Ioint NZCYPS and Police Operating Guidelines (March 1997)

- b Provide sufficient structure and direction to help the child or young person co-operate and feel unthreatened.
- c Conduct the interview in a confident, straightforward and respectful way to minimise the child or young person's anxiety.
- d Communicate in vocabulary and sentence structure that is appropriate to the child or young person's age, developmental level and cultural background.
- h Help them put a structure to their account, such as a beginning, middle and end to the incident.
- The Guidelines similarly address the level of information that ought to be collated from the parent, at page 24:

The interviewer must talk to the parent or supportive adult ("parent") to:

- obtain or clarify any background information eg the child or young person's general history;
- inform them about the possibility that the interview with the child may not result in a disclosure because the child or young person may not have been abused or they may not be ready to talk about what has happened.

.

The interviewer should take all steps to ensure that relevant information is known before the interview with the child.

...

If unknown or unclear, clarify the following information with the "parent" before the child interview. If the "parent" does not have all the information, they must not question the child or young person. The child or young person should not repeat disclosure information before their interview.

a Interview with adult.

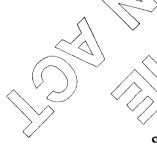
- information they have about the interview;
- what the child or young person has been told about the interview.

Allegation:

- what they know about the notification;
- the context of the allegation, eg how often the child or young person sees the alleged offender;
- The exact questions asked of the child or young person;
- the child or young person's exact words in response;
- what the adults' response was to the child first telling of the alleged abuse;
- anything the child or young person has said that is indicative of abuse (in their exact words).

c Context of the allegation:

- any changes in their behaviour over time;
- any observed sexual behaviour;
- their behaviour and performance at pre-school or school;
- their daily routine;
- significant people they are in contact with;
- whether they are avoiding any person or situation;
- whether they have been exposed to pornographic material or sexual behaviour between adults;



- d Child or young person's vocabulary and conceptual level:
 - their words for different parts of the body;
 - their understanding of the concepts, truth, lies and promises;
 - their level of sexual knowledge.
- e Factors impacting on the interview:
 - how the child or young person feels at the moment;
 - issues that may impact on the interview, eg custody dispute.
- f Parents/family:
 - the child or young person's demeanour and personality;
 - parent's attitudes and behaviours to nudity;
 - history of the family/whanau, especially marital separation or conflict, violence or physical abuse.

Proposition 19(xii): An interview with a child should be no longer than one hour.

Supporting Research and Opinion:

Joint NZCYS and Police Operating Guidelines (March 1997) page 201

• Keep the interview to a reasonable length (45-60 minutes) unless there are good reasons to continue longer (eg the child or young person is in the middle of a disclosure).

Proposition 19(xiii): Children should not be interviewed or questioned (for example by parents, family members, social workers, therapists, police) prior to the formal specialist interview.

Supporting Research and Opinion:

The Memorandum of Good Practice

• Early discussion with the child prior to the Police being involved should be done by "listening to the child rather than directly questioning him or her" (para 1.8).

Proposition 19(xiv): Delay between the time of the event and the time of interview compromises the reliability of the child's account.

Supporting Research and Opinion:

The Memorandum of Good Practice

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Delay is bad for the child and bad for justice (para 1.9).

Law Commission. Total Recall? The Reliability of Witness Testimony. A Consultation Paper (July 1999);

- Delay has a greater effect on the spontaneous recall of young children as compared to adults. Specific prompts and cues, such as photos of the event, will enhance recall. However, the use of prompts may also elicit much unreliable information (see paras 113-119). Shrimpton et al's 1998 study confirmed earlier research about the effect of delay. They found that children's memories for an event (one stressful and one not) were better in an earlier interview (after 2-7 days) compared to children first tested after a lengthier delay (6-8 weeks) (1998:141). Also, children who had both an early and later interview gave more correct responses in free recall than children first interviewed at 6-8 weeks (refer page 31, paragraph 122).
- A child, and also many adults, will be less open to suggestion if:
 - there is minimal delay between the event and the reporting of it (this is also true for adults; Loftus and Davies, 1984; 63);

Research:

