To combat the spread of novel coronavirus, responsible for the pandemic COVID-19, public health authorities in the U.S. and globally have recommended social distancing—ceasing all non-essential human contact—as the only way to slow the spread of the virus and preserve the healthcare system’s capacity to treat an overwhelming number of victims.

Children’s Advocacy Centers (CACs) provide many essential services which have, until now, been conducted in person, and many of these services critical to children's health, safety, and well-being must continue despite the outbreak. Among these services is the foundational forensic interview of children at the center of allegations of child abuse.

Experts suggest that tele-forensic interviewing (tele-FI) is an effective and legally defensible alternative to face-to-face interviewing when appropriate guidelines are followed and external factors that could impact the reliability of the children’s testimony are effectively addressed. Evidence for tele-FI for children include a review of existing research, plus preliminary results from a large in-progress study funded by the National Science Foundation.

Expert tele-FI guidance for CACs

National Children’s Alliance (NCA), Montclair State University, and Central Michigan University partnered with an emergency working group of leading experts in the field of forensic interviewing, including researchers, developers of forensic interviewing protocols, master trainers in forensic interviews, and representatives from the FBI and Homeland Security Investigations. This working group provided the following guidance to CACs on when, whether, and how to provide tele-FI for children as a safe alternative in emergencies.

What’s in this guide

This guide to tele-FI for CACs includes guiding principles, guidelines, scenarios, and practices to avoid, as well as additional considerations. NCA will update this guide with new information and guidance as it becomes available.
Guiding principles of tele-FI for CACs

1. Tele-forensic interviews are only for use as an alternative to in-person forensic interviews in case of emergency during COVID-19 or other disasters in which in-person interviews are unsafe.

2. Emergency situations that call for tele-FI protocol include services to children who cannot be safely seen at the CAC because they or a household member have been exposed to COVID-19 or otherwise fail the intake health screen (i.e. are COVID-19 positive, have a respiratory infection, etc.); situations in which CAC facilities have been closed due to mandatory lockdown, contamination, or staff exposure; or where there is concern that an in-person interview cannot be safely conducted for health reasons of the child or forensic interviewer.

3. Children still need the full CAC response to thrive and heal. The tele-FI is a gateway to those services, but it doesn’t replace the necessity of the full array of CAC services being offered to the child and family. As with all cases, the victim advocate should be involved with the family from the outset of the case through case closure. Procedures should be in place to ensure that core CAC services are provided in person or remotely/virtually.

4. All forensic interviews, including tele-FI, must include an opportunity for the forensic interviewer to consult with the team during the interview to avoid duplicative interviewing. Team consultation should be a part of implementation planning.

Tele-forensic interview guidelines

Below, you will find guidance for tele-forensic interview. Ensure your forensic interviewers, full multidisciplinary team, and board members have reviewed NCA’s guidance and your plan.

As you begin your plan

1. Continue to follow existing forensic interview protocols and guidelines, and ensure you have copies of your existing guidelines on hand as you develop new protocols for your tele-FI.

2. Consult your prosecutor on evidentiary implications before planning your protocol or holding tele-forensic interviews. Chain of custody issues must be addressed in the plan and you will need to rely on your prosecutor’s guidance (and that of law enforcement) in doing so.

3. Discuss which officials and agencies are required or important to check with or gain clearance regarding your plan.
4. Establish a protocol and/or checklist for each type of interview location (e.g., CAC, soft room, home). Your protocol should cover all relevant items, including setup, technology, and disinfecting the area. This should include safety protocols for face-to-face interviews.

5. Determine who can serve as a point person in each setting to help by activating the session, resolving technology or other issues that may come up, and meeting the child’s immediate needs. Make sure to identify point people and alternates for each situation, from best-case to emergency situations.

6. Likewise, determine possible “point people” to ensure the interviewer can speak with team members and that technology problems can be handled so the interviewer can focus on their task. Make sure to identify point people and alternates for each situation, from best-case to emergency situations.

7. Ensure you have redundant technology and audio systems available.

8. Establish a procedure for capturing the environment (panning the camera to capture footage both of the space the child is in and the space the forensic interviewer is in) and putting required info at beginning of recordings.

