

DEVELOPMENT OF A TOOL KIT FOR THE CHILD FORENSIC INTERVIEW TO IMPROVE THE COLLECTION OF EVIDENCE

By

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Forensic Interviewing: Review of the Process
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Abstract

Background: The problem of interest is focusing on an increase for education within the forensic interviewing process for individuals within the multidisciplinary team and community stakeholders. The **PICO** question is: Does the development of an assessment tool kit for the child forensic interviewing process increase knowledge of qualified observations evidence by the multidisciplinary team and stakeholders. The **Theoretical foundation** for this research will aim to develop and present a toolkit that will enhance and positively affect the knowledge and practices of the forensic interview, based on the Iowa Method of Evidence-Based Practice and a Knowledge-to-Action structure.

Methods: Methods utilized a pre-survey, presentation, and post-survey; which entailed an example of setting the stage introduction, rapport, encouraged narrative, facilitators, interview instructions, narrative practices, and follow-up questioning.

The analysis of the forensic interview consisted of a model structure in which the multidisciplinary team was given a pre-survey questioning acquired knowledge from previous education, a presentation entailing a structured conversation with a child intended to elicit detailed information about a possible event or events that the child has experienced or witnessed, and a post-survey that measured knowledge gained.

Results, conclusion, implications, and recommendations: The scholarly project gathered information through the pre/post surveys focusing on assessing the information interviewers typically review prior to conducting the forensic interview. The surveys revealed a lack of uniformity within the protocols and the preparation practice, as well as

the observational viewers. Summary of data collected, there were limitations to the results which stemmed from a lag in the post survey sent out, as well as a decrease in response from the attendees. In conclusion, there was evidence of learning, which was observed through the results obtained.

The Pearson correlation was used with the result sought after to determine if there was a linear relationship between two quantitative variables, whether a positive or negative correlation. In this scholarly study, the variables were the pre and post survey measuring gain of knowledge by participants. Each question results were reviewed as data to the survey response, with a total of ten questions; both pre and post survey. The pre-survey there were 19 responses. The post-survey resulted in nine out of nineteen responses. Four questions had no statistical significance, however, the remaining questions relating to rapport with the child, impartial attitude, ground rules of the interview, appropriate process, open-ended questioning, and a value with discoverable evidence demonstrated a statistical significance.

Keywords

Knowledge to Action, forensic, forensic interview, Child Advocacy Center (CAC), multidisciplinary team (MDIT), case review, stakeholders, forensic expert, medical exam, victim advocacy

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Chapter 1

Introduction

A forensic interview is a structured conversation with a child intended to elicit detailed information about a possible event or events that the child has experienced or witnessed. There are multiple purposes for the forensic examine: obtaining information from a child that may be instructive in a criminal investigation, assessing the safety of the child's living arrangements, and obtaining information that will either corroborate or refute allegations or suspicions of maltreatment (Lamb & Brown, 2017). Such an interview is conducted when there are concerns that the child has been a victim of physical or sexual abuse or when a child has been a witness to a violent or abusive act perpetrated on another victim. The interviewer must adopt a hypotheses-testing approach and maintain objectivity throughout the conversation (Saywitz et al., 2018).

Forensic interviewing is a first step in most child protective services (CPS) investigations, one in which a professional interview a child to find out if he or she has been maltreated. In addition to yielding the information needed to decide about whether abuse or neglect has occurred, this approach may produce evidence that will stand up in court if the investigation leads to criminal prosecution. Properly conducted forensic interviews are legally sound in part because they ensure the interviewer's objectivity, employ non-leading techniques, and emphasize careful documentation of the interview (Saywitz et al., 2018).

Forensic interviewing is often the only way an agency can learn enough to make a fact-based determination of whether child abuse has occurred. Forensic interviewing

can also yield information to build a safety plan for the child and to support the child's family. The interviewing process brings all entities of child welfare agencies together with other community and state agencies. Because it is used so often in combination with a multidisciplinary response to child maltreatment, forensic interviewing helps professionals learn about each other's roles and how the larger system serving families and children operates. It enables these professionals to see that, despite differences in their missions, human services and law enforcement agencies share two common goals: fostering healthier, safer relationships for children and preventing further exploitation and harm (Lamb & Brown, 2017).

Law Enforcement's main objectives in child abuse cases typically are perpetrator-focused around arresting and gathering evidence against the perpetrators. Typically, officers lack training and experience with child abuse, especially within the Child Advocacy Centers,(CACs) and Multidisciplinary team work, (MDTs). For CACs to be most effective for the children who are victims of sexual abuse, the full engagement of law enforcement with the CAC and MDTs is crucial. Police are the criminal investigators on the MDT, and they are tasked with building a case of information and evidence to hand over to the DA's office. Therefore, gaining a better understanding of what facilitates law enforcement engagement in MDTs would be a valuable contribution to inform policy and practices. This is the evidence for best practice with the necessity of education for the multidisciplinary team, especially law enforcement as they witness the forensic interview (Pielmus,2013).

Background of the Problem

Sexual abuse is a severe problem in the United States and around the world with a

report of child sexual abuse made every 10 seconds. One out of every four girls, and one of every six boys, will be sexually abused before they reach 18. More than 90% of children know the person who abused them. The alarming statistics surrounding child sexual abuse has caught the attention of the legal, healthcare, and social justice systems to work collaboratively to ensure the physical and psychosocial health of the child is maintained. In 2014, the CACs served 315,000 children for abuse and of which 205,438 children were sexually assaulted (Elliot, 2014). The establishment of Child Advocacy Centers (CAC) provides community-based, child –focused programs to investigate, treat and manage, and prosecute child sexual abuse cases (Jackson, 2014). There are nine core components incorporated into a child-friendly facility. A multidisciplinary team, an investigative child interview, a medical examination of the child, victim advocacy, care review, case tracking, organizational structure, the forensic interview and mental health services. These nine components are the integral parts which plays a pivotal role. The multidisciplinary team and community stakeholders actively observe the formal interview done by the forensic expert, and then performs an assessment to obtain agreement to move forward with a court trial and possible conviction.

Following two decades of research and practice, professionals have gained significant insight into how to maximize children’s potential to accurately convey information about their past experiences. Yet, as this effort continues and practice evolves, professionals face new challenges in standardizing forensic interviewing practice throughout the country (Saywitz et al., 2018).

Forensic interviewers are sometimes inadequately trained to conduct child sexual abuse interviews. A poorly conducted interview can change the child’s recall of events

(Fanetti et al., 2012). A common and severe problem for forensic interviewers is the danger of becoming jaded. Interviewers who become involved in these cases will, overtime, build a set of prejudices based on their experiences. This causes them to project their past experiences into the contemporary interview. As well-intentioned as the individual interviewers may be, by filtering how they conduct a forensic interview based on their extensive past experience, they are likely to contaminate the present interview by confirmatory bias (Fanetti et al.,2012).

While total objectivity is impossible, the need to find some mechanism to identify this condition before it becomes irredeemable is of utmost importance. Education is needed to determine the level of the contamination of interviewer's objectivity and the observational bias of the multidisciplinary team. When the team detect in themselves that they are anticipating the child's responses, and arrive at a point of, "I know what you mean" in their minds because of an overload of observations the risk of contamination and bias with a lackadaisical view becomes inescapable (Steele et al., 2012).

Statement of the Problem

The problem is that the forensic interviews are not being conducted per the evidence-based guidelines on a consistent bases by the multidisciplinary team and stakeholders. The multidisciplinary team should be aware and informed so as to respond cooperatively to reports and capable of moving the sound information to trial.

Research Question(s)

Does the development of an assessment tool kit for the child forensic interviewing process increase knowledge of qualified observations evidence by the multidisciplinary team and stakeholders?

Definitions of Terms

KAP- knowledge to action- iterative sequence of activities and support which together bridge the gap between knowledge and practice, by converting knowledge into decisions and actions to deliver safer, more effective care.

