abuse and had not had their children in any treatment. That is not to say that some of the children were NOT exhibiting behaviors consistent with abuse sequelae (as the evidence given by parents at depositions and trial strongly supported the contention that many of the complainant children were displaying, symptoms of sexual traumatization), but at that point, their parents had not recognized the etiology of their children's difficulties. For the other parents of children who were not in any way victimized, this handout created the expectation or mindset in parents that they should expect difficulties.

As an alternative, I would have provided the name of the person in the DSW who was on the team as a resource to answer inquiries if any problems arose in the children after their parents talked to them.

It would not be my suggestion that parents be provided with a written or verbal list at a meeting of actual symptoms that are suggestive of sexual abuse. Instead I would have suggested to parents that if children from the Creche were exhibiting any behaviors of concern to their parents while they were at the creche, that they discuss this with a designated person on the team (one who had expertise in determining the significance of the symptoms and their relevance). The specialist interviewer or social worker could have run through a list of behavioral sequelae with the individual parents which they could have confirmed or disconfirmed. Normal behaviors that are not associated with any past abuse could have been included in that list as a precaution.

Another strategy recommended by Friedrich (1990) and Waterman and Lusk (1993) is the use of standardized behavior checklists as a diagnostic screening device as well. The CBCL (Child Behavior Check List -Achenbach 1987), or the Child Sexual Behaviors Inventory (Friedrich, 1990) are two tests that have been shown to discriminate between abused and non abused samples of children. If the decision was made to use a standardized test as part of the initial screening assessment for investigative interviews, then the results could have been interpreted, and depending on the findings, a referral made to the investigative team.

In the Ellis matter, parents and the specialist interviewer SS reported in their evidence, that information was provided to parents about some of the behavioral sequelae that they might encounter in their children. Although I do not believe that this significantly influenced the parents to report more symptomatology than was present, some parents may have wrongly attributed their child's symptoms to abuse without considering an alternative hypothesis. The box on "medical examinations" as well should not have been provided at this point in the investigation for the same reason. It subtly suggested that some of the children could have been penetrated or injured in some way, which would necessitate an intrusive medical examination for confirmation. This could have caused many parents undue stress and panic, and for no reason. Unless children had already been identified as likely victims of sexual abuse in the case (based on formal interviews), parents would not need to know that a necessary step in a forensic investigation which included allegations of penetration, was consistent physical corroboration. That information could have been shared with parents on a case by case basis when it was timely.

The box on "Counselling and Funding" also concerned me because it seemed premature to offer this to parents who came to an information meeting. This advice could have been provided to parents on an individual basis when they called the DSW or Police Child Abuse Unit with concerns or requests for referrals.

Of all the information, that was offered at the March meeting the box entitled "Support for Parents" was the most problematic in that it formally recommended that parents support each other through the investigation. It is not that I believe parents should not have been supportive to each other not at all. It would have been better to offer them the services of a designated social worker on an individual basis in late December 1991. As it was the absence of an identified social worker to meet individually with parents of child complainants early on resulted in one parent informally assuming that role. By the time the Knox meeting was held, some parents had been meeting informally

for several months. In fact the information in this box may have encouraged the formation of the informal parent support group which met regularly in addition to the formal support group which began in early April. In the Ellis case, the evidence suggests that in addition to the pre-existing friendships between some of the parents of Creche children, two scheduled information meetings and many support group meetings led to a lot of contact between parents of child complainants who would not normally have associated together, but were drawn by their involvement in this case.

From a philosophical point of view it makes sense to have parents get together and vent their frustrations with the system and their fears for the well being of their children, but from a forensic point of view it is not good practice. The reality is that parents will talk informally to each other anyway, and creating an infrastructure for them to do so may simply legitimize this process and lessen their inhibitions.

The third pane of the handout on how to handle disclosures which was distributed at the Knox meeting could have used some modifications. In particular, the title "What to do when (the word 'when' crossed out but visible and replaced with 'if) a child tells of his or her abuse" was problematic. A more appropriate title for the handout would have been "If your child discloses that he or she was abused" follow these guidelines.

The following is a modified list with other suggestions that would have been less controversial at that stage in the Ellis investigation.

## **HOW TO APPROACH THE TOPIC OF SEXUAL ABUSE, AND WHAT TO DO IF YOUR CHILD DISCLOSES**

(A HANDOUT FOR PARENTS)

Broach the topic by asking a few very general questions about their time at the Creche. Listen carefully, and do not suggest anything to your child that you have heard from others. If they do not disclose anything concerning, follow this up with a general question about whether anyone (adult or child) has ever made them scared or was mean to them, or did things to them they did not like while they were at the Creche. Ask them to explain. If they disclose abuse, carry out steps (a) to (g) . If not, try one leading question along the following vein "some children have mentioned that a teacher at school did things to them they did not like at the Creche, has a teacher ever done anything to you that you did not like, or made you feel afraid?" Follow (a) to (g) if there is a disclosure. If not, then abort the questions immediately and change the topic. If you hear information from the police later on that challenges the veracity of your child's non-disclosure, then ask a general question again and then proceed to (f) as the next interview should be carried out by a trained interviewer at their discretion.

- a) Do not pressure your child to tell you more or provide all the details.
- b) Do not over react to the child's information.
- c) Reassure your child that they are safe and you will help them with their feelings about what happened
- d) Reinforce that no matter what happened it was not their fault.
- e) Tell them they did the right thing to disclose when you asked because now you can make sure that it won't happen again.
- f) Seek support and advice from the DSW or the Police Child Abuse Unit (#s enclosed) immediately.
- g) Avoid bringing up the topic with your child after the first time. Do not repeatedly interview your child in between formal interviews.

REMEMBER: The most important thing is not to take on the role of the police or special services, as forensic interviews should only be carried out by specially trained interviewers.

Parents who do not want to engage in any conversation with their child about the Creche, but have concerns that their child might have been abused, should make a referral to the police/ DSW.

In summary, how parents responded to the possibility that there was ongoing abuse in the Creche attended by their children, depended on the interaction between the information they received early on and their personality type. The same information received by different parents could have resulted in very different reactions. This was evident at the trial when complainant parents were asked about their attendance at the two meetings and of their impressions of the message that was portrayed at the first meeting varied. Parents of R, and Z, and N, described the December meeting as low key and remembered being advised not to question their children aggressively. They did not think that their children had been involved. One parent of D seemed to suggest that the meeting was unsatisfactory, as it provided so little information.

By the time the March meeting had been called however, there had been many more interviews, and Mr. Ellis had been arrested based on a disclosure by a child in January. One parent described how parents felt frustrated with the sluggishness of the system and angry at the lack of information. Despite these complaints, the best strategy would still have been to once again understate the concerns in order not to cause undue upset and over reaction by parents of children who had attended the creche during the indictment period, but had not disclosed anything. The Knox meeting likely did the opposite because of some of the handout material.

Overall, the cumulative impact of the growing number of children interviewed in the early part of 1992, the type of information handed out at the March Knox Hall meeting, and the arrest of Mr Ellis suggested the possibility of

widespread abuse. This may have led to more children being referred for interviews than needed to be (about 118 children). This broadened the nature and scope of the investigation, and increased the work load.

The reassuring fact is the conservative number of children who actually became complainants. The fact that potentially more children were interviewed in the investigation interviews, did not seriously affect the reliability of the complainant children's evidence that was presented at the time of trial.

### **Dealing with Parental interference**

13) The next most important thing is to reinforce to parents that they are not investigators and are not expected to carry out mini- investigations.

In the Ellis investigation there was evidence offered that some of the parents talked with their children about the events as much if not more than the trained interviewers in the videotaped sessions. This was apparent in the exhibits that were provided in court about their discussions with their children regarding the creche and the accused (stories, drawings, notes tapes etc). Some of these parents also took their children on site visits trying to see if they recognized certain buildings and places where they may have been taken. This latter activity was apparently at the suggestion of the police

14) It is important to follow up on information that there is someone spreading information around the community and in particular to other parents of complainants. Identifying any persons responsible for spreading information, and warning them of the fact that they are potentially obstructing the case and contaminating the evidence of their child and of other children is critical. Determining the extent of damage is advisable in assessing whether to lay charges on behalf of a particular child.

In the Ellis matter there was evidence that one parent in particular went to great lengths to share information with other parents about the allegations and the connection between children and certain incidents.

There were a few other parents who also blatantly ignored the directive not to spread information about their children's disclosures. One parent, whose child made the initial disclosure which led to the investigation of Mr. Ellis, apparently became an informal social worker for some of the other parents between the months of Nov 91 and March 92.

Throughout the investigation she provided parents with literature on child sexual abuse, discussed symptoms, phoned other parents with information about allegations of other children, notified parents if their child had been named by another child, and went so far as to create a list which she handed out in August 1992 at a meeting, of parents at the house of a child complainant. This list outlined all the places the children alleged they were taken, the locations where abuse took place, the types of abuse committed, alleged adult perpetrator names, and types of threats made to silence them. She even included theories of involvement of Japanese tourists and ritual abuse at the Masonic Lodge. She labeled the accused as a child hater and molester.

She attended the support group for parents of child complainants and some of the informal support groups as well. She was investigating things on her own, even though her own child did not end up as one of the complainants in the trial. In her evidence, the mother of D admitted that she chose to ignore the police directive not to do all this, but she felt that the parents were frustrated by the process and lack of information shared with them by the police. She wanted to assist parents in dealing with the process. She was described by parents as a wonderful resource and support.

15) Provide as little information as possible to families about the details of their children's disclosures and no information about other children's disclosures, while the matter is under investigation and there is a possibility that their child will be re-interviewed, or that they will have contact with other parents of complainant children who have yet to be interviewed.

From the testimony I read, it was clear to me that the interviewers shared with Parents the outcomes of their children's interviews each time they came, but it appears that they respected the confidentiality of other children.

16) Ensure that the team discusses details of the case internally only, and that the sharing of information with other resources is on an absolute 'need to know' basis. Identify any leaks emanating from the team as soon as possible, and deal with it accordingly.

17) Develop a strategy for dealing with the problem of shared information by witnesses and child victims by identifying every known leak as it emerges and discussing its impact on that particular child's evidence and the case at large with the team.

It was evident that this was done on a number of occasions. For example this occurred when a planned interview was cancelled because there were concerns about parental contamination of one child's disclosures. (Child X)

18) Discourage a contact between child complainants (unless of course they are siblings) until their interviews are completed. If they are close friends, then have parents agree to monitor their children's conversations.

I did not see any evidence that this was formally done. In court some parents reported that their children played together during the investigation stage. There was at least one situation where children spontaneously spoke about the abuse to each other, and the mother recorded the conversation.

19) Until the interviews are all completed, keep the communication lines open, but generally in one direction only, with information flowing towards the investigative team; such that if a child is in treatment, the therapist is responsible to alert the team immediately when and if there is a disclosure, but details of the disclosures made in the

forensic interviews are not shared with the therapist. As well, encourage parents to bring forward to the team any information their child has disclosed spontaneously, or any other bits of relevant information, but do not provide details back to parents of what their children have said in their interviews.

Although this may seem uncaring at the time, it is better that parents and others only have a general awareness and not specific details of allegations until the investigation is over. If their children are disclosing details to them directly in a spontaneous manner, that is a different matter and can't be controlled. The interviewer should not add to or confirm that information.

In the Ellis investigation, I was not able to determine whether information was shared by the interviewer with the therapists of the child complainants, but it was shared with parents.

20) If parents of child complainants know each other well and on their own initiative are meeting regularly to support each other, assign someone from the team to attend the meetings and listen to the discussions. In addition to providing emotional support, this person can also function as a gentle reminder that 'evidence' should not be shared while the investigation is underway.

It was reported that there were formal support group meetings led by the social worker beginning in April 1992, and informal support meetings which were attended from time to time by Sue Sidey and Det Colin Eade. This was the best that could be done under the circumstances.

21) Discourage parents from independently gathering evidence, interviewing their own or other children, or providing resources to other parents. These activities should all originate and be carried out by the investigative team.

In the Ellis investigation, there were reports that parents were actively involved in the investigation. For example the parents of several complainants took them places in their car so that they might be able to identify the places they had been taken with the offender. Some complainant mothers interviewed children and wrote down the disclosures. There was one situation where a mother produced two audio tapes of her interviews with her child. I am not surprised that all this was challenged by the defense, as at times it appeared as though the parents were independently gathering evidence while the police investigation was going on.

22) Assign a social worker to assist parents with their own anxieties and upset, provide general reading material if requested. Ensure that parents are able to support their children through the investigation, and beyond.

This was done but not until March 1992. Parent D provided much of the early support and suggested resource books for children on abuse and disclosure. It is my opinion that such books may encourage disclosures in children who would normally not come forward, but then do not encourage false disclosures, and as such did not contribute to any contamination of the children's evidence

23) In consultation with parents, make referrals for treatment of child complainants if they are presenting with emotional distress or significant behavioral problems in the aftermath of their disclosures. It is not necessarily true that every child will require treatment. When referrals are made, ensure that these therapists are "on board", that is that they are aware of the pending court involvement, and the need to document clearly their interventions and discussions with the children. They should not see their role as one of soliciting information from the children they see about the details of the abuse, but should be supportive of the children and help them cope with their feelings around the abuse.

I was not clear whether parents made their own referrals to therapists or whether there were referrals facilitated by the team to particular therapists.

## **INTERVIEWING CHILD COMPLAINANTS IN AN MVMO CASE**

### **Introduction**

In the last decade, there has been mounting concerns over the way in which children are interviewed when there are suspicions of sexual abuse. Historically, there has always been doubts about the veracity of children's accounts of sexual abuse, despite social science research which has documented favourable accounts of the accuracy of children's memory for traumatic events. No doubt this skepticism has arisen once again as a result of a number of high profile legal cases in which scores of children have made extreme and often improbable allegations of abuse following repeated and highly suggestive interviews (Dunn 1995, Ceci & Bruck 1990). Although most legal cases involve only single or double investigative interviews of children, the problem of repeated highly suggestive interviews has been raised. This is of particular relevance when cases involve young children who because of their stage of development, are less verbal, lack general knowledge and comprehension, and are socially immature. In the absence of corroborative medical evidence which is rarely present in child sexual abuse, and due to the clandestine nature of sexual abuse which precludes witnesses (other than other children), investigative child interviews provide the crucial evidence in a criminal case. They must therefore be carried out competently.

The personality, temperament and intelligence of the child who is being interviewed are all givens. The interviewer must work with the individual attributes that the child brings to the interview, to uncover what if anything has happened to the child. With particularly young children, interviewing remains a challenge because they lack the vocabulary to describe events that have happened to them, and they often misunderstand exactly what they are being

asked They tend to be very concrete in their thinking style and take comments made to them literally. They also may lack the social comprehension to fully understand the significance of what has occurred to them.

In light of these developmental deficiencies, clinical researchers have suggested that great caution must be exercised when asking children questions in a forensic interview. It has been demonstrated that free recall reports' or 'narratives' received from children (even as young as age 2.5 or 3) are usually accurate, but tend to be very incomplete. Because details are especially needed in a forensic interview, the interviewer is forced to ask more direct questions in order to obtain the missing information from the child's initial account. This practice then raises a concern over possible contamination of children's memories for events through the process of suggestion. Are interviewers providing too much direction in their questions? Are they limiting the choices children have in responding when they give them forced choice options? Are interviewers suggesting to children that things have happened in a certain way, because they themselves believe so? Are they intimidating children into finally disclosing even when nothing happened by repeatedly asking the same questions over and over?

Although the research strongly supports the use of a free narrative technique in the beginning of an interview, professionals have to be realistic, and everyone recognizes that some leading questions will need to be asked in order to assist children in retrieving their memories. Young children in particular have trouble accessing their memories for details, and depend on cues from the interviewer to organize the delivery of their information. It is therefore the order as well as the type of questions that becomes important in an evidentiary interview, and the balance that is struck between the number of leading and open ended questions.