Delay should also be significant; the greater the opportunity to forget details about the original event, the more likely it is that memories thereof will be contaminated by misinformation (e.g., Brainerd, Reyna, Howe, & Kingma, 1990; Lottus, Miller, & Burns, 1978; Pezdek & Roe, 1994; Poole & Lindsay, 1995). Several researchers have reported that suggestibility increases as a function of the time between the to-be-remembered (TBR) event and the questioning. Steward and Steward (1996), for example, found that 3- to 6-year-olds were roughly twice as susceptible to suggestive questions about body touch a month after rather than immediately after the TBR event. Acquiescence was even more common after a 6 month delay. No researchers have studied acquiescence and the incorporation of misleading information after delays as long as those in the Ellis case, but there is every reason to expect both to be even higher in such circumstances 161.

TRAINING THE CHILD

Proposition 19(xv):

Children should be instructed and encouraged to use "Don't know" answers. If a child then uses the answer, this should be accepted by the interviewer.

Supporting Research and Opinion:

The Memorandum of Good Practice

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¹⁶¹First Affidavit of Dr Michael Lamb, tendered to the Court of Appeal at the second appeal hearing, paragraph 36.

 Children should be encouraged and instructed in the use of "Don't know" answers.

Research:

- Children have a tendency to answer any questions an adult asks and are often reluctant to say "I don't know" (Hughes & Grieve, 1980). Consequently, it is often recommended that the interview begin with a brief explanation of the ground rules, including the child's right to ask for clarification and to say "I don't know" (e.g. Warren & McGough, 1996). (page 126)¹⁶²
- Regardless of the child's age or the use of warnings, it is always best to use simple, open-ended questions during the substantive portion of the interview and to avoid specific questions as much as possible. Interviewers can ask children to demonstrate their understanding of the ground rules by role-playing corrections (at page 129). 163
- Recent research (1996) notes that simply telling children they can say "Don't Know" may not be enough to encourage appropriate use and recommends training for the child in how to use the response. Indeed children's reports are more accurate when they are instructed and trained to use this as an answer¹⁶⁴.
- Children confronted with forced choice questions will typically choose one of the options proffered and will rarely say "don't know" or "don't remember" unless specifically trained to do so 165
- Children as young as 4 are sensitive to parent's intent in situations in which they are asked to answer questions 166
- Children's Use of "Don't Know": The Memorandum of Good Practice advises that children be informed prior to questioning that they are allowed to say "I Don't Know" or "I have forgotten". More recent research (Walker et al., 1996; Mulder and Vrij, 1996) notes that simply telling children they can say "Don't Know" may not be enough to encourage appropriate use and recommends training for the child in how to use the response (pA11).167
 - Children's reports are more accurate when they are instructed and trained to use this as an answer (Mulder and Vrij, 1996) (pA11). 168

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¹⁶²Poole, D.A., and Lamb, M.E. Investigative interviews of children: A guide for helping professionals, American Psychological Association, Washington DC.

¹⁶³Poole, D.A., and Lamb, M.E. Investigative interviews of children: A guide for helping professionals, American Psychological Association, Washington DC.

¹⁶⁴r (First Affidavit of Dr Parsonson, p21, pargaph 56

¹⁶⁵(First Affidavit of Dr Parsonson, p22).

¹⁶⁶(First Affidavit of Dr Parsonson, p22)

¹⁶⁷First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

¹⁶⁸First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

Children (8-9 years old) who use the "Don't Know" option make fewer errors in an interview and are more accurate in their responses (Memon, Holley, Wark, Bull and Koehnken, 1996) (pA11).¹⁶⁹

Summary:

• The research is clear that children who are not trained in the use of the "Don't Know" option and who are unaware of the process of an interview are very likely to produce more inaccurate information when confronted with closed, forced choice, or leading questions from an adult (pA11).¹⁷⁰

Proposition 19(xvi): Children should be instructed to ask the interviewer to clarify a question, and that it is permissible to correct the interviewer.