Forensic- relating to or denoting the application of scientific methods and techniques to the investigation of crime application of any science, study, or discipline to the law or legal realm.

Forensic Interview- a structural conversation that takes place under an established protocol and is designed to elicit accurate and complete information.

Child Advocacy Center (CAC)- A child friendly comfortable, family-friendly facility that provides comprehensive assessment and treatment services for children suspected as victims of abuse or neglect.

Multidisciplinary Team-a coordinated, specifically trained team of child protection professionals that responds cooperatively to reports of abuse and neglect within a particular community, involving Child Protective Services, Law Enforcement, Medical and Mental Health professionals, and Children & Youth Services(National Children's Advocacy Center, 2018).

Educational review-a review that includes conceptualizations, interpretations, and synthesis of literature and scholarly work in a field broadly relevant to education and educational research (Taylor & Francis, 2022).

Supportive services- services that address the special needs of people served by a project, including the establishment and operation of a child service program (Cornell, 2022).

Group debriefing-structured group discussion for the purpose of understanding or a learning process designed to continuously evolve plans while they are being executed (McNallie, 2022).

Need for the Study

The forensic interviewer and observational team should be neutral. This is sometimes virtually impossible, as individuals who work in the field of child protection often become jaded and bring their expectations into the room with them as the interview is conducted. These individuals may lose their professional sight and become hard or uncaring about the observation and their educational background may become hazy and unproductive to the case. The purpose of this training is to increase knowledge regarding established guidelines for forensic interviews to follow so that all interviews are conducted using the same format to allow for better court preparation. In most cases, the investigation comes down to the victim's word against the perpetrator's word, therefore it is of utmost importance that the interview is conducted according to best practice policy and training is followed to the degree of integrity and evidence-based format (Newlin,2016).

Forensic interview models guide the interviewer through the various stages. All models include the following phases: The initial rapport-building phase typically comprises introductions with an age- and context-appropriate explanation of documentation methods, a review of interview instructions, a discussion of the importance of telling the truth, and practice providing narratives and episodic memory training. The substantive phase most often includes a narrative description of events, detail-seeking strategies,

clarification, and testing of alternative hypotheses, when appropriate. The closure phase gives more attention to the socioemotional needs of a child, transitioning to no substantive topics, allowing for questions, and discussing safety or educational messages (Saywitz et al., 2015).

Skillful questioning is crucial for retrieving the information sought from the child in their own words and from their perspective. To preserve the accuracy of the child's information, interviewers should make use of questions that target free-recall memory including questions that ask for additional description through cued narrative questions which make use of child-generated cues. Effective forensic interviewing requires gathering and managing multiple streams of information during both the pre-planning and execution stages. Critical thinking, the ability to deduce what information is important and relevant for decision making, is a helpful skill to inform this process (Newlin, 2016).

Forensic interviews are best conducted within a multidisciplinary team context, as coordinating an investigation has been shown to increase the efficiency of the investigation while minimizing system-induced trauma in the child (Cronch et al., 2006; Jones et al., 2005). Before the interview, multidisciplinary team members should discuss possible barriers, case-specific concerns, and interviewing strategies, such as how best to introduce externally derived information, should that be necessary. Regardless of whether the forensic interview is conducted at a CAC or other child-friendly facility, the interviewer should communicate with the team members observing the interview to determine whether to raise additional questions or whether there are any ambiguities or apparent contradictions to resolve (Jones et al., 2005).

A relative lack of both research and practice experience challenged pioneers in the field. As such, protocols and training efforts underwent significant revisions as more research was conducted and people began gaining practice-based experience, which informed further training. Additionally, given the dearth of resources at the time, geographically diverse training programs began to develop naturally throughout the United States, emanating from frontline service providers who struggled to provide quality services themselves and who also wanted to help fellow professionals. Different case experiences, contextual perspectives, and community standards influenced these training efforts. In addition, these service providers were not directly communicating with one another about the content of their training or their theoretical approaches. This further supported the existence of various approaches and the lack of standardized training language regarding forensic interviewing (Anderson, 2018). The interviewer often has to balance the team's request for further questions with the need to maintain legal defensibility and with the child's ability to provide the information requested. The goal for society will aim to continuously improve and transform healthcare delivery and the education and knowledge of the Stakeholders responsible for trial, conviction, and the child becoming whole with a productive life (Anderson, 2018).

Significance of the Problem

The process within most agencies is problematic because the premise they start out with does not help find out the truth. It is aimed at securing a conviction, whether justified or not. The process is designed as a tool for prosecuting the accused, not for finding the truth. It is outcome oriented, a process in which truth becomes secondary to getting information to support the prosecution's goal.

In most communities, law enforcement forensic interviews are done in police stations. The interviewers are typically police officers, either in uniform or plain clothes but generally visibly equipped with the usual police paraphernalia — badge, guns, handcuffs, and police radio. This is likely to further contaminate the interview. Children are eager to please adults of "high status" and nothing is as impressive to a small child as being alone with a police officer. Not only this but the fact that children are told to do as someone in an authority position tells them to do. Sometimes social services workers can be equally intimidating (Bourg et al., 2012).

The main issue, however, is the training of the forensic interviewers who work with the children. It is important they have the knowledge of interviewing skills and recognize their own biases. They must zealously guard against being contaminated with too much biased external information, such as through fellow police officers or case workers who want to help by giving them information, they feel is important. This "team" concept is flawed when it comes to the child interview. The interviewer needs to know minimum facts as to what is alleged and minor demographics on the child. Too much additional information may result in confirmatory bias unless the interviewer is aware of this danger and consciously explores all possible hypotheses. But few real-world interviewers do this. Perfect neutrality is probably the impossible dream, but perfect bias is the perfect nightmare. This is where the educational study and continual training opportunities are of the utmost importance for success (Bourg et al. 2012). Little research has examined the effects of burnout, secondary trauma, and organizational stressors on forensic interviewers. This study by Starcher examined the following research questions. To what extent do forensic interviewers experience burnout and

secondary trauma associate with their profession? How do organizational stressors increase these outcomes among interviewers? Decreased job support, increased funding constraints and heavy agency caseloads all result in burnout and secondary trauma. Policy recommendations include continued training and mental health services for interviewers. Future researchers should conduct qualitative interviews and examine how other factors, such as forensic interviewing protocols, influence interviewers' job experience and mental health (Starcher et al., 2020). The relationship between job support, funding constraints, agency caseloads and the number of conducted forensic interviews on burnout and secondary trauma among forensic interviewers can impact and validity of the interview. The forensic interviewing process may have detrimental effects on the mental health of interviewers. In a recent study comparing police officers and social workers that investigate cases of child sexual abuse, social workers were more likely to report a feeling of discomfort, including "empathy with the child's plight/condition" (Cheung & Boutte-Queen, 2000). Among forensic interviewers, these feelings may lead to increased burnout and secondary trauma, resulting in poor interview practices, which may lead to high levels of internal inconsistencies during the forensic interview (Bonach & Heckert, 2012). Therefore, research examining the mental health of forensic interviewers is vital for both the interviewer and the subsequent criminal investigation, including the validity of the child interview.

From a policy perspective understanding, the cause of burnout among forensic interviewers can help reduce the high turnover rate in this profession (Bonach & Heckert). This can lead to issues and implications for the children served at CACs.

Addressing the leading causes of burnout and secondary trauma among forensic interviewers helps to ensure that child victims receive high-quality care, according to Starcher.(Starcher et al., 2020). The forensic interview process will be evaluated continuously for effectiveness in the reporting and observation to assure movement toward trial, conviction, and safety of the child ensuring they are whole.

