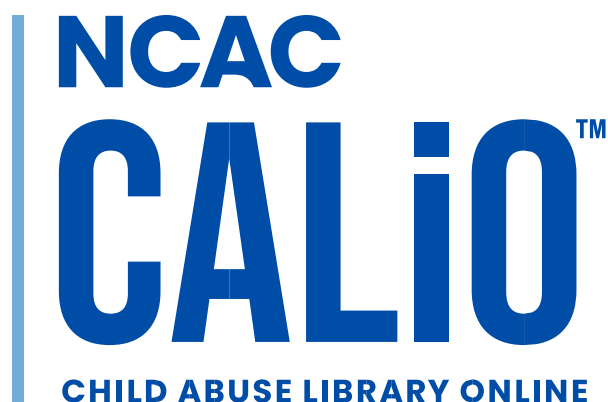




**Bias/Neutrality Among
Multidisciplinary Team Members
Investigating Child Sexual Abuse**
A Bibliography

September 2026

**Championing and Strengthening the
Global Response to Child Abuse**

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Preferred citation: National Children's Advocacy Center. (2026). *Bias/Neutrality among multidisciplinary members investigating child sexual abuse: A bibliography*.

This project was supported by a grant awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

Scope

This bibliography lists publications of research conduct biases among professionals working in multidisciplinary team investigations of child sexual abuse.

Organization

Publications include articles, book chapters, reports, and research briefs and are listed in date descending order. Links are provided to full text publications when possible. However, this collection may not be complete. More information can be obtained in CALiO™, the Child Abuse Library Online.

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Bias/Neutrality Among Multidisciplinary Team Members Investigating Child Sexual Abuse

A Bibliography

Gewehr, E., Merschhemke, M., Pülschen, S., Pülschen, D., & Volbert, R. (2026). [Predicting suggestive questioning from cognitions and emotions about child sexual abuse across three study paradigms](#). *Legal and Criminological Psychology*, 31(2), 566–594. DOI:10.1111/lcrp.70012

Although interviews are individual in nature, and suggestiveness is a major pitfall when questioning children, individual differences in interviewer bias and suggestiveness remain understudied. We assessed relationships between Cognitions and Emotions about Child Sexual Abuse (CECSA) with suggestive questioning and bias across three mock case studies and a meta-analytical integration. In all studies, participants filled in the scales of the CECSA questionnaire (Naive Confidence, Emotional Reactivity and Justice System Distrust) and read mock cases about children displaying unspecific behavioural symptoms, potentially triggering sexual abuse suspicions. In Study 1, 285 human sciences students further read interview transcripts and selected questions suitable to pose to the children. In Study 2, 241 police students read interview transcripts and freely formulated questions to pose to the children. In Study 3, 148 teaching students interviewed virtual children using natural language in a virtual reality simulation. Participants in Studies 1 and 2 additionally rated the abuse likelihood for the children with unspecific symptoms, whereby high ratings indicated biased mindsets. Across three studies and their meta-analytical integration, we found substantial evidence that higher Naive Confidence and Emotional Reactivity but not Justice System Distrust scores significantly relate to stronger bias and suggestive questioning ($b = .14-.37$). The newly developed measures to assess suggestive questioning validly captured a unidimensional trait of suggestive questioning but showed unsatisfying reliability. The findings enhance our understanding of individual differences in suggestive questioning and bias and can inform the development, customisation and evaluation of interviewer training programs.

Gewehr, E., Volbert, R., Merschhemke, M., Santtila, P., & Pülschen, S. (2026). Cognitions and emotions about child sexual abuse (CECSA): Development of a self-report measure to predict bias in child sexual abuse investigations. *Psychology, Crime & Law*, 32(6), 923-943. DOI:10.1080/1068316X.2024.2443448

A biased mindset can foster confirmatory reasoning and suggestive questioning when adults talk to children about abuse suspicions in child-protection, healthcare, educational or investigative settings. We developed a self-report instrument on Cognitions and Emotions about Child Sexual Abuse (CECSA) that may predict individual propensity for a bias toward the abuse hypothesis. Three subscales, 23 items in total, were created in a sample of 801 students of human sciences via exploratory factor analysis and Ant Colony Optimization. The 'Naive Confidence' subscale reflects overestimating one's ability to recognize abused children and overestimating the accuracy of children's abuse reports, the 'Emotional Reactivity' subscale measures the intensity of one's emotional reactions towards the topic of child sexual abuse (CSA), and the 'Justice System Distrust' subscale covers distrusting the justice system's ability to prosecute CSA. The CECSA showed adequate model fit and good internal consistencies. Correlations with other self-report measures demonstrated convergent validity. All subscales predicted biased evaluations towards the abuse hypothesis in scenarios of children displaying unspecific behavioral problems. Given context-specific validations, the CECSA may be used to evaluate training programs or to assess training needs of professionals who talk to children about CSA suspicions.

Lyons, O., Fallon, B., King, B., & Collin-Vézina, D. (2026). [Case and caseworker factors—Do they impact the substantiation decision in sexual abuse investigations](#). *Child Protection and Practice*, 100331. DOI:10.1016/j.chipro.2026.100331

Child Sexual Abuse (CSA) investigations are a complex area of practice in child welfare with low substantiation rates compared to other forms of child maltreatment. The substantiation decision is one of the most critical decisions during an initial child welfare investigation. This study aimed to explore the characteristics of CSA allegations that were reported to the child welfare system in Ontario and examine which characteristics contribute to the substantiation

decision. Data used for this analysis were derived from the Ontario Incidence Study of Reported Child Abuse and Neglect-2018 (OIS-2018). The OIS-2018 used a multi-stage sampling design to capture information about investigations conducted by a representative sample of child welfare agencies over a three-month period. Bivariate Chi-square analyses and a CHAID were conducted to determine which variables were significantly associated with CSA substantiation. There were an estimated 4014 maltreatment-related investigations for CSA in Ontario in 2018. Of these, 29.7% were substantiated and 64.3% were unfounded for CSA at the conclusion of the investigation. Results of the chi-square analyses found that investigations involving female children, contact sexual abuse, older children and the presence of child functioning concerns such as internalizing behaviors, self-harming behavior and suicidal thoughts were more frequently labelled as substantiated. CHAID found that investigations involving workers with a caseload of 10 or fewer were more likely to substantiate younger children (0-7) and older adolescents (16-17). Results indicate the key case and caseworker factors in the substantiation decision in CSA investigations. More research is needed to better understand the decision-making processes of workers to ensure that they are afforded every assistance when judging these cases.

