Developing a Structured Interview Tool for Children Embroiled in Family Litigation and Forensic Mental Health Services: The Query Grid

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**ABSTRACT.** Child-centered mental health and forensic professionals have long recognized the dilemma implicit in the need to elicit valid reports from court-involved children. The fact that young children are highly suggestible and that even skilled, well-intended interviewers can corrupt the data in myriad subtle ways risks compromising the legal process and (re-) traumatizing the child interviewee. The present article introduces the Query Grid (QG), a child-centered, multi-modal and minimally

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leading interview tool suitable for use with clinical populations and court-involved children ages four through twelve years. The QG joins the sparse arsenal of existing forensic child interview tools and protocols (e.g., Poole & Lamb, 1999) useful in better meeting the needs of the court system and those children involved in abuse and neglect proceedings, criminal investigations, and custody matters. doi:10.1300/J158v07n01_01 [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <http://www.haworthpress.com> © 2002 by The Haworth Press, Inc. All rights reserved.]

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Mental health and family law professionals alike are often faced with the dilemma of how best to elicit valid and reliable reports from children. The lessons of the McMartin daycare abuse trials (e.g., Garven, Wood, Malpass, & Shaw, 1998; Kelley, 1996), among others, have highlighted the confounding impact of both young children’s suggestibility and interviewer bias. Unfortunately, this acknowledgement has yielded too few child-friendly tools which are used far too infrequently (Goodman, Quas, Bulkeley, & Shapiro, 1999; Hardy & Leeuwen, 2004; National Children’s Advocacy Center, 2005; Poole & Lamb, 1999).

In the ideal situation, children might never be involved in forensic process. Those emotionally super-charged, highly acrimonious, and routinely polarized and polarizing matters which bring children before forensic examiners and families into our courtrooms can create trauma in the very children whose best interests they seek to protect (Flin, 1993; Goodman et al., 1999). In the interest of due process, however, eliciting a child’s direct experience can be a necessary—and sometimes the only—means of investigating allegations of abuse and neglect, requests for termination of parental rights (TPR) and reunification, custody determinations, criminal matters, and allegations of alienation.

If children must continue to be involved in forensic process and if mental health and family law professionals are to fulfill the dual (and sometimes mutually exclusive) obligations of serving both children’s needs and the court system, interview tools must be established which serve to elicit a child’s valid and reliable report even while minimizing the potential for trauma associated with the process (Saywitz & Snyder, 1996; Yuille, Hunter, Joffe, & Zaparniuk, 1993; Yuille, 1998). The present paper briefly reviews the literature concerning the forensic child interview as a foundation upon which to introduce one such tool.

Children’s suggestibility and interviewer bias. Eliciting a valid and reliable report from any person depends in large part on the integrity of the interviewee’s memory, that person’s capacity for expression and the conditions under which the report is elicited. Suggestibility describes the degree to which an individual is vulnerable to incorporate new information into existing memories, mistaking such misinformation as genuine (Brady, Poole, Warren, & Jones, 1999; Fivush & Schwarzmueller, 1995; Garven et al., 1998; Loftus, 1992; Poole & Lindsay, 1995; Poole & White, 1991, 1995). Interviewer bias describes the means—both intentional and incidental—through which such misinformation may be communicated in the course of conducting an interview (Bruck & Ceci, 1993; Ceci & Bruck, 1993a,b, 1995; Ceci & Friedman, 2000).

Taken together, studies of suggestibility and interviewer bias have yielded a profile of the child and interviewer variables most commonly associated with inaccurate report. Younger children, for example, are likely to be less reliable reporters than older peers (e.g., Ceci & Friedman, 2000; Lyon, 1999; Cohen & Harnick, 1980; Goodman & Reed, 1986; King & Yuille, 1987; Warren, Hulse-Trotter, & Tubbs, 1991), more dependent upon or responsive to external cues (Fivush, 1993; Hardy & Leeuwen, 2004; Zajac & Hayne, 2003), and more vulnerable to limitations implicit in both a more restricted world knowledge and in relatively immature communication skills (Saywitz & Snyder, 1996).