Assumptions

The forensic interview is critical in helping investigators understand the broader experience of the child, identifying other victimization the child may have experienced (poly-victimization) and identifying additional victims and/or corroborating witnesses. Some professionals suggest introducing evidence, especially digital evidence, in forensic interviews is not appropriate; and this is often supported with the perspective that children will disclose when they are ready, and that introducing evidence to a child may cause them additional trauma. However, the reality is that children are not avoiding recall of the abuse only to have these experiences recalled when asked questions by a forensic interviewer, or possibly when evidence is introduced. Children who have experienced abuse consistently recall these experiences, and the great anxiety for them is not only the experience(s) but also whether they will be believed and/or protected if they disclose. In this regard, the sensitive introduction of evidence may actually help children who are reluctant to disclose to know that the issue of belief will not be an issue at all. Likewise, the opportunity to begin talking about their experiences and to be put in contact with supportive services that can assist in their protection from further maltreatment and healing may not occur if we simply wait until the child initiates the process (National Children's Advocacy Center, 2018). The knowledge gained will improve the continuity

of the process to trial with the individuals who are observing following the required standards and exhibiting appropriate follow through with peers.

Limitations

Limitations to the study will involve my inability to attend all forensic interviews and assess the multidisciplinary team as they move forward with education and continual training opportunities. Another limitation will be the follow-up with the number of cases that go to trial stemming from the interviews that depict a trial is warranted. Finally, limitations to the outcome and success of the presentation and the survey results could be hindered by individuals present for the presentation, conflicts with timing, and the general opinion of need for the education within an aggregated study.

Summary of the Problem

All interview structures advocate using open-ended prompts/questions to elicit information during the abuse-related part of the interview, although there is not entire agreement on definitions and structure of these probes. In the early days of forensic interviewing, experts preferred “who-” questions (e.g., Who did this? What did the person do? Where were you? When did this happen? How did you get into the room?) (Ahern et al., 2018), in part because the answers to these questions were central to the police investigation. Today, most interview structures advise invitational probes, such as “Tell me everything you remember” over “why-” questions for older children because invitations tap free-recall memory. That said, not all “who-” questions are equal in their productivity (Ahern et al., 2018). For example, Ahern and colleagues (2018) found “what” and “how” questions about actions were far more productive than questions such as “What color was the man’s shirt?” Today, most forensic interview structures privilege

verbal disclosures over demonstrations of what happened, even though young children may be more accomplished in showing than telling. The efficiency of the forensic interview will be reviewed monthly at the Child Advocacy Board meeting, where the cases of the month are reviewed with the multidisciplinary team and those extenuating individuals who observed the interview.

Child advocacy has been slowly shifting toward the integration of children's rights and protection along with balance of values and empiricism. The evolution of forensic interviewing offers an instructive illustration on this point. In the past the reliability of children's disclosures was predicated on untested adult beliefs about their capacity. For decades the prevailing view was that children could not be trusted to tell the truth or did not possess the capacity to recount personal experiences. As a result, the children's report of sexual abuse was discounted or ignored (Motzkau, 2007). Consistent with an emphasis on children's rights, alleged abuse victims were given the right to self-expression and were listened to by concerned adults. However, values and untested beliefs about children's innocence led to problematic forensic interviewing practices. Child advocates, with best intentions commonly relied on leading interview methods to elicit a disclosure, even if the child repeatedly denied abuse (Horner et.al, 2007). Research on forensic interviewing continues to advance and provide a balanced integration of children's need for protection with their rights to self-expression using empirically supported principles of child development and age-appropriate investigative interview strategies (Anderson, 2018).

In this research, child advocacy has emerged as an organized social and political movement to help the State make decisions about children's welfare. The character and

complexity of child advocacy has transformed and increases with recognition as a unique study. The effort supporting child advocacy offers protection and rights to healthy child development and is attributed to success by advancing multidisciplinary teams made up of trained forensic examiners to attain appropriate information through interviewing and procedure (Anderson, 2018).

Chapter 2

Review of Literature

The following review of literature deals with the synopses of forensic interviewing, importance of Child Advocacy Centers, and the problem and solution supporting Child Advocacy within child abuse and education of the multidisciplinary team. This review combines discussion of treatment of the abused child, the importance of inclusion of the child as a whole, the supportive family member, and contrast as to why and how the multidisciplinary team reveals a difference in the success of the outcome. Restating the problem of interest is the focus and increase for education within the forensic interviewing process for individuals within the multidisciplinary team and community stakeholders. The goal of a forensic interview is to have the child verbally describe his or her experience. The Forensic interview models guide the interviewer through the various stages of a legally sound interview; they vary from highly structured/scripted to semi-structured (interviewers cover predetermined topics) to flexible (interviewers have greater latitude). All models include the following phases: the initial rapport-building phase typically comprises introductions with an age- and context-appropriate explanation of documentation methods, a review of interview instructions, a discussion of the importance of telling the truth, and practice providing narratives an

episodic memory training. The substantive phase most often includes a narrative description of events, detail-seeking strategies, clarification, and testing of alternative hypotheses, when appropriate. The closure phase gives more attention to the socioemotional needs of a child, transitioning to no substantive topics, allowing for questions, and discussing safety or educational messages. Increasingly, forensic interviewers receive training in multiple models and use a blend of models individualized to the needs of the child and the case (MRCAC, 2014). All interview models acknowledge that building rapport is important for both the child and the interviewer. During this phase, the child can begin to trust the interviewer and become oriented to the interview process. The interviewer can begin to understand the child's linguistic patterns, gauge the child's willingness to participate, and start to respond appropriately to the child's developmental, emotional, and cultural needs. A narrative approach to building rapport sets a pattern of interaction that should be maintained throughout the interview (Hershkowitz et al., 2015; Collins, Lincoln, and Frank, 2002; Hershkowitz, 2011).

Giving interview instructions during the rapport-building phase sets expectations that the child should provide accurate and complete information and also mitigates suggestibility. The child's age may influence the number of instructions and, perhaps, the type of instructions that may be most helpful. Interviewers may want to include some of the following instructions: "I was not there and don't know what happened. When I ask you questions, I don't know the answer to those questions." "It's okay to say 'I don't know' or 'I don't understand that question.'" "Only talk about things that really happened." (This emphasizes the importance of the conversation.) For younger children, interviewers may want to have them "practice" following each guideline to demonstrate

their understanding (Saywitz et al., 2011). When children demonstrate these skills spontaneously, interviewers should reinforce them.

Caseworkers, law enforcement, or other professionals require training in order to conduct effective forensic interviews. Training generally ranges from 4 days to 1 week and is sponsored by a variety of organizations, including state agencies, professional organizations, and agencies responsible for conducting interviews. Advanced training is also available on a variety of topics, such as interviewing young children, interviewing across cultures, interviewing developmentally challenged children, managing bias, delivering court testimony, and secondary trauma. Many forensic interviewers are trained in the use of more than one model (Stephens et al., 2012). To help strengthen their skills and address difficulties they have encountered, many forensic interviewers participate in supervision or peer review. Supervision involves the interviewer meeting individually with a more experienced interviewer, who can review interview transcripts or video and provide feedback. This may assist in ensuring the newer interviewer is adhering to the model being implemented as well as general best practices. Peer review allows interviewers to discuss cases and current research and provide feedback and support to each other in a group setting. To achieve accreditation by the National Children's Alliance (NCA), CACs must ensure forensic interviewers participate in peer review.

Development of Child Advocacy

According to Cascardi (2017) a hard look was taken on the development of child advocacy as a field of study, which focused on protection, rights, values, and strategies for reconciling the framework of research and education. The goal of the study mainly concerns child protection and the rights to self- expression, inclusion within decision making, and balancing society's views of discipline and what is abuse. Cascardi (2017)

consequently views the challenges of the child's need for protection, while viewing lack of basic rights due to the view of competence within decision making became a source for review. Therefore, the value of child advocacy needs to rely on analysis of outcomes, strong basis of policy and procedures, and research evidence of practices generated from relevant disciplines.

