PARTICULAR SUBJECTS OF INTERROGATION AS UNCEASING CHALLENGE FOR INTERROGATORS

Dr. Violetta Kwiatkowska-Darul

Criminalistic’s department, Faculty of Law and Administration
Nicolai Copernik University of Toruń
Gagarina st. 15, Toruń, Poland
Phone: 6 114 007
E-mail: vdk@law.torun.pl

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Summary

Legislative regulation concerning the issue of interrogation creates the general scope of the one of the most important actions, next to the examination, during which the information from personal evidential sources is obtained. In some procedures there are regulations which expressis verbis point out the necessity of modification of the interrogation, thereby enacting particular forms of the interrogation. For instance, the Polish Code of Criminal Procedure regulates six situations, in which the interrogation takes on the particular nature. Here they are:

- the confrontational interrogation of two persons – the confrontation (art. 172 C.C.P.),
- the interrogation concerning material evidence (art.173 § 1 C.C.P.),
- the interrogation of the incognito witness (art. 184 C.C.P.),
- the interrogation with an expert physician or psychologist’s participation (art. 192 § 2 C.C.P.),
- the interrogation of the expert witness (art. 200 § 3 C.C.P.),
- the interrogation through an interpreter (art. 204 C.C.P.).

Although the interrogation acquires “more specific character”, straying from the standard one, in the cases listed above, the code of criminal procedure neither uses the term “specific forms of the interrogations nor defines their methodology. Furthermore, the catalogue presented above is not closed. The inspiration to distinguishing other particular forms of interrogation and drawing up rules of their application is the prospect of obtaining maximally objective, full, explicit and verifiable relation.

Criminological issues of particular forms of the interrogation include, within its scope, the tactics of preparation and conducting an untypical interrogation, the role of specialists participating in the interrogation, the method of the utilization of the most appropriate technical means and the strategy of an optimal introduction of definite and particular forms of the interrogation in the course of criminal proceedings (particularly in the investigative phase).

The peculiarity of the interrogation may result from:

a) particular characteristics of the interrogated subject;
b) particular conditions in which the interrogation is held;
c) particular methods of the obtainability of evidential means;

1 The interrogation with an expert physician or psychologist’s participation occurs when a suspect is a specific subject, for instance: a child, an elderly person, a mentally ill person, a person in a critical health condition. The peculiarity of the interrogation results from the specificity of the interrogated subject, and the participation of an expert physician or psychologist in the interrogation can be the additional element of this particular form.
d) the specialist subject of the interrogation.

The above-mentioned criteria may accumulate in the course of one interrogation action (for example: the reconstruction of a person’s image during the interrogation of a child, obtaining an account from an elderly person, in addition being unable to speak Polish etc.). The advisable criteria also permit distinguishing the eleven following particular forms of the interrogation:

1) the confrontational interrogation of two persons;
2) the interrogation concerning material evidence;
3) the interrogation in order to reconstruct the situation or proceedings in place of the event;
4) the interrogation in order to reconstruct the appearance of a person or an object;
5) the interrogation of children;
6) the interrogation of the elderly;
7) the interrogation of the people with mental disturbances,
8) the interrogation of people in the critical health conditions;
9) the interrogation through an interpreter;
10) the interrogation of the expert witness;
11) the interrogation of the incognito witness.

From the eleven above-mentioned particular forms of the interrogation the most frequently the interrogation of children and the elderly is used in practice. Distinguishing these two particular forms of the interrogation is connected with the fact that a human being, in the course of their lives, goes through several stages¹, resulting in differences also in the range of formulating the testimony. These are precisely particular subject determinants that have lay at the root of their distinguishing. However, not only children and the elderly are such particular subjects but also people suffering from different kinds of mental disturbances and people who are in critical health conditions. They also require, on account of their specificity, special treatment. All these above-mentioned subjects raise standards considerably for interrogators² and they are the unceasing challenge for them.

1. The interrogation of children

The necessity of the interrogation of children through the trial organ happens in the situation when the proceedings are conducted in the juvenile’s case and in the adult’s case juvenile witnesses take the floor including a child being the victim of the offence. The child may also be a witness in the civil and administrative proceedings³.