Supporting Research and Opinion:

- It may also be important to communicate the need to correct interviewers who incorrectly reformulate children's statements or who verbalise inaccurate hypotheses. Sternberg et al. (1997) thus included the following in their expanded experimental protocols: "If I ask you a question that you do not understand, or that you do not know the answer to, simply tell me, "I don't know". If I say things that are not correct, you may correct me, OK?" (p.1144) (at page 129).
- Regardless of the child's age or the use of warnings, it is always best to use simple, open-ended questions during the substantive portion of the interview and to avoid specific questions as much as possible. Interviewers can ask children to demonstrate their understanding of the ground rules by role-playing corrections (at page 129).

Proposition 19(xvii): A child's account will be less susceptible to suggestion if they are trained in essential interviewing procedures.

Law Commission. Total Recall? The Reliability of Witness Testimony. A Consultation Paper (July 1999):

Providing children with training designed to increase their ability to resist suggestion may also be effective. Such training is described in Saywitz and Moan-Hardie, 1994, and Gee, Gregory and Pipe (in press). Interviewing techniques may also reduce the risk of suggestion, for example, by

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¹⁶⁹First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

appeal in this case.

170 First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

appeal in this case. ¹⁷¹Poole, D.A., and Lamb, M.E. Investigative interviews of children: A guide for helping professionals, American Psychological Association, Washington DC.

¹⁷²Poole, D.A., and Lamb, M.E. Investigative interviews of children: A guide for helping professionals, American Psychological Association, Washington DC.

emphasising to the child that he or she is not expected to know all the answers and that the child may say "I don't know".

PROPS AND OTHER DISTRACTIONS

<u>Proposition 19(xviii)</u>: Props should not be used in interviews, but if they are to be, then they must be used with caution.

Supporting Research and Opinion:

The Memorandum of Good Practice

• The need for the use of props should be carefully considered before interview. In the main dolls with genitalia should only be used as an adjunct to the interview to establish the meaning of terms used by the child "once the child has finished his or her free narrative account and the general substance of his or her evidence is reasonably clear."

Law Commission. Total Recall? The Reliability of Witness Testimony. A Consultation Paper (July 1999);

- Children may require more assistance than adults to recall all they know, for example, by the use of cued questions. Ripe, in her literature review, also concluded that children will recall more information if provided with adequate support (1996:42). However, the type of support provided whether props or a certain kind of questioning is critical (see paras 113-119) (refer page 29 paragraph 111)
- Young children's accounts can be reliably enhanced, at least when the children are interviewed soon after the events, but the methods used to draw out the further information must be carefully monitored to ensure that they do not compromise accuracy. Psychological studies on children's suggestibility are highly relevant to the conduct of interviews (refer page 29 paragraph 113).
 - Whilst some props and techniques can reliably be used to help children remember and report events, some kinds of props (especially toys) may prompt inaccuracy. It has been suggested that this is due to the inability of young children to treat a toy as a representation (Pipe, 1996:39, citing a number of studies by DeLoache and colleagues). This may be more relevant for very young children. Five year olds seem able to make the connections between models and toys to the items they represent, and to use that relationship when talking about past events (Priestley and Pipe, 1997: 75). Encouraging children to interact with props, however, may increase report errors. Children may be more likely to attend to the props as play things and be distracted from the central task of using the props to help them talk about their past experiences (refer page 29 paragraph 115).

Research:

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- Use of "scene" props with 5-year-olds increased the quantity and the inaccuracy of reports under free recall, with the greatest inaccuracies for memory of actions. 173 Similarly, research has shown that where toys are used in an interview as representative of items from an earlier event, 5 year old children produce significantly more errors than children without the toys. Both 3 year olds and 5 year olds made more errors when re-enacting the event with toys. Toys may be problematic because they have other functions in children's lives (such as fantasy and play) which have a confounding influence on the accuracy of reporting. Toy props are not conducive to recall or accuracy over long time delays since the extent and any new information given after long delay may be suspect. 174
- To date there is one published study (Rawls, 1996) of the effect of using the body-parts diagram, such as those used in the R v Ellis interviews, on the accuracy of children's reports. When children were asked closed or open and closed questions (mixture) in an interview and body part diagrams were used 24 % of children alleged some form of inappropriate touching (which did not in fact occur). Of those that reported the toughing 10% reported genital touching, 7% reported either the adult touching their bottom or themselves touching the adult's bottom, and a further 7% reporting mutual beneath clothing touching non-sexual touching between adult and child. Rawls compared the children's reports of touching recorded on the body diagrams with the videotaped recordings of the interaction. Open questioning as to where the adult touched the child and the child touched the adult produced the most accurate reports (average of \$1\% and 60\%) compared with mixed (open and closed) questions (31% and 38% respectively) and for those asked only closed questions (28% and 22% respectively).¹⁷⁵