Repeated questioning is the most controversial problem in forensic interviewing, because of the possible demand characteristics that might ensue when children come to believe that they have answered wrongly (because the question is being asked again), or feel they must produce more information even if they do not have it. Research appears to suggest that if the repeated questioning is across interviews, it does not necessarily produce inaccuracies in children's reports (Fivush, Peterson and Schwarzmuller; in press). However, it is more problematic if it occurs in one interview session. Repeated questions should not however be confused with repeating to the child what they have already provided and checking if that it is accurate. When false information is repeatedly presented to a child as true across interviews, or if there is a highly negative response to information provided by a child across interviews, then there could be an increase in error and false reports.

Overall there appears to be definite developmental differences in children's suggestibility and memory function.

Younger children are more susceptible to suggestion, because they are less competent in encoding, storing and retrieving memory traces, but all children have a natural tendency to view adults as 'all knowing' and to feel pressure from authority figures who they believe have the right answers. An encouraging research finding for forensic interviewers is that generally, it is more difficult to mislead children to report negative or abuse related events than positive events, regardless of age (Eisen, Goodman, Qin and Davis; 1998). Children are fairly resistant to suggestions that they've been hurt for example, when they have not. Examining interviews for children's 'resistance to suggestion' is important when determining how malleable a child was to presented information by an interviewer. Another area of identified difficulty for younger children is 'source monitoring', that is determining the actual source of their memories and accurately reporting whether the memories they are describing are their own or something they've been told (Poole and Lindsay, 1990). The ability to differentiate one's own memories from other's increases with age. In an evidentiary interview, it is important to evaluate the child's source monitoring to insure that they are describing their own experiences, not something they've been told.

With respect to the overall quality of investigative interviews themselves, there is a large body of work examining the effects of the total number of interviews, the specific style of questioning (repeated, exploratory, direct, probing, misleading, and forced choice), the media employed to solicit the information, and the overall emotional tone and level of coercion in the interview. No doubt at the base of this research has been the heated debate on children's increased suggestibility to certain types of questioning and their production of false memories.

In response to these concerns and others, clinical researchers have issued guidelines for interviewing children. These include a number of characteristics which should be monitored if one is evaluating whether disclosure information obtained from a child in an evidentiary interview is reliable (Boat and Everson, 1988; Faller, 1990; Morgan and Edwards, 1995; and Quas, Goodman, Ghetti, & Redlich, 2000). These characteristics include both interviewer variables and interviewing variables. The following suggested "Best Practices Model" for interviewing includes a compilation of features which together provide sound evidentiary interviews of children and draws heavily on Faller's guidelines (1996). After each feature, a comparison is made to the interview process in the Ellis investigation.

## **BEST PRACTICE MODEL FOR INVESTIGATIVE INTERVIEWS**

### **Interviewer characteristics:**

24) The interviewer should be well trained in investigative interviewing, child development, the dynamics of child sexual abuse, and childhood victimization in general.

In the Ellis investigation the three interviewers had varying amounts of expertise in the area of evidentiary interviews. The interviewer who conducted almost all of the interviews of the trial complainants where the evidence resulted in convictions (except for the three interviews of complainant N, and the first interview of X.) was the most

knowledgeable in the area of investigative interviews and child sexual abuse, and had conducted over four hundred evidentiary interviews prior to her involvement in the Ellis matter.

25) The interviewer should not be aware of the 'specifics' of the allegations about which they are to interview the child about, but should be aware of the general suspicions.

In the Ellis investigation, interviewers were aware of many of the details of the allegations children had made to their parents prior to the conduction of the formal interviews. This was because parents were the first to question their own children about the accused following the December 1991 and March 1992 information meeting. Parents appeared in some measure to be the initial screening body with respect to whether Creche children were interviewed by the authorities. From reading the evidence, I gleaned that parents often consulted with the DSW, the police and specialist interviewers when requesting that their children be interviewed or reinterviewed. In the majority of cases I reviewed, they most certainly provided information to the interviewers about their children's comments regarding the Creche and the accused. There was however great variability in the amount of questioning conducted by parents of child complainants. and in the presentation and organization of this information that was provided to the interviewers.

With respect to the complainants whose cases resulted in convictions. I noted that complainant S's mother made a book with her about what had happened which the child brought with her to the first interview, complainants P's and O's mother made two audio tapes of her children's disclosures as well as many notes. the mothers of complainants X, and Z, as well questioned their children and made their detailed notes available. However. mothers of complainants N, O and R did not. Of the cases at trial where there wasn't a conviction the notes and joint drawings made by the mother and complainant Y were suggestive in their tone and content and were somewhat concerning.

26) The interviewer must not go into an interview simply to confirm a preconception by someone else that abuse has occurred.

In all interviews I reviewed, it was obvious that the interviewers had been given information by parents prior to the interview with the child This was communicated early on in the interviews when the interviewer cued the child by saying that they understood they had something to tell which they had already told their parents. It was my clinical impression that this knowledge was used to gently cue the children and help them retrieve their memories of events which they had previously disclosed to their parents. Generally, the initial questions asked by the interviewers were open ended, but did become more specific and direct (such as "can you tell me what you told your mum and dad about P ?") There were some examples in interviews where the interviewer repeated the specific allegations they had heard from the parents and then checked them out with the child to determine their truthfulness and accuracy. This tended to happen only when children were not forth coming with the disclosures that they had made previously to their parents. There is no doubt that at least initially in each interview. the interviewers were directed by information they had available to them from others. Despite this. it would be unfair to suggest that their goal was solely to confirm parents' preconceptions.

27) The interviewer should consider alternative hypotheses for the information provided and test them out in the next interview.

It was difficult to comment directly on this issue with respect to the Ellis investigation. as I was not privy to the discussions in the team meetings and the consultation that followed the interviews-of all the 118 children.

However, given the conservative number of children that actually became complainants compared to the number of children initially interviewed (about 15%), this screening process and consideration of alternative hypotheses must have occurred in many of the cases.

28) The interviewer should have an open mind to a disclosure or non disclosure from a child.

There was nothing to suggest that the interviewers did not have an open mind to the possibility of a disclosure. On the contrary, in many of the interviews of the trial complainant, there also appeared to be an underlying healthy skepticism on the part of the interviewer, which translated into challenges to the veracity of the information being provided by the child. Reminders that only true things could be talked about in the room and asking the children if they were sure that the things they were describing were true were examples of this balanced skepticism.

In some interviews however, accepting non-disclosures from children when then had heard differently from parents was difficult. There were a few occasions when an interviewer had difficulty accepting the child's information that nothing more had happened to them, and repeated the question "Did anything else happen?" several times. Many children generally resisted providing more information and were able to respond in the negative. However some children did not and it is a valid criticism that a few children were coerced into talking about things they did not want to share, or may not have not happened exactly as described.

29) The interviewer should familiarize her (his) self with the child's verbal abilities and level of comprehension and knowledge base, and employ language that the child understands (Walker, 1993).

In my observation of the videotaped interviews, I found that overall the language and phraseology of the questions asked across the evidentiary interviews was appropriate and great care was exercised by interviewers to employ the children's terminology for body parts and access their knowledge of the bodily functions. As well, there was an effort made to evaluate the children's comprehension of simple instructions and directions.

30) The interviewer must be vigilant with respect to a child's demeanor and non-verbal cues in the interview and respond accordingly.

Overall the interviews were responsive to the children, but there were valid criticisms that some children were tired and did not wish to continue, others resistant, others distracted and many upset. Despite this, the interviewers attempted to persevere in the questioning.

31) The interviewer should develop good rapport with the child being interviewed.

In nearly every interview I observed, good rapport was established. There were a few interviews where children expressed that they did not want to be there, or were angry at the number of repeated questions they were asked. For the most part the interviewers worked around the resistance nicely, by distracting the child, empathizing, and allowing them to play for a while, before resuming the questioning. There were a few situations, that I felt the child's rapport with the interview was compromised by the interviewer's need to get the disclosure. Having said that, I recognize how very difficult it is to keep a child engaged in an interview process when the topic is upsetting and the questions are intrusive.

### **Interviewing characteristics:**

32) The interview should always be videotaped, as it preserves the child's statement, and is a record of what is said and done by both the interviewer and the child. The videotaping should follow strict guidelines with respect to stating the time and date of the interview, and accounting for any absences due to breaks.

All the interviews submitted at the depositions hearing and trial were videotaped. I assume that all the 118 interviews were taped. The videotaping procedures and sound quality were excellent (except for one tape where there appears to have been technical difficulties). The allegation that there was discussion of disclosure material outside the interview room with the monitor or the interviewer was not supported by anything the children said.

33) Interviews should be carried out as soon as possible, following a disclosure.

Given the volume of interviews and the timeline (approximately one year) there appears to have been an effort to expedite the interviews, but from the perspective of the parents and Mr. Ellis, it must have felt like the investigation dragged on. Due to incremental disclosures made by the children to their parents, it was likely not always possible to schedule immediate interviews given the volume. The risk of course in such situations was that the child's memory for the details they initially provided could fade and their motivation to repeat the information at a later date could lessen.

34) The timing of the interview should coincide with the child's day time schedule (avoid nap times, meal times etc.).

I am not able to comment except that most of the interviews appeared to be mid to late morning or early afternoon.

35) The length of the interview should depend on the child's age and tolerance, usually not more than an hour, and less if the child shows signs of fatigue, boredom, or distractibility. Breaks are advisable as a means of encouraging a child to stay longer, especially if the interview has only just begun, and the child is a reluctant participant. It is important to remember that there is a fair degree of variability in children's concentration levels and their tolerance for being separated from their parents.

There were some valid criticisms made by defence at trial of a few interviews where children were obviously tired or becoming distracted, and the interviewer persevered in their questioning despite this. Having reviewed all the tapes submitted to trial, in particular the ones of the six children upon which convictions were obtained. I do not believe that this was a significant factor in diminishing the reliability of the evidence gathered. There were no blatant negative effects.

36) The interviewer should determine in the first few moments of the interview, the child's understanding of the purpose of the interview and to whom the child has previously spoken to about their concerns.

In all the videotaped interviews submitted at trial, this was routinely done.

37) The interviewer should insure that the child knows the difference between the truth and lies and can give an example of a promise. The interviewer should remind the child of the seriousness of the interview- ie. the importance of not lying and of only telling the truth. Their knowledge of the repercussions of not telling the truth should be evaluated by asking them what happens if they lie about something at home or at school.

This was generally done, and quite creatively compared to taped interviews I have reviewed in other cases. (In situations where the child is being re-interviewed the following day, I do not feel that it is necessary to go over the same territory in an inquiry, as there is no reason to assume that the child's understanding would have changed. A simple reminder of the importance of telling the truth and a promise to do so would be sufficient. However, I understand that in New Zealand, this is a statutory requirement.)

38) The interviewer should routinely inform the child at the beginning of an interview that they can refuse to answer a question, they can say they don't know an answer or that they don't remember something, if that is indeed the case. The interviewer should advise the child to tell them immediately if they don't understand a question, and not to answer questions they don't understand.

This was not routinely done across interviews. but was indirectly implied to the children in the general direction to only tell the truth in the room. and to only talk about real things they knew about. On a few occasions, the interviewers queried whether children were able to remember details or not, when there was no response forthcoming. In response children would indicate that they forgot or then didn't know. As well, there were some children who on their own would indicate that they did not understand a question. and the interviewer then modified

the question. Although I do not believe that there were any examples of interviews submitted at trial, (in particular with respect to the seven complainant children where convictions were reached), which created "false disclosures of central details" because children believed they needed to come forth with an answer whether they had one or not: I do feel that it is likely that there were some hazy peripheral details that may have been filled in by the children. In their belief that they should have remembered those things as part of their narrative account.

39) The interviewer should begin the interview with a free narrative format, for example a very open ended question like "What have you come to talk to me about today?" or "Can You tell me what happened?" rather than a direct question like "what did the accused do to you?" This should be followed with statements like "Tell me more" or "Then what happened?".

This was routinely attempted in the beginning in most of the interviews. The interviewers already knew why the child had come for an interview, so their general question was usually one which asked "what have you come to talk about today?". In all cases, it was because either a child had made a disclosure, or another child had disclosed something involving that child, or there was more clarification needed. Generally, all three interviewers began with one or more open ended questions, and worked down to direct questions for clarification. There were exceptions. The problem they encountered was that most children provided a few bare details in their initial disclosure, and the rest of the information was solicited through more direct questions. This is not atypical of interviews with young children who require cues in order to retrieve their memories and provide relevant information.

40) More explorative questions should follow open ended questions, but direct questions should only be used when it is absolutely required to obtain necessary details, and or to go over territory that has already been introduced by the child. Direct confirmatory questions should be used at the close of an interview to summarize the information and to check again that the interviewer has understood the child accurately.

The use of direct and leading questions became an issue in the Ellis investigation. Having reviewed all the relevant tapes, I would have to agree that there were occasions when the number of direct or leading questions employed was too high. It was true that confirmatory questions were employed at the end of most interviews which helped to confirm the disclosures.

41) The interviewer should check the child's 'source monitoring' with respect to the information they are disclosing about other children, in particular if there are allegations that the child may have heard about other's disclosures through their parents, or has spoken with other children about their experiences. Differentiating between children's second hand knowledge of events, and their own observations is crucial.

This was one of the major criticisms put forward by the defence for the accused with respect to the interviews. However, contrary to the defence position that the interviewers did not check for the sources of the children's memories, it was my impression from viewing the videotaped interviews that the interviewers did ask the children directly if the information they were providing was from their own experiential memory (ie that they actually saw it happen) or from their parents' information to them.

42) Repeated interviews should only be carried out under a number of different conditions. They are advisable if a) there is reason to believe that the child has more to disclose, or b) if the first interview is inconclusive despite documented worrisome symptomatology and secondary information from other children which points to the child as one of the victims. They are also advisable when children are very young, especially four and under (Everson, 1992; Hewitt and Friedrich, 1991). In fact in the case of very little children, an average of three to six hours of child contact over two to four appointments is suggested. Care however should be taken not to unduly burden or stress children with repeated interviews that force them to relive their abusive experiences. If a child has made a clear disclosure, it is not necessary to have them return and repeat it over and over. As well the child should not be left with the idea that they should produce more information about an incident even if there isn't more to tell.

Examination of the schedule of interviews indicates that at the depositions stage there were only six children who had more than three interviews: At trial only three children X, Y and Z, had more than three interviews. Not all of their interviews were shown to the jury. There a few cases where I felt that the additional interviews were not necessary.

43) The interviewer should gently but firmly challenge bizarre impossible accounts, while keeping an open mind and trying to understand why a child would make such a disclosure. Had they been tricked into believing certain things occurred in a certain way? It is always important to determine the authenticity of the disclosure information. This was effectively done in many of the interviews. For example, when the following questions were asked a) where everyone else was in the Creche when the incidents were allegedly occurring? b) why did you not tell someone before about the abuse or c) how is it that no one noticed any injuries from the pointed objects or noticed you crying. d) how come you didn't burn in the ovens?" There is always the concern that if one reacts with too much cynicism to what appears to be a bizarre account of abuse, the child will clam up in the interview, and not disclose anymore. Interviewers must strike a balance between a gentle challenge and outright negation of a child's story. In my opinion, this was definitely done in the interviews of the six complainant children whose cases resulted in convictions.

44) Interviewers should use a variety of media in interviewing young children. These can include drawings by the children of their experiences and the places where events occurred, pre drawn anatomical drawings where children can identify body parts and terms they use to describe them, miniature dolls and doll furniture to demonstrate scenes and activities, and less frequently under specific conditions, anatomically correct dolls to identify specific sexual

acts and bodily parts. In my opinion, and this is supported by the clinical literature, such methods can assist a child in demonstrating what happened when they lack the vocabulary to do so. With respect to the anatomically correct dolls, they should be used only by interviewers trained in their use (Robin, 1991), and only once a child has attempted to verbalize or has demonstrated where on their body something has occurred, but is having difficulty explaining how they were positioned and exactly what transpired. One should be prepared for the argument that they are suggestible. Their use is routinely challenged, and as such one must decide if they are going to really be of assistance.