As it has been mentioned earlier, a human being, in the course of their lives, go through a lot of stages, however the most vital changes in their organisms happen in their first ten to twenty years of their lives. Such vital quantitative and qualitative changes cause the necessity of the modification of the interrogation. In this study the analysis of the interrogation of the child is not possible in particular age groups⁴. The rule is that the older child, the easier it is to establish the contact with them, obtain the spontaneous relation, full answers to questions etc. It is important to realize the dissimilarity of the psyche and the juvenile’s reaction to know the sources of advantages and drawbacks of the evidence from the testimony and general tactical rules being expressed, in particular, in the rules listed below.

1. The preparation to the interrogation includes the collection of possibly thorough information about the child (the interview with their parents, class tutor, etc.). The adequate preparation enables the proper decision to be made, or the resignation from this action for their good. At this stage, it may appear that it is necessary to consult the psychologist or even to order the psychological examination. Making preparations for the interrogation, the interrogator ought to consider the question of the potential recording of the interrogation on an audio or a video cassette, which would be, in particular, advisable in the case of the interrogation of the child–witness in the preparatory proceedings.

³ More on the subject of the trial roles of the children: V. Kwiatkowska-Darul, op. cit., p.112-164.
2. To decide to have the interrogation exclusively when a considerable amount of time can be sacrificed to it. The **place** of the interrogation is also of great significance. The psychologists and criminologists emphasize the unfavorable influence of traditional places in which the interrogation takes place, for instance: police stations, prosecutor’s offices and court-rooms. The atmosphere can unfavorably affect the content and the form of the testimony of the adult witnesses, to say nothing of the children. With the children it may cause the inhibition of intellectual processes, anxiety, shyness, mistrust and even fear. In order to minimize the stress connected with the interrogation and conduct it in the most favorable conditions special interrogation rooms are established.

3. **The stage of the preliminary** conversation ought to lead to the actual establishment of the contact between the two sides. The interrogator should, already in this stage, adapt their vocabulary to the intellectual level of the child.

At this stage the interrogator should aspire to make the suspect’s emotions calm which acts as a brake on the suspect. It acquires specific significance in the case of the interrogation of the witness-victim of the crime. In the situation of the build-up of emotions of the interrogated child, the interrogator should not escalate them but, for example, try to change the subject in a gentle way. Subsequently, he or she ought to come back to the previous topic without any clear transition.

4. The **spontaneous relation** of children frequently develops slowly and with resistance. It depends on the character, temperament, personal motives and the effectiveness of the preliminary stage. The child ought to be neither urged nor chastened; on the contrary, they should favorably be shown interest in and encouraged to make a statement. One should not show impatience, mistrust, irony or irritation, all the more, interrupt when the suspect digresses from the subject. In many cases it may appear impossible to obtain the spontaneous relation. In particular, it concerns the children under the age of ten. Then, one ought to move to the phase of questions.

If it is difficult for the interrogator to obtain the spontaneous relation, they should ask the child to draw the thing which he or she has difficulty in talking about. The picture can be analyzed by the interrogator and the suspect. Due to the research conducted by the author it appears that the application of the picture as the form of the child’s expression produces good effects. The fact of the reflection of the content of the picture which was found neither in the spontaneous relation nor in the answer to the asked questions\(^1\) is the proof of it.

The picture drawn by the child should be attached to the testimony protocol.

5. In **the phase of questions** – questions ought to be formed in a simple and clear way, thoroughly comprehensible, without any legal and medical jargon and expressions, and more difficult words should be exchanged with comprehensible ones or supplemented with a description. One should try to keep the unhindered atmosphere giving the character of a conversation to the questions and answers. In case of doubt, as for the understanding of the uttered words by the child, he or she should be asked to explain them. The appropriate pace of the speech of the interrogative is of great importance as the child may not be able to follow the quick and fluent speech of the interrogator.

The proper comprehension of the meaning of the interrogator’s statement by the child acquires significance while cautioning them about being able to exercise their rights (as in the case of every other witness). It should be remembered that the child does not always realize what kind of statement may expose their closest family to criminal responsibility although the content of the caution was understood. The child does not realize that, for instance, his father’s particular act has constituted the offence or shows the causation and they confide the information that they would not reveal at the older age, taking advantage of the benefit resulting from the right of the refusal of the testimony or the answers to particular questions. The significant meaning and the influence on the interrogation may have the parent or guardian’s participation in the interrogation (art. 171 § 3 C.C.P.). The parent is the guarantor of the rights that the child is entitled to and the parent’s participation in the juvenile witness’s interrogation should not only consist in their formal presence. In certain cases the parent or guardian’s presence can make the child feel uncomfortable and distract them.

