

## Reflections on Emerging Issues



### Forensic Use of Anatomical Dolls

The following is a partial summary of Hlvaka et. al 2010. For more information please read the entire article:

Hlavka, H., Olinger, S. & Lashley J. (2010). The use of anatomical dolls as a demonstration aid in child sexual abuse interviews: A study of forensic interviewers' perceptions. *Journal of Child Sexual Abuse*, 19(5), p. 519-553.

Effective use of anatomical dolls as a demonstration aid requires training regarding when it is appropriate to introduce dolls and how to provide children with specific instructions about their use. While there are current guidelines regarding doll use, there is no single correct way to use the dolls in an interview of a suspected child victim of abuse. However, state statutes, local practice, and the specifics of a case may dictate modifications to the use of anatomical dolls (APSAC, 1995, 2002).

Forensic interviewers should not consider using dolls until a child has made a verbal disclosure of abuse during the interview (Boat & Everson, 1996; Thierry et al., 2005). To effectively use an anatomical doll, the child must be able to identify that the doll represents their own body; this cognitive skill is referred to as representational capacity (Myers, Saywitz, & Goodman, 1996). Children should be provided with doll instructions that avoid such words as pretend, imagine, or make believe (APSAC, 1995; Boat & Everson, 1988a; Freeman & Estrada-Mullaney, 1998) to clarify the child's representational capacity. Once the child has made a verbal statement or has exhausted verbal recall (Faller, 2007; Faller, 2005) the dolls can then be used as demonstration aids for the purpose of clarification, consistency, distancing, and communication (Anderson et al., 2010).

Dolls are used for clarification of previous information that was disclosed verbally (APSAC, 1990, 2002; Holmes, 2000; CornerHouse 2007; Faller, 2005; Myers et al., 1996; Poole & Lamb, 1998). Dolls may be used to help clarify the child's vocabulary and terminology for body parts, positions, and in demonstration of sexual or physical acts. To establish consistency of a child's report anatomical dolls can be utilized. To help bolster a young child's credibility, they can first tell what happened to them and then use the anatomical dolls to show what happened.

Children who try to communicate their experience by demonstrating on their own bodies can use anatomical dolls as an alternative to demonstrate what happened; this is referred to as distancing. Anatomical dolls are also helpful when a child cannot or will not fully verbalize their experience (APSAC, 1995; CornerHouse, 2003; DeLoache, 1995; Faller, 2005; Koocher et al., 1995; Meyers et al., 1996). This may be due to language or emotional barriers; regardless, anatomical dolls can be used to help them communicate. The anatomical dolls can be used for a child to communicate in a way that might be more comfortable for them (CornerHouse, 1990, 2003; Faller, 2005; Holmes, 2000; Meyers et al., 1996).

The four distinct functions of clarification, consistency, distancing, and communication are commonly practiced and are considered valuable to sexual abuse forensic investigations but remain largely unexamined. When using anatomical dolls, the interviewer should consider the functions of the use of the doll and modifications required by the specifics of the case. Anatomical dolls are valuable for clarifying and internally corroborating information to augment children's verbal disclosures (Faller, 2007).

Throughout the forensic interview, children must be given as much opportunity as possible to provide narrative details about their experience. When anatomical dolls are used, forensic interviewers must continuously invite children to provide verbal narrative details about what they are demonstrating. In addition, interviewers should monitor the child's use of anatomical dolls to ensure that the dolls are put away when the child is done using them for demonstration purposes.

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