Interestingly, I noticed that the anatomically- correct dolls were used more frequently in the beginning of the investigation, when the interviews just started. but their use tapered off (was that as a result of feedback from the psychologist monitoring the interviews?). I did not see examples of misuse of the toys. dolls and drawing activities in the interviews. that would in any way affect the integrity of the evidence.

Defence arguments that the play activities detracted from the seriousness of the interview, or caused children to fantasize and not talk about real things to do with the allegations were not in my opinion demonstrated in the interviews that I observed. This was a non issue. There was only one situation where there was some confusion about a child's description of the colour of the urine which was produced by the offender (She responded 'red and green' and she was using red and green markers at the time). In that case she may have taken the question literally and was replying that the colours she was using were red and green). In any event this was not significant with respect to her evidence, or to the case.

A clear example of how diligently some children tried to portray events was captured in the creation of the Creche was evident by R. who took great pain to place things as he remembered them.

45) Specific details provided by a child in their interviews are best not shared with their parents, until all the interviews are over for that child, and for other children as well who are involved in the case and might be affected by hearing the details, if it were leaked.

From what I was able to glean from the evidence, parents were routinely informed of what their children said in their interviews. This was unfortunate, because of the possibility of parents sharing this information with other parents. However the reality in this case was that the parents generally knew the disclosure details anyway, as their children had previously disclosed to them. a fact which triggered the formal interview in the first place. The problem of parents sharing the information is of course a separate issue.

46) An attempt should be made to evaluate the consistency of the information provided by a child across their different interviews (if there is more than one interview). One should take into consideration the fact that young children will vary the way in which they describe the same incident, because they are likely to stress different aspects and the order of their presentation. If there have been many separate incidents of similar acts but in different locations, or acts which occurred in the presence of different people; children's abilities to differentiate exactly what happened and who was present on each occasion will be less well developed than an adult's. Therefore consistency should be expected only with respect to central rather than peripheral or incidental details of an incident. Central details are ones such as the identity of the offender, and the different acts perpetrated, but not necessarily the exact location, timing, or positioning, or number of incidents.

Generally, interviewers did attempt to revisit previous allegations and search for consistency in reports. If there were inconsistencies, they tried to clarify why that was so This was not always possible.

## **Assessment Of Reliability Of The Evidence In Respect Of Child Complaints Whose Cases Resulted In Convictions**

Child Z

Evidentiary Interviews

First interview: This child complainant was primed to talk about the accused in her interview, which suggests that she was aware of the purpose of the meeting. She began immediately with the least intrusive act involving herself (exposure) and then went onto describe what she had witnessed happening to two other children. She then provided considerable detail in response to more direct questions about what she had seen. She demonstrated sexual knowledge well beyond her years. She provided a clear disclosure of sexual abuse involving herself in response to a direct question. Once again there was considerable detail. In response to a direct question, she was able to identify the source of her memory for the abusive incidents which involved the other children - her own eye witness experience. In response to a direct question about the term she used to describe the semen which went into her mouth, she acknowledged her mother had explained what the substance was 'baby stuff'. She described feeling ill a number of times throughout the interview when describing the oral sex This ill feeling in the interview was consistent with her described reaction to having to swallow semen.

Throughout the interview, she demonstrated appropriate affect, and was obviously anxious and uncomfortable with the information she had to disclose. The fact that her allegations began with a less intrusive act to a more intrusive act is typical pattern of disclosures in children. When asked a forced two- choice question about whether she ever

went out of the Creche with the offender, she answered that she went for walks, and then added only that she did not like to do so.

She was able to explain the circumstances surrounding her disclosure to her mother prior to coming to the interview. She understood the duty to tell the truth, and was intelligent and conscientious. She paid attention to the questions being asked, and corrected the interviewer on one occasion, when she used the offender's name instead of a child's as part of a question. When she did not respond to a question, it was my impression that she was upset with the material she was discussing. Her last disclosure that she was touched in her groin area with the offender's penis, occurred following a request by her to leave the interview. She was then not prepared to discuss any details surrounding that act, and wanted to leave.

The interviewer conducted a sound evidentiary interview, using open ended questions initially and gradually moving to more direct questions. There was good rapport throughout the interview, despite the child's discomfort with the topic. The use of media (in particular the anatomically- correct dolls) was appropriate, in that other dolls were used first, and the child gave a verbal description of the acts before she was asked to demonstrate using the dolls. This was a good interview all around. Second interview: The second interview was more difficult to conduct, as the child was anxious from the start and she wanted her mother who was in the other room. She was less cooperative generally and her demeanor suggested that she was quite nervous. She initially played for a long while with the toys, and was less keen to talk about the offender. Using anatomically correct dolls, she was asked to identify body parts and junctions which she did. This was a good method of moving towards the discussion of the abuse, as the interviewer was able to ask her a question about her vagina. In response to a direct question re who had seen her vagina, she mentioned the accused, and demonstrated. There was incremental disclosure in response to a direct question about seeing the offender's penis, and another sexual act was described in more detail by her.

The child was particularly mature and candid in her expression of empathy for the littler children whom she felt were afraid of the accused. She was honest in saying that she wanted to leave the interview.

In the interview, the interviewer employed a few general open ended questions and then immediately introduced direct questions. Given that the first interview was the previous day, it was not in my view unreasonable for the interviewer to pose a leading question using information the child had mentioned the day before. Again there was appropriate use of the anatomically-correct dolls. Overall this was another good evidentiary interview.

Third interview: The third interview was difficult as well, as the child identified that it was scary to talk about the offender. Once again she seemed primed to talk about the offender, despite her anxiety. However she needed reassurance from the interviewer that the offender would not know that she had told. She demonstrated considerable anxiety when describing a non-sexual abuse incident which scared her- the dunking of her head by the accused under water in the pool at QEII, and her belief that she was going to drown. She shared the reasons for her late disclosure about the other incidents- threats by the accused, and once again she appeared worried. She disclosed more sexual abuse, but had difficulty describing the position of her self and the accused when he attempted to penetrate her vagina with his penis. She also talked about attending the offender's home.

She appeared to have adult information in that she was aware of the reason for her recent blood test, "because of the possibility that the accused had hurt her body".

The interviewer used a combination of open ended questions followed by more direct questions. There was an evaluation of the child's 'source monitoring' once again, when she was asked how many children had told her details about the offender. The major criticism of this interview is that despite the child asking to end the interview a number of times, the interviewer went on to ask many more questions of her. From an evidentiary point of view the interview was sound, but the child was unhappy because she was not listened to when she asked to leave. There is no doubt that she was anxious and frightened about disclosing more details of the offender's behavior towards her.

Fourth interview: In the fourth interview, the interviewer began with a leading question "I know that you've been some places with Peter", and then a more general question "Tell me all the places". The child had mentioned being taken to OEM to swim with the offender, and that she had been to the offender's home in the previous interview, so the interviewer did not actually suggest something the child had never mentioned before. However, there was a better way to frame that question so as not to suggest to her that she was taken more places than the QEII and his home.

There was an incremental disclosure when the child mentioned that she had been abused by other adults as well. The child was not prepared to use the anatomically correct dolls to demonstrate the abuse, and she refused to simulate one of the abuser's faces. The child actually hid from the camera, behavior indicative of her distress with the process. She wondered out loud when it would all be decided, clearly more evidence of her own anxiety and the pressure she was feeling. She was concerned that the offender would deny the allegations. In this interview, she was very vocal about her fears of the offender.

The rapport was not as good in this interview, as the child was distressed and difficult to console. It was obvious that she had made incremental disclosures to her mother prior to coming, and these included being taken to other locations and sexually abused by others. With this information in mind, the interviewer directed her line of questioning almost immediately to solicit this information from the child. There was as a result more leading questions in this interview than in the first three.

It appears that the child's mother was saying mildly negative things about the offender -"his family doesn't like him" which came out spontaneously in the interview. The interviewer as well was negative in her comment about talking to the offender "No I talk to kids-I don't talk to people like him".

Overall, this interview was not as well conducted as the first three, but there were no serious flaws in the interview style which could be said to have negatively affected the integrity of the child's evidence.

Fifth interview: In the fifth interview, the child began by announcing that she didn't have much to tell the interviewer. She did provide an incremental disclosure involving other adults in response to an open ended question. Once again she demonstrated considerable anxiety, holding her bear and claiming to feel ill. She was clearly fed up with the interview process, and wanted the opportunity to tell the Judge (seemingly to get the whole thing over). Unfortunately, the interview continued well beyond what she could tolerate, and despite the fact that she announced that she had nothing more to say, she was ignored and more questions were repeatedly asked of her. She maintained her ground and resisted the subtle suggestion that there was more she, had to tell. She provided no further disclosures and no more details, just repeated her earlier disclosure information.

The interviewer's style of eliciting information was somewhat coercive in the latter part of the interview. As it turned out this tape was not shown to the jury at trial.

Sixth interview: There was a sixth interview the next day which I understand was not shown to the jury either. Without going in to any great detail, I did not see why this interview was necessary in the first place, and of all the interviews carried out, it was the weakest from an evidentiary standpoint, as the child was resistant to being interviewed.

Overall the evidence in the first four interviews obtained from this child complainant was reliable and not the result of suggestibility factors in the interview process, or poor source monitoring on her part. Her disclosures were very convincing given her age and level of maturity. The interview style produced good evidentiary interviews.

Testimony at court:

Z, was a good witness in court, and did not waiver on the central details of the allegations. She was adamant that the offender had sexually abused her. She admitted to having difficulty remembering the order and nature of some of the questions asked of her by her mother. She also had some memory problems with respect to when the interviews occurred. This is very reasonable given the length of time that had passed. Overall she held up well, and spontaneously offered insights and comments which in my view lent credibility to her testimony.

Potential External Contamination by Parental and other involvement:

With respect to the issue of contamination through her contact with other children, I do not feel that this was an influential factor in her disclosures. Her contact with Child T, and S, did not in my opinion contaminate her evidence.

The role of her mother in shaping her disclosures was more difficult to ascertain. On the one hand her mother presented as reasonable and appreciative of the importance of not contaminating her child's evidence, in her evidence at trial. On the other hand, she also conceded that she did not follow police direction in February 1991, regarding not sharing details from other children's disclosures with her own child and vice versa. She actually admitted asking very direct questions of her child prior to her first interview, and later on as well. It is also clear that she shared a lot of information with other mothers about their children, in particular with parents of Y, S, V,. Prior to her child's first interview, her contact was mainly with two parents (B and D), whose children were not complainants at trial, but whose disclosures certainly triggered the investigation, and the offender's arrest respectively.

She was away on holiday at Christmas time for several weeks between the end of December and some time in January. This was before her child's first interview Feb. 27th. On Feb 10th, according to her evidence she told her daughter that another child (S,) had made a self disclosure- reporting that she was taken by the offender into the washroom and was shown his penis. According to Z,'s mother she did not have specific knowledge of anything that had happened to her own child, when she told her this. She reported that her daughter began to disclose her own information, and she then asked more direct questions to elicit more details. She also reported that her daughter over the next few months spoke spontaneously of the offender and the abuse.

This mother's involvement with the support group occurred after her child's disclosure interviews which resulted in charges and later convictions Z's mother began attending regular meetings in July 1992 every two weeks. From that time on she became involved with the mother of X, and admitted putting allegations from Child X to her daughter that were reported to her by mat mother. She had a lot of phone and other contact with parents of other child complainants.

However, having reviewed the mother's notes of their discussions and her evidence at trial, I was not convinced that she had significantly influenced the content of her daughter's disclosures in her first four interviews. If anything, she may have affected the order in which the child disclosed her information by the nature of the questions put to her, but not the specific details.

The mother's notes were valuable as they shed light on the nature of the discussions she had with her daughter, and showed her willingness to share that information with the investigators. Some of the information the child gave to her mother was not ever mentioned in her interviews, but was very interesting, due to it's similarity to what was provided by other children in their interviews. For example she described: 1) a circle incident like R, and X, 2) photos being taken like X, although in a different context; 3) food placed up her bottom like T, 4) 'poos' placed on her, 5) taking a bath with the offender like S, 6) sharp objects placed in her bum like R, and X, 7) that the offender

(s) laughed at the children during the abuse - several children said this peculiar thing; 8) she identified other common child victims, many of whom made their own disclosures.

There was also evidence of consistency in her disclosures to her mother and to the interviewer, but a lot more information was provided to her mother about other incidents.

Other clinical indices of reliability:

A major indicator of reliability in this child's disclosures were the many contextual and experiential details provided by her with respect to the abuse. These details in my view, went a long way to support the allegations that she had indeed experienced sexual abuse first hand, as well as witnessed the sexual abuse of others. Two other significant indices of clinical reliability, were the child's symptomatology prior to the investigation, and in the aftermath of the disclosure, (as described by her mother in her evidence), and the child's overall demeanor and sincerity in her formal interviews.

In summary, with respect to Z, the evidence upon which the four guilty charges were based, was in my opinion reliable and emerged within the context of well conducted investigative interviews. Although her mother did not follow the police directive, I did not believe that she contaminated her child's evidence to the degree that it was unreliable.

Child R

Investigative interviews

First interview: The child did not appear to be 'primed' for the interview. In response to an open ended question, he mentioned the offender first, saying bad things happened at the Creche. He demonstrated that he was able to separate out that there were good and bad things about the offender. He was extremely meticulous in his recreation of the Creche using the doll furniture. He corrected the interviewer if the toys were not in the right place. He clearly described the threats used by the offender to maintain his silence, and his demeanor was consistent with a child who was fearful. He was very reluctant to tell how the offender was mean, and he did not want to give the names of other victims. His source monitoring for his information was evaluated, and he was able to differentiate what he had heard, from what he saw. He did not disclose that anything had happened to him at first, but then admitted that the offender had "done wees in his mouth" after the interviewer asked him a leading question. He then minimized the amount that went into his mouth, saying only a little. He gave a clear description of an erect penis.

The interviewer asked general open ended questions at first and then moved to more direct questions. There was an inquiry into the child's understanding of truth, lies and promises, and there was good rapport throughout the interview. The only criticism of the interview, was the repeated questioning towards the end of the interview, regarding all the names of the other children involved- this did not however result in a disclosure. Overall it was a good evidentiary interview.

Second interview: The second interview contained many more direct and leading questions, and the interviewer appeared to be aware of allegations he had made to his mother before the interview. Despite her repeated efforts to solicit more information, he was not forthcoming with further disclosures about himself, and he appeared fearful of the threats made by the accused that he'd go to jail or die. Like complainant Z he referred to " dunking children in the pond" as a mean thing that was done by the offender. He reiterated his first disclosure of 'wees in the children's faces', but was very reluctant to mention other children's names despite indicating that he witnessed it. After many leading questions, he agreed that he too was a victim. He was uncomfortable admitting this.

There were some problems with this interview as it had a coercive favour to it, and contained many repeated leading questions. The saving grace was that the child had previously given these disclosures in the first interview which was conducted more objectively.

Third interview: The child was ready for the interview, announcing that he had a lot to say. More allegations came forward unsolicited at first, involving other accused as well, and a lot of contextual details regarding abuse which took place at another location outside the Creche. Throughout this interview, his affect was appropriate, and he was serious about the information provided. Many of the allegations made by him in this interview were strikingly similar to those of Child X; (the circle incident, photos taken, names of other abusers, women as abusers, sharp objects in his bum, secret room where abuse took place, children having to hurt each other). He did not have contact with that child to my knowledge.

The interviewer's techniques in this interview were appropriate. There was less pressure to disclose, and many more open ended questions followed by direct questions. In my opinion this interview resulted in the child offering reliable evidence.

Child R's court testimony:

The most convincing aspect of the child's testimony was his description of his fears of the offender's threats and his belief that they would come true if he told. His mother in her evidence supported the fact that he thought he would die if he told. He was also forthcoming in his description of his mother's questions to him, acknowledging that she

asked him direct questions to which he responded yes. He then elaborated. He had some difficulty in the cross-examination and was confused a number of times about who was present, and where different abusive incidents occurred. Under pressure he admitted that he couldn't remember certain events, such as when the stick was placed in his bottom by the offender. He agreed that he could have been mistaken. However, he was consistent in his allegation that the offender urinated in his mouth. He also maintained through several challenges, that he was placed in an oven and refused to renege on this allegation. He gave many details about being on the roof and in a room of the Cranmer centre where abuse took place. This was interesting in that testimony by a police officer who did the scene investigation of the Cranmer centre supported his description of the man holes on the roof, saying these things could only be seen from someone who had been up there. Overall he was a reasonable child witness.