Unusually vital regulation, introduced to the Polish Code of Criminal Procedure by the amendment from 10 January 2003 – art. 1 item 1 of the act from 10 January 2003 about the change of the act of the Code of Criminal Procedure, has been unknown in the Polish proceedings so far art.

\(^1\) See V. Kwiatkowska-Darul, op. cit., p.29-30 (footnote 63), p. 107-111, p.194; V. Kwiatkowska-Darul, The proved value of the testimony of the children in the light of the empirical research [in:] The violence in the family and at school. The materials from the symposium Toruń 5 April 2001, V. Kwiatkowska-Darul (ed.), p.113-121.
185a. However, it concerns only the children under the age of 15 aggrieved by the sex crime. According to this article: “In the cases about the crime described in the chapter XXV of the criminal code of the aggrieved, who was under 15 in a moment of the act one should interrogate in the capacity of the witness only once, unless significant circumstances come to light and their explanation requires another interrogation, or when it is demanded by the suspect who did not have their own defense counsel in the course of their first interrogation of the aggrieved”. Introducing this regulation the legislator was aimed at the special protection of the children under the age of 15, who were abused sexually. Moreover, the repeated interrogations favored the secondary victimization and were commonly criticized by psychologists. The introduction of the psychologist’s obligatory participation in the interrogation has been assessed positively. Indeed, the victims of these kinds of offence require special treatment, not only the tact and understanding on the interrogators’ side but also the psychologist’s care during the interrogation, since it is repeatedly difficult to establish the contact with the victims of the sexual abusement. The protocol compiled in the course of the interrogation is read out at the main trial (without calling the child), and in the situation in which the sound record was made out, it is played back (§ 3). Nevertheless, this regulation, though desirable, concerns only the very narrow circle of friends – the victims of the sex crime. Unfortunately, the children – the victims of other offences are not protected, for instance: against repeated interrogations.

As mentioned above, the children – the victims (under the age of 15) of the sex crime are guaranteed the participation of the psychologist during the interrogation. However, in other cases the participation of the psychologist in the juvenile’s interrogation is the more worth recommendation, the younger the witness is. One should constantly pay a lot of heed not to suggest anything to the child incautiously.

2. The interrogation of the elderly

The next subject raising standards to the interrogators and requiring “the particular form of the interrogation” is the elderly person. The cause which decides about such a necessity is the changes taking place in the organism of the elderly person, the consequences of which are often limitations occurring in the first two stages of the formation of testimonies – the processes of the perception and the memory.

The elderly person’s psyche, in many respects, starts to resemble the child’s psyche, and the physical clumsiness is accompanied by the mental clumsiness (dementia). In the elderly people the hearing, visual and sense of balance impairments may take place. The elderly person pays less attention to the surroundings, focusing this attention on themselves. The memory of the elderly person frequently fails in the range of the recent experiences, and the gaps are often, in good faith, filled with delusions. The elderly people, by and large, remember distant events well. Furthermore, the interrogator ought to realize the possibility of mental disturbances taking place connected with the process of becoming old. The main mental disturbances are the following: dementia (the torpor), Alzheimer’s disease, vascular dementia, frontal lobe dementia, dementia resulting from Parkinson’s disease etc.

Making a decision about the interrogation of the elderly people one should obey certain rules, similarly as in the case of the child’s interrogation.

1. One should prepare themselves properly i.e. gather as much information about the interrogated person as possible, which in the future may result in calling the expert psychologist or the geriatrician. The interrogator ought to aspire to the recording of the interrogation.

2. Here, similarly as in the child’s interrogation, one should predict a suitable amount of time to give to the interrogated person as their statements can be inhibited.

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3 See also: M. Kulicki, V. Kwiatkowska-Darul, Seven criminological „sins” C.C.P. [in:] The Professor Zdzisław Kegla’s Jubilee Book, Wrocław 2005.
3. The stage of the preliminary conversation should serve to establish the contact of both sides. The interrogator should take into consideration that in the account of the elderly person there may appear language archaisms, which the elderly person should explain if there are doubts as for the understanding of the meaning.