9. Plan for introducing child to the space/use of video technology (especially important if child is by themselves in the space).

10. Set ground rules concerning technology for kids in different settings and scenarios and what the child should do if there is a problem.

11. Consider safety planning and law enforcement needs in case the accused learns the interview will take place.

12. Consider your team’s full plan to deal with the aftermath of the interview. What will be done if the child makes allegations of abuse? How will the pandemic that makes the tele-FI necessary affect the child’s safety, health, and placement?

**Interview scenarios**

Discuss with your team different tele-forensic interview scenarios and how you might form a different plan to address each one. Example scenarios include:

1. **More likely:** The forensic interviewer and the child are both present at the CAC, located in separate rooms, and interviewed via video conference.

2. **Sometimes:** The forensic interviewer is remote, either at the CAC or their own home, and the child is located at a police station soft room, hospital, CPS office and interviewed via video conference. Keep in mind that whatever the location the issue of the psychological safety of the child must be addressed. In addition, any tele-FI conducted from a forensic interviewer’s home must be conducted from a completely private space that is unable to be eavesdropped upon and is uninterruptable.
3. **Very rare**: The forensic interviewer is remote, either at the CAC or their own home, and child is at home. Consider scenarios with or without a team member present at the child’s home (the latter to address worries about eavesdropping, child safety, etc.).

In each scenario, team members with investigative responsibilities are present either at the CAC (or other location) or available remotely/virtually to consult with the forensic interviewer as needed during the interview.

**Before each interview**

1. Explore your interview location options. Order them beginning with the safest location in terms of minimizing human exposure. Considerations may include (a) whether the setting is a CAC vs. a soft room, (b) which requires less travel for family and which available modes of transportation are safest, (c) time inside the building, (d) movement through the building, (e) exposure to how many people.

2. Discuss with team members the best location for the interview to take place, taking into account the safety and health of the child and family; the safety and health of the forensic interviewer and other MDT members; and the case facts.

3. Determine whether the child is physically well enough for a forensic interview. This decision should be made in consultation with your MDT’s medical provider.

4. Determine your team’s plan in case an extended interview, across multiple sessions, is required.

5. Collect pre-interview information over the phone or online, regardless of where interview is set to take place. Pre-interview information may now include questions about possible exposure and risk of child/family to exposure (e.g., are family members that live with the child in an at-risk category).

6. The forensic interviewer may need someone else to assist the child getting settled in the interview space and set up with the technology. Identify this person ahead of time for each interview.

7. Ensure that the camera is set up to record a wide angle of the entire room as evidence that no one else is in the room.

8. Anticipate possible challenges for a child sitting alone to attend to the interview. Some children will be impossible to interview in this format due to their inability to attend. Those should then be scheduled for an in-person interview when health and safety allow.

9. Conduct an assessment (in person, virtually or over the phone) of all interview locations beforehand to plan for space needs and any challenges.

10. Set parent and family expectations for all spaces but especially those very rare instances of in-home interviews. Consider how to address families’ concerns about
bringing children to you or alternatively having a person come into their home. It should be made clear to the caregivers that they will not be in the room when the child is interviewed and should not attempt to listen in, as it will compromise the investigation.

11. In the rare instance in which the tele-FI must occur at home, non-offending caregivers and other families may be required to sign a waiver notifying them that compromising the investigation by listening in or recording the interview may force them to testify as a witness in court, and that they will only receive a verbal summary of what occurred during the interview.

12. Discuss any distractions present which may interfere with the interview and discuss how to minimize them.

13. Build in additional time in case there are problems with technology.

14. Have a backup system in place in case the preferred technology fails.

15. Test primary and backup technology systems before the child enters the space.

16. Address/document concerns about influence on the child (e.g., pan room).

17. Consider how to manage child’s needs and behaviors during the interview. How should the child signal that they need to stop, take a break, or get help with the equipment.

18. Discuss with your team the room setup, equipment placement, developmental needs of the child, and other considerations.