A child’s report to a familiar, trusted interviewer will be more accurate and complete than the same child’s report in the absence of interviewer rapport (Ackerman, 1983; Carter, Bottoms, & Levine, 1996; Hardy & Leeuwen, 2004; Tobey & Goodman, 1992; Yuille et al., 1993). Interview techniques that establish interviewee comprehension and expressive capacity tend to be more accurate than those that do not (Carter, Bottoms, & Levine, 1996; Yuille et al., 1993). More generally, interviewers who use any of the following techniques are likely to compromise the quality of the child interviewee’s report:

1. Forced choice questions (e.g., “Was it red or blue?”) (Gilstrap, 2004; Wood et al., 1997);
2. Questions that introduce a preference (e.g., “It was Tuesday, wasn’t it?”) (Gilstrap, 2004; Wood et al., 1997);
3. Repeated questions within a single interview (Poole & White, 1991; Siegal, Waters, & Dinwiddie, 1988);
4. Imagination or speculation questions (e.g., “If he had been there, what do you think he might have done?”) “... increase the likelihood that children will accept the false event as true and give details about the event” (Gilstrap, 2004, p. 17; cf., DeVoe & Faller, 2002; Schreiber, Wentura, & Bislyk, 2001);

5. Stereotype induction (Leichtman & Ceci, 1995; Marxsen, Yuille & Nisbet, 1995), frames a question about a specific person or event within the context of a stated stereotype of generic bias (e.g., “Many men do that. Did he?”);

6. Reference to social pressure (Garven, Wood, & Malpass, 2000; Garven et al., 1998; Wood et al., 1998) or the “other people” paradigm (Wood, McClure, & Birch, 1996) “... even a short dose of reinforcement and social influence techniques can have a strong, immediate impact on children’s accuracy” (Garven et al., 1998, p. 350);

7. The use of two or more of the foregoing techniques in combination (Gilstrap, 2004).

Two studies examining children’s reports following routine pediatric exams (Saywitz, Goodman, Nicholas, & Moan, 1991; Ornstein, Baker-Ward, Myers, Principe, & Gordon, 1995) illustrate these observations. Older children were more accurate reporters than their younger peers. Across age, children queried with open-ended questions (e.g., “Tell me everything that happened”) offered less information but more accurate information than peers queried with closed-ended questions (e.g., “Did the doctor look inside your ear?”). In closed-ended query groups, children offered more information but with lesser accuracy. Accuracy declined as the interval between the pediatric visit and interview increased. Inaccuracies in all conditions included not only omissions (forgetting) but commissions consistent with information implicitly communicated by the interviewer.

The Query Grid (QG) is a structured tool designed to assist interviewers in eliciting accurate reports from court-involved children ages four through twelve years old. The QG provides interviewers with a common, standardized means of entering the child’s world and eliciting his or her report without recourse to those methods known to be associated with bias and suggestibility. The QG has the advantage of providing the child interviewee with simultaneous auditory and visual prompts, thereby facilitating comprehension, particularly when learning, perceptual, linguistic/cultural, and/or developmental differences might otherwise confound interview. The QG offers the further advantage of giving the child interviewee some control over a process that can otherwise invoke anxiety and itself become traumatic.²

The QG does not address the target issue (e.g., abuse, custody, TPR) unless and until the child raises it. Instead, the QG prompts the child to acknowledge events associated with a spectrum of emotions as experienced in each of the environments or relationships in the child’s life. In this regard, it is possible for a child interviewee to complete the QG with no reference to the target issue. At the least, in those few instances to date in which this has been the case, the QG remains valuable as a preliminary means of establishing rapport and the child’s response set.

The QG is distinct from other forensic child interview tools in that it provides a context for the interviewer to enter the child’s world. Queries prompted by the QG format are framed within the child’s emotional experience (happy, sad, mad, and scared) and within the familiar contexts of the child’s life. In contrast, other tools ask the child to bring his or her experience into the contexts imposed by the interviewer.

Differentiating among feeling states. Clinical experience demonstrates that children as young as four years can reliably differentiate between happy, sad, mad, and scared facial expressions in face-to-face interaction, using photographs and/or standardized abstract icons. Research confirms that the ability to recognize and differentiate among these emotional states develops independent of culture and language (e.g., Ekman & Friesen, 1971) and can be reliably demonstrated in preverbal infants (Montague & Walker-Andrews, 2001). This skill does develop with age (e.g., Denham, Zoller, & Couchoud, 1994) and may be related to overall mental health status (e.g., Blair, Collinge, Murray, & Mitchell, 2001 regarding psychopathy; Hale, 1998 or Surguladze et al., 2004 regarding depression; Teunisse & de Gelder, 2001 regarding autism; Camras et al., 1990 and Pollak & Sinha, 2002 regarding trauma).