The effect of interview props, including toys, dolls, body parts diagrams and anatomical dolls (Interview method contamination)

- Props and Accuracy. There is a growing body of research that has considered the effects of interview props, such as actual items, toy items, body parts diagrams and anatomical dolls on accuracy of children's subsequent reports (pA18). 176
- Real Items, Toys and Models
 - Use of "scene" props with 5-year-olds increased the quantity and the inaccuracy of reports under free recall, with the greatest inaccuracies for memory of actions (pA18).
 - Young children (2.5 to 4 years old) have difficulty representing themselves through dolls (DeLoache and Marzolf, 1995) (pA18).
 - New Zealand research by Salmon, Bidrose and Pipe (1995) demonstrated that where toys are used in an interview to represent real items from an earlier event 5 year old children produced significantly more errors than children without the toys (or with the real items) when giving verbal accounts of the event. Both 3

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¹⁷³(First Affidavit of Dr Parsonson, p25)).

¹⁷⁴⁽First Affidavit of Dr Parsonson, p26)

^{175 (}First Affidavit of Dr Parsonson, p26)

¹⁷⁶First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

year olds and 5 year olds made more errors when re-enacting the event with toys. Toys may be problematic because they have other functions in children's lives (such as fantasy and play) which have a confounding influence on the accuracy of reporting. Toy props are not conducive to recall or accuracy over long time delays since the extent and any new information given after long delay may be suspect (pA19).

- <u>Summary</u>: While toy props may enhance accurate reporting of previously experienced events, in some instances their use may result in less accurate or even false reporting of events, especially after delays since the event.¹⁷⁷
- Body Part Diagrams. To date there is one published study (Rawls, 1996) of the effect of using the body-parts diagram, such as those used in the R v Ellis interviews, on the accuracy of children's reports. When children were asked closed or a mixture of open and closed questions in an interview and body part diagrams were used 24 % of children alleged some form of inappropriate touching (which did not in fact occur). Of those that reported the touching 10% reported genital touching, 7% reported either the adult touching their bottom or themselves touching the adult's bottom, and a further 7% reporting mutual beneath clothing touching non-sexual touching between adult and child. Rawls compared the children's reports of touching recorded on the body diagrams with the videotaped recordings of the interaction. Open questioning as to where the adult touched the child and the child touched the adult produced the most accurate reports (average of 71% and 60%) compared with mixed (open and closed) questions (31% and 38% respectively) and for those asked only closed questions (28% and 22% respectively) (pA20).178
- <u>Summary of Body Parts Diagrams</u>: The possibility exists that body diagrams may prompt inaccurate reporting, perhaps because they are associated with fantasy and imagination. If, in interviewing young children, body diagrams are used in conjunction with closed questions then the evidence should be viewed with considerable caution (pA21). ¹⁷⁹

Proposition 19(xix):

Anatomically detailed dolls should not be used in interviews, but if they are to be, then they must be used with caution.

Supporting Research and Opinion:

The Memorandum of Good Practice

 The need for the use of props should be carefully considered before interview. In the main dolls with genitalia should only be used as an

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¹⁷⁷First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

appeal in this case. 178 First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

¹⁷⁹First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

adjunct to the interview to establish the meaning of terms used by the child "once the child has finished his or her free narrative account and the general substance of his or her evidence is reasonably clear."

Joint NZCYPS and Police Operating Guidelines (March 1997)

- The Joint Operating Guidelines recommend, in Table 4.1 on page 22, against the use of certain toys and play items and against the use of "anatomically detailed dolls (except in extraordinary circumstances)". The Guidelines state that:
 - Body diagrams can be used to clarify the part of the body that the child or young person is describing. In an evidential interview the diagrams must only be used after the child or young person has disclosed and when they cannot verbalise what has happened.
 - Only use anatomically detailed dolls if they cannot clarify what
 has happened with the use of body diagrams or ordinary dolls. The
 anatomically detailed dolls need to be kept outside the interview
 room in a cupboard or box and brought into the room only when
 needed.