For this reason, Cascardi postulated a guide for child advocacy into three basic issues. First, an interdisciplinary approach should be attained to synthesize knowledge and lack thereof from the team, second, child's need for protection encouraging their right to participate and exhibit self-expression, and third, values and ideologies are judged against evidence based practices. By doing so, an argument was made that the goal of child advocacy is to support the child within the service delivery, such as forensic interviewing, and educate the powers that ultimately decide the outcome of the process, while providing protection and rights to the child (Cascardi, 2017).

Education Needs for Child Advocacy Centers

In this qualitative data analysis of utilization of advocates in the child advocacy center, Young explains the goal was to fill the gap in knowledge by reporting findings based on a survey of family victim advocates employed in child advocacy centers. The study aimed to answer the questions of what personal characteristics and qualities family victim advocates need to perform this work as well as education. The diverse nature of this work requires a knowledge of crisis assessment techniques, interventions, community resources, dynamics of child abuse, trauma-informed services, and interaction with law enforcement (Young, 2019).

A pragmatic qualitative research method to seek discovery and understanding was instituted due to the wide range of needs and resources of the community. This open-

ended survey reached a greater number of family victims, advocates for broader perspective. The online survey promoted reach, flexibility, ease of entry, and analysis. The National Children's Advocacy Alliance analyzed the data collected. Young (2019) was inclusive of data that encompassed the respondents' characteristics, motivation to becoming a family victim advocate, and discussion of personality qualities.

Study findings revealed a relationship between years of experience and knowledge of research-informed practices, specifically the need for advanced training related to trauma. Even though participants had an average of 7.5 years of experience, almost one-half of them had fewer than five years of experience. It was documented that persons with more years of experience may be less knowledgeable about trauma-informed care, suggesting that experienced family victim advocates may not have the opportunity to attend more advanced training because of perception, staffing, and timing. The research included information of the participants who were extremely interested in state and national conferences for greater opportunities for networking and advancement with problem-solving techniques (Young, 2019).

The findings from the current study provide clues to the motivations and personal characteristics of family victim advocates. Young (2019) was selective of the providers of child victim services chosen due to their personal characteristics, willingness, education, and experience qualifying them to work with at-risk families. CAC directors that are responsible for recruiting, hiring, and retaining family victim advocates need to consider the background of a potential candidate to determine the applicant's level of commitment. The CAC directors need to consider ways of making training and education more accessible, as well as suggesting additional coaching, consultation, supervision, and

support to their staff. In conclusion, the study provides a framework for understanding who forensic interviews are, what motivates them to perform their work with at-risk families, and the training that is dire for them to provide quality care and sustain positive outcomes (Young, 2019).

Herbert (2017) reviewed the Child Advocacy Center, (CAC) model as a solution to the child sexual abuse, and the issues that remain over the effectiveness due to the manner that Child Advocacy Centers are ran in differing communities. Outcomes were CAC in the community. Higher satisfaction in outcomes for the child, families, and the reviewed investigating outcomes of physical, psychological, family functioning involving the process in place and the involvement of outside sources. When comparing CAC service delivery to communities without this established service, the rate of police involvement and medical examinations were at a higher rate than the multidisciplinary team was evident in every study. Moreover, an understanding of the operational ability of the CAC and its connection with the multidisciplinary team and their responsibilities theorize to connect to outcomes of improvements in symptoms of trauma and improved criminal justice reporting. So as Herbert stipulates the ideals of the holistic approach of the CAC versus the individual components, the benefit would be one of current education and understanding of the appropriate protocols required (Herbert, 2017).

The Child Advocacy Center approach to serving families arose out of complaints in the 1980's that the process of treating children of sexual abuse caused further detriment to the child (Hubel, 2018). According to Hubel, the ideal of looking at the child as a whole and exploring the physical and emotional reaction to sexual abuse is critical. A qualitative study was conducted to investigate the effectiveness of a group program for

children and families involved in sexual abuse in improving self-esteem, interpersonal relationships, and sexual relationships. Hubel associated with the Sexual Abuse Family Education SAFE Program which is a 12-session behavioral group treatment meeting that occurs at separate and concurrent intervals with the child and non-offending family member (Hubel, 2018).

Symptoms of Child Abuse & Need for Services

This study examined factors potentially related to the initial symptom presentation of children participating in Project SAFE. The study instrument measured depression, anxiety, loneliness, fear, and the impact of traumatic events on the child. Analysis of Variance for Child Outcome was performed to examine the differences between symptomatic and subclinical groups of children on the social validity of Project SAFE. The study involved ninety-seven participants; there was completion of a pre, and post assessment associated with an evaluation at the CAC. The study results of sixty-three children and the non-offending members revealed a significant decrease in problematic behavior and distress. Hubel reviewed the study results which revealed an outcome regarding the child and non-offending family member's perception of the environment of the CAC with treating the child. Advocacy groups for victim services can be trained specifically in these types of programs and can be inclusive not only to the abused child, but the non-offending family member (Hubel, 2018).

Forensic Interviewing/ Education

According to Newlin (2016) the forensic interview is one component of the comprehensive child abuse investigation. The Forensic interview can provide direction

for other aspects of the investigation. Newlin (2016) describes the interview as a sound method of gathering factual information without regard to the outcome. There are many issues that can impact the child of abuse and their ability to unpack and communicate the information. Consideration of development, trauma, timing, question type, documentation, and most importantly the expertise of the forensic interviewer. Newlin (2016) explored the forensic interviewing process inclusive of the rapport-building phase, substantive phase, and the closure phase performed in a trained blend of models individualized to the needs of the child and the case. Furthermore, Newlin (2016) explored and exposed the importance of peer review as a facilitated discussion with the multidisciplinary team. The team maintains an expertise of practice and offers support professionally as well as critiquing of the process.

A child forensic interview can be conceptualized as a structured conversation that is designed to obtain information from a child about an event the child may have experienced. The interview should be “developmentally sensitive,” meaning questions should be phrased based on a child’s level of cognitive development and linguistic skills. The results of a child forensic interview can serve several purposes: (1) To inform and direct a law enforcement investigation; (2) To substantiate or disprove allegations of child sexual or physical abuse, neglect or maltreatment; or, (3) To assess the safety of a child’s living arrangement (Newlin, 2016). Ultimately, the results of a child forensic interview may help determine whether to bring criminal charges against an individual suspected of physically or sexually abusing, or neglecting a child, or suspected of another criminal offense. Given the importance of protecting children who may have experienced abuse or neglect, as well as protecting the legal and civil rights of individuals suspected

of a criminal offense, it is imperative that forensic interviews of children are conducted in a neutral and unbiased fashion that follows empirically based, best-practice standards (Newlin, 2016). In the research study of “Do Children’s Advocacy Centers improve families’ experiences of child sexual abuse investigations?” the approach has sought to address a number of issues with the response to child sexual abuse including the traumatic nature of many investigations, low convictions and prosecutions rates, and the lack of support alongside the investigation. The approach involves the delivery of key services at a stand-alone child friendly facility, also serving as the focal point for a multidisciplinary and multiagency team who collaborate on the abuse (Jones et al., 2018).

The CAC is presented as a holistic response to child sexual abuse and aims to present the current state of evidence for fully realized CACs, undertaking a systemic review as to the design, the outcomes, and the state of evidence. The CAC model stands for a common-sense approach drawing on the combination of well-evidenced forensic interviewing practices, multidisciplinary teams, and victim advocacy. CACs seek to increase multidisciplinary coordination in sexual abuse investigations and provide an independent, child-friendly environment for forensic interviews, increase training for interviewers, and increase children’s access to medical and therapeutic services (Jones et al., 2018).