Materials and set-up. The QG is optimally administered using a large (18 × 24 inches) pad of newsprint, a thick black marker, and an ordinary pen or pencil. With the child watching, the interviewer draws and labels in marker and simultaneously states aloud the four simple emotion icons denoting happy, sad, mad, and scared feelings across the top of the page in landscape orientation. These will become column headers. This is illustrated in Figure 1.

Rows are then defined in marker by headers down the left edge of the page. These are the relevant contexts or relationships in the child’s life.
For the present purpose, a relevant context or relationship may be defined as a physical environment (e.g., classroom), a generic type of relationship (e.g., friends), or a particular relationship (e.g., Uncle George) of relevance. Determining these categories requires that the interviewer have advance access to information about the child’s history. The number of contexts chosen will be specific to the child’s maturity, attention span, apparent anxiety, and the nature of the target matter such that younger, less mature, more inattentive, and anxious children will typically tolerate fewer rows in any given interaction. In practice, the Expressive Baseline context (always row #1) and two or three child-specific contexts (thus, three or four rows in total intersecting four emotion columns yielding 12 to 16 query cells) typically proves optimal. As with emotion/column headers, contexts/rows are stated out loud and labeled in marker in block letters down the far left margin of the page. Simple stick figure icons (sometimes even supplied by the him or herself) can be helpful in defining each.

To illustrate—most young children from intact homes might define their experience as occurring within three contexts: Home, School, and Friends. A fourth context (e.g., “dance class”) can be determined on a child-to-child basis. When parents separate, Home can be differentiated into Home-with-Mom, on one hand, and Home-with-Dad, on the other. The particular matter prompting interview may dictate inclusion of other contexts. Recent clinical work has included, for example, Swim Team, At the hospital, Grandma’s House, and Sunday School.

Establishing expressive baseline. Validating that the child can comply with the process, understand the questions, differentiate among the four feeling states, and offer a coherent response requires a priori identification of a benign context, where “benign” denotes an event or environment that the child is likely to find familiar and non-threatening. This context will become row #1 and the resulting four queries (i.e., “What makes you feel [happy, sad, mad, scared] in benign context?”) serve as the Expressive Baseline.

Unfortunately, there can be no single benign context common to all children. Thus, the interviewer’s familiarity with the child’s history and the matters relevant to the interview will be necessary in order to identify a child-specific context believed to be benign. In preliminary forensic applications of the QG, such contexts have included Playground, Birthday, TV shows, Lunchtime at School, favorite hobbies (e.g., Skiing), collections (e.g., Pokemon characters), and sports (e.g., Red Sox baseball).

During expressive baseline, the four feeling columns are established and the benign context introduced as the only row (see Figure 2) with the explanation, “Let’s practice.” The examiner asks the child to point to any one of the four empty cells generated by intersecting the four feelings and the only row. The interviewer labels the chosen cell out loud by pointing at the column and row headers: “That’s something that makes you feel happy at recess.” The interviewer then prompts for comprehension by indicating another cell and asking the child to identify its intended contents. Correct answers mention the proper emotion (column) and the benign context (row) and are complimented (e.g., “Wow! You’re good at this!”). An incorrect answer obviously mislabels the intended emotional state or the context. All efforts are praised (“Great try”) and gently corrected as necessary by visual reference to the column and row headers (e.g., “See this? This is something that makes you feel [appropriate emotion by column] about [appropriate context]”).

During expressive baseline, “nothing” and “I don’t know” responses are discouraged by helping the child to define the four emotional states by degree and by idiosyncratic (sometimes by culture-specific and non-English) labels. In practice, this is more often necessary with negative affect states. For example, it is sometimes difficult for a child to identify events which elicit “scared” feelings, but much easier when the category is broadened to include words that suggest degrees of the category,
such as, “nervous, worried, or scared.” In the same manner, the word, “Angry” may be less familiar or less comfortable than “mad,” “aggravated,” “frustrated,” or “pissed.” Sad can include “disappointed” and “depressed.” Happy can include “pleased,” “proud,” and “excited.”

