IN THE SUPERIOR COURT OF THE STATE OF ARIZONA

IN AND FOR THE COUNTY OF MARICOPA

STATE