Effective measures in this study included a majority which focused on criminal justice outcomes, with results that stemmed from abuse to lack of evidence. The research also encompasses a hard look at child physical and psychosocial well-being, family functioning, evidence collection, child trauma outcomes, and family coping strategies. Advocates for the model need to review a number of issues dealing with child protection,

and how certain agencies respond to child sexual abuse. A change could result in defining areas of deficits where lack of coordination exists stemming to trauma, poor criminal justice outcomes that leave children at risk of revictimization and a lack of service provisions to eliminate the effects of abuse (Jones et al., 2018).

The study assessment of the review measured the performance of the CAC model in obtaining disclosures, substantiating accounts of abuse, arrests, convictions, the prevention of victimization, and reductions in the rates of abuse in communities with a CAC. The studies included in this review supported the idea that CACs result in favorable criminal justice outcomes when it came to comparisons of how multidisciplinary teams responded within the communities. If the response were integral with the benefit of the CAC, in the forefront, the outcome would be positive (Jones et al., 2018).

The discussion reviewed studies that exposed significant issues within the body of evidence for the CAC model. Questions explored where outcomes reviewed satisfaction with services, interviewing of children, parents, and members of the multidisciplinary team to understand their experiences of CACs. There is a lack of evidence for claims about CACs with respect to child trauma outcomes, with no study directly addressing the question of whether CACs result in less systemic trauma than standard practices (Jones et al., 2007). This review concluded that it is important to identify the benefits of this approach above other practices, especially in the efficacy of the model in terms of criminal justice outcomes and forensic interviews. CACs are developing and the recommendation states that all CACs can benefit by organizing a multidisciplinary team and instilling in that team that education through research with appropriate investigation

skills will generate positive outcomes. The potential for success within the CAC model depends on adaptation, collection and sharing of data, education of a cohesive team, and well framed research and evaluations (Jones et al., 2018).

The instrument used in this education is based on the development of the tool assessment for forensic interviewing process to improve observational and collection of evidence. The questionnaire will be voluntary and confidential with the results provided for assisting in setting procedures and policies that will perfect the process. These outcomes will benefit the interviewing process, the process of caring for the child, and complying with the forensic guidelines as well as the medical examination. Five investigation questions that are examples of key informant interview questions that assess interagency collaboration tie in with the forensic interviewing process. In the questionnaire the participants, experts in the field as professionals working in or with the CACs to help identify which outcomes are most important to advocate for the beneficial outcome for the abused child (Bowen et al., 2020).

Theoretical Framework

Theoretical framework for this research will aim to develop and present a toolkit that will enhance and positively affect the knowledge of the forensic interview, based on a Knowledge to Action premise. Within this premise the Knowledge to Action is a conceptual framework intended to assist those concerned with knowledge translation and deliver sustainable evidence-based interventions. These guidelines will be elaborated through the Iowa Evidence-Based Practice process for education and promotion, which will have knowledge focused triggers that come forward when new research findings are presented or when new practice guidelines are warranted (Melnyk, 2015).

Accomplishment in the research will be implemented through a pre-survey, presentation, and post-survey educating the multidisciplinary team and other stakeholders in the county with the importance of the forensic interview and the impact on the outcome of the assaulted child.

The Child Advocacy Center Model is based on the Iowa Model of Evidence-Based Quality Care. The CAC offers guidance to sexually abused children and the non-offending family member. The Iowa Model has six components; consisting of selection of a topic, forming a team, evidence retrieval, grading the evidence, developing an EBP standard, implementation, and evaluation (Melnyk, 2015). The first step is to identify a trigger, which is the lack of a community-based CAC. The second step of the Iowa Model involves the process of reviewing credible literature related to making a change in the practice setting. In the review of the literature research, it supports the need for further evaluation of the effectiveness of CACs and how they improve the treatment and quality of care given to each child in a timely manner. The third step is to identify the evidence that supports the need for a change. The implementation of a CAC is efficacious for the community serving a means to provide comprehensive care to child victims of sexual assault. The final step of the model is implementing the change and monitoring the outcomes. This is a program set up to evaluate the effectiveness of the change in reporting, the forensic interview, the efficiency of the center in respect to proximity for the community, the medical examination, and the follow up to assure the child is safe and well. The Iowa model has set forth a guide for the Child Advocacy center and the multidisciplinary team to follow for success (Melnyk, 2015).

Summary of the Literature Review

Future implications of this study are focusing on the effect of knowledge with the multidisciplinary team center compared to the current practices for sexually assaulted children in treatment response time and efficiency of care. Communities need to focus on the best practice of having a Child Advocacy Center established with procedures and policy guidelines. Recommendations for future care would be that all children are seen at a CAC for treatment of sexual assault and abuse. This recommendation must fall under the guidelines of a knowledgeable multidisciplinary team and the regulations that guide their education and processes. The goal of the CAC is to provide a setting that is confidential, child friendly, and offers a safe place for the forensic interview and assessment to be performed. The goal is timeliness, support, and healing for the child victim and their non-offending family member (Bowen et al., 2020).

When the child is between the ages of three and seventeen years and meets the criteria for case referral, a forensic interview shall be conducted at the CAC. Cases involving these allegations may deviate from referral to the CAC only when consultation regarding case specific concerns have occurred between the investigator, their supervisor, and the CAC. A Multidisciplinary team (MDIT) meeting including Child Protective Services, Forensic Interviewer, District Attorney's Office, Victim Services, and Law Enforcement will occur prior to the interview. Information shared includes a review of any prior interviews of the child, a review of prior relevant criminal and child protective services history with the family, any relevant cultural and/or development considerations, and any critical issues to be addressed with the child. The caregiver will not be present during this meeting so the forensic interviewer will remain neutral, only members of the MDIT may view a forensic interview. Occasionally, an individual who is not a MDIT

member will observe an interview with the permission of the CAC Director for reasons such as educational and/or training with partner agencies of the CAC. Individuals who are not MDIT members and who are observing an interview must complete the CAC Confidentiality Statement prior to the child's interview. Parents/caregivers may not observe or view the interview.

The Forensic Interviewers at the CAC are, with best practice, required to regularly attend training and participate in peer review opportunities. In addition to the above, the MDIT at the CAC are required to participate in peer review at a minimum of twice annually, defined by the evaluation and assessment of work or performance by other people in the same field in order to maintain or enhance the quality of work or performance in that field. This includes educational review, supportive services, and group debriefing; hence the importance of forensic interviewing education.

Chapter 3

Methodology

A forensic interview of a child is a developmentally sensitive and legally sound method of gathering factual information regarding allegations of abuse or exposure to violence. This interview is conducted by a competently trained, knowledgeable, neutral professional utilizing research and practice-informed techniques as part of a larger investigative process (Saywitz et al., 2015). Within this educational study, all members of the MDIT and Stakeholders will be given a pre- survey to question their knowledge base and follow through with post-survey knowledge questionnaire.

Research Design

This research study was implemented through a pre-survey, presentation, and

post-survey educating the multidisciplinary team and other stakeholders in the county with the importance of the forensic interview and the impact on the outcome of the assaulted child.

Setting

The setting was in a rural center, located in southern Pennsylvania County at the Child Advocacy Center.

Sample

Participants will be between approximately 25-60 years of age, but 18 years or older, gender male and female, any race. The special consideration of the population will be participants from the multidisciplinary team, encompassing Stakeholders from the community. Stakeholders may be the District Attorney and team, Law Enforcement encompassing several different entities, Children and Youth Services employees, Victim Services employees, and the Forensic Interviewing team.

Participants were notified of research project through email, online networking within the multidisciplinary team, and presentations that are held monthly with the Child Advocacy Board members who will stream information to County Representatives and Stakeholders.

Ethical Considerations

Full Disclosure will be maintained during the process. Child Abuse Clearances are already required from the multidisciplinary team members and the Stakeholders. Consent is obtained prior to all interviews and procedures involving the Child Advocacy Center and procedures and is kept on file, as well as an evaluation of the presenter.