4. The spontaneous relation should be the uninterrupted statement of the interrogated person as far as the subject of the process is concerned. However, obtaining the spontaneous relation, obviously not always, is not difficult, but obtaining the relation deprived of personal digression of the interrogated person becomes difficult. In this case the interrogator should show a lot of patience and not interrupt, even if the interrogated person digresses from the subject. One should also take into consideration that the person giving an account may lose the thread of the testimony and wanting to remind themselves will come back to the facts already reported on. Here irritation or impatience should not be expressed.

5. In the stage of questions – the questions ought to be formed in the simple and clear way, thoroughly understood by the interrogated person. This should be a conversation conducted in a very friendly, full of respect and understanding atmosphere.

Similarly, as in the child’s interrogation the participation of the expert psychologist is intentional. While interrogating the elderly person one should have patience and understanding and take the circumstance of strong emotions being able to threaten their lives into account.

3. The interrogation of the people with mental disturbances

The accomplishment of this form requires having the minimum of knowledge from the field of the psychiatry and the psychology by the interrogator. On the basis of this knowledge the trial organ will, first and foremost, be able to recognize such a person, which obviously is not always possible. The physical appearance may show the mental disturbances – the outfit, the way of walking, the posture, the gestures, the expression on the face and the psychomotor drive – hyperactivity, inhibitions, trembling, twitches, tension, fear, specific way of speaking etc. However, not all disturbances are noticeable for laymen who are, without hesitation, obviously in this field the representatives of the prosecution and the judiciary organs. It is difficult, at first glance, to state that the interrogated person suffers from depression (every ten person suffers from it²), and one should take such a person into account in the case of the crime victims. That is why one should remember that the people with mental disturbances are not only the people with mental retardation, dementia and the people with a high rate of the neuroticism, but also those in whom the offence has caused trauma. In such cases it is worth remembering about some rules helpful during the interrogation of these following subjects.

1. Before the interrogation one should collect the medical data about the person with mental disturbances and establish if the present state allows the person to be interrogated. The final opinion in this case belongs to the psychiatrist who may participate in this activity. Whereas, if the interrogator does not have the knowledge about the potential disturbances of the interrogated person, they may start having doubts as for this person’s mental condition during the direct contact with the interrogated person and then decide about a potential interrogation with the expert psychologist, psychiatrist’s participation.

2. The preliminary stage of the interrogation has got a vital role. The interrogated person should understand their own role and trust the interrogator. In many cases only at this stage the trial organ learns that the interrogated person suffers from some mental disturbances. Then the organ may even resign from the interrogation or postpone it in order to provide the person with the psychiatrist or the psychologist.

3. In the course of the spontaneous relation if it is difficult for the interrogated person to keep to the main topic, one should start the stage of the detailed questions. The questions ought to be

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¹ The term „disturbance” is in accordance with the latest tendencies in the psychiatry since: “so far it is not sure that the statement of the psychical deviation is indeed the illness in the medical understanding” and “the etiopathogenesis of many mental disturbances is constantly unknown”. It has also been proved that “calling the changes ‘an illness’ is unfavorable for the certain person and carries with it many negative consequences being the reason for prejudice and ostracism. It makes the life difficult and coming back to the normal after undergoing any disturbances”. At last “ unfavorable attitudes such as pessimism, helplessness and fatalism are connected with the notion of the mental disturbance. They are contrary to the principles of practice and the spirit of the contemporary psychiatry”. S. Sidorowicz from the preface of D. A. Tomb, The Psychiatry. Edition 1 Polish, S. Sidorowicz (ed.) Wrocław 1998, p. IV.

adjusted to the intellectual possibilities of the interrogated person and made it possible for them to give short answers. It is deliberate to repeat questions in the other way to make sure that its sense is properly understood. The interrogation should last short in order not to weary or, all the more, not to irritate the interrogated person.

The vital role of the expert psychiatrist in the interrogation, with whom general tactical rules were agreed on, should be emphasized here. In the course of the interrogation the expert observes the interrogated person, gives some tactical tips to the trial organ, may also ask questions concerning the state and the feelings of the interrogated person.

4. The interrogation of the people in the critical health conditions

The issues of obtaining relations from the people in the critical health conditions is extremely complicated as the very decision about the interrogation is made owing to bad prognosis as for recovering of the interrogated person. The critical health condition of the potential witness can be the result of the physical injury or mental trauma, which seriously disrupt the functioning of the organism. The trial organ can make a decision about the interrogation in the face of the necessity of the choice between obtaining testimony from the aggrieved person, thanks to whom it will be possible to take uncovering action, and the interrogation in the conditions of the worsening state of the witness’s health, which can as well appear to be the action not being able to be repeated.