Järvillehto, L., Sun, Y., Korkman, J., Pakkanen, T., Shen, C., Bader, F. M., & Santtila, P. (2025). [Pre-interview hypothesis generation: Large language models \(LLMs\) show promise for child abuse investigations](#). *Psychology, Crime & Law*, 1-32.
DOI:10.1080/1068316X.2025.2531391

Investigative interviews in child abuse (CA) cases are vulnerable to biases that can compromise the investigation's objectivity. Children's initial statements are often ambiguous or incomplete due to developmental and motivational factors, leaving room for adult interpretations and suggestive influences. These biases need to be minimized, particularly before the investigative interview, which is often the primary evidence. Although there is a recognized need for formulating case-specific hypotheses to guide interviews, practical guidance is limited. We compared the capabilities of Large Language Models (LLMs) and

humans with varying expertise levels in generating pre-interview hypotheses. Participants included CA investigation experts ($n = 21$), psychologists ($n = 60$), naive participants ($n = 60$), and two LLMs (GPT-4 Turbo and Llama 2). Each human group generated hypotheses for four of eight case vignettes, while LLMs generated hypotheses for all eight. This resulted in 81 sets from experts, 240 sets from other human groups, and 480 sets from LLMs. Hypotheses were evaluated for testability, specificity, and comprehensiveness. GPT-4 outperformed humans in generating a higher number of hypotheses that were also more specific and comprehensive. This highlights the potential of LLMs to assist in hypothesis formulation, suggesting they can enhance the objectivity and thoroughness of CA investigations.

Schnabel, D. J., Font, S., & Miyamoto, S. (2025). [Putting kids first: Reaffirming universal strategies for accurate detection of child sexual abuse in child protection investigations](#). *Child Protection and Practice*, 5, 100151. DOI:10.1016/j.chipro.2025.100151

To accurately detect child sexual abuse (CSA), universal investigative best practices require caseworkers to perform timely, thorough, and unbiased interviews utilizing evidence-based practices, synthesizing evidence gathered from medical forensic evaluation and assessment of caregiver and family dynamics, and knowledge of developmental nuances in the CSA disclosure process. Incomplete CSA investigations may lead to mistakenly classifying true allegations as unsubstantiated, leaving children at risk for re-victimization. This discussion paper focuses on a case review of 62 unsubstantiated CSA allegations in Pennsylvania, United States, to describe alignment with internationally-recognized investigative CSA best practices. We highlight three universal interrelated barriers to accurate CSA detection: 1) Untimely or absent forensic interviews and medical forensic examinations; 2) Failure to mitigate investigative interference of unprotective/nonbelieving caregivers; and 3) Biases in assessing child credibility, particularly in children with vulnerabilities. We use the highlighted investigative gaps in our review to reaffirm global CSA investigative best practices.

Segal, A., Bakaitytė, A., Kaniušonytė, G., Ustinavičiūtė-Klenauskė, L., Haginoya, S., Žukauskienė, R., & Santtila, P. (2025). Are emotions and psychophysiological states experienced when observing a child sexual abuse interview associated with confirmation bias in subsequent question formulation?. *Journal of Investigative Psychology and Offender Profiling*, 22(1), e1643. DOI:10.1002/jip.1643

When interviewing children in suspected child sexual abuse (CSA) cases, a common mistake is for interviewers to only ask questions that aim at confirming their initial assumption. Here, we sought to investigate whether experienced emotional states and psychophysiological parameters measured when following a (simulated) CSA interview would be associated with confirmation bias in subsequent question formulation. Psychology students ($N = 60$, $M_{age} = 22.75$) followed a (simulated) CSA interview while their facially expressed emotions (anger, sadness, disgust, surprise and relief), galvanic skin response, heart rate (HR), and HR variability (HRV) were registered. The interview was then interrupted, and the participants were asked to formulate additional questions they would ask of the interviewee. As predicted, we found that participants who got more (vs. less) disgusted by the interview asked more questions biased towards confirming CSA. Against our expectations, participants who got more (vs. less) surprised also asked more questions biased towards confirming CSA. We also found, as predicted, that lower HRV was associated with more abuse confirming questions. Results suggest that emotions and psychophysiological states participants experience when observing a CSA interview are associated with confirmation bias in how questions are formulated.

Arnold, S., & Jeglic, E. L. (2024). Stereotypes and unconscious bias in institutional child sexual abuse: Barriers to identification, reporting and prevention. *Child Abuse Review*, 33(2), e2865. DOI:10.1002/car.2865

Child sexual abuse within institutional settings has been a major concern for governments around the world for many years. Consequently, prevention policies have been developed, and institutional child abuse laws have been strengthened in many jurisdictions. Legislation is important to prevent reoffending, however, the majority of childhood sexual abuse remains

unreported and undetected. While awareness of the failings of institutions to properly identify and respond to child abuse has grown in recent years, barriers to reporting institutional abuse remain understudied, impacting the ability to prevent abuse. One possible reason that prevents workers from identifying and reporting child sexual abuse is that their judgements are vulnerable to stereotypes and unconscious biases about who perpetrates and is victimised by sexual crimes and what constitutes warning signs of sexually abusive behaviours. Research in psychology provides key insights into human reasoning processes that can lead to bias, so workers fail to identify, respond and prevent grooming and child abuse in an organisational context. This paper reviews what is known about the development and maintenance of stereotypes and unconscious bias, their role in institutional sexual abuse, and concludes with a discussion of measures that can be taken to mitigate unconscious bias to prevent child abuse.