Parental involvement and potential for contamination:

A significant feature of R,'s mother in her testimony at trial, was that she indicated that her son had disclosed that the offender had done wees and poos on children well before the investigation had started. She did not take it seriously at that time. She denied that she knew about all the allegations before she heard them from him, and therefore she denied influencing his responses. She admitted to only two direct questions; one related to the offender pulling down children's pants and touching their bottoms, and one related to whether he had seen videos of bulls, both of which she claimed led to a flood of disclosure information. She denied knowing about the details of the allegations made by P, and O, even though she spoke with their mother. She claimed that her son did not have much contact with other Creche children only P, and Q, on one occasion much later. She said she was not aware of all the things other children were saying until late June or July 92. She did however see the list prepared by Mrs. D around that time frame, and was then aware of some of the other allegations made by other children. This mother attended the first December meeting, and the Knox Hall meeting, but appeared not to be involved with the other parents to any degree in between the two meetings. She claimed not to know that the investigation was ongoing, until late March. Unlike many of the other parents, she did not have previous friendships with the other mothers per se.

Her testimony suggested that she did not repeatedly question her son about the offender or the Creche, and that when she did question him, she did not use leading questions beyond the two she described. In my view contamination by her of the child's disclosures was not a significant issue.

Clinical Indices of Reliability:

The child's symptomatology as described by his mother both prior to and after his disclosure were very consistent with a child who had been sexually traumatized and terrorized by threats to his personal safety. His behavior was not the result of questioning by his mother regarding other's allegations to do with the offender and the Creche. In summary with respect to R, the evidence he provided to the interviewer and the court, upon which a finding of guilt was obtained, was reliable and not tainted by the investigative process or by parental contamination.

Child O

Investigative interview

This child was only interviewed on one occasion. In that interview she described the offender as a 'mean bugger', who threw her in the sandpit, sat on other children, called her and other children nick names. The interviewer asked several leading questions regarding the bad things she'd told her parents about the offender, and hinted that tickling was one of them. She spoke of the tickling at great length. Later, unsolicited the child offered that the offender had poked her in the crotch, and that she had told him to stop because she did not like it. It was not clear how many times it happened. Throughout the interview, she was very histrionic, and used expressive vocabulary, raising her voice and demonstrating with her arms. At times she appeared quite agitated, and angry with the offender. She was very bright and articulate.

The interviewer was obviously aware of her allegation to her parents, and was very direct in attempting to solicit the disclosure. However, the child did disclose on her own to interviewer, and not in response to a leading question. The interview was very straightforward, and appropriately conducted.

Child's testimony in court:

The child was a good witness in court, and although she did have trouble remembering some of the peripheral details of her disclosure, she was steadfast that she had been poked by the offender in the crotch. Her description of her disclosure to her parents was consistent with their testimony.

Parental involvement and potential for contamination:

Parents did not attend the Dec. meeting despite being told about it by a mother of another Creche child. They had no

ongoing contact with other parents. They did attend the Knox Hall meeting out of curiosity, and decided to ask their daughter about her experiences with the offender. They started with what appeared to be a leading question, in which they told her that the police thought the offender had perhaps been doing bad touching with some of the children at the Creche. Upon hearing this, she made a confronted disclosure about inappropriate touching.

With respect to contamination of her evidence by her parents, both parents denied asking her repeated questions, or discussing the case with her. They did not share details of her allegations with other parents, or put other specific allegations to her after the first question. They arranged for an investigative interview for their daughter, but unlike other parents did not attend the support group or share stories. There is no evidence that they in any way influenced her to make erroneous allegations. There is no evidence to suggest that the child was influenced by other children either, and she did not have regular contact with the other child complainants. It appeared as though this family was isolated from the other parents and children.

#### Clinical Indices of Reliability:

A significant clinical indicator of reliability was the evidence provided by her parents that she had disclosed to them rather forcefully that she did not like the Creche, when they drove to park in the Creche parking lot prior to a fireworks display (well before the investigation began). She was castigated for doing so. According to both parents she was often reluctant to attend the Creche the year before and would cry.

This child's symptomatology (night terrors, refusal to use the toilet at the Creche, temper outbursts, hitting her mother in the crotch) were consistent with sexual abuse having taken place in and around the toilets at the Creche. In summary, child O's evidence of inappropriate touching upon which there was a finding of guilt (indecent assault) was reliable, and not contaminated in anyway by her parents' questioning of her, or by the nature of the evidentiary interview.

#### Child Q

##### Investigative interview:

In response to an open ended question about the purpose of her interview, the child indicated that she was there to talk about the things that the offender did. She began with a description of tickling, which she said was scary because he wouldn't stop. She described him as a person who wanted to make children scared, and disclosed that she was afraid of him. She also disclosed that she complained to a worker (other children claimed to have told her as well about things they did not like about the offender) and that another worker saw some of the incidents. In response to an open ended question as to whether there was anything else she remembered, she described 'drinking games' during which the offender put his penis in her's and other children's mouths. She identified several other child victims including her sibling.

This child was very serious and attentive in the interview. In response to several direct questions, she offered a lot of contextual details with respect to the location in which this abuse occurred, the positions during the acts, the taste in her mouth etc. She was very subdued, held her blankie, and her demeanor was consistent with a child who was describing events that were troubling to her.

She also made another disclosure about inappropriate touching of her vagina and bottom, and was clear that it was not in the context of toileting. When asked, she explained her delayed disclosure to her parents "they asked if I wanted to talk to them about him": She seemed relieved. She was very convincing in her disclosures.

The investigative interview was well carried out, beginning with open ended questions, and then followed by more direct questions. This child was easy to interview, as her vocabulary was good, and she was comfortable with the interviewer. The rapport was excellent. There was appropriate use of media (dolls) to assist her in demonstrating where the secret touching occurred, but it was not a necessary part of the interview. There were no suggestions made to the child about what others had said, and repeated questions were used only as a means of rechecking details.

Overall the interview was sound, and her evidence reliable.

##### Second interview:

In the second interview, the child did not really add much more information, other than to identify another location where abuse occurred- a big building with escalators and people working at desks. She was insistent that other teachers were aware of what was going on at the Creche with the offender. She repeated much the same disclosures as in her first interview. She was cooperative and tried hard to answer questions. She identified a number of other children (mainly other complainants).

It was apparent that the child had spoken to her mother and her mother had offered her some insights in response to her disclosures (for eg the suggestion that one location might have been the City Council building, and that there was once another male worker at the Creche that fitted his description). In each case, the child clearly identified the source for that information as her mother and not herself.

The second interview was not shown at trial. There were no obvious problems with this interview, as the questions asked were appropriate, the rapport was good, and the interviewer was attentive to the child's responses, and

clarified anything that she was unsure of. There was an attempt to evaluate the child's source monitoring and knowledge base, and some challenges with respect to inconsistencies in the child's accounts of who she had spoken to at the Creche about the abuse.

My impression is that there were concerns on the part of the Crown about contamination by the mother of the child's evidence as a result of leading questions and suggestions put to her, and the decision was not to use the interview as it occurred at the end of the investigation.

The third interview was not shown either, as it followed the taped interviews made by the mother of her discussions with the child, and there was concern that the window of opportunity for contamination had widened by this point in the investigation. This was understandable but was unfortunate as the child made clear disclosures.

#### Child's testimony in Court:

The child was a good solid witness, and her evidence was consistent with her previous disclosures. She had some difficulty remembering all the different discussions she had had with her mother, and what was said in each, which is understandable given the time delay. She was adamant about many things regarding the abuse; the acts, the offender, and the awareness of other staff. The only questionable comment was her description of being in an incubator as a child, in that she confused her mother's account of what had happened to her with her own memory. From mother's testimony, I deduced the fact that there was a picture of the child in an incubator with the tubes, and that explanations had been provided to her as she was growing up by her mother of her and her sibling's prematurity and need to be in an incubator. This information obviously became part of her autobiographical history, which she then claimed as her own memories. This does not suggest that she was more susceptible to difficulties in source monitoring with respect to sexually abusive events she alleged occurred.

#### Parental and other sources of contamination

According to the child's mother in her evidence at trial, she talked to her daughter about the Creche no more than four or five times, between the months of December 1991 and March 1992 prior to her daughter's first interview. As well, she read two books to her, one called "that's Wrong With Bottoms?" and another "A Very Touching Book": The term "secret touching" was described in the second book. In my opinion, the child's exposure to the reading material is not a concern with respect to contamination of the evidence, although it may have contributed to her motivation to disclose. It is my understanding, that this mother heard about the investigation and called Mrs. D to provide support. She conceded in her evidence that in February she heard from her that another child S had disclosed that her two children were there when the offender had put his penis in her mouth. She decided to ask a leading question of her daughter regarding the offender, by telling her what the other child had said. She claimed that she did this because her daughter was displaying concerning symptoms, and it was reported that she allegedly had witnessed something. Her son had already begun to disclose some information of his own about the offender. She reported that her daughter then disclosed sexual abuse to her, providing a lot of information on her own without being asked further questions. Altogether denied at that time knowing all the allegations that were being made by other children to their parents when she first spoke to her children.

The two tapes which this mother made of her discussions with her child in November 1992 before the last two interviews were however more problematic than her initial discussions, in that there were many leading questions, suggestions by the mother as to how the child was feeling, and information on what other children had reported. As well, these tapes were made the morning after the mother had already interviewed the child the night before. This was obvious by the fact that she kept referring to what the child had already disclosed. According to her, she and the child were driving by the Creche a day earlier and this apparently triggered more memories of other things that had happened. In response to a leading question over whether she had been taken to a house with other children by the offender, the child disclosed that she had also been to the offender's house. She then gave many details on her own about other offenders and their activities such as hitting children on their backs and tickling them. She also included the curious detail of the offender laughing when the children were being harassed (this has come up in many complainants' disclosures). In the taped interviews, this mother was very supportive, and responsive to her child's demeanor, which she labelled anxious (we of course cannot "see" this). There were some other disclosures in response to open ended questions (the offender urinated in the corner of a room at the Creche, wanted them to run through sprinklers naked, locked them up in dark rooms and scared them with stories of monsters).

With respect to contact with other parents of complainants, this mother attended informal support group meetings between December 1991 and March 1992, but denied that children's allegations were discussed at those meetings. In fact she mentioned that the group had sought legal advice around the operation rules for the group, in order to protect the privacy of the children who were coming forward. She did admit that this rule only applied to the meetings and not to separate conversations outside the room. She also attended the two information meetings and in July she joined another support group just for complainant parents, in which the team social worker and someone from Specialist services participated. It appears that her main contacts were with Mrs. D, S's mother, R's mother and Z's mother.

There is no doubt that information was shared between the parents about their children's allegations as the children were naming each other as victims to their parents. Given that the children alleged that most of the abuse was carried out in the presence of other children, this is understandable. The fact that the children often described the same things does not mean that their disclosures were only the result of suggestibility factors, they may have had the same things happen to them!

This child had a sibling who was also a complainant, and therefore there was obvious contact between the two children. However, the child denied talking to her brother about the details of her experiences when she was testifying. There was some contact between child R, this child and her sibling, and indeed a disturbing incident in which this child witnessed the child R, masturbated openly in a car. In addition, her sibling was displaying severe behavioral and emotional symptomatology, which may have contributed to her own anxiety. This would not have been sufficient to cause her symptomatology.

Clinical Indices of reliability:

Two comments made by the child in her second audio taped interview with her mother, in my view provide support for her credibility; 1) when she declared that the worst thing one could do in the world is tell lies, and secondly 2) when she agreed that she didn't like remembering the abuse, and said "It's too awful, stop me remembering, give me some spice and special medicine from the chemist to stop me remembering, it is too awful".

Her behavioral symptomatology (toileting problems etc.) during her time at the Creche, and after her disclosure (nightmares, fears etc.) were consistent with having being sexually traumatized and frightened. Frequently, when children begin to disclose there is an increase in symptomatology, consistent with intrusive thoughts brought on by discussing the abuse and remembering details.

Overall, while I agree that this mother's questioning of her child was too intrusive prior to her interviews in October and December of 1992 this was not in my view the case prior to the child's first interview. Given the quality of the first investigative interview, the child's clarity and demeanor, and the contextual details provided by her, as well as her performance on the stand, it would be my opinion that the evidence upon which the convictions (unlawful sexual connection and indecent assault) were made was reliable.

Child S

Investigative interviews

First interview:

In the first interview, this child described her bare bottom being painted by the offender (there is a photo taken of this), and that she was angry when it happened but did not say so because she thought he would hurt her. She was then asked a direct question as to whether the offender had indeed hurt her, to which she responded, no. Was this because she only equated hurting with physical abuse not sexual abuse? She then offered that he had said "yucky things" in the toilet, and wanted the children to drink wees. In response to a direct question, she disclosed that she witnessed the children drinking wees, and that she closed her mouth when it was her turn. Her reason for not disclosing earlier is that the offender told her that her mother would not like her. She later disclosed going to the offender's home, and that Child Z was there and another child. ("Interestingly" deleted) She reported that the offender's mother was there (several other children have said the same). She was clear when demonstrating in her booklet that she brought, what she drew and what her mother drew in order to tell her story. In response to a leading question regarding having a bath with the offender, she volunteered that she was in the bath with him, and he washed her bum and vagina at his house. She offered a lot of detail about the bath scene, but only in response to numerous direct questions. She said she was not initially upset about having to take the bath.

This interview was very long, in part because before she began to disclose, the child talked at length about different things that had happened in response to an open ended question. Towards the end of the interview, the interviewer referred a number of times to things the child had told her mother, suggesting that she had said more to her mother than she was disclosing in the interview. There was pressure on the child to disclose. Throughout the interview, there were times the child was distracted, and quite hyperactive. Her demeanor suggested that this was a difficult interview. Often she felt unsafe- She wanted to know where her mother was. The most controversial question in my view occurred in the following interaction at the end of the interview. The interviewer asked the child "Is there anything that is just too hard to tell me today, that's happened? The child answered "no": "What about something to do with the bath, is there anything too hard to tell me about the bath? "Yep there is, yep there is". She then pressured the child into disclosing. The response was that the offender defecated in the bath. It is understandable that she would be reluctant to disclose this. The child's description of that act, did lend credibility to her disclosure, but it would have been better from an evidentiary point of view, if she had spontaneously reported that without the pressure.

The use of the booklet the child made with her mother, as a medium in the interview was not something that I've seen done before, but at least it gave the interviewer an opportunity to review what the child had previously talked about at home. It enabled her to assess the child's source monitoring as well, and clarified mother's involvement. The rapport with the child was good throughout the interview. Despite the fact that there were some leading questions,

the information that the child offered appeared credible, in that she offered many details and insights which were not in response to direct questions.

#### Second interview:

The second interview began with the interviewer informing the child that she had heard that the child had more things to tell. The interviewer employed dolls to assist the child in describing the bath scenes. The child pointed out that she used a wash cloth when she washed the offender's bottom, because she did not want to touch the penis (interesting detail). She also described that he had waterproof cushions in the bath (another interesting detail). She gave a clear disclosure of inappropriate touching of her vagina and then told of the touching of her bottom as well. In response to a blatantly leading question, she conceded that he put his finger in her bottom in the bath. This is after she described how he did this to a puppy he brought to the Creche. In response to a direct question as to whether this really happened to her, she answered that it was something that really happened. She denied being upset when disclosing this information, but she was nervous from my observations.

The interviewer used more leading questions in this interview ( especially in relation to the digital penetration of her bottom), but did check the child's source monitoring and her truthfulness. The rapport was good, and there was appropriate use of dolls (ordinary baby dolls) to assist the child to simulate the bath scene, but it was difficult to tell exactly what she was doing. Overall the interview was adequate, except for the above leading question. It is my understanding that the second interview was not shown at trial because of the contentious question.