Law Commission. Total Recall? The Reliability of Witness Testimony. A Consultation Paper (July 1999):

- Everson and Boat (1997)...concluded that there is growing evidence that the use of anatomical dolls does enhance children's recall when compared to purely verbal interviews (refer page 30 paragraph 116)
- Everson and Boat streview of studies of presumably non-abused children
 found that inspecting and touching sexual body parts on the dolls was fairly
 common, however, play demonstrating explicit sexual activity such as
 intercourse or oral-genital contact was rare.
- Nevertheless, the use of anatomically correct dolls remains controversial, especially with young children...very young children may be unable to treat the doll as a representation and thus use of the doll may impede rather than facilitate their ability to provide accurate testimony (Ceci and Bruck, 1993). Certainly, the effect of dolls on the accuracy of children's reports will, as is the case for any props, depend on each individual child's cognitive abilities and the way in which the dolls are used in the interview context (refer page 30, paragraph 118).

Research

• On the use of anatomical dolls the authors state: It seems that there are similar concerns about the use of anatomically detailed dolls with children as old as six years of age. Stewart and Stewart (1996) interviewed children (ages three to six years) three times after a paediatric clinic visit. With each interview, children's false reports of anal touching increased, by the final interview, which took place six months after the initial visit, more than one third of the children made such errors of commission (see also

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Rawls, 1996, for errors of commission by children interviewed using a diagram of body parts). (at page 142)¹⁸⁰

- The research indicates that the use of anatomical dolls is to be actively discouraged and they are no longer used by the New Zealand Children & Young Persons Service. There was evidence that anatomical dolls reduce accuracy in reports and increase the likelihood of false reporting. Children's behaviour with the dolls may be misinterpreted by interviewers and triers of fact who may, incorrectly, consider the interaction of the child with the doll to be significant of sexual abuse when, in reality, the interactions occur in that way with children who have not been sexually abused also 181.
- Undressing the dolls or looking at or touching their genitalia was regarded as being normal for non-sexually abused children. By 1988 researchers cautioned against the use of anatomical dolls given the potential effects for suggestion and for evoking fantasy¹⁸² In one 1987 study it was found that some 50% of pre-schoolers engaged in digital insertion into vagina and arus or penile stroking ¹⁸³.
- There is research evidence that a small proportion of children use the dolls to represent people in real life. 184
- Exposure to anatomical dolls has been found to increase children's sexual awareness generally. Such interest could be misinterpreted by mothers (who could mis-identify the source). In subsequent interviews this increased interest may be inaccurately interpreted as strengthening or confirming the occurrence of abuse. 185
- It is now clear that the use of anatomical dolls is to be actively discouraged and indeed the New Zealand Children Young Persons Service no longer use the anatomically detailed dolls. The problems of use of anatomical dolls was known in the early 1990's. There was evidence that anatomical dolls reduce accuracy in reports and increase the likelihood of false reportings. Children's behaviour with the dolls may be misinterpreted by interviewers and triers of fact who may incorrectly, consider the interaction of the child with the doll to be significant of sexual abuse when, in reality, the interactions occur in that way with children who have not been sexually abused also (pA21).186

The use of colls may be traced to a 1986 study (White, Strom, Santilli and Halpern, 1986) which suggested the use of anatomical dolls for pre-verbal children. However, the researchers and the editor of the Journal (in an editorial note) expressed concern at the lack of comparative research with dolls (pA22/23).

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^{**}Roberts: From Research to Policy and Practice, American Psychologist, Vol. 53, No. 2, 136

^{181 (}First Affidavit of Dr Parsonson, p27)

¹⁸²(First Affidavit of Dr Parsonson, p27)

¹⁸³⁽First Affidavit of Dr Parsonson, p27)

¹⁸⁴⁽First Affidavit of Dr Parsonson, p27).

¹⁸⁵(First Affidavit of Dr Parsonson, p28)).