Lwin, K., Hoagland, A., Antwi-Boasiako, K., MacKenzie, P., & Fallon, B. (2024). [Examining the role of child welfare worker characteristics and the substantiation decision](#). *Child Abuse & Neglect*, 149, 106641. DOI:10.1016/j.chiabu.2024.106641

The role of child welfare workers is twofold, to promote the safety of children and youth and to address their wellbeing. This provincially legislated mandate requires child welfare workers to make decisions across the child welfare service continuum. After a report of child maltreatment is investigated, workers are required to assess the veracity of the allegation through the substantiation decision and to determine whether the child has been victimized, which may impact on families' future involvement with services. Little is known whether or how individual worker characteristics impact the substantiation decision. This study estimated the degree of variation across caseworker characteristics in the substantiation decision through secondary data analysis of the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS, 2018). We explored how the substantiation decision varied across clinical and caseworker characteristics, using both simple and multilevel logistic regression models. Findings suggest that primarily clinical characteristics predicted the substantiation decision, however, worker

years of child welfare experience also predicted substantiation, such that more experienced workers were significantly more likely to substantiate than less experienced workers ($est = 0.02, SE = 0.01, p < .10$). The Intraclass Correlation Coefficient (35 %) suggests differences among child welfare workers' substantiation decision, they are however, characteristics not measured in this study. Conclusions: Further research to assess the differential nature of child welfare worker characteristics and their role in decision-making is required.

Salimi-Jazi, F., Liang, N. E., Huang, Z., Tennakoon, L., Rafeeqi, T., Trickey, A., & Chao, S. D. (2024). [Racial and ethnic disparities in child abuse identification and inpatient treatment](#). *JAMA Network Open*, 7(12), e2451588. DOI:10.1001/jamanetworkopen.2024.51588

Child abuse is a leading cause of morbidity in early childhood. Accurate detection remains challenging. This retrospective, multicenter cross-sectional study performed between 2022 and 2024 examined a representative national sample of children and adolescents (aged <18 years) admitted for pediatric trauma indications from 2006 to 2019. Data were from the Kids' Inpatient Database (KID), the largest publicly available all-payer pediatric inpatient care database. Patient demographics, injury severity, and hospitalization characteristics were classified by race and ethnicity and compared using univariate and multivariate regression. Statistical analysis was performed between March 2022 and October 2024. The SCA subgroup was identified using *International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)* and *International Statistical Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)* codes corresponding to child and adolescent maltreatment. The primary outcome was the racial and ethnic composition of pediatric patients admitted after traumatic injury with SCA vs those without SCA. Among the weighted total of 634 309 pediatric patients with complete data included in the study, 13 579 patients had injuries attributable to SCA (SCA subgroup; mean [SD] age, 1.70 [0.04] years; 7650 male [56.3%]; 2868 Black [21.1%], 2293, Hispanic [16.9%], and 5675 White [41.8%]) and 620 730 patients did not (non-SCA subgroup; mean [SD] age, 9.70 [0.01] years; 395 158 male [63.7%]; 86 376 Black [13.9%], 108 406 Hispanic [17.5%], and 298 748 White [48.1%]). The racial and ethnic distribution

of the non-SCA subgroup was similar to that of the 2010 US Census. In the SCA subgroup, Black patients (odds ratio [OR], 1.75; 95% CI, 1.65–1.85; $P < .001$) and Hispanic patients were overrepresented (OR, 1.11; 95% CI, 1.05–1.18; $P < .001$) and White patients were underrepresented compared with the Census. After controlling for socioeconomic factors and hospital characteristics among 504 365 (weighted) observations in White, Black, and Hispanic patients (493 530 patients without and 10 835 patients with SCA), Black race remained an independent risk factor associated with SCA (OR, 1.10; 95% CI, 1.03–1.17; $P = .004$), whereas Hispanic race was found to be a protective factor associated with decreased odds of SCA (OR, 0.71; 95% CI, 0.67–0.76; $P < .001$). Compared with White patients in the SCA subgroup, Black patients had a 26.5% (95% CI, 11.0%–44.3%) longer length of stay ($P < .001$) for mild to moderate injuries and a 40.1% (95% CI, 16.4%–68.5%) longer length of stay ($P < .001$) for serious injury. In this study, Black children and adolescents were suspected to have experienced child abuse at higher rates than children and adolescents of other racial and ethnic backgrounds. More research is necessary to understand the origins of these disparities to reduce them in child abuse identification.

Diyaolu, M., Ye, C., Huang, Z., Han, R., Wild, H., Tennakoon, L., Spain, D. A., & Chao, S. D. (2023). [Disparities in detection of suspected child abuse](#). *Journal of Pediatric Surgery*, 58(2), 337–343. DOI:10.1016/j.jpedsurg.2022.10.039

Child abuse is a significant cause of injury and death among children, but accurate identification is often challenging. This study aims to assess whether racial disparities exist in the identification of child abuse. The 2010–2014 and 2016–2017 National Trauma Data Bank was queried for trauma patients ages 1–17. Using ICD–9CM and ICD–10CM codes, children with injuries consistent with child abuse were identified and analyzed by race. Between 2010–2014 and 2016–2017, 798,353 patients were included in NTDB. Suspected child abuse victims (SCA) accounted for 7903 (1%) patients. Of these, 51% were White, 33% Black, 1% Asian, 0.3% Native Hawaiian/Other Pacific Islander, 2% American Indian, and 12% other race. Black patients were disproportionately overrepresented, composing 12% of the US population, but 33% of SCA patients. Although White SCA patients were more severely injured (20% vs 16%) and had higher

in-hospital mortality (9% vs. 6%), Black SCA patients were hospitalized longer despite controlling for ISS. In multivariate regression, Black children continued to have longer lengths of stay despite controlling for ISS and insurance type. Utilizing a nationally representative dataset, Black children were disproportionately identified as potential victims of abuse. They were also subjected to longer hospitalizations, despite milder injuries. Further studies are needed to better understand the etiology of the observed trends and whether they reflect potential underlying unconscious or conscious biases of mandated reporters.