#### Third interview:

In the third interview, the child indicated that she had come back to talk about the bath stuff, and that it was scary. She described the vaginal penetration in the bath as "sexing" (a term not mentioned by any other child). She gave a fair bit of detail saying that his penis was yucky and hairy. She made a similar allegation to child Z, and others about the offender's mother kicking her, that the offender drove a car, and that he laughed when she was being hurt! In this interview she gave a lot more information, usually in response to more direct questions.

The interview was quite long, and there were times when it was clear that the child was having difficulty talking about the abuse. There was a very blatant leading question regarding the insertion of a needle in her bum (it was almost phrased in the form of a guess) and as a result, that evidence was not reliable. However the allegations she made about penetration of her vagina in my mind were more credible. The problem was that her demonstration with the dolls was not clear. In this interview, the use of anatomically -correct dolls would have been an asset.

#### Child's court testimony:

This child's cross examination was quite long and difficult. I noted that she had difficulty remembering the order of some of the events, which was understandable. At one point when asked if she remembered the second interview she asked "What's an interview?", reminding the court that she was just a child. At least she was able to point out that she did not understand the question. She maintained her allegations about the bath, the wees in her face, the touching of her vagina and bottom, and the attempted penetration of her vagina. She also maintained that the offender had placed a needle in her bottom. The questions in my view were quite confusing for her, and expected a level of analysis that is not characteristic of a child of her age. Given that, she did manage to maintain her ground, and was consistent in the central features of her allegations.

#### Possible contamination by parents or others

This child's mother did not attend the December information meeting. She reported asking her child a direct question about tickling in February 1992, as a result of speaking to Q's mother. The child did not make a disclosure. The mother attended the meeting at Knox Hall in March. She heard more allegations from Z's mother, suggesting that her child was present in two locations when abuse occurred, at the Creche and at the offenders' house. She denied knowing specific abuse allegations regarding the offender's behavior. Shortly after, apparently in the context of taking a bath together, she was alarmed by her daughter's sexualized behavior in the bath. This information only came to light at the trial, and was not in her earlier statement. She asked her daughter about the offender's house (she already had heard that children were taken there). Prior to arranging an investigative interview, she prepared a "booklet" with her child, about the different things that had happened. The booklet "On the way to Peter's house" contained very specific disclosures. This mother had considerable contact with O's mother, and her child regularly played with child Z, a number of times from June 1992 on. It was reported by both mothers that the children talked a little about the offender and the Creche (this was recorded by Z's mother). The child in her evidence indicated that this was so as well.

#### Clinical indices of reliability

A number of symptoms were described (sore and red vagina, fear of having a bath alone, leaving the door open to

the toilet, excessive masturbation, sexualized behavior) prior to her disclosure, and after her disclosure (bouts of nausea, difficulty going to sleep, fear of being alone, sexualized play, scratched 'help' in the wall). The child also had sexual knowledge beyond her years. The finding of medical support for vaginal penetration was another very significant indicia of reliability.

Overall, despite the evidence which suggests that her mother was responsible for asking her leading questions and putting together a 'book' with her about her experiences, and despite the fact that there were some leading questions in her investigative interviews, the child's evidence upon which the convictions were based was reliable. I would venture to say that given the medical evidence, her other disclosure of vaginal penetration was likely reliable as well, even in light of her inadequate description using the dolls.

#### Child X

Investigative interviews:

First interview:

At the beginning of the interview, in response to an open ended question about the purpose of the child's visit, he responded by telling the interviewer that she had to ask him questions, but then volunteered that he was there to talk about the Creche. He clearly wanted the interviewer to probe the answers from him, and was obviously a very reluctant participant in the beginning of the interview. He made the comment that the offender was alright when he was at the Creche, except that he 'fiddled with his rude parts' and smacked his bottom. The interviewer then went on to have him show her his knowledge of body parts and his meaning for the rude parts. The 'fiddling' appeared to have occurred when his diaper was being changed- innocuous? Interestingly, when the child was asked if the fiddling felt okay or was an okay thing, the child's response was "now its not, but then it tickled" suggesting that his perception of the act had changed over time (influenced by someone else's interpretation?).

There were many questions repeated over and over for clarification, and to check for more disclosures. Despite repeated questions, the child did not disclose anything else after his first disclosure. In fact, he became increasingly angry that the interviewer kept repeating his allegation to him. In response to a direct question about whether there was anything else that happened that he didn't like, he said no. He was not helpful in the interview, and would be somewhat sarcastic in his responses and angry, for example "I don't know, you'll have to ask him". Later when asked again if some thing more happened, he responded that there were no other things anyway.

This interview was not terribly productive, and the child was indeed a reluctant participant. The interviewer had a difficult time obtaining his cooperation, and would have been better off, aborting the interview midway, and offering to see him another time when he felt more like being there. In any event too much time was spent going over the incident in which the offender fiddled his rude parts. Given his reluctance to describe it in the first place, this was an uncomfortable process. The interviewer did establish his understanding of truth and lies and promises. The rapport was mediocre, but the interviewer did try to engage him in conversation about movies and other topics. The information provided was likely reliable, but there was nothing to suggest that sexual abuse had occurred.

Second interview:

The second interview occurred three months later and was the first of a triad of daily interviews. Evidently his parents had requested another interview because he had been disclosing to them other things that had happened with the offender. The child was more cooperative and seemed more comfortable with the interviewer. There were many more incremental disclosures, from less intrusive to more intrusive, beginning with things that were said and then things that were done to him. Firstly, he disclosed swearing by the offender. He then disclosed being in the bath with the offender at his house, and that there were other adult male friends there at the time. When asked what the other friends' names were, he became somewhat defensive, and said "Why are you asking?", but then responded. His disclosure information about the bath was somewhat vague at first, but then, in response to direct questions, he provided some unusual details unsolicited (There were poos in the bath which he was made to eat, if he didn't he would have to eat a whole load the next time). He explained that the door was shut, that he didn't have a choice but to take off his clothes or the offender would do it for him, and that bad words were used by the offender after the bath. In response to a question of whether anything else happened, he disclosed that he had to touch the offender's penis at the Creche and at his house, until white stuff came out. Again he provided an interesting comment that he was not to hold the penis too hard. He provided a lot of contextual details, and sexual knowledge beyond his years in relation to that incident.

A little later in the interview, he disclosed that the offender had put his penis in his bum, and then when describing how he felt at the time, mentioned that he felt sad (I noted that in the interview, he then claimed that his eye were getting sore because of the light - was he upset or crying?). From the video, it appeared that he might have been teary. This was not addressed by the interviewer which was unfortunate.

He offered some interesting comments regarding what was said by the offender when they returned to the Creche to cover up what had occurred. One curious fact that he mentioned was that the offender drove a car (this has been said by several children). He then went on to describe other offenders, and mentioned that there were other child victims as well like child U, and child Y, and another non complainant. His style of responding was quite unique. He began

repeating many of the questions put to him before he answered, which was a curious feature. He also would suddenly change topic and talk about something totally different, and then return to the topic of the abuse. Although it was suggested by the defense that his affect was inappropriate (no emotions), I do not agree. Both strategies, the repeating of questions and changing topics were likely used by him to cope with his emotions, given himself time to respond and distract himself.

He described of oral penetration by several adult males in addition to the offender. He indicated that the offender took pictures with a camera and that he was laughing while the child was being abused. He mentioned the house had a ladder.

His description of oral intercourse was particularly detailed, and he said that white sticky stuff went into his mouth, he swallowed it, it tasted yucky, and it made him sick.

The interview was well conducted, with a combination of open ended and direct questions. Although there were a few leading questions, the child offered a lot of detail on his own initiative. The rapport was better than in the first interview, and the child seemed more comfortable with the interviewer. Overall I found that the interviewing style was balanced with minimal suggestion. The interviewer checked with the child if he had disclosed the information to anyone else, and also where he had obtained his information. The child was attentive to the questions, and responded more willingly than in his first interview.

#### Third interview:

In the third interview there were many disclosures and details provided by the child, some of which were pretty incredible. A neutral discussion occurred for the first bit, and then the interviewer requested that they talk about what he had come back to tell her. The child obviously had a lot to tell. His last interview had been the day before, and I'm aware that there was a further disclosure to his mother, that he had not told the interviewer everything the day earlier, and this was communicated to the interviewer. In any event, he responded that there were more things about what the offender did to him that he wanted to talk about.

The interviewer then asked a series of open ended questions followed by more direct questions, which elicited the following numerous details; he was taken to a library building/ house, there were trap doors there, the offender drove, the offender's mother was present, the offender read adult sex books, other children were there including child Y, and child Z and either N or T, the children had to hurt each other, they were locked up, they were then taken to QEII afterwards and some children were dunked in the pool, other adult offenders with the names Spike, and Boulderhead and some women were present, he was given drugs to sleep-pills and needles.

In response to a direct question as to whether he had gotten hurt, he said yes and alleged that the offender and another adult male had stuck a sharp stick and burning paper up his bum, and that pictures were taken and the offender laughed. He once again made disclosures of anal penetration, photos being taken and of being forced to jump off a ladder.

Like before, the child repeated most of the questions that he was asked, and whenever he was asked for explanations, he provided elaborate explanations. His demeanor in this interview was very matter of fact, considering the information he was providing, however he did suggest that he had felt threatened, and that he had been afraid when the things were happening. Once again, he would shift back and forth between the disclosures and playing with toys in the room.

In this interview, it was my impression that the interviewer did not sufficiently challenge the child with respect to some of the more implausible details, nor did she successfully determine the context for some of the allegations, and test out whether there was a possibility that he had been tricked into believing things happened as he said -for example, that he had been poisoned, or that the paper was actually burning when placed in his bum etc. Towards the end of the interview, the reports from the child were more and more disjointed, and at times implausible as he described them, yet there was really little challenge. The allegation that the offender had placed his penis in his bum was repeated, although with less detail this time. The earlier description in the second interview of the accused's penis against his anus was in my view reliable, and provided a detailed description of the act. This time the disclosure provided less detail and was imbedded in the context of a bizarre larger account which at times was difficult to understand. Despite this, there was consistency across both interviews with respect to the allegation of attempted anal penetration by the offender.

#### Fourth interview:

The controversial 'circle incident', the allegation of being placed in an oven, of having needles placed in his penis, and the involvement of other female teachers from the Creche in the abuse were new developments. The first allegation regarding the circle incident was offered in response to a general question about the easiest thing to start with. He responded that he wanted to talk about what the offender's friends did to him, and in that context he described the circle incident. There were no suggestive questions by the interviewer. The child identified other children present in this circle, and added a new child that was involved in the abuse. Although he mentioned that there were at least nine children, he did not remember all of them. With respect to sexual acts, the child reported that the children were naked in the circle and had to hurt each other and touch each other sexually. He described needles

being placed in his penis. At that point he claimed that he felt sick and was going to throw up. He is not able to say why he a feeling that way. Later he said that he had a tummy bug over the last three days, (interestingly, coinciding with the three days of interviews).

Given that he was interviewed the day before, the interviewer asked him why he did not tell her the new things the day before. He claimed that he just remembered. Once again many details were offered in response to direct questions. After the break, the interviewer attempted to clarify some of the details, and the child's source monitoring for the offender's house address. Apparently the child had been taken to the offender's house the day before. The child was able to say that he recognized that it was the same house he had been taken to. Later in the interview, he made a spontaneous disclosure of oral intercourse by the offender. The latter part of that interview was spent reviewing all the information he had provided. He was remarkably consistent in his account and explanations. The interview was long, and the information provided was no doubt shocking for the interviewer to hear. Given the disclosures from the child, I felt that the interviewer did attempt to challenge some of the details, but not all. She remained 'open' to the possibility that these events occurred, if not exactly as he described, then in some semblance. There was an inquiry into his understanding of truth and lies, and he was asked to promise to tell the truth. Frequently he was asked if what he was describing was what really happened. He always responded in the affirmative. The disclosures were very disturbing, to say the least. (I found it interesting that Child R made a similar description to the 'circle incident' and that Child Z's mother in her notes of her discussion with her daughter contained a reference to children in a circle as well.)

#### Fifth interview:

The fifth interview was spent in checking as many details as possible with the child. This time there were some inconsistencies with respect to the identity of the other female teachers that were present, and a widening of the allegations with respect to the number of teachers involved. This tape was also not shown to the jury.

#### Child's testimony:

In court the child was steadfast in his allegations, and handled the cross examination well. In particular challenges to his source monitoring regarding his understanding of the semen ejaculated in his mouth, and his identification of the places the events occurred. He was also clear about the fact that his mother had told him to tell the truth and nothing else. He was convincing in his description of the threats and his reluctance to disclose because of his fears. Even though the information provided to the court was at times bizarre, he never backed down, and denied that he was lying or mistaken.

#### Parental and other contamination:

The issue of parental contamination was mentioned as a serious concern in this case, and an interview was apparently canceled because it was felt that the mother's involvement (repeated suggestive questioning of the child, and bringing him places where he might have been abused) was affecting the child's disclosures and creating erroneous accounts (Masonic Hall as a location).

The mother of the child reported that she heard about the Knox Hall meeting and attended even though her child was no longer at the Creche. She claimed that before going to the meeting she did not question him. She did question him after that meeting, but denied that she knew about the allegation that children had been taken out of the Creche, or any of the details about the acts. She also denied that the child had any contact with other children before his first interview. The mother did admit that she asked her child direct questions. Despite the fact that in his first interview he did not disclose any abuse, his mother was convinced that more had happened to him, and she proceeded to ask him weekly, if the offender had done anything else to him. His behavior after the first formal interview was deteriorating and he was showing signs of distress.

The mother attended the parent support group meetings led by the DSW social worker beginning in July, and met the mothers of Child S, Child Z, and Child Y. She also attended a meeting August 4th at the parents of child Y's home, and the mother of D was there as well. She admitted that she took her son to a number of different addresses (The offender's house based on information from the father of Child Y, and other places at the request of Detective Colin Eade.). She denied that she knew of details of allegations before the child's August interviews. She also denied seeing the list prepared by the mother of Child D, even though it was reported that she had left it there for parents to read at one of the support group meeting.

She may have been confused in her sequence of information she received from other parents, and inadvertently through leading questions influenced some of the disclosures that were made by her child. However, in a letter of complaint she wrote to the team, when she heard that the last interview for her son was being canceled, she did address some of the concerns that had been raised. In particular she provided a chilling account of the child's 'emotive responses when disclosing to her (screaming, crying vomiting etc). She also denied that she ever put, as she termed it such horrific details to her son. She obviously believed in the possibility of ritualistic abuse and was angry that this was an area which was causing the team reluctance and discomfort. In all, the entire situation seemed

very unpleasant, and a great deal of anger was displayed with respect to the lack of reception by the 'professionals' in the case towards her child's disclosures.

Of all the cases of complainant children where there were bizarre allegations, this case was the most contentious in my view. One theory I have which may help to explain the course of events is that the child was likely abused in many of the ways that he described, but his disclosures brought forth a strong post traumatic stress reaction, exaggerated fears and an over worked imagination, wherein he became increasingly suspicious of more and more people, and had difficulty differentiating threats/tricks, with events that really happened (being hung in cages). It is noteworthy that another child who was not involved with him at all, made an allegation that she was threatened with being put in a cage and taken away (Child N). She did not have contact with this child at all nor did her mother! His fears of the threats made by the offender likely increased as he disclosed the abuse.

Clinical Indices of reliability:

As with many of the other child complainants, there were some signs that he was reluctant to attend the Creche, especially some time in 1989 he did not want to attend, and that he was very quiet and withdrawn. There was a separation between parents at the time that may have contributed to this as well. There were no serious concerns re other behavior. After his first interview, his behavior deteriorated dramatically, and he started soiling, bed wetting, having temper outbursts, refusing to go to the toilet, and displaying generalized fears for his personal safety. In my view these symptoms were consistent with a child who as a result of intrusive memories of abuse which were revisited, began to decompensate and developed PTSD symptomatology. Many of the symptoms were similar to another Child P. The investigation was highly very stressful for this child. He displayed his anxiety at home and in his behavior and not in the interviews per se.