¹⁸⁶First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

- Undressing the dolls or looking at or touching their genitalia was regarded (Boat and Everson, 1988) as being normal for non-sexually abused children. By 1988 researchers cautioned against the use of anatomical dolls given the potential effects for suggestion and for evoking fantasy (pA22).
- In a study by McIver, Wakefield & Underwager, 1989, the authors concluded non sexually abused children are as likely to engage in behaviour, such as undressing the dolls and looking at or touching the genitalia, putting them in sexual positions, or engaging in overly aggressive play, as sexually abused children are. A small proportion of children use the dolls to represent people in real life (15%). Although this study can be criticised on the basis of the format of the experiment it nevertheless does raise questions about the differential diagnosis or indicator value of sexualised interactions with dolls (pA23).
- While anatomical dolls are still used in some United States jurisdictions their use is banned or proscribed in others (pA23).
- There is evidence of non abused children both avoiding the dolls and showing a distinct interest in genitalia. In one study, Herbert, Grams and Goranson (1987, cited in Ceci and Bruck, 1995) some 50% of pre-schoolers engaged in digital insertion into vagina and anus, or penile stroking (pA24).
- Exposure to anatomical dolls has been found to increase children's sexual awareness generally. Such interest could be misinterpreted by mothers (who could mis-identify the source). In subsequent interviews this increased interest may be inaccurately interpreted as strengthening or confirming the occurrence of abuse (pA24).
- Ceci and Bruck (1995) conclude there is little evidence that anatomical dolls assist in recall and that there is evidence that their use for children under 5-years reduced accurate recall. In a 1995 study, 3-year old children were interviewed 5 minutes after a paediatric examination. Children who were not touched demonstrated on dolls that they were touched, while some who were touched either refused to admit touching or showed penetration when it had not occurred. Some, when given a small spoon a spoon had not been used in the examination) inserted the spoon into the dolls anus or vagina or tapped the doll's genitalia with it. The use of anatomical dolls with young children may be particularly problematic (Bruck, Ceci, Francoeur and Renick, 1995 ofted in Ceci & Bruck, 1995) (pA25).

Children under 5- years have considerable difficulty in representing themselves through the use of a doll and their reports using dolls are less accurate than either their verbal or non-verbal reports (DeLoache and Marzolf, 1995) (pA25).

 Summary: Anatomical dolls have little to contribute as reliable and valid instruments for differential diagnosis of sexual abuse. 187

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 $^{^{187}}$ First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

- There is clear evidence their use may prompt increased interest by young children in genitalia, thus confounding subsequent assessment or diagnostic investigation. Exposure to dolls increases the chances of misreporting of genital touching by children who have not been touched and either reduces the reporting by children who have been touched or leads to highly inaccurate reports of the types of touching that occurred. Ceci and Bruck, in 1995, warned against the use of anatomical dolls (pA25/26).¹⁸⁸
- The use of these dolls is problematic in that the child's demonstrations with the doll may cause a trier of fact to conclude that the child had been sexually abused because the child was able to replicate for the interviewer "sexual" activity. This would not be accurate. The research indicates that the anatomically detailed dolls themselves create interest in genitalia and that non-abused children can and do demonstrate sexual activity with these dolls (pA26). 189
- Anatomically detailed dolls are no longer used in New Zealand by the Children Young Persons Service (pA21). 190

Conclusion: Interview Method Contamination:

- Props contribute little to enhancement of accuracy and may detract from accurate recall and reporting by contributing to inaccurate reporting (pA26). 191
- The use of anatomical dolls creates a danger for the triers of fact in that they may be persuaded by the physical demonstration that abuse occurred rather than looking at the verbal accounts of the child which may be the source of more accurate information (pA26).

Proposition 19(xx):

A child should not be questioned after the formal recorded interview to obtain more evidence or clarify matters raised within the interview.

Supporting Research and Opinion:

Joint NZCYRS and Police Operating Guidelines (March 1997)

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¹⁸⁸First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

¹⁸⁹First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

¹⁹⁰First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

appeal in this case.

191 First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.

appeal in this case. ¹⁹²First Affidavit of Dr Parsonson submitted to the Court of Appeal in support of the second appeal in this case.