LaBrenz, C., Kim, Y., Baiden, P., Shipe, S. L., Littleton, T., Choi, M., Bai, R., & Stargel, L. (2023). State child maltreatment policies and disparities in substantiation: A study of state-administered child welfare systems in the U.S. *Child Maltreatment*, 28(4), 700–712. DOI:10.1177/10775595221143136

Although several studies have examined child & family factors associated with substantiation, less research has explored the role of state child maltreatment policies in substantiating cases of alleged maltreatment. In parallel, there is growing pressure to reduce racial/ethnic disproportionality and disparities across the span of a child welfare case. We examined the relationship between state child maltreatment policies and substantiation, with child race/ethnicity as a moderator of this relationship. Data came from the 2019 National Child Abuse and Neglect Data System (NCANDS) and the State Child Abuse and Neglect (SCAN) Policy Database. Using a series of multi-level binary logistic models, we calculated the odds of substantiation based on child characteristics (e.g., child age, number of types of alleged maltreatment) and state policies (e.g., state definitions of maltreatment that include exposure to domestic violence, harsh punishment). Approximately 17% of the variance in substantiation occurs between states. Although we did not find a direct effect of state policy on substantiation, there were significant interaction terms, in that inclusion of exposure to domestic violence, harsh punishment, or educational neglect in state policy was more strongly associated with substantiation for children of color than white children. Implications for policy and research are explored.

Lacey, E., & Nunkoosing, K. (2022). 'What am I bringing into the room?' Perception and management of interviewer bias in child sexual abuse interviews: An interpretative phenomenological analysis. *Child Abuse Review*, 31(2), 123–136. DOI:10.1002/car.2725

Several high-profile cases in the USA in the 1980s and 1990s revealed the impact that interviewer bias can have on children's accounts of child sexual abuse (CSA). Since then, researchers and practitioners have explored techniques to address this, leading to refined interviewing techniques, greater understanding of suggestibility and memory, and the development of best practice guidelines. However, a gap remains in understanding how professionals themselves manage their interviewer bias. This interpretative phenomenological analysis (IPA) examines professionals' perceptions and management of interviewer bias when assessing CSA allegations. Eight professionals across social work, clinical/counselling psychology and psychiatry employed in specialist services across Ireland participated in semi-structured interviews to explore this question. Ethical approval was obtained from the relevant university and the first author's organisational panel. IPA identified three superordinate themes: Quality Assurance; Collaborative Approach; and Professional Identity – Personal Self. The professionals considered interviewer bias to have potentially detrimental impacts upon both the interview process and possible outcomes. They move from a definition of bias related specifically to a priori beliefs to a definition in which bias is a more dynamic process. A multidisciplinary approach alongside the constant reviewing of practice is considered essential to ensuring a high standard of practice, accountability and integrity of assessments.

Zhang, Y., Segal, A., Pompedda, F., Haginoya, S., & Santtila, P. (2022). [Confirmation bias in simulated CSA interviews: How abuse assumption influences interviewing and decision-making processes?](#) *Legal and Criminological Psychology*, 27(2), 314–328. DOI:10.1111/lcrp.12213

Research has shown that confirmation bias plays a role in legal and forensic decision-making processes and, more specifically, child interviews. However, previous studies often examine confirmation bias in child interviews using non-abuse-related events. We enrich the literature by examining interviewers' behaviours in simulated child sexual abuse (CSA) cases. In the

present study, we used data from a series of experiments in which participants interviewed child avatars to examine how an assumption of abuse based on preliminary information influenced decision-making and interviewing style. Interview training data ($N_{\text{interview}} = 2084$) from eight studies with students, psychologists and police officers ($N = 377$) were included in the analyses. We found that interviewers' preliminary assumption of sexual abuse having taken place predicted 1) a conclusion of abuse by the interviewers after the interview; 2) higher confidence in their judgement; 3) more frequent use of not recommended question types and 4) a decreased likelihood of reaching a correct conclusion given the same number of available relevant details. The importance of considering how preliminary assumptions of abuse affect interview behaviour and outcomes and the implications for the training of investigative interviewers were discussed.

Broaddus-Shea, E. T., Scott, K., Reijnders, M., & Amin, A. (2021). [A review of the literature on good practice considerations for initial health system response to child and adolescent sexual abuse](#). *Child Abuse & Neglect*, 116, 104225. DOI:10.1016/j.chiabu.2019.104225

Healthcare workers play an important role in responding to the needs of the millions of children and adolescents who experience sexual abuse around the globe. A supportive child and adolescent-centered initial response is crucial for the physical and emotional wellbeing of survivors. In 2017, the World Health Organization (WHO) published clinical guidelines for responding to child and adolescent sexual abuse. The review described in this paper informed the development of good practice statements on how best to deliver health care to survivors. This review examined the values and preferences of children and adolescents who were sexually abused, and of their caregivers and healthcare workers, regarding: 1) initial response to children and adolescents who have been sexually abused; and 2) obtaining medical history, conducting physical examination, and documenting examination findings. Searches were conducted in Scopus, Pubmed, and the WHO's Global Index Medicus (1 January, 1995–15 July 2016). All articles in English that indicated preferences of survivors, caregivers and/or healthcare workers in ensuring empathetic and trauma-informed care were included. Sixty-

two articles were included and analyzed thematically. Key findings included the importance of providing care to survivors in a manner that respects the child or adolescent's autonomy and wishes, ensures privacy and confidentiality, and makes services and facilities appropriate and welcoming. Findings indicate how evidence-based recommendations can be delivered in a child or adolescent-centred and trauma-informed manner.