In summary, although I would agree that his mother was over involved in questioning him and taking him to sites, that she was aware of allegations by other children, and was convinced that he had been a victim of ritual abuse, it still did not account for the amount of detail that this child provided and the disclosures that he made. The unreliability of some of the details he provided about the locations may have been the result of being taken to locations which looked like where he had been (Masonic Lodge), and were probably the result of suggestion. With respect to the child wanting to please the interviewer by filling in details, it is possible that he felt that he had to embellish his accounts, but he did not seem too concerned with her response. The descriptions he gave of the abuse with the offender contained contextual details that in my view were credible. Overall, the interviews were reasonably conducted, in particular the second and third and fourth interviews.

Although there was definitely over- involvement of the mother in the investigation process, it is my opinion that the evidence the child provided specific to the allegations upon which the four convictions were based was reliable. I would venture as well that there were aspects of the "circle incident" that were reliable as well.

## CONCLUDING REMARKS

After reviewing all the material that was sent, I was faced with the task of providing an opinion on reliability on the cases where convictions had occurred. However in order to do so, I reviewed all the evidence that was sent to me regarding the other complainants at the trial, and the evidence of the complainants at the depositions hearing. Due to the volume of material, and the specific mandate, it was necessary to narrow the focus.

In order to bring together my thoughts on this very lengthy and complex investigation, I decided to summarize my findings by addressing the criticisms of interviewing and investigative techniques by counsel for Mr. Ellis.

**Repeated interviewing:** If there are incremental disclosures, repeated interviewing is necessary. The repeated interviews were an issue only in the case of child X, as it was evident in his fifth interview that the process was contributing to increasingly bizarre and disjointed accounts in the child. There were several cases where there were repeated interviews of complainant children where there were no convictions. Some of these children were not only not forthcoming with information, but were very reluctant to be there. This was a valid criticism in those cases.

**Interviewers were not neutral and objective:** The interviewers were aware of the details of the allegations that the children had made to their parents prior to coming to the interviews. It can be said that they had an expectation that they would hear the same information. They were therefore primed to accept certain disclosures. This was true in the majority of the interviews that were conducted.

**Interviewers allowed children to bring in material they had worked on with their parents to interviews.** Given that this had been already been done with parents (specifically Child S) it was probably a better idea to use the material, and check the accuracy and the child's "source monitoring" than not to use it.

**Interviewers asked direct, suggestive, leading and forced choice questions:** On the whole the interviewers started the interviews with open ended questions but then they reverted to direct questions. Given the ages of the children, this was an acceptable practice. There were examples of leading questions as well, to which some children

responded and others did not. The use of suggestive questions appeared to happen mainly in the context of the interviewer suggesting to the child that they had told parents certain things before coming to the interview, and could they tell them the same information. This likely served to trigger the children's memories, or at times may have decreased their apprehension about talking about things. Unfortunately, if the original material offered to parents was flawed, then it could have led to the children repeating these same things to the interviewer.

**Interviewers permitted free play during the interviews which led to confusion in the children between fact and fiction:** I disagree that this happened in any of the interviews that I observed. It was not an issue.

**Interviewers employed media such as dolls toys etc. to assist children even when they were not needed:** The uses of the media were generally appropriate, and there was only one or two situations where it was unnecessarily used, with no damage to the reliability of the information provided by the child.

**Bizarre details were not challenged:** On the whole, there was an attempt to challenge some of the more implausible accounts, however there were some instances where the interviewers were neutral in their responses and simply repeated the children's accounts. For the most part, there was a balance between challenging the children's accounts outright and gently questioning them. In the case of a few children like (R, X, and Y) more challenges were likely necessary.

**Interviewers repeated details to parents after interviews:** This was a valid criticism, and one that I spoke about at length in the report in the section on MVMO investigations. The effect may have been to lead parents to encourage their children to disclose, and then the additional interviews followed.

**The interviewers did not discourage the parents from questioning their children:** I cannot comment on whether this was the case or not.

**Interviewers did not ascertain the children's sexual knowledge:** This was not a valid criticism, the interviewers routinely asked children about body parts and body functions, if they made an allegation about a private part or a sexual act.

**Interviews were too long and ignored children's tiredness or reluctance:** It was a valid criticism that some of the interviews were too long, and children were less invested in the process, due to tiredness or reluctance to be there. Perhaps, more attention to child cues was necessary in those cases, and a willingness to reschedule. There was appropriate use of breaks, and some children were offered the possibility of returning. This then led to the criticism of repeated interviews- and the possibility of contamination in the interim, - a double edged sword.

**Interviewers perpetuated the demonization of Mr. Ellis:** There was only one example of a negative comment made by an interviewer regarding Mr. Ellis, which was uncalled for. It appeared to be in response to fears a child had of the interviewer talking to him. This should not have been said.

**Interviewers did not explore children's "source monitoring" and possible contamination:** On the contrary, children were routinely asked if they had just heard about things or actually saw it themselves. They were asked what was said by their parents in their pre investigative discussions with them. This was not a valid criticism.

**Interviewers failed to explore inconsistencies across interviews:** There were many occasions when inconsistencies were explored. It was difficult to know at times if children were talking about different occasions and incidents. In the case of the six complainants where convictions were obtained, it is my opinion that this was routinely done.

**Interviewers used social pressures to encourage disclosures:** There were times when interviewers did pressure children to disclose what they had told their parents, by using repeated questions about whether anything else had happened. This was not appropriate, and sometimes led to a child disclosing what they had told their parents earlier, and sometimes not. In many cases this was done in an appropriate manner. There were a few situations where the interviewers appeared very anxious to obtain the information and used too many repeated probes.

**Interviewers attended meetings which increased concern:** In hindsight, their presence at the first meeting was not necessary. Whether this contributed to added concern per se, is difficult to ascertain. I dealt with the effect of the meetings in more detail in the report.

Overall the investigative interviews as a whole were reasonably conducted, and in accordance with standard practice.

**The specific issue of Contamination:**

There is no doubt that there was some contamination of the case by the over-involvement of parents in the investigation, and the sharing of information between the complainant parents. This is always a danger in any case,

and in particular in a MVMO case of this proportion. Having said that, in respect of the convictions that were based on the evidence of the six child complainants, that I was asked to comment on, I did not feel that their evidence was seriously affected and unreliable as a result of the contamination. The effect in my view was that there likely would have been more convictions if the issue of contamination by parents, had not been raised so frequently.

The evidence of the six complainant children (S, Q, X, Z, R, and O) was reliable.

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## APPENDIX D

### DR. LOUISE DEZWIREK SAS, PH.D., C.PSYCH.

Dr. Sas is a Clinical child psychologist in private practice in London [Ontario]. Previously, she was Director of the Child Witness Project, located at the London Family Court Clinic. Currently, Dr. Sas conducts assessments for both Criminal and Family Court, in matters relating to children. She regularly provides expert testimony in the area of child sexual and physical abuse, parenting capacity, testimonial- capabilities of children, and post traumatic stress. She is a part time school psychologist for the Thames Valley School Board. She provides treatment to children and Adolescents.

She received her undergraduate degree in Honours Psychology from McGill University (1974) and her M.A. (1977) and Ph.D. in Clinical Psychology (1980) from the University of Western Ontario. As well, Dr. Sas is a member of the Clinical Adjunct Faculty for the Department of Psychology at the University of Western Ontario.

Her research endeavours have included evaluating our Criminal Justice System's system's response to child victims, developing techniques of court preparation for child witnesses, identifying disclosure processes in sexually abused children, and describing the patterns of sexual exploitation in male children.

Dr. Sas's publications focus on child sexual abuse, and the response of the Criminal justice system to this problem. She provides training for crowns, Police officers, mental health professionals and the judiciary in Canada. She has been invited to speak at numerous conferences, in the US, Europe and abroad.

#### CURRICULUM VITAE

**NAME: LOUISE SAS (nee DEZWIREK)**

**DATE OF BIRTH:** November 12, 1951

**PLACE OF BIRTH:** Montreal, Quebec

**MARITAL STATUS:** Married, with Four Children

**CITIZENSHIP:** Canadian

**OFFICE ADDRESS:** LONDON ON N6A 4Y7

**PROFESSIONAL STATUS:**

1981-present Registered Psychologist, Province of Ontario

**EDUCATION:**

1977-1980 Ph.D. (Clinical Psychology), University of Western Ontario

1975-1977 M.A. (Clinical Psychology), University of Western Ontario

1969-1974 Honours B.A. (Psychology), McGill University

**AWARDS & SCHOLARSHIPS:**

1989 Outstanding Young Londoner Award - Jaycees

1989 Women of Distinction Award - London YM-YWCA

1976-1977, 1977-1978, 1978-1979 Canada Council Doctoral Fellowship Award

1975-1976 Ontario Graduate Scholarship

1972-1973, 1973-1974 University Scholarship

1972-1973 Mary Beatty Award

**PROFESSIONAL EXPERIENCE:**

1999-present Private Clinical Practise- assessment and treatment of children, and families; special reference to childhood depression and anxiety, post trauma, school related problems, child victimization /court preparation and assessment of testimonial competency School Psychologist for the Thames Valley Board of Education (part time in the Strathroy Dorchester area)

London ON

1987-1999 Director, Child Witness Project, London Family Court Clinic

1987-1999 Principal Investigator, Child Sexual Abuse/Child Witness Research, London Family Court Clinic

1985-1999 Co-ordinator, Child Welfare Assessment Project, London Family Court Clinic

1982-1985 Assistant Director, London Family Court Clinic (resigned following the birth of my second child in order to reduce the long work

hours and devote more time to parenting)

1980-1999 Clinical Psychologist, London Family Court Clinic

1979-1980 Psychometrist/Research Co-ordinator of Young Offender Research, London Family Court Clinic

1976-1978 Clinical Psychology Internship, London Family Court Clinic

1975 Clinical Psychology Internship, Jewish General Hospital, Montreal, Quebec

1973-1974 Research Assistant for Dr. L. Solyom, FRCP, Allen Memorial Hospital, Montreal, Quebec

**UNIVERSITY AFFILIATION:**

1985-present Clinical Adjunct Professor, University of Western Ontario

**PAST DUTIES/RESPONSIBILITIES AT THE LONDON FAMILY COURT CLINIC:****Child Witness Project**

Responsibilities include: providing Clinical services to child witnesses, providing expert testimony and Clinical assessments in cases of child sexual abuse, supervising Child Witness Project staff and providing in-house training. Research: Presently research endeavours are in the area of child sexual abuse, child witness preparation and the impact of Legislation.

**Child Welfare Matters**

Responsibilities included: coordinating London Child Welfare Project, completing Clinical assessments in child Welfare matters with respect to physical and sexual abuse, placement and treatment needs, and providing expert testimony in court when necessary.

Research Interests: Issues that pertain to child Welfare cases, assessment of parenting capacity, attachment and bonding as significant factors, impact of sexual abuse and Criminal justice system victimization.

**Young Offenders**

Responsibilities included: Clinical assessment of young offenders, preparation of reports for court, consultation and training with Juvenile detention staff, and crisis intervention with Juvenile detention residents.

Research: Dangerousness and depression in young offenders, feasibility of providing secure treatment in Ontario for offenders, use of behaviour contracting with probationers, specialized classrooms for truant and delinquent pupils, use of Basic Personality Inventory in assessment of young offenders, incidence of sexual abuse in young offender populations.

**Custody & Access Matters**

Responsibilities have included: Clinical assessments in custody and access disputes, involvement in developing the Custody and Access Project in London, doing research on the effects of divorce and separation on children and the incidence of sexual abuse allegations in these disputes.

**TEACHING EXPERIENCE:**

1997-ongoing Supervision of Ph.D. or /M.A. Psychology student (one half day per week)

1993 Supervision of Ph.D. Psychology student for practicum course

1989 Summer internship of M.A. Psychology student from Lakehead University

1988-1989, 1989-1990 Joint supervision of honours Psychology thesis student

1987-1988 Co-Professor of a Psychology Graduate seminar course, "Psychology and the Law"

1987 Lecturer on "Separation, Divorce, Remarriage: Psychological, Social, Legal Perspectives", Continuing Education Department, King's College

1986 Examiner for Ethics Orals for Ph.D. Psychology students at U.W.O.

1985 Supervision of 4<sup>th</sup> year honour students in Psychology

1984 Supervision of Ph.D. Psychology student for Ontario Board of Examiners in Psychology

1974-1975, 1975-1976, 1976-1977 Teaching Assistant, University of Western Ontario

**GOVERNMENT TESTIMONY:**

September 1998 Bill 18 - A Private Members Bill on Youth Prostitution - Standing Committee on Social Development (invited for presentation), Queen's Park, Ontario

May 1994 Children at Risk - Standing Committee on Social Development (invited for presentation), Queen's Park, Ontario

March/June 1993 Four Year Review of the Child Sexual Abuse Provisions of the Criminal Code & the Canada Evidence Act (formerly Bill C-15) (written & oral submissions) - Standing Committee on Justice and the Solicitor General, Ottawa, Ontario

May 1993 Victims of Crime -- Standing Committee on Administration of Justice, Queen's Park, Ontario

March 1993 Ontario Evidence Act Reforms for Child and Vulnerable Adult Witnesses - Evidence Reform Consultation Project, Ministry of the Attorney General, Ontario

August 1991 A presentation to M.P.P.'s addressing the needs of child sexual abuse victims - Parliamentary Committee of the Ontario Budget Review, London, Ontario

**EXPERT WITNESS:**

Qualified in the areas of:

Child Sexual Abuse, Historical Abuse

Child Witness Issues, Adult witness Issues

## Child Development

### Clinical Child Psychology & Assessment

Parenting Capacity, emotional abuse/ neglect/

Adult and child PTSD related to sexual abuse

Interviewing strategies for children

Testimonial capabilities of children and disabled adults

more specifically:

- C.C. Section 486(2.1) (screen/closed-circuit television)
- Child Sexual Abuse Syndrome/ behavioral and emotional symptoms
- Child Witness Competency to Testify
- Consent to sexual activity- in the developmentally handicapped
- Credibility and Reliability of Disclosures of abuse
- Delayed/ incremental Disclosure and Recantation
- Khan Applications (necessity/reliability assessments)
- Memory in children (for traumatic and non traumatic events)
- Post-Traumatic Stress Symptomatology in adults and children
- Quality of Investigative Interviews! Suggestibility of children
- Historical Abuse: issues of memory,
- Parenting capacity: child Welfare/custody and access issues
- Attachment and Bonding Between Parents and children

Qualified in the following Courts:

- Ontario Court (Provincial- Division)
- Ontario Court (General Division)
- Family Court
- Arbitration hearings

## **INVITED PRESENTATIONS AND WORKSHOPS:**

2000

- Parenting capacity Assessments; Theory and practical strategies; Invited Workshop presented of Dame Child and Family Institute, Nov 8<sup>th</sup>, 2000 Kitchener Ontario
- Panel Presentation for Children's Aid Foundation of Canada News Conference ' Introducing a friendly animatronic robot for interviewing children at risk "Aug. 30<sup>th</sup>", 2000
- Working with child witnesses: Issues related to putting children on the stand. Crown Summer School, three hour workshop July 2000, London
- The Child Witness in Domestic and Abuse cases: Procedural Accommodations, Language, comprehension and emotional resiliency in young witnesses. What crowns need to know. Crown Training Session, Feb. 2000, Toronto
- Invited Lunchtime presentation on child sexual abuse victims. Interviewing potential victims. Presented to Clinical staff at St. Claire's Child Sexual Abuse Clinic, Temple Street Children's Hospital, Dublin, Ireland. May 16<sup>th</sup>, 2000
- Facilitating the testimony of children: Presentation at the Department of Justice Regional Roundtable Consultation Meeting on Child Victims and Children who offend. June 14-16, 2000, Toronto