Once the expressive baseline task is clearly understood, the interviewer prompts the child, “Okay, let’s fill in these four squares. Which one do you want to do first?” The child’s choices are noted for sequence on paper (i.e., #1, #2, #3, #4), and recorded verbatim within each respective cell. Every effort is made to complete the Expressive Baseline responses briefly without rushing the child and always praising the effort, regardless of the content of the response.

Less mature, attentive, and compliant children can be given a break upon completion of expressive baseline before continuing on to complete the QG itself. In general, any time that a child/interviewee appears fatigued or distressed, the process is interrupted or discontinued.

Completing the grid. The substance of the QG is completed in exactly the same manner as the expressive baseline, either as an uninterrupted continuation by adding new rows/contexts under the existing column/feeling headers, or by recreating the column headers and the functional rows/contexts down the far left column of a new page (see Figure 3). The child is given free rein to choose the sequence of his or responses and this sequence is recorded (#1 . . . #12 in the case of three contexts or through #16 in the case of four contexts) along with verbatim responses. Non-verbal indices accompanying responses (e.g., tearfulness, apparent anxiety, task avoidance) are similarly noted.

Insubstantial responses (e.g., “nothing,” “I don’t know,” “I don’t care”) are noted and gently discouraged (“I need something to go in this square”). In some instances, the interviewer might determine that, “We can’t get back to playing until all of these squares are filled in.” The interviewer is free to follow up any particular response with an open-ended query (“What do you mean?” or “And then what happened?”) always mindful of the dual risks of leading the child and taxing the child’s limited attention and frustration tolerance.

Repeat administrations of the QG can be particularly useful in several ways. Most generally, the predictability of beginning each interview with the same tool can help to quell many children’s anxiety. Some children find the control and structure inherent in the tool reassuring and even ask to complete, “that chart” rather than engage in open-ended conversation with the examiner. Changes in QG responses across time can be helpful in generating hypotheses (and prompt related investigations)
about real-world events which have transpired between interviews and/or suggest differences in the child which can be a function of caregiver context. By the same token, rigid repetitions of QG responses over multiple administrations can generate hypotheses about the rigidity of the child’s thinking, the scripted nature of his or her responses and, in those instances where the responses are not only immutable but polarized by caregiver, the possibility that some sort of alienation is at work (e.g., Garber, 2004d).

Interpreting QG responses. Sound clinical practice, psychometrics, ethical standards, and in some instances, the law (e.g., Daubert v. Dow, 113 S. Ct. 2786 [1993]) guide the prudent evaluator to interpret any one child’s responses in any single interview using any single protocol must become taken as a means of generating hypotheses and never as conclusive. It is only when convergent data become available across time, across protocols, and even across informants that such hypotheses can begin to be ruled in or ruled out. With this in mind, the data generated through the use of the QG on one or across multiple occasions can help to generate hypotheses and guide the larger direction of investigation, but can seldom if ever be taken as conclusive in and of itself.

The QG is neither a formal assessment with established reliability and validity coefficients nor a projective instrument. The QG is no more and no less than a standardized interview tool intended for use with children. As such, the hypotheses address evaluation questions on the basis of the interpretation of single cell (row × column) responses, by patterns within contexts/rows, patterns within emotions/columns, and by the overall response sequence.

Single cell (row × column) responses. A child interviewee’s response to any single cell on the QG can be simultaneously the most provocative and the least reliable source of data. Court-involved children and trauma victims can develop discrete islands of intense emotional experience in the midst of an otherwise unremarkable life experience. In these instances, a child’s response on the QG can appear mundane in all but a single trauma-relevant cell. The content, the accompanying incidental non-verbal behaviors, and the sequence of such responses can stand out dramatically in these instances. It is not uncommon for interviewers completing the QG with a child who offers pleasant if mundane responses one cell after another to be lulled into complacency and then startled by the emotion that erupts in response to a single trauma-relevant cell. The eight-year-old girl who is being molested by her step-father, for example, calmly works her way through happy, sad, mad, and scared responses at Home-with-Dad,

happy, sad, mad, and scared among Friends, and then completes happy, sad, and mad at Home-with-Mom in an entirely compliant and age-appropriate manner. It is only when the final cell (scared × Home-with-Mom) is approached that she drops eye contact, stammers and becomes tearful, finally responding simply with the step-father’s first name.