Feely, M., & Bosk, E. A. (2021). [That which is essential has been made invisible: The need to bring a structural risk perspective to reduce racial disproportionality in child welfare](#). *Race and Social Problems*, 13(1), 49–62. DOI:10.1007/s12552-021-09313-8

The racial & ethnic disproportionality and disparity in the child protective system (CPS) has been a concern for decades. Structural factors strongly influence engagement with the child welfare system and families experiencing poverty or financial hardship are at a heightened risk. The economic factors influencing child welfare involvement are further complicated by structural racism which has resulted in a greater prevalence of poverty and financial hardship for families who are Black, Native American or Alaska Native (Indigenous), and/or Latino/Hispanic (Latino) and their communities. The multiple decision points within CPS are an opportunity to reify or correct for bias in child welfare outcomes. One major effort to eliminate racial disparities and disproportionalities has been to enact standardized decision-making procedures that aim to control for implicit or explicit bias in CPS. The Structured Decision-Making Model's (SDM) actuarial-based risk assessment (RA) is the gold-standard of these efforts. In this conceptual article, we ask (1) How are structural factors accounted for in assessment of risk within CPS? and (2) What are the consequences when structural factors are left out of risk assessments procedures? We posit that the exclusion of race, ethnicity, and economic factors from the RA has inflated the importance of variables that become proxies for these factors, resulting in inaccurate assessments of risk. The construction of this tool reflects how structural racism has been overlooked as an important cause of disproportionality in CPS, with interventions then focused on individual workers and cases, rather than the system at large. We suggest a new framework for thinking about risk, the structural risk perspective,

and call for a revisioning of assessment of risk within child welfare that acknowledges the social determinants of CPS involvement.

Jol, G., & Stommel, W. (2021). [The interactional costs of “neutrality” in police interviews with child witnesses](#). *Research on Language and Social Interaction*, 54(3), 299–318.
DOI:10.1080/08351813.2021.1939532

This paper discusses the interactional dilemma between displaying affiliation & being neutral. This dilemma is highly salient in police interviews with child witnesses where interviewing guidelines encourage police officers to take a neutral stance to avoid steering children's stories. In this article, we use conversation analysis to analyze childrens' volunteered accounts of their own role during the alleged offense, e.g., how they resisted. Such accounts make relevant affiliative uptakes such as approval, disagreement, or reassurance that may be seen as nonneutral. Hence, these accounts raise interactional dilemmas for police officers: Should they do what is interactionally relevant or follow the guidelines? Our analysis shows how police officers display & deal with this dilemma and that children may add to it by pursuing something more than neutralistic uptakes. The upshot of this analysis is that attempting to be neutral in interaction may cause undesirable interactional difficulties.

O'Donohue, W., & Cirlugea, O. (2021). [Controlling for confirmation bias in child sexual abuse interviews](#). *Journal of the American Academy of Psychiatry and the Law*, 49(3), 371–380. DOI:10.29158/JAAPL.200109–20

Confirmation bias is one of the most important sources of error in clinical assessment & clinical judgment. There has been little scholarship on the role of confirmation bias in forensic interviews with children who may have been abused sexually. This article reviews relevant research and explores the possible role of confirmation bias in forensic interviews. Confirmation bias may come into play because these interviews usually are conducted under the auspices of one side of the adversarial judicial system, the prosecution. In addition, the

existing forensic interview protocols have paid little explicit attention to confirmation bias, instead focusing on decreasing the likelihood of suggestibility within the interview (although rarely are there efforts to detect suggestibility before the forensic interview). Finally, this article offers eight practical suggestions regarding how to further mitigate confirmation bias in these important forensic interviews, including increased training in how confirmation bias can affect forensic interviews, increased psychometric investigation of current interview protocols (particularly their sensitivity and specificity), and expanding forensic interview protocols and training to address confirmation bias explicitly.

Palusci, V. J., & Botash, A. S. (2021). Race and bias in child maltreatment diagnosis and reporting. *Pediatrics*, 148(1), e2020049625. DOI:10.1542/peds.2020-049625

Pediatricians have implicit & explicit racial biases that impact the health and well-being of children & their families. Similarly, effects of racism on diagnosis and reporting of suspected child abuse & neglect to child protective services (CPS) can have serious consequences. Although pediatricians and others are mandated to report suspected child abuse or neglect in all US states & territories, the threshold for reporting requires only “reasonable suspicion” of abuse or neglect. Pediatricians may also report families that they perceive need additional resources. Research on racial bias and physician reporting is limited. Disproportionality in reporting is widespread on the basis of race, culture, & ethnicity. Asian American and Hispanic children are underrepresented, but overrepresentation of Black children throughout the child protection system has been most widely described.

Melinder, A., Brennen, T., Husby, M. F., & Vassend, O. (2020). [Personality, confirmation bias, and forensic interviewing performance](#). *Applied Cognitive Psychology*, 34(5), 961–971. DOI:10.1002/acp.3674

Confirmation bias is a universal characteristic of human cognition, with consequences for information processing and reasoning in everyday situations as well as in professional work

such as forensic interviewing. Cognitive measures such as general intelligence are also related to personality traits, but there is a lack of research on personality and confirmation bias specifically. This study focuses, firstly, on the relationship between Big Five personality traits and confirmation bias as measured by the Wason selection task, and secondly, how these dispositions are related to observed performance in real forensic interviews of child victims. In a sample of police interviewers, Openness (i.e., the facets Ideas and Fantasy) and Neuroticism (i.e., the facets Anxiety and Vulnerability) were independently associated with confirmation bias ($N = 72$). Scores on the selection task, the Openness facet values, and the Extraversion facets Assertiveness and Activity were consistently related to interview performance ($N = 46$). Implications of these findings are discussed for the empirical and conceptual relations of cognitive ability to personality and for the selection and training of police interviewers and their professional development.