Instrumentation

The pre/post survey questions were obtained from the question bank utilized within the forensic interviewing process of education. These questions result from education guiding best practice when interviewing the abused child to depict a safe arena and ability to obtain the appropriate information that is truthful and increase the likelihood of successful outcomes (American Professional Society on the Abuse of Children, 2012). (Appendix B).

According to the Iowa Model, interviewers will be trained based on the needs of their specific jurisdiction, weighing the quality of the interview, consistency of the information, and the implementation. There is a universal agreement within the Iowa Evidenced-Based model research that many protocols support the recommended interviewing techniques that will be discussed as beneficial and accurate using open, non-suggestive questioning. The lack of consensus surrounds and will be explored regarding the upkeep of educational expertise of the multidisciplinary team and their ability to convey the allegation information into a formidable process toward conviction (Iowa Model Collaborative, 2017) .

Data Collection

The pre-survey was sent prior to the presentation on February 1st, 2023 with a 19 out of 19 responses obtained. The post-survey was sent out with the minutes from the Board meeting on February 6, 2023, which followed the presentation on February 3rd, 2023, the time lag may have added to the decrease in response to the post-survey, which was nine out of nineteen responses. The following results were obtained out of ten questions, four were found to have no statistical significance due to the fact that the pre and post answers were identical in response (Appendix B).

Institutional Review Board and The Informed Consent

An informed consent (Appendix A) was obtained prior to the presentation at the Child Advocacy Center. The consent explained the purpose of the study, the key players; Principal Investigator Dr. Jill Rodgers and Co-Investigator Suellen Lichtenfels. The participants were asked to take part in the study as a voluntary option, aiming to appreciate the knowledge of the observational value of the forensic interview process, as a review, and the goal to be able to move forward with an evidence-based assessment of valid information for process to trial and conviction. The study was approved through the Institutional Review Board of Edinboro University of Pennsylvania.

Pre/Post Survey

A pre/post survey was formulated to gauge the knowledge of the study participants. Participants were notified through the Child Advocacy Board meeting. The Stakeholders were notified through emails and online notifications of the training and the date of the presentation. A pre and post -survey with an evaluation was ascertained from the participants. The pre/post survey encompassed identification of any irresponsible approach or handling that does not regard the guidelines required for the forensic interviewing process. Data was gathered through the pre/post surveys focusing on assessing the knowledge of the information interviewers typically review prior to conducting the forensic interview. Confidentiality was of the utmost importance with obtaining consent for observation of interview and completion of child clearances prior to any attendance of the presentation. Pre/ Post-survey encompassed the continuum of the forensic interviewing process as a recap of pre- information, presentation, and post understanding of education presentation (Appendix B).

Time Schedule

The presentation was performed in a non-threatening environment, with open discussion and without prejudice of answer. The presentation was held on February 3, 2023 at 10 am. Notification was sent to all invited guests through email and the surveys via Survey Monkey as previously explained.

Summary of Methodology

Educational related records will stem from knowledge regarding the observation of the forensic interviewing process performed in a structured guideline for best practice and research. Observation knowledge encompassed identification of any irresponsible approach or handling that does not follow the guidelines required for the forensic interviewing process. The importance of the provision of a professional environment where guidelines and structure follow the requirements by state statutes and the Child Advocacy practice will be implemented. It will be a continuous process that will observe the progress of the procedure and my development of the core content. The Child Advocacy Center will be evaluated continuously for effectiveness in the reporting and observation of the forensic interview to assure movement toward trial, conviction, and safety of the child ensuring they are whole (Nelson et al, 2018).

Chapter 4

Analysis

Introduction

An educational presentation of the forensic interviewing process was performed for research and best practice. The survey revealed a lack of uniformity within the

response of some participants viewing the interviews as part of the multidisciplinary team. This lack of response to the required protocols was the instrument which triggered the development of the tool kit to improve the collection of qualified observational evidence and to take a hard look at the knowledge base and what could be instrumental for change. The data that was obtained from the pre/post survey indicated a t-Test: Paired Two Sample for Means. The t-Test was run for a paired two sample for the means comparison from the pre and post surveys. The pre/post survey was one that was prepared with the educational piece and presentation, and a Survey Monkey was sent out to the participants within a group design study. The results from the surveys were then analyzed utilizing a paired t-Test to further indicate the learning obtained from the group participants (Appendix C).

Results/ Limitations

Data results from Survey Monkey, the post survey and evaluation were sent post presentation on February 6, 2023. Initially there was a slow return, so a reminder was sent via email with the link on February 9th, 2023 with a request for all to be returned by February 10th 2023, concurrently responses were obtained, not all responded.

The Pearson correlation is used when the result sought after is to determine if there is a linear relationship between two quantitative variables, whether a positive or negative correlation (Freedman,2019). In this scholarly study, the variables would be the pre and post survey measuring gain of knowledge by participants. Each question results were reviewed as data to the survey response, with a total of ten questions; both pre and post survey. The pre-survey was sent prior to the presentation on January 30th, 2023, 19 out of 19 responses were obtained. The post-survey was sent out with the minutes from the

Board meeting which followed the presentation on February 6th, 2023, and the time lag may have added to the decrease in response to the post-survey, which was nine out of nineteen responses. The following results were obtained out of ten questions, four were found to have no statistical significance due to the fact that the pre and post answers were identical in response (Appendix C).

The questions that were insignificant were as follows; What is the importance of the recorded interview with eliciting a child's unique information? All respondents answered correctly pre/post. The forensic interview is conducted by a neutral professional utilizing research and practice-informed techniques. All respondents answered correctly true pre/post/ A forensic interviewer is required to participate in which of the following? All respondents answered correctly pre/post. Important areas to explore during the forensic interviews are who, what, where, when, and how? All respondents answered true pre/post.

The questions that had significant results were as follows:

Question #2 The P-value is $>.05$ with significance. Pearson correlation is -0.14 which is less than P-value of $.05$ proving a negative relationship from the pre to post survey proving a lack of learning from the respondents.

Question #5 The P-value is $>.05$ with significance. Pearson correlation is 0.47 which is greater than the P-value of $.05$ proving a positive relationship from the pre to post survey indicating a gain of learning from the respondents.

Question #6 The P-value is $.05$ with significance. Pearson correlation is $-.22$ which is less than the P-value of $.05$ proving a negative relationship from the pre to post survey proving a lack of learning from the respondents.

Question #8 The P-value is .05 with significance. Pearson correlation is 0.45 which is greater than the P-value of .05 proving a positive relationship from the pre to post survey indicating a gain of learning from the respondents.

Question #9 The P-value is .05 with significance. Pearson correlation is -0.66 which is less than the P-value of .05 proving a negative relationship from the pre to the post survey proving a lack of learning from the respondents.

Question #10 The P-value of .05 with significance. Pearson correlation is 0.15 which is greater than the P-value of .05 proving a positive relationship from the pre to post survey indicating a gain of learning from the respondents (Appendix B).

Summary

In summary of data collected, there were limitations to the results which stemmed from a lag in the post survey sent out, as well as a decrease in response from the attendees. If a future educational presentation were conducted changes that would have a positive impact for increase of data would be a larger population sampling, and a different view of how and where the presentation would be carried out. If a possible decrease in response came from a population for example of Law Enforcement personnel, education could be presented at the Police barracks with only this type of respondents present. In this case these respondents may appear more engaged and more appropriately ready to respond to the survey due to the individuals that would be present(Appendix D).