At the time of interview

1. As with any other interview, there should be one forensic interviewer per child interview.

2. Keep in mind that even with tele-FI the forensic interviewer will need to be able to communicate with LE and CPS for pre-interview planning, to pause in the interview to check in with investigators to ensure all questions are being covered, and to do post-interview planning. Ensure that these communications are not accidentally recorded.

3. Have and test backup audio (in both locations if possible but especially with child) because children may not speak loudly to a screen and screen recordings can fail.

4. Capture the environment (pan the room or have the child pan the room) and enter required info at beginning of recordings.

5. At the beginning of the recording, have the forensic interviewer state that the interview is taking place during the COVID-19 pandemic. These cases may not come to fruition for months (or years), and it is important to remind people watching them later the circumstances under which they were made. Courts are likely to give more
leeway for deviations from protocol during this time provided adequate documentation of the exceptional circumstances caused by the crisis.

6. Introduce the child to the space/use of video technology.

7. Cover with the child any ground rules concerning technology and what the child should do if there is a problem.

8. Rapport-building may be challenging in the tele-FI setting, and especially during a global crisis which has upset the child’s routine and may itself be traumatizing.
   a. Ensure that the interviewer asks questions about who the child is quarantined with and how they are handling school.
   b. Expect rapport-building to take longer in a tele-FI.
   c. Spend time addressing the child’s feelings, taking special care to differentiate between feelings of isolation and feelings caused by abusive events.

9. The interview must stop if anyone enters the room or if the interviewer determines someone may be listening in.

10. Ensure that a victim advocate is prepared to meet (whether in-person or virtually) with the caregiver while the interview is being conducted and following the interview for safety and case planning. Ensure that the forensic interviewer briefs the victim advocate about key items from the tele-FI that will need follow-up.

11. Because all forensic interviews, including tele-FI, are gateways to needed services for abused children, ensure that the full complement of CAC services are available to the child. It is not enough to conduct an emergency tele-FI. Children need and deserve the full MDT/CAC response including medical and mental healthcare.

## Practices to avoid in tele-forensic interview

While emergency situations may require you and your team to use your best judgment, here are some general guidelines on practices to be avoided in the tele-forensic interview setting.

1. Avoid interviews held in the child’s home if at all possible. Only exceptional circumstances would warrant an in-home tele-forensic interview.

2. In home interviews are not permissible for intra-familial cases, as it is nearly impossible to address psychological and physical safety needs of the child given that the location itself is unsafe and triggering.

3. Caregivers should not be present during the interview.

4. Irrespective of interview location, caregivers, household members, and others should not be able to overhear what the child says during the interview. Avoid rooms and
other settings where eavesdroppers may be able to overhear the interview. Ensure the child is comfortable with the setting if they express concerns about being overheard.

5. Avoid distractions to the child, especially for the rare case in which an in-home interview is required. In all interview locations, all noisy or distracting activity must respectfully stop for the duration of the interview. Prepare to intervene if necessary.

6. Do not perform tele-forensic interviews in interrogation rooms, police cars, or any locations where the suspect may have access to the child.

7. Tele-Fi is not appropriate in cases where the non-offending parent is not protective and has access or potential to interfere with the interview.

8. Tele-Fi is likely not appropriate for cases involving the commercial sexual exploitation of children, since the presentation of evidence is a normal part of those federal agency interview protocols.

9. Do not use the tele-Fi setting for children having psychiatric crises or severe mental health concerns.

**Additional Considerations**

- Consult NCA’s COVID-19 Resources for CACs as well as CDC information for guidance specific to preventing exposure to COVID-19. Specific CDC resources at coronavirus.gov for schools, businesses, and healthcare professionals will be most helpful in practical steps you can take to minimize exposure and should inform your planning. Additional NCA medical guidance is forthcoming.

- Some rural CACs/communities may be especially short staffed. Connect with your Chapter and larger CACs in the state to request help with interviews, planning, and more. NCA Engage Open Forum is a good place to start.

- Use of interviewing aids (e.g., body diagrams and anatomical dolls) has not been tested in a tele-forensic interviewing settings. Questions will likely come up about their use, so be prepared to answer them according to your own interview protocols.
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