Najdowski, C. J., & Bernstein, K. M. (2018). Race, social class, and child abuse: Content and strength of medical professionals' stereotypes. *Child Abuse & Neglect*, 86, 217-222.
DOI:10.1016/j.chiabu.2018.10.006

Black and poor children are overrepresented at every stage of the child welfare system, from suspicion of abuse to substantiation. Focusing on stereotypes as a source of bias that leads to these disparities, the current study examines the content and strength of stereotypes relating race and social class to child abuse as viewed by medical professionals. Doctors, nurses, and other medical professionals (Study 1: $N = 53$; Study 2: $N = 40$) were recruited in local hospitals and online through snowball sampling. Study 1 identified stereotype content by asking participants to list words associated with the stereotype that either (a) Black or (b) poor children are more likely to be abused by their parents, and responses were organized into construct groups. Study 2 determined stereotype strength by asking participants to rate how strongly the constructs generated in Study 1 related to either the race-abuse or social class-abuse stereotype. The content of stereotypes linking child abuse to Black or poor children are confounded, with approximately half the constructs shared by both stereotypes. Of the 10

shared constructs, only “Stressed” and “Neglect” differed in strength, with both significantly more strongly related to the social class-abuse than race-abuse stereotype, all $t(36-37) \leq -2.23, p \leq .03$, Cohen’s $d \geq .71$. This research documents the existence, content, and strength of stereotypes that link race and social class to child abuse. These stereotypes have the potential to lead to medical misdiagnosis of abuse for Black and poor children.

Priest, N., Slopen, N., Woolford, S., Philip, J. T., Singer, D., Kauffman, A. D., Mosely, K., Davis, M., Ransome, Y., & Williams, D. (2018). [Stereotyping across intersections of race and age: Racial stereotyping among White adults working with children](https://doi.org/10.1371/journal.pone.0201696). *PLoS One*, 13(9), e0201696. DOI:10.1371/journal.pone.0201696

This study examined the prevalence of racial/ethnic stereotypes among White adults who work or volunteer with children, and whether stereotyping of racial/ethnic groups varied towards different age groups. Participants were 1022 White adults who volunteer and/or work with children in the United States who completed a cross-sectional, online survey. Results indicate high proportions of adults who work or volunteer with children endorsed negative stereotypes towards Blacks and other ethnic minorities. Respondents were most likely to endorse negative stereotypes towards Blacks, and least likely towards Asians (relative to Whites). Moreover, endorsement of negative stereotypes by race was moderated by target age. Stereotypes were often lower towards young children but higher towards teens.

Widom, C. S., Czaja, S. J., & DuMont, K. A. (2015). [Intergenerational transmission of child abuse and neglect: Real or detection bias?](https://doi.org/10.1126/science.1259917) *Science*, 347(6229), 1480-1485. DOI:10.1126/science.1259917

The literature has been contradictory regarding whether parents who were abused as children have a greater tendency to abuse their own children. A prospective 30-year follow-up study interviewed individuals with documented histories of childhood abuse and neglect and matched comparisons and a subset of their children. The study assessed maltreatment based on child protective service (CPS) agency records and reports by parents, nonparents, and

offspring. The extent of the intergenerational transmission of abuse and neglect depended in large part on the source of the information used. Individuals with histories of childhood abuse and neglect have higher rates of being reported to CPS for child maltreatment but do not self-report more physical and sexual abuse than matched comparisons. Offspring of parents with histories of childhood abuse and neglect are more likely to report sexual abuse and neglect and that CPS was concerned about them at some point in their lives. The strongest evidence for the intergenerational transmission of maltreatment indicates that offspring are at risk for childhood neglect and sexual abuse, but detection or surveillance bias may account for the greater likelihood of CPS report.

Rush, E. B., Lyon, T. D., Ahern, E. C., & Quas, J. A. (2014). [Disclosure suspicion bias and abuse disclosure: Comparisons between sexual and physical abuse](#). *Child Maltreatment*, 19(2), 113-118. DOI:10.1177/1077559514538114

Prior research has found that children disclosing physical abuse appear more reticent and less consistent than children disclosing sexual abuse. Although this has been attributed to differences in reluctance, it may also be due to differences in the process by which abuse is suspected and investigated. Disclosure may play a larger role in arousing suspicions of sexual abuse, while other evidence may play a larger role in arousing suspicions of physical abuse. As a result, children who disclose physical abuse in formal investigations may be doing so for the first time, and they may be more reluctant to provide details of the abuse. We examined abuse disclosure and evidence in comparable samples of court-substantiated physical ($n = 33$) and sexual ($n = 28$) abuse. Consistent with predictions, the likelihood that the child had disclosed abuse before an investigation began was lower in physical (27%) than that in sexual (67%) abuse cases, and there was more nondisclosure evidence of abuse in physical abuse cases. These findings have implications for understanding the dynamics and meaning of disclosure in cases involving different types of abuse.

Powell, M. B., Hughes-Scholes, C. H., & Sharman, S. J. (2012). Skill in interviewing reduces confirmation bias. *Journal of Investigative Psychology and Offender Profiling*, 9(2), 126-134. DOI:10.1002/jip.1357

Interviewers given prior information are biassed to seek it from interviewees. We examined whether the detrimental impact of this confirmation bias in terms of leading question use was moderated by interviewers' demonstrated ability to adhere to open questions. We classified interviewers' adherence as 'good' or 'poor' in an independent interview before they interviewed children about a staged event. Half the interviewers were given biasing true and false information about the event; half were given no information. As predicted, only poor interviewers showed the effect of bias. Poor interviewers asked fewer open questions in the biassed condition than the non-biassed condition; good interviewers asked the same (high) proportion of open questions in both conditions. Poor interviewers asked more leading questions in the biassed condition than the non-biassed condition; good interviewers asked the same (low) proportion of leading questions in both conditions. These results demonstrate that interviewers' skill in adhering to open questions reduces the detrimental impact of confirmation bias on question type.