1999

- Empowerment or retraumatization: Hearing directly from children in court during child protection hearings and custody disputes. Oct. 1999 Regional European Conference of ISPCAN, (International Society for the Prevention of Child abuse and Neglect, Jerusalem, Israel
- Children's abilities and the Criminal court system: The interaction between Children's memory, suggestibility, their reaction to trauma; the interview experience and the expectations of the court system; Crown Summer School August 19<sup>th</sup> 1999, London, Full Day workshop presentation
- The impact of domestic violence on children: When to involve children in cases, and ways to minimize stress. Crown Summer School, August 23<sup>rd</sup>, 1999, London, one hour presentation
- Hearing Children's Testimony in Cases of Custody and Access Litigation: What Judges Need to Know - Paper presented at "The Canadian Family at the End of the Millennium", National Judicial Institute, February 10, Quebec City, Quebec

1998

- Child Abuse and the Courts: What is Justice? (Panel member) -Martin Kruze memorial Forum, Maple Leaf Gardens, Toronto ON
- Male Sexual Victimization - Implications of Project Guardian- a multi victim multi perpetrator case (co-presenter) -Ontario Board of Parole Western Region, Thorold ON

- Project Guardian, Male Sexual Exploitation - A multi- victim multi- offender case:Victim Witness Co-ordinators Annual Training, Toronto ON
- Child Sexual Abuse: The Hidden Victimization -Niagara Regional Police Association, Niagara Falls, ON
- Assessing Children's Testimony (panel member)--International Women Judges Association Conference, Ottawa ON
- Dealing with Student Disclosures of Child Sexual Abuse-Frontenac County Board of Education, Kingston ON

1997

- Preliminary Results of Mufti-Site Study: Criminal Justice System's Handling of Child Witness Cases Across Ontario for 1995-Victim Witness Coordinators Training, Toronto ON
- Efficacy of Primary & Secondary Prevention Efforts in Elementary Schools: Recommendations for Integrating Theory and Practice (13 bilingual full day workshops)-Ministry of Education and Training, Timmins, North Bay, Thunder Bay, Toronto, Ottawa, Sudbury, Sault Ste. Marie, Chatham and London ON.
- Child Witnesses in the Criminal Justice System; Expert Testimony and Assessment of Young Children; The Impact of Children's Disclosure of Sexual Abuse-2nd International Conference on Children Exposed to Family Violence, London ON
- Child Sexual Abuse: The Hidden Tragedy-National Association of Chiefs of Police, Aylmer ON
- Project "Guardian" Research: What We Learned from this large scale multi victim case-Ontario Network of Sexual Assaults Care/Treatment Centres Annual Conference, London ON
- Male Sexual Exploitation: What Project "Guardian" Has Told Us About This Problem-London Children's Aid Society, London ON
- Dealing with Disclosures of Child Sexual Abuse in Our Schools: What Administrators Need to Know (full day workshop)-Sault Ste. Marie District Roman Catholic Separate School Board, Sault Ste. Marie ON
- Child Sexual Abuse: A Healing Night for the Community-public forum, Sault Ste. Marie, ON

1996

- Child Witnesses: Preparing Them to Testify and Assessing the long-term Impact of the Criminal Justice System on their lives-International Society for the Prevention of Child Abuse and Neglect, Dublin IRELAND
- Preventing Retraumatization in the Court System -London Health Sciences Centre, London ON
- Parent Alienation Syndrome and Accusations of Sexual Abuse Within the Context of Custody and Access Cases - The Children's Lawyer, London ON
- Innovations in Court Clinic Services-The Association of Court Related Clinic Services, Toronto ON O
- Project "Guardian" Debriefing DayLondon Police Service, London ON Achieving closure, and peace following the stress of the investigation for Police officers O Sexual Abuse - Disclosing abuse within the context of the hockey association Presentation to the London Knights Hockey Team, London ON

1995

- The Experience of Child Sexual Abuse Victims in our Criminal Justice System and the Potential for Trauma or Emotional Recovery: What Our Research Tells Us - University of Western Ontario, London ON
- Primary and Secondary Prevention Strategies for Child Sexual Abuse: Developing a Prediction Facilitators and Inhibitors of Child Disclosures - Child Psychiatry Teaching Rounds, London ON
- Emotional Abuse of Children (keynote address) - Ontario Family Law Judges' Association, Ottawa ON
- Disclosures of Child Sexual Abuse: The Public Discovery of Child Sexual Abuse - Ontario Association of Court-Related Clinical Services Conference, Toronto ON
- Recent Case Law Decisions Pertaining to Child Witnesses and the Prosecution of their Cases (co-presented with Justice John McGarry and Kevin Gowdey) - Ontario Association of Court-Related Clinical Services Conference, Toronto ON
- Decision Making When There are Allegations of Domestic Violence - Ontario Court of Justice (General Division) Spring Seminar, Toronto ON
- Tipping The Balance to Tell The Secret: The Public Discovery of Child Sexual Abuse - Ministry of Education & Training, Toronto ON
- Preparing Child Victims of Sexual Abuse for Courtroom Testimony (presenter) - XXVII Banff International Conference on Behavioural Science, Banff AB
- Effects on the Family When a Member Has Been Abused by a Member of the Immediate Family, the Extended Family and a Stranger (presenter) - The University of Western Ontario, Faculty of Medicine, Department of Psychiatry, London ON
- A Prospective Follow-up Study of 50 Child Sexual Abuse Victims and Their Adolescent Peer Relationships (presenter/participant at annual conference) - Society for Research in Child Development, Indianapolis, IN
- Project Guardian Overview Meeting (participant) - London Police Department, London ON

- Children as Victims of Violence (co-presenter with Dr. Peter Jaffe) - London Police Services Board, London ON
  - Dealing With the Effect on Children Testifying in Court (presenter/panel member at Children and the Law Conference) - Middlesex Family Lawyers Association, London ON
- 1994
- Children and the Justice System: A community Service Approach to Witness Preparation (keynote address/ (1/2) day workshop) Family & Children's Services of Guelph and Wellington County, Guelph ON
  - The Role of Child Witnesses: Secondary Trauma vs. Successful Prosecution of Child Sexual Abuse in Canadian Courts (plenary with The Honourable Mr. Justice McComb at Ontario Association of Court Related Clinical Services Conference) - London Family Court Clinic, London ON
  - The Psychologist's Assessment of Causation and Damages in Cases of Child Sexual Abuse (one-day workshop on civil Litigation) - Law Society of Upper Canada, London ON
  - Some Developmental and Clinical Considerations in Assessing Allegations of Child Sexual Abuse - tailoring the interview to the needs of the child Canadian Judicial Institute, Ottawa ON
  - Principles of Evidence: A Retrospective of Major Accomplishments Since the Badgley Report (participant at the Beyond Badgley Meeting) - Health Canada, Ottawa ON
- 1993
- Children's Memory/ Interviewing children, Recantation/Delayed Disclosure (Police training) - London Police Department, London ON
  - Dealing Preparing Children To Testify In Court (symposium) - Children's Psychiatric Research Institute, London ON
  - Child Witness, Child Perpetrator: Dealing with Sexual Abuse in the Criminal Justice System (mock trial expert witness) Children's Psychiatric Research Institute, London ON
  - O The Child Complainant and the Ability to Testify (workshop) -1993 Canadian Judicial Council, Aylmer PQ
  - O Developments in Legislation: Effects on Witnesses (provincial co-ordinators training) - Victim Witness Assistance Programme, Ministry of the Attorney General, Milcroft Inn ON
  - Three Years After the Verdict (presentation of Health Canada study results at news conference) - London Family Court Clinic, London ON
  - Needs of Child Witnesses in the Courtroom - Child Friendly Courtroom Subcommittee, Ministry of the Attorney General, Toronto ON
- 1992
- Court Outcome and Sentencing for Child Sexual Abuse in London, Ontario After Bill C-15 (workshop at Ontario Association of Court-Related Clinical Services Conference) - Ottawa Family Court Clinic, Ottawa ON
  - Breathing Life Into Research: Evaluation of a Clinical Intervention with Child Witnesses (keynote address) - Children's Psychiatric Research Institute, London ON
  - Child Witness Issues: Influencing the Impact of Testifying on Children (presentation) - Canadian Association of Chiefs of Police, Aylmer ON
  - Child Sexual Abuse: Legal Issues and Courtroom Testimony (mock trial expert witness and panel member) - London-Middlesex County Child Abuse Council, London ON
- 1991
- Victim Impact Statements: Their Use in Criminal Court (provincial training) - Ministry of the Attorney General and Victim/Witness Assistance Programme, Toronto ON
  - The Child Witness Project: What We Have Learned (plenary speaker at Ontario Association of Court-Related Clinical Services Conference) - Kingston Family Court Clinic, Kingston ON
  - intervening in the Criminal Justice System on Behalf of Child Victims of Abuse (presentation at Lecture series) - The London Regional Psychological Association, London ON
  - Overview of Child Witness Project Protocol and Different Community Models: Responding to the Clinical Needs of Child Witnesses in Your Community (two workshops with Pamela Hurley) - John Howard Society of Peterborough, Peterborough ON
  - The Child Witness in the Canadian Criminal Justice System: Current Clinical Research on Children's Competency to Give Evidence, and the Reception in our Courts Under Bill C-15 (keynote address) - John Howard Society of Peterborough, Peterborough ON
  - Preparing Sexually Abused Children for the Stress of Court: A Controlled Study (presentation with Dr. D. Wolfe) - American Psychological Association, San Francisco CA
  - Treatment of Child Sexual Abuse Victims (commissioned to do a paper and a 30 minute presentation) - Institute for the Prevention of Child Abuse, Toronto ON
- 1990

- Civil Litigation in Child Sexual Abuse Cases (discussant at Ontario Association of Court-Related Clinical Services Conference) - London Family Court Clinic, London ON
- Investigative, Legislative and Therapeutic Issues Related to Child Sexual Abuse Victims in Court (discussant at Ontario Association of Court-Related Clinical Services Conference) - London Family Court Clinic, London ON
- Post-Traumatic Stress Disorder Symptoms Among Sexually Abused Children Testifying Before the Court (presentation with Dr. David A. Wolfe and Ms. Christine Wekerle) - American Psychological Association Annual- Convention, Boston MA

1989

- Child Witnesses Before the Court (Three hour workshop on preliminary results of a two year evaluation study in London on court preparation with Pam Hurley and Susan Wilson at Ontario Association of Court-Related Clinical Services Conference) - Toronto Family Court Clinic, Toronto ON
- Preliminary Results of the Child Witness Project (presentation)- Health & Welfare National Advisory Board of the Child Witness Project, London ON
- Developing a Research Orientation in Child Abuse (full day workshop with or. D. Wolfe at Annual Child Abuse Conference) -Institute for the Prevention of Child Abuse (IPCA), Toronto ON
- Empowering Children for Child Sexual Abuse Litigation (paper presented at the Sex Offenders and Their Victims conference (501 - The Clarke Institute of Psychiatry, Toronto ON
- Child Sexual Abuse: Importance of Laying Charges and Assisting Children in Testifying in Court (presentation at the monthly Crime Probe meeting with Pam Hurley) - Ontario Provincial Police, Westminster Township ON

1988

- The Impact of Sexual Abuse on Children, Secondary Victimization of the Criminal Justice System and Ways to Alleviate the System-induced Stress (presentation with Pam Hurley) - Ministry of the Attorney General and Victim Witness Assistance Programme, London ON
- Further Victimization of Child Sexual Abuse Victims Through Court Involvement: Child Witness Project Goals and Objectives (presentation with Pam Hurley) - London Ontario Provincial Police, London ON
- Bill C-95 (keynote speaker at Regional training) - Ontario Centre for the Prevention of Child Abuse, London ON
- Issues in Child Abuse (facilitator and presenter) - Institute for the Prevention of Child Abuse, Toronto ON
- Children As Witnesses: An Overview (panel member) - Institute for the Prevention of Child Abuse, Toronto ON
- Preparation of Child Witnesses: An Innovative Model (three hour workshop with Pam Hurley) - Institute for the Prevention of Child Abuse, Toronto ON
- Child Witness Preparation and Interviewing of Young Children (three hour workshop presented for Advanced Criminal Investigation Training on 'Sexual assaults, domestic violence and child abuse' with Pam Hurley) - Ontario Police College, Aylmer ON
- Preparing Child Witnesses (one hour presentation for Youth Officers Training Seminar on "Development of an innovative service") - Ontario Police College, Aylmer ON
- Preparing a Child Witness: An Innovative Model (one hour provincial training seminar for Crowns designated as Child Abuse Specialists) Ministry of the Attorney General, Toronto ON

1987

- Assessments: Their Use and Limitations (presentation at Continuing Education Program on Representing Children) Bar Admission Course, The Law Society of Upper Canada, London ON
- Preventing System-Induced Trauma Through Court Preparation of Child Sexual Abuse Witnesses (presentation at Ontario Association of Court-Related Clinical Services conference - Kingston Family Court Clinic, Kingston ON
- Critical Issues for Preparing Children for Court Testimony (paper presented at a symposium on child sexual abuse) - Canadian Psychological Association, Vancouver BC
- Preparing Child Witnesses for Court (three hour workshop at an international conference on child abuse "The search for solutions) Shawbridge Youth Centre, Montreal PQ
- Depression in Adolescents in Secure Settings (workshop presented at the Critical Risk-Quality Care Conference and International Conference for Children and Adolescents with Peter Jaffe) - Thistleton Regional Children's Centre, Toronto ON

1986

- Sexual Abuse: Issues in Court Intervention (in-house training) - Family and Children's Services, London ON
- Attachment and Bonding Within a Custody Battle: Paramount Issues to Be Considered When Kidnapping Occurs (expert testimony in a mock trial at Ontario Association of Court-Related Clinical Services conference) - London Family Court Clinic, London ON

- The Child Witness in Sexual Abuse Cases (presentation at a one-day community conference on Current Issues and Innovations in Sexual Abuse cases), London ON
  - Sexual Abuse: The Impact on Children and their Families: Available Intervention Strategies (presentation to Psychology Department at Westminster Campus) - Victoria Children's Hospital, London ON
  - Depression in Children and Adolescents: Strategies for Parents (presentation at Focus on women's Health Day, sponsored by university of western Ontario) - YM-YWCA, London ON
  - Impact of Separation and Divorce on Children (workshop) - Robarts School for the Hearing Impaired, London ON
  - Sexual Abuse: Who Does It, To Whom, and What Are The Repercussions? (Lecture to undergraduate Psychology Class) Brescia College, London ON
- 1985
- Social, Behavioral and Moral Judgment of Delinquent and Normal Adolescents: Intervention Strategies for Promoting ProSocial Behaviour in Residential Placement (two 3-hour training workshops with Gary Austin) - Blue Water Regional Correctional Centre, Goderich ON
  - Psychological Effects of Separation and Divorce on Children and Their Performance in School: How Schools Can Respond (half-day workshop at citywide professional development day with Maureen Coolman) - London and Middlesex Public School Board, London ON
  - The Impact of Divorce on Children: Specific Issues Regarding School Behaviour and Performance (one day workshop with Maureen Coolman) - Oshawa Family Court Clinic, Oshawa ON
  - Sexual Abuse Allegations within the Context of Custody and Access Disputes (workshop at sexual Abuse Conference) - London Child Abuse Council, Sexual Abuse Task Force; London ON
  - Separation and Divorce: Clinical Issues (seminar Lecture, Social Work Department) - King's College, London ON
  - Depression and Suicide in Children and Adolescents (paper at Annual Clinical Day) - London College of Family Physicians, London ON
- 1984
- Effects on elementary School Behaviour of Custody and Access Disputes: Psychological and Behavioral Factors Related to Divorce (Ontario Association of Court-Related Clinical Services Conference with Maureen Coolman) - Ottawa Family Court Clinic, Ottawa ON
- 1983
- Dangerousness, Depression and Staff Attitudes in Hard to Manage Adolescents (with Peter Jaffe) - Ontario Association of Children's Mental Health Centres, Kitchener ON
  - Critical Factors in the Assessment and Treatment Planning for Severely Depressed Adolescents (Ontario Association of court-Related clinical services conference) - Toronto Family Court Clinic, Toronto ON
  - The Dangerous Juvenile Offender. Psychological Characteristics, Assessment and Treatment (professional development day) - London Juvenile Detention Centre, London ON
  - Anger Control: Techniques on Self-control and Management of Aggressive Acting Out Behaviour in Adolescents (professional development workshop for psychologists) - Children's Psychiatric Research Institute, London ON
- 1982
- The Efficacy of Clinical Assessments v. Offence History in the Prediction of Dangerousness in Juvenile Offenders American Society Criminology, Toronto ON
  - The Relationship Between Depression in Juvenile Delinquents and the Phenomenon of Masking Behaviours: Meeting the Needs of Depressed Juveniles with Severe Behaviour Problems (research day in Childrens Mental Health) - T histletown Regional Children's Centre, Toronto ON
- 1981
- Dangerous Juvenile Offenders: Assessment and Treatment (panel member at Ontario Association of Court-Related Clinical Services Conference) - Ottawa Family Court Clinic, Ottawa ON
- 1980
- The Dangerous Juvenile Offender: Identification and Treatment- Ontario Association of Probation Officers, London ON
  - The Need for Secure Treatment for Dangerous Juvenile Offenders (panel member at Ontario Association of Court-Related Clinical services conference) - Kingston Family Court Clinic, Kingston ON
- 1979
- The Use of Behaviour Contracting with Juvenile Probationers: Modifying Moral Judgement -- Ontario Psychological Association Conference, Quebec City PQ
  - Innovations in the Assessment and Treatment of Juvenile Offenders: Behaviour Contracting Procedures with Juvenile Probationers - Ontario Psychological Association Conference, Toronto ON
- 1978

- Innovations in the Assessment and Treatment of Juvenile Offenders: Behaviour Contracting Procedures with Juvenile Probationers - Ontario Psychological Association Conference, Toronto ON

#### **GRANTS IN THE AREA OF SEXUAL ABUSE:**

1998

Frontenac County Board of Education Grant to evaluate their "Safe School Policy".