Seasoned interviewers know that continued calm is critical in the face of these potential “Aha!” moments; that a dramatic or inconsistent response on the part of the interviewer risks leading the child to elaborate in the service of confirmational bias and/or overstimulating the child and cutting off any further disclosure. As a single-cell response, this new information lacks convergent support from elsewhere in the Grid or the larger interview and must therefore be taken as just another data point worthy of later follow-up. The QG protocol is flexible enough to invite elaboration (“Can you tell me more?” or “How does he scare you?”) without leading.

Response patterns within context/row. A child who offers markedly different responses by rows is communicating his or her differential experience of the respective environments. This pattern is often seen on the QG among children who migrate between separated and conflicted parents. More specifically, it can be a signal that the child is caught in the middle of an adult conflict.

In one instance, a twelve-year-old boy chose to complete the QG sequentially by rows, filling in the happy, sad, mad, and scared cells from left to right first for Home-with-Mom, then for School, Friends, and finally for Home-with-Dad. His sequential approach is not unusual and may suggest a generally logical, sequential means of coping with ambiguity. The differences in the content of his responses by rows, however, generates valuable hypotheses relevant to the extant custody matter.

This child’s Home-with-Mom responses were dramatic and positive. He nearly cheered his enthusiasm for life at Home-with-Mom, “lots of times, ‘cuz she doesn’t have any rules.” Sad, mad, and scared cells in this row evoked avoidance and minimalization but eventually yielded minimal if insignificant events (e.g., “I get mad when my brother finishes the cereal”). In contrast, his Home-with-Dad responses emphasize angry feelings (e.g., “Like when he grounds me.”), punctuated by a cursory happy × Home-with-Dad response (“When we play video games together”). Recognizing these differences yields a hypothesis about where this child may be most comfortable even as it begins to suggest critical differences in parenting style.

The same child’s response pattern serves to illustrate one further point: As different as these responses are as a function of environment, they
are not starkly black and white. When responses on the QG differ dramatically by row such that the child can offer nothing positive about one environment and/or nothing negative about another, one or more of several hypotheses must be considered. Black-white, all-or-nothing thinking is characteristic of children who are cognitively very young or delayed, can be associated with trauma (e.g., Shapiro, Leifer, Martone, & Kassem, 1990) and certain Axis II diagnoses and/or can be indicative of a conscious manipulation by the child or by someone who has coached the child. The latter typifies parental alienation (Garbar, 2004d).

Response patterns within columns/emotions. Black and white thinking can similarly differentiate a child’s responses by QG columns/emotions. In these instances, a child might typically complete one column at a time across contexts/rows. This response style may suggest that one affect state is predominant and/or that another affect state is threatening and therefore to be avoided. When this pattern appears even after the child has demonstrated a capacity to respond to each of the four emotion states during Expressive Baseline, the suggestion is that the introduction of the contexts/rows has prompted the child to withdraw into a less adaptive, more rigid response set.

Depressed individuals, for example, characteristically see the part of the cup that is half-empty (e.g., Riso et al., 2003). Depression in children can be seen on the QG in a marked emphasis on or stark avoidance of the mad and/or sad response columns across contexts/rows. Anxiety may be similarly manifest in an emphasis upon or avoidance of the scared column. In beginning to interpret such patterns, interviewers are cautioned not to be misled by responses by “empty” responses, that is, answers by omission as with the child who remarks that he is happy at Home-with-Dad, “when he’s gone.”

In some instances, a child’s responses across QG columns are notable for a apparent lack of affect, as if the child is saying that nothing causes him or her happiness, sadness, anger, or fear. This response set is inconsistent with guardedness and may suggest that the interview rapport is inadequate and/or the presence of marked affective disorder and/or the dissociation that is sometimes seen in response to trauma such as abuse (e.g., Silberg, 2004).