Everson, M. D., & Sandoval, J. M. (2011). [Forensic child sexual abuse evaluations: Assessing subjectivity and bias in professional judgements](#). *Child Abuse & Neglect*, 35(4), 287-298. DOI:10.1016/j.chiabu.2011.01.001

Evaluators examining the same evidence often arrive at substantially different conclusions in forensic assessments of child sexual abuse (CSA). This study attempts to identify and quantify subjective factors that contribute to such disagreements so that interventions can be devised to improve the reliability of case decisions. Participants included 1106 professionals in the field of child maltreatment representing a range of professional positions or job titles and years of experience. Each completed the Child Forensic Attitude Scale (CFAS), a 28-item survey assessing 3 forensic attitudes believed to influence professional judgments about CSA allegations: emphasis on- sensitivity (i.e., a focus on minimizing false negatives or errors of

undercalling abuse); emphasis-on-specificity (i.e., a focus on minimizing false positives or errors of overcalling abuse); and skepticism toward child and adolescent reports of CSA. A subset of 605 professionals also participated in 1 of 3 diverse decision exercises to assess the influence of the 3 forensic attitudes on ratings of case credibility. Exploratory factor analysis identified 4 factors or attitude subscales that corresponded closely with the original CFAS scales: 2 subscales for emphasis-on-sensitivity and 1 each for emphasis-on-specificity and skepticism. Attitude subscale scores differed significantly by sample source (in-state trainings vs. national conferences), gender, years of experience, and professional position, with Child Protective Service workers unexpectedly more concerned about overcalling abuse and more skeptical of child disclosures than other professionals—a pattern of scores associated with an increased probability of disbelieving CSA allegations. The 3 decision exercises offered validation of the attitude subscales as predictors of professional ratings of case credibility, with adjusted R²s for the three exercises ranging from .06 to .24, suggesting highly variable effect sizes. Evaluator disagreements about CSA allegations can be explained, in part, by individual differences in 3 attitudes related to forensic decision-making: emphasis-on sensitivity, emphasis-on-specificity, and skepticism toward child reports of abuse. These attitudes operate as predispositions or biases toward viewing CSA allegations as likely true or likely false. Several strategies for curbing the influence of subjective factors are highlighted including self-awareness of personal biases and team approaches to assessment.

Jent, J. F., Eaton, C. K., Knickerbocker, L., Lambert, W. F., Merrick, M. T., & Dandes, S. K. (2011). [Multidisciplinary child protection decision making about physical abuse: Determining substantiation thresholds and biases](#). *Children and Youth Services Review*, 33(9), 1673–1682. DOI:10.1016/j.chilyouth.2011.04.029

The current study examined the threshold at which multidisciplinary child protection team (CPT) professionals substantiate physical abuse allegations and the extent that they utilize potentially biased constructs in their decision making when presented with the same case evidence. State legal definitions of child maltreatment are broad. Therefore, the burden of

interpretation is largely on CPT professionals who must determine at what threshold physical acts by parents surpass corporal discipline and constitute child physical abuse. Biased or subjective decisions may be made if certain case-specific characteristics or CPT professionals' personal characteristics are used in making physical abuse determinations. Case vignettes with visual depictions of inflicted injuries were sent to CPT professionals in Florida and their substantiation decisions, personal beliefs about corporal discipline, and coercive discipline were collected. Results of the study demonstrated relatively high agreement among professionals across vignettes about what constitutes physical abuse. Further, CPT professionals strongly considered their perceptions of the severity of inflicted injuries in substantiation decisions. Although case specific characteristics did not bias decisions in a systematic way, some CPT professional characteristics influenced the substantiation of physical abuse. Practice implications and future directions of research are discussed.

Malloy, L. C., & Lamb, M. E. (2010). Biases in judging victims and suspects whose statements are inconsistent. *Law and Human Behavior*, 34, 46-48. DOI:10.1007/s10979-009-9211-y

In this commentary, we point to similarities in characteristics of suspect and victim/witness statements and the underlying motivations of these individuals. Despite the similarities, there are differences in how such statements are evaluated by fact-finders and investigators. Retractions, for example, cast serious doubt on the credibility of victims/witnesses but appear not to diminish the power of confessions. Investigators need to recognize the wide range of motivations behind statements made to the authorities and be mindful of biased dispositions to doubt victims and believe confessors, especially when their statements are inconsistent or retracted. An investigative process that was entirely transparent would help ensure that inconsistencies and retractions, whether in statements from victims, witnesses, or suspects, are viewed in the context of other statements and eliciting circumstances.

Goodman, G. S., & Melinder, A. (2007). Child witness research and forensic interviews of young children: A review. *Legal and Criminological Psychology, 12*(1), 1-19.
DOI:10.1348/135532506X156620

In this article, we provide an introduction to child eyewitness memory issues that are frequently discussed and debated, both within the research and practice communities. We review several of the central areas of research on child eyewitness memory and some of the most promising protocols aimed at standardizing and improving child forensic interviews. We focus primarily on memory in young children, because they pose particular challenges. Research on the use of props and external cues to prompt young children's memory is discussed. We also review research on professionals' knowledge and attitudes about children as witnesses. It is concluded that we must guard against overly negative or overly optimistic views of children's abilities.

Quas, J. A., Malloy, L. C., Melinder, A., Goodman, G. S., D'mello, M., & Schaaf, J. (2007). [Developmental differences in the effects of repeated interviews and interviewer bias on young children's event memory and false reports](#). *Developmental Psychology, 43*(4), 823-837. DOI:10.1037/0012-1649.43.4.823

The present study investigated developmental differences in the effects of repeated interviews and interviewer bias on children's memory and suggestibility. Three- and 5-year-olds were singly or repeatedly interviewed about a play event by a highly biased or control interviewer. Children interviewed once by the biased interviewer after a long delay made the most errors. Children interviewed repeatedly, regardless of interviewer bias, were more accurate and less likely to falsely claim that they played with a man. In free recall, among children questioned once after a long delay by the biased interviewer, 5-year-olds were more likely than were 3-year-olds to claim falsely that they played with a man. However, in response to direct questions, 3-year-olds were more easily manipulated into implying that they played with him. Findings suggest that interviewer bias is particularly problematic when children's memory has weakened. In contrast, repeated interviews that occur a short time after a to-be-remembered event do not necessarily increase children's errors, even when interviews include misleading

questions and interviewer bias. Implications for developmental differences in memory and suggestibility are discussed.