1997-1999

Cloverleaf and Trillium Foundations Grant for \$25,000 to conduct a "Multi-Site Study on Children's Trajectory Through The Criminal Courts in Ontario". 1996

Ministry of Education and Training Grant for \$30,000 to provide training in designated Ontario sites to school board personnel on the development of effective child abuse prevention programs.

1995

Health Canada Grant for \$59,410 to produce a national post-court handbook for child victims and their families.

Health Canada Grant for \$21,952 to develop a national association of child Curric~um Vitae of P Loutse has, Ph.D., Psychologist H/S8 witness service providers and to produce a biannual newsletter.

1995

Ministry of Community and Social Services Grant for \$60,000 to study the child victims discovered in the Project Guardian Investigation.

1993

Health and Welfare Grant for \$150,000 (two years) to develop a prediction Model based on facilitators and inhibitors of child disclosure.

1991

Rhea Foundation Grant for \$10,000 to produce a videotape for educating children on the Criminal justice system.

1991

Health and Welfare Grant for \$140,000 for a follow-up study of the Social a Psychological adjustment of child witnesses referred to the Child Witness Project.

1987

Health and Welfare Grant for \$500,000 to undertake a three year evaluation project of different Models of intervention with child witnesses and victims of sexual abuse who testify in court.

1987

Laidlaw Foundation Grant for \$15,000 to develop a protocol for preparing children for court testimony.

1986

Community and Social Service Grant for \$5000 to develop a local resource Library on topics related to sexual abuse of children and Criminal justice system involvement.

#### **RELATED WORK:**

Worked on a Brief (with Dr. Barbara Appleford) to represent the views of member psychologists in the Canadian Psychological Association, January 1987.

Consultation with the Olford County Children's Aid Society to develop and train staff on setting up a project to provide child witness preparation.

Consultation with the Guelph, Goderich, London, Sarnia, St. Thomas and Woodstock Crown Attorney's Offices regarding sexual abuse prosecution.

Advisory Board Member of the Ontario Law Reform Commission's Report and recommendations on child witness in civil proceedings. Toronto, Ontario, July 1991.

Development of an association of Ontario Child Witness Projects - Child Witness Network-consultant

Member of the Child Friendly Courtroom Committee organized by the Ministry of the Attorney General to develop standards for courtrooms. 1993/94

Invited to be the External Examiner of a Doctoral dissertation on child witnesses at Trinity College University Dublin, Ireland May 17th, 2000,

#### **PUBLICATIONS:**

Sas, L., & Child Witness Network (1999). I'm Trig To Do My Job In Court. Are You? Questions For The Criminal Justice System. London ON: London Family Court Clinic.

Dezwirek Sas, L.(1997)Sexually Abused Children as Witnesses: Progress and Treatment and Prevention Across the Lifespan . Thousand Oaks, CA: Sage Publications.

Sas L. (1999). Hearing children's testimony in cases of custody and access Litigation: What judges need to know. Paper presented at "The Canadian Family at the End of the Millennium", National Judicial Institute, Quebec City, Quebec February 10, 1999.

Sas, L. (1998). Brief in response to Bill 18: A private members bill on youth prostitution. Paper presented at the Standing Committee on Social Development, Toronto, ON September 29,1998.

Dezwirek Sas, L. (1998). Evaluation Of The Child Abuse Protocol And Safe School Policy Prepared By The Frontenac County Board Of Education. London, ON: London Family Court Clinic.

- Sas, L., & Hurley, P. (1997). Project "Guardian": The Sexual Exploitation of Male Youth in London. London, ON: London Family Court Clinic.
- Dezwirek Sas, L., Wolfe, D., Gowdey, K. (1996). Children and the Courts in Canada. *Criminal Justice and Behavior: An International Journal*, 23: 2, pp. 338-357. Thousand Oaks, CA: Sage Publications
- Sas, L. (1996). Fair Play and Decency: Implications of the Supreme Court of Canada's Decision in R.v. O'Connor (also available in French), *Viva Voce: A National Newsletter About Child Victims and Witnesses*. London, Ontario: London Family Court Clinic.
- Dezwirek Sas, L., Hatch Cunningham, A., Hurley, P., Dick, T. & Farnsworth, A. (1995). *Tipping the Balance to Reveal the Secret: Public Discover roof Child Sexual Abuse*. London, Ontario: London Family Court Clinic.
- Sas, L. (1994). Victim impact statements: Their use in court. *Violence Update*, 5(1), 3, 6 & 10. Washington, DC: University of Washington Press.
- Sas, L., Hurley, P., Hatch, A. Malla, S. & Dick T. (1993). *Three Years After The Verdict: A Longitudinal Study Of The Social And Psychological Adjustment Of Child Witnesses Referred To The Child Witness Project*. London, Ontario: London Family Court Clinic.
- Sas-Dezwirek, L. (1992). Empowering Child Witnesses for Sexual Abuse Prosecution. In H. Dent and R. FLin (Eds.), *Children As Witnesses*. Birmingham, UK: John Wiley & Sons Ltd.
- Sas, L., Hurley, P., Hatch-Cunningham, A. (1992). Use of the Criminal Courts for Intrafamilial Child Sexual Abuse in London, Ontario After Bill C-15. Paper presented at the American Society of Criminology annual Meeting, New Orleans, L.A., November 4-7,1992.
- Sas, L. (1991). Empowering Children For Abuse Litigation: New Data (pp. 167-177). In Ron Langevin (Ed.). *Sex Offenders and Their Victims*. Oakville, Ontario, Juniper Press.
- Sas, L., Austin, G., Wolfe, D., Hurley, P. (March, 1991). *Reducing the System-Induced Trauma for Child Sexual Abuse Victims Through Court Preparation, Assessment, and Follow-Up*. London, ON: London Family Court Clinic.
- Wolfe, D.A., Sas, L., Wekerle, C. (August, 1990). Post-traumatic Stress Disorder Symptoms Among Sexually Abused Children Testifying Before the Court. A symposium entitled "International perspectives on Post-traumatic Stress Disorder, at the American Psychological Association Annual convention, Boston, 1990.
- First publication of the Child Witness Project Newsletter, March 1990.
- Hurley, P., Sas, L. & Wilson, S. (1988). Empowering Children For Abuse Litigations. *Preventing Sexual Abuse*, 1, 8-12.
- Jaffe, P., Austin, G., Leschied, A., Sas, L. Critical Issues in the development of custody and access dispute resolution services, 1987, (submitted for publication).
- Wolfe, V., Sas, L. & Wilson, S. (1987). Some issues in preparing sexually abused children for courtroom testimony. *Behaviour Therapist*, 10, 5, 107-113.
- Jaffe, P., Wilson, S.K. & Sas, L. (1987). Court testimony of child sexual abuse. victims: Emerging issues in Clinical assessments. *Canadian Psychology*, 28(3), 291-295.
- Austin, G., Leschied, A.W., Jaffe, P., Sas, L. (1986) Factor structure and construct validity of the basic personality inventory with Juvenile offenders. *Canadian Journal of Behavioral Science*, 18 3 1986, 238-247.
- Leschied, A.W., Coolman, M., Jaffe, P., and Sas, L. (1986). The role of the family court Clinic in the assessment of school related disorders with young offenders. *Guidance and Counselling*. 1(5),19-24.
- Sas, L., Jaffe, P. (1985) Understanding depression in Juvenile delinquency: Implications for institutional admission. Policies and treatment programs. *Juvenile and Family Court Journal*, 37,1, 49-57.
- Jaffe, P., Leschied, A., Sas, L. (1985). A Model for the provision of Clinical assessments and service brokerage for young offenders: The London Family Court Clinic. *Canadian Psychologist*, 26(1), 54-61.
- Jaffe, P.G., Leschied, A.W., Sas, L., Austin, G.A. (1985). The utility of the basic personality inventory in the assessment of young offenders. *Ontario Psychologist*, 17,1, 4-11.
- Sas, L., Jaffe, P., and Reddon, J. (1984) Unravelling the needs of dangerous young offenders. A Clinical, rational and empirical approach to classification. *Canadian Journal of Criminology*.

#### **MEDIA CONSULTATION (HIGHLIGHTS):**

- State Street News Conference- Children's Aid Foundation member of Blue ribbon panel " animatronic robots for interviewing at risk children
- CBC "The Morning Edition"-telephone interview.
- Degrassi Junior High - consultant to producer regarding television series on child sexual abuse.
- CBC "Sunday Morning"- interview "Issues relating to child witnesses".
- CBC "As If Happens"- radio interview with Alan Maitland on Ontario Law Reform Commission recommendations vis a vis child witnesses.
- London Free Press - article on the Child Witness Project funding by Allison Uncles.
- London Free Press-article on the Ontario Law Reform Commission by Allison Uncles.
- CFPL "F.Y.I." - Live television interview on the Ontario Law Reform Commission's recommendations vis a vis child witnesses.
- Toronto Star-feature on the Ontario Law Reform Commission by Ms. Tyler.
- Ottawa Citizen - telephone interview regarding the Criminal justice system and its treatment of child witnesses.

CBC "National News"- segment on the plight of child witnesses.

**RESEARCH PROJECT IN CHILD WELFARE MATTERS RESULTING IN UNPUBLISHED PAPERS:**

Family and Children's Services Experience in Responding to Allegations of Child Sexual Abuse Across Ten Counties in Southwestern Ontario (1987-1989). (Clinical Researcher and Co-Author.)

Development of a local resource Library on topics (300 articles) related to sexual abuse of children and Criminal justice involvement (1986). Submitted to the London Child Abuse Council for use by community professionals.

London Family Court Clinic Section 16 Classroom. Program Review and Recommendations (1984) and (1985).

Report submitted to the London Board of Education, W.B. Sutton Schools.

An Exploration Of Service Delivery In Cases Of Child Sexual Abuse In London and Middlesex County (1985).

Research conducted through involvement in the Sexual Abuse Task Force and with London Family and Children's Services (Research Co-Author).

Attitudes Of Residential Treatment Staff Towards Adolescents Who Fail In Treatment (1982). Research completed for Thistleton Regional Children's Centre.

Assessing the Needs of Dangerous Juvenile Offenders (1981). A study of referrals made to the London Family Court Clinic for Thistleton Regional Children's Centre (Principal Researcher and Author).

The Manipulation of Moral Judgment and Behaviour of Juvenile Probationers Using Three Forms of Behaviour Contracts (1980). Doctoral Thesis, University of Western Ontario.

A Secure Assessment and Treatment Unit for Adolescents (1980). Feasibility study paper for Children's Services Division, Ministry of Community and Social Services (Principal Researcher and Co-author).

The Implementation Of Behaviour Contracting With Juvenile Probationers (1978). Ministry of Community and Social Services (Principal Researcher).

Systematic Desensitization In Modifying Parental Verbal Aggression (1976). M.A. Thesis, University of Western Ontario.

**ASSOCIATIONS:**

Ontario Psychological Association

## **APPENDIX E**

### **THE RT HON SIR THOMAS EICHELBAUM GBE**

Born in Königsberg, Germany, 17 May 1931. Parents emigrated to New Zealand 1938. Has lived in Wellington area since 1938. Educated Hutt Valley High School and Victoria University College (LL.B 1954). Married, three sons. Employed by Chapman Tripp & Co, barristers and solicitors, 1950-1958, working under W P Shorland (later Mr Justice Shorland), I H Macarthur (later Mr Justice Macarthur) and N A Morrison. Admitted as solicitor 1953, barrister 1954. Partner in Chapman Tripp & Co 1958-1978 (senior litigation partner from 1968). In practice as barrister sole 1978-1982; appointed Queen's Counsel 1978.

1954-1982 - appeared in a wide range of litigation before New Zealand Courts and Tribunals, and as counsel in a number of Commissions of Enquiry, including the Lake Manapouri Commission (1970); Inquiry into Chiropractic (1978), and the Marginal Lands Inquiry (1981).

Formerly: Member of Council, Wellington District Law Society 1968-1975; President, Medico-Legal Society of Wellington, 1970; Lecturer in Civil Procedure, Victoria University; Assessor for New Zealand in Commercial Law; member of the panel of Supreme Court prosecutors in Wellington; Legal Assessor, Medical Council of New Zealand; member of Disciplinary Committee, New Zealand Law Society 1973-1979; member of the Council and Executive Committee, New Zealand Law Society, 1976-1982; Vice President, New Zealand Law Society, 1976-1979; President, New Zealand Law Society, 1980-1982.

Appointed Judge of the High Court of New Zealand, 1982. Member of the Rules Committee of the High Court, 1969-1980, 1983 - 1999; member of the Rules Revision Committee responsible for the new Rules of the High Court enacted in 1985; member of the Working Party into the role and efficiency of the High Court, 1985; Deputy Chairman of the Courts Consultative Committee from its establishment in 1986 (Chairman, 1989-1999); represented the New Zealand Judiciary on the Australian Institute of Judicial Administration 1987-1988; Chairman, Criminal Practice Committee from inception (1989) until 1999.

Appointed Chief Justice of New Zealand 1989; Knight Grand Cross of the British Empire (GBE) 1989; Privy Councillor, 1989; Honorary Bencher, Lincoln's Inn; Honorary Member, American Bar Association; Honorary Member, International Academy of Trial Lawyers; Member, LawAsia; Editor in Chief, Mauet's Fundamentals of Trial Techniques (NZ Edition, 1989); Consulting Editor, Introduction to Advocacy (2000); Honorary Doctorate of Laws, Victoria University of Wellington 1998.

Sat on a number of appeals in the Privy Council, 1993; New Zealand observer, then member of the Council of Chief Justices of Australia & New Zealand 1994 - 1999.

As Chief Justice, based in Wellington but sat throughout New Zealand, normally in the High Court but also presided in the Criminal Appeal Division of the Court of Appeal, and member ex-officio, Court of Appeal. Retired as Chief Justice, 1999.

1999 to date: Member, Ministerial Inquiry into DNA anomalies, 1999; Ministerial Inquiry into the Peter Ellis case, 2000 - 2001; Chair, Royal Commission on Genetic Modification, 2000 - 2001; member, Court of Appeal of Fiji; Non-Permanent Judge, Court of Final Appeal, Hong Kong.

(Updated to December 2000)