Chapter 5

Summary of the Findings

The goal for society will aim to continuously improve and transform healthcare delivery through the education and knowledge of the Stakeholders responsible for trial, conviction, and the child becoming whole with a productive life. An evaluation of my DNP project will be formative in nature referring to an assessment of procedures and learning. It will be a continuous process that will observe the progress of the procedure and my development of the core content. The Child Advocacy Center will be evaluated continuously for effectiveness in the reporting and observation of the forensic interview by continuation of monthly board meeting and required state peer reviews. This study revealed a lack of uniformity within the observational viewers with regard to attitude, knowledge, and independent focus on assessing information and formulating a conclusive opinion. The tool kit proved that the importance of continuous education through gain of knowledge by peer review, sustaining ongoing discussions among all key players with delivery techniques and program planning will improve their abilities as well as benefit to the abused child.

Limitations

Limitations to the scholarly project were founded with the population sampling, and the response of certain aspects of the population themselves. The response time from the pre-survey to the presentation, and the response of post surveys was postponed due to a lag in the turnaround of emails sent. Due to the timeframe of return the amount of post-survey was decreased from the initial pre-survey response causing a decrease in the linear response. The insignificance of four of the questions in learning was demonstrated by correct answers by the sampled population with the pre to post survey responses. The cause and effect of this may be the fact that these questions demonstrated a complete

review of the forensic interviewing process, which is the basis of all questions. In the ideal of comparison of gain of learning to lack of, a summation could be made that some of the respondents may feel that they are expert in the field, or possibly that as law enforcement that this presentation may have not met their needs in the set environment (Appendix B).

Implications for Nursing

This scholarly DNP project possesses several aspects to implicate beneficial outcomes within the nursing process for abused children. Forensic interviewing is a different avenue of the health process and it encompasses population health spanning the healthcare delivery continuum to prevent further deterioration of the health of children in an undesirable circumstance. This ties in with the core competencies of Professional Nursing, and strives for the improvement of equitable population health outcomes. The forensic interview sets expectations of accurate and complete information, mitigates suggestibility, and categorizes milestones of development which are all inclusive of aspects in the nursing process(NCA, 2018).

To increase the likelihood of successful outcomes for all children, it is imperative to continue ongoing knowledge through continuous education, peer review , and discussion among professionals in both direct delivery of the interview as well as the frank observation and review of who, what, where, and when. If these types of programs persist and become community oriented, the ideal will permit that more stakeholders and families will be included in education and hopefully a decrease in the need for forensic interviewing will occur. The hope for nursing implications in the future would be to link this type of education within the nursing process, so as students learn fundamentals

within pediatrics and woman's' health they may also realize the existence of violence toward women and children as real and palpable with discussion of consideration for an end.

Recommendations for further Research

The presentation could be offered on an annual basis coupled with education peer review for all entities of the multidisciplinary team and stakeholders who have a founded interest in outcomes. Within these different entities of the multidisciplinary team, each may have a differing perception of the presentation and the possibility of the groups having separate style education and group sessions may permit for open dialogue amongst the particular assemblage. Examples: Law Enforcement which typically presents with a reserved attitude when in reality they may have the same focus but their demeanor may exhibit something completely different. In this case a separate education and presentation may permit for an open discussion amongst their own colleagues and would assure adherence to model implementation and best practice.

Training and knowledge are topics that could be a continuum of education encompassing the conduction of effective interviewing, the interview across cultures, interviewing the developmentally challenged children, court delivery, secondary trauma discovery, and continual management of bias. The forensic interview has to be under continuing construction with peer review, multidisciplinary team involvement, and annual training. These training sessions need to include varieties of organizations, which encompass state, professional, and agencies responsible for conducting interviews.

Summary

The tool kit for the child forensic interviewing process to improve the knowledge of the collection of evidence resulted in a positive outcome. Assumptions in evidence and education does increase knowledge according to the questioning process. The forensic interview was reviewed on levels of actual observation of hours of interviewing children, review of collection of evidence by the multidisciplinary team, both on an individual basis as well as monthly Board meetings. The Knowledge to Action within this scholarly project identified the problem as to level of education and bias of the stakeholders, with the collection of data providing a insignificance with practice for some members falling in the required guidelines, as well as a gap between what some members exhibited a need for continuation of education to dislodge barriers and facilitate a positive outcome (Field et.al. 2014). Review of informed and direct law enforcement investigation was processed with gathering of information of allegations of child sexual abuse, neglect, and maltreatment. Inclusion of Children & Youth individuals assessing the safety of children in their designated living arrangements, family coping strategy reviewal, assessment of family functioning, and coping strategies. All of these assessments, reviews and meetings assisted with determination assuring adherence to the model of forensic interviewing which stimulates best practice for the child and conviction through the court system.

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Appendix A

Title of Study: Development of a tool kit assessment for the child forensic interview to improve the collection of evidence.

Principle Investigator: Dr Jill Rodgers

Co-Investigator Suellen Lichtenfels

You are being asked by Suellen Lichtenfels to participate in a research study, taking part in the study is voluntary, and may stop at any time. This portion of the study aims to examine the observational value of the forensic interviewing process, as a review, and the goal is to be able to move forward with assessment of valid information for process to trial and conviction.

In this study you will be presented with a pre-survey and post survey which will mimic the pre. This survey will be compiled with ten questions which will assist in exploring your knowledge and basic concept of the interviewing process and digestion of the information for documentation and movement in the case toward trial. The survey will be

a constructive view of knowledge pertaining to forensic interviewing regarding protocols, rapport building, familiarity with developmental stages and differences.

The study will be completely anonymous: you will not be asked to give any information that could identify you (e.g., name). The survey is not linked to any IP addresses, the individual responses will not be presented, just the aggregated data.

Remember, taking the survey is voluntary. If, while taking the survey, you feel uncomfortable or no longer want to participate, you may stop at any time. To stop taking the survey, you may destroy your paper document. If you chose to continue, complete the pre-survey and post-survey and then make sure that the number that you select out of a blind drawing is entered on the document.

You should know that all your information related to this study will be kept as confidential as possible within local, state, and federal laws. Records of the study may be reviewed by the Edinboro University Institutional Review Board (IRB). Records from this study will be kept by Suellen Lichtenfels for a minimum of three (3) years after the study is complete.

Information from this study could be used for future research studies or distributed to another investigator for future research studies without your additional informed consent.

Summary

If you have questions about the research or a research-related injury, you can contact Suellen Lichtenfels @pennwest.edu. If you have a question about your rights as a research participant that you need to discuss with someone, you can contact the Edinboro

University Institutional Review Board at irb.Edinboro@edinboro.edu. If you would like a copy of this informed consent, please email slichtenfels@pennwest.edu.

By checking the box, "I agree" and continuing with the survey, you have acknowledged that you have read the entire informed consent and are at least 18 years of age. Also, you acknowledge that you agree to participate in the study and have the right not to answer any or all of the questions in the survey.

A pre and post survey along with an evaluation tool will be sent out through monkey survey prior to and after the presentation. All responses will be anonymous.

Appendix B

1. What is the importance of the recorded interview with eliciting a child's unique information?

a. Body language is documented as it happened.

b. The recording can be used in a court setting

c. There is record of child's exact words

D. all the above

2. What is the first step in interviewing children during the forensic interview?

a. Abuse disclosure

b. Rapport building

c. Rules

d. Narrative practice

3. The Forensic interview is conducted by a neutral professional utilizing research and practice-informed techniques.

a. True

b. False

4. A forensic interviewer is required to participate in which of the following?

a. Forensic interview peer review

b. 32 hours of instruction and practice in evidence supported protocol

c. Review of current literature on the practice of forensic interviewing

d. All of the above

5. Forensic interviewers may handle sensitive cases, so it is important to be impartial without knowledge of the legal system.