Dickinson, J. J., Poole, D. A., & Bruck, M. (2005). Back to the future: A comment on the use of anatomical dolls in forensic interviews. *Journal of Forensic Psychology Practice*, 5(1), 63–74. DOI:10.1300/J158v05n01_04

Many researchers and interviewers have become disenchanted with the practice of using anatomically detailed (AD) dolls during forensic investigations, yet there is still support for doll-assisted interviews. This comment discusses five major concerns about AD dolls, involving child-related and interviewer-related factors. The research findings suggest that individuals who advocate for AD dolls bear the burden of proving that dolls are the best alternative for eliciting information about personally-experienced events from children.

Aarons, N. M., Powell, M. B., & Browne, J. (2004). Police perceptions of interviews involving children with intellectual disabilities: A qualitative inquiry. *Policing and Society*, 14(3), 269–278. DOI:10.1080/1043946042000241848

This study employed a qualitative method to explore the experiences of 20 police officers when interviewing children with intellectual disabilities. Three main themes were interpreted as representing challenges to the officers when interviewing special-needs children: police organizational culture, participants' perceptions of these children as interviewees, and prior information. Participants in this inquiry mentioned poor organizational priority within the police force for child abuse cases and children with intellectual disabilities, as well as inadequate support for interviewing skills development and maintenance. Participants also attempted to equalize these children by interviewing them in the same way as their mainstream peers. Finally, participants viewed interview preparation as influential in determining an interview's successful outcome, but recognized that preparedness could bias their interviewing techniques. Increased attention towards these issues will provide a basis for developing

strategies to minimize such challenges and thus improve the quality of interviews with children with intellectual disabilities.

Melinder, A., Goodman, G. S., Eilertsen, D. E., & Magnussen, S. (2004). Beliefs about child witnesses: A survey of professionals. *Psychology, Crime & Law*, 10(4), 347-365. DOI:10.1080/10683160310001618717

This research addressed how professionals involved with the legal system evaluate children, primarily between 4 and 8 years old, as witnesses. In particular, we focused on professionals' beliefs and opinions regarding children's memory, suggestibility, and behaviors as they relate to witness credibility. In addition, we surveyed professionals' evaluations of investigative methods related to reliability. Four hundred and seventy-eight professionals working with children in the Norwegian legal system (i.e. judges, police detectives, psychologists, child psychiatrists, prosecutors, and defense attorneys) completed a questionnaire about child witness issues. Results indicated that psychiatrists as well as police officers expressed greater belief in children's capacities than did other groups, whereas defense attorneys and psychologists were more skeptical regarding children's general credibility. Psychiatrists and psychologists both, however, tended to favor, more than did legal professionals, the use of clinical techniques with children in abuse investigations. Implications are discussed in relation to professionals' attitudes toward children as witnesses.

Lentsch, K. A., & Johnson, C. F. (2000). Do physicians have adequate knowledge of child sexual abuse? The results of two surveys of practicing physicians, 1986 and 1996. *Child Maltreatment*, 5(1), 72-78. DOI:10.1177/1077559500005001009

The objective of this study was to determine if physician knowledge of and biases regarding child sexual abuse (CSA) have changed since 1986. A questionnaire, previously used in 1986, was mailed to 370 physicians who see children in Columbus, Ohio. More respondents in 1996 correctly denied an association between specific sociologic factors and the likelihood of CSA.

Seventy-two percent of physicians indicated that they check the genitalia of prepubescent females more than 50% of the time, versus 77% in 1986. Physicians who see more than 25 pediatric patients per week were significantly more likely to check the genitalia ($p < .001$), whereas physicians with more than 10 years experience were less likely to check genitalia ($p < .05$). Physicians surveyed in 1996 were more knowledgeable about socioeconomic and behavioral aspects of CSA but continued to be deficient in identifying prepubescent female genital anatomy and in reporting suspected abuse. Education is necessary to correct these deficits.

Drake, B., & Zuravin, S. (1998). Bias in child maltreatment reporting: Revisiting the myth of classlessness. *American Journal of Orthopsychiatry*, 68(2), 295–304.
DOI:10.1037/h0080338

Reviews the literature on the degree of class bias in child protective services databases and recent empirical findings on the class distribution of child maltreatment. The evidence suggests high levels of child abuse and neglect among the poor and, despite debate on the question, there is no body of empirical data suggesting that these findings are a product of bias predisposing toward overestimates of child maltreatment among the poor. Implications for research, practice, and policy are offered.

Goodman, G. S., Sharma, A., Thomas, S. F., & Considine, M. G. (1995). Mother knows best: Effects of relationship status and interviewer bias on children's memory. *Journal of Experimental Child Psychology*, 60(1), 195–228. DOI:10.1006/jecp.1995.1038

This study examined whether interviewer status or a preconceived bias affect: (a) children's memory and suggestibility or (b) adults' descriptions of children's reports. Forty 4-year-olds participated in play activities with a research assistant. Each child was then interviewed either by the child's own mother or by an unfamiliar female. Interviewers were instructed to find out what happened (free interview), but half of the interviewers were misled (biased) about the

play activities prior to the interview. To examine how accurately adults recount children's reports, the interviewers were asked to write postinterview descriptions of the play session. Children were then questioned by the interviewer again, who asked a predetermined set of questions (structured interview). Analyses revealed that during the free interview, questioning styles of mothers and strangers differed in several ways: mothers were more task-oriented, whereas strangers spent more time building rapport and were more open-ended in their approach. Biased compared to unbiased interviewers asked more questions about the misinformation provided. Children's free recall accuracy suffered (e.g., they minimized what occurred, made more order errors) when they were interviewed by biased versus unbiased strangers but not when interviewed by biased versus unbiased mothers. The interviewers' descriptions of the children's experiences were generally correct, although mothers reported more correct details than strangers about certain categories of information. Exposure to the biasing misinformation led to greater inaccuracy in interviewers' descriptions. During the structured interview, children were less susceptible to suggestions of abuse when questioned by their mothers than by strangers. The findings are discussed in relation to concerns about children's eyewitness memory and adults' interviews of children.