Not only does the limited psychophysical competence of the witness decides about the peculiarity of this form of the interrogation but also untypical places of the interrogation, the time of this action and the extraordinariness of the situation in which both the interrogator and the interrogated person take place.

The psychosomatic state of the human being who is potentially to give an account can exclude any contact with them, but it may enable a short and suitably prepared interrogation. The limitations can also be connected with the specificity of undertaken medicinal treatments. In all the cases it is the physician who make a final decision about the admissibility of the interrogation, and the therapeutic actions have the priority over the trial-criminological ones. The vital factor making decisions for the physician about the admissibility of the interrogation easier is, apart from the knowledge about the subject in the scope and the form of the interrogation, also their participation in this action. The physician then supervises the state of the patient in the course of the prying, plays the role of the expert assessing – according to art. 192 § 2 C.C.P. – the capability of the witness to reconstruct, and at the same time, can demand to discontinue the started interrogation when the physician acknowledges that the good of the ill person requires this, or when the capability of the patient to reconstruct observations is dubious. Here, among others, pharmacological drugs may wield influence on this capability. The presence of the physician enhances the patient’s sense of the safety and has a soothing effect on their mood.

This very complex situation causes that in practice it is often resigned from this trial action assuming that such people cannot manage the standard interrogation. Sometimes it is made do with the attempt to talk with the person in the critical health condition and only notes are taken.

A new regulation in C.C.P. – art. 316 § 3 C.C.P. introduced by the Polish legislator expects that “If there is a danger that the witness will not be able to be interrogated at the trial, the party or the prosecutor or another organ directing the proceedings can turn to the court with the demand for interrogating them by the court”.

Making a decision about the interrogation one should take these vital rules into account.

1. During the interrogation the presence of the physician is necessary, who previously assessing the scope and the method of the interrogation, consented to conduct it. The physician signs the protocol confirming by the interrogator, in this way, the reason for the lack of the interrogated person’s signature (art. 121 C.C.P.). The physician’s confirmation of their participation in the interrogation by their signature is tantamount to the approval of the conformity of the content of the protocol to the course of the trial actions.

2. The resignation from the spontaneous relation, announcing of which requires the activeness and the strength on the side of the interrogated person in order to obtain answers for limited number of questions written in the protocol. One should, in the first place, ask, for example, if the interrogated person knows the perpetrator, what loses they suffered and finish with the question concerning any other potential evidential sources. If the conditions are favorable, one can ask
questions of detailed type concerning, for instance, the circumstances of the event, characteristic features of the offender, the instruments of the crime, the offender’s way of acting, the content of the statements, the relations between the event’s participants and the characteristics of the loses.

3. Making notes by the official from the prosecution organs about the heard statement of the person in the critical health condition – in the situation when the realization of no previous variants (for example: in place of the event and directly straight after the event, in the unfavorable situational conditions etc.) is possible. The predicted reservations from art.174 C.C.P. are related to such a note and that one must not exchange the evidence from the accused person’s explanations or the witness’s testimony with the content of the letter, the record or the official notes. Such a note can only constitute the information about the listed events in it and their circumstances, provide tips for further proceedings of the trial and operational organs, but cannot be the equivalent of the testimonies. In this connection and in view of the potential difficulty in the next contacts with the evidence source one should provide the court with the equivalent of the directness in the form of the magnetic recording of the course of the interrogation.

One should emphasize that the base of the effectiveness of the testimony is an appropriate contact with the witness being in the critical health condition. The contact ought to be on the interrogated person’s side marked with a particular tact and kindness, which is connected with the situation of the person giving evidence – the compulsory situation, frequently with the dramatic subject of the relation, and sometimes with the indispensability of raising the issue of the victimological nature.

The above-mentioned principles are not rules, without any exceptions. One should always remember that neither the particular tactics of the interrogation nor the credibility of the obtained relation depend on the conventional criteria of the age, the education, the eloquence, the mental level, etc., but they must be described individually and against a background of the entirety of the decisions made in the case. The interrogated person should be treated with a respect and one should take care of the fact that the frank testimony would be accompanied by the satisfaction resulting from the feeling of the well accomplished duty. It concerns all the interrogators, but in particular those ones for whom this study has been dedicated.
- specifiniai apklausos metodai;
- specifinių apklausos dalykai.

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