a. True

b. False

6. Name one of the ground rules to be followed during the forensic interview.

a. Correct the interviewer

b. Say "I don't know" if do not know the answer to the question

c. Only talk about things that really happened

d. All of the above

7. Important areas to explore during forensic interviews are who, what, where, when, and how.

a. True

b. False

8. What is the appropriate process for a successful forensic interview?

a. Interview, pre-parent meeting, team meeting, post parent meeting

b. Team meeting, pre-parent meeting, interview, post-parent meeting

c. Pre-parent meeting, interview, post-parent meeting, team meeting

d. None of the above

9. What is the best type of question utilized by forensic interviewers?

a. List

b. Forced choice

c. Open-ended

d. All the above

10. If notes are taken during the Forensic interview, they should be kept as discoverable evidence.

a. True b. False

Appendix C

t-Test: Paired Two Sample for Means

QUESTION #2

	0	1
Mean	0.875	0.875
Variance	0.125	0.125
Observations	8	8
Pearson Correlation	-0.142857143	
Hypothesized Mean Difference	0	
df	7	
t Stat	0	
P(T<=t) one-tail	0.5	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	1	
t Critical two-tail	2.364624252	

t-Test: Paired Two Sample for Means

QUESTION #5

	1	1
Mean	0.625	0.625
Variance	0.267857143	0.26785714
Observations	8	8
Pearson Correlation	0.466666667	
Hypothesized Mean Difference	0	
df	7	
t Stat	0	
P(T<=t) one-tail	0.5	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	1	
t Critical two-tail	2.364624252	

t-Test: Paired Two Sample for Means

QUESTION #6

	1	1
Mean	0.75	0.875
Variance	0.214285714	0.125
Observations	8	8
Pearson Correlation	-0.21821789	
Hypothesized Mean Difference	0	
df	7	
t Stat	-0.551677284	
P(T<=t) one-tail	0.299165578	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	0.598331156	
t Critical two-tail	2.364624252	

t-Test: Paired Two Sample for Means

QUESTION #8

	1	1
Mean	0.375	0.75
Variance	0.267857143	0.21428571
Observations	8	8
Pearson Correlation	0.447213595	
Hypothesized Mean Difference	0	
df	7	
t Stat	-2.049390153	
P(T<=t) one-tail	0.039801006	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	0.079602012	
t Critical two-tail	2.364624252	

t-Test: Paired Two Sample for Means

QUESTION #9

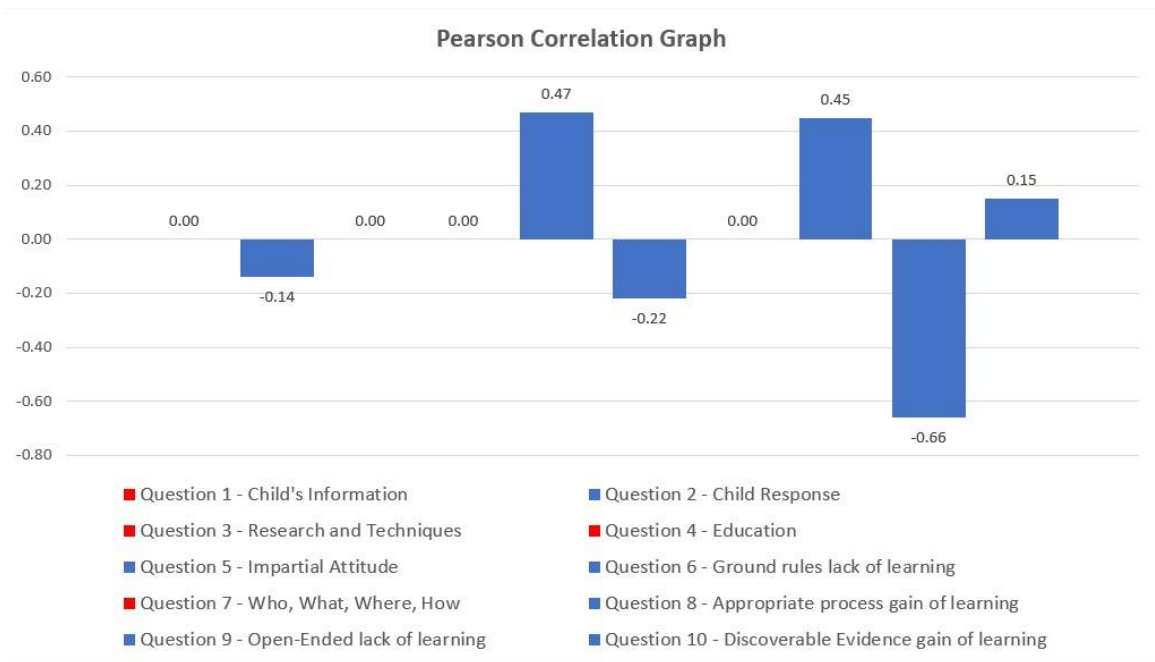
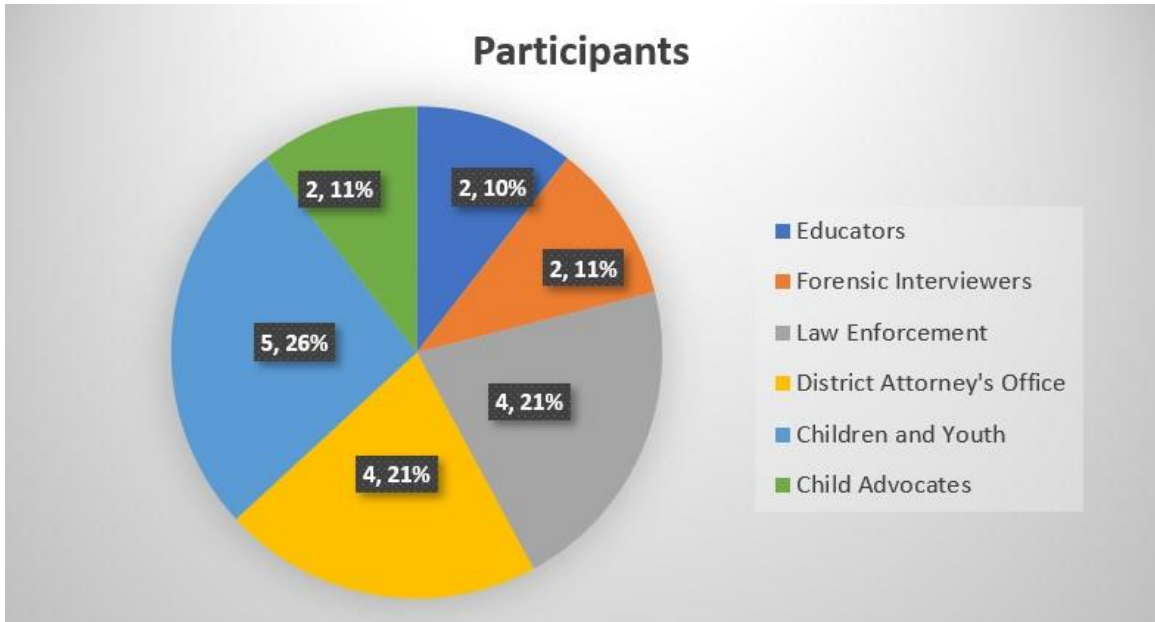
	1	1
Mean	2	0.75
Variance	10.57142857	0.21428571
Observations	8	8
Pearson Correlation	-0.664410597	
Hypothesized Mean Difference	0	
df	7	
t Stat	0.988763688	
P(T<=t) one-tail	0.177858344	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	0.355716689	
t Critical two-tail	2.364624252	

t-Test: Paired Two Sample for Means

QUESTION #10

	1	1
Mean	0.625	0.75
Variance	0.267857143	0.21428571
Observations	8	8
Pearson Correlation	0.149071198	
Hypothesized Mean Difference	0	
df	7	
t Stat	-0.551677284	
P(T<=t) one-tail	0.299165578	
t Critical one-tail	1.894578605	
P(T<=t) two-tail	0.598331156	
t Critical two-tail	2.364624252	

Appendix D



Note: Questions 1,3,4,& 7 show insignificance for the value of the study due to the fact that these questions were answered the same in the pre and post survey, therefore they are not included in the graph.