Finally, consider the little girl whose parents were divorced before she was born and whose entire six years of life had been spent caught in the midst of her parents’ intense conflict and intractable post-divorce custody litigation. Although there is every reason to believe that she understood the task and was capable of completing it, she struggled to find anything negative during Expressive Baseline (using “gymnastics class” as a benign context) and again throughout the remainder of the task. Her cheery, eager responses in the happy column across contexts and the accompanying innocent shrug of “I don’t know” associated with all things sad, mad, and scary might be mistaken as incredible resilience. Instead, the interviewer’s gentle insistence that, “I really need your help to fill in all of these squares” and reassurance that, “everyone feels sad and mad and scared sometimes” broke through her fragile defensive veneer, generating a great deal of data relevant to the custody question and likely relieving the child of enormous emotional pressure. Specific recommendations for supportive therapy for the child were quick to follow.

Discussion. Professionals responsible for interviewing children in court-related matters carry the ethical burden and practical responsibility of eliciting the child’s valid report even while minimizing the stresses associated with the interview process. Walking this tightrope requires that the interviewer be familiar with the variables that bear on children’s suggestibility, with the interview techniques least likely to lead the child interviewee. This calls for easy and flexible access to an arsenal of tools in support of these goals.

Unfortunately, such child-centered tools are few and far between. The present paper introduces the Query Grid, a structured, multi-modal protocol which serves to minimize anxiety associated with interview in part by granting the child some control over the process. By inviting the child to identify events which evoke a spectrum of emotions in each domain of his or her world, the QG sidesteps many of the pitfalls associated with children’s suggestibility. Preliminary data collected in outpatient clinical practice, a forensic (custody) evaluation setting and a child advocacy center suggest that the QG may fulfill its promise of helping child forensic interviewers balance the dual needs of eliciting a full and uncontaminated report even while minimizing the child’s experience of the process as stressful.

The QG is not, however, sufficient in and of itself. Given an adequate rapport between interviewer and child and evidence from an Expressive Baseline procedure that the child understands and is capable of completing the task, the QG is best considered a preliminary means of generating working hypotheses with which to guide the remainder of a child-centered interview. The QG can pave the way for a child to approach a critical subject (e.g., experiences relevant to abuse, TPR, criminal matters, and/custody) and to open the door for the interviewer to follow. But the QG does allow that a child can sidestep such critical issues entirely, leaving the substance of investigation to more intrusive and directed means.
The QG is also not to be misconstrued to be a psychometrically sound instrument. It is not an assessment measure. It does not have established reliability or validity indices. The QG is as fallible and subject to distortion and dependent upon an interviewer’s insights and inferences as any interview protocol. It has, however, been established in preliminary applications across clinical and forensic settings and across ages to be a child-friendly, minimally intrusive structure within which a forensic interviewer can begin to understand a child’s experience as this may bear on questions yet to be decided by the courts.

Building on its preliminary successes, the QG remains in active development. Descriptive studies are underway seeking to associate response patterns with diagnostic categories in clinical settings and with family dynamics in contested custody matters. Potential differences related to child’s gender, related to the interviewer-interviewee gender match and related to child’s age are only beginning to be understood. Also of interest is the applicability of the QG tool to atypical populations including developmentally delayed populations spanning a far greater chronological age range.

In the end, introduction of the Query Grid will be successful to the extent that the forensic child interviewer’s dual of eliciting a valid report while minimizing the child’s interview-related stress and helps to spark the development of complimentary tools serving the same goals.

NOTES

1. The QG has been used with verbally skilled children as young as age 3 years, but the greater reliability of children’s truth telling by age four years (Poole & Lamb, 1999) marks this as the recommended minimum age.

2. As a clinical matter, it is important to note the extent to which children who are victims can experience interview as yet another victimization. Granting the child a degree of control, making the process predictable, proceeding at his or her pace and in the comfort of a non-threatening rapport can both allievate this dilemma and improve the accuracy and completeness of report.

3. Recognition and differentiation among emotional states is inferred throughout the research from facial recognition measures.

4. In scores of preliminary administrations through QG development, only two children appeared not to understand the Expressive Baseline procedure thus prompting discontinuation of the procedure. The first of these two children was a seven-year-old child diagnosed with Pervasive Developmental Disorder. The second was an openly hostile twelve-year-old boy with a history of violence and drug abuse.

5. This author has referred elsewhere to “chameleon children” as those whose presentations shift dramatically as a function of the accompanied parent (e.g., Garber, 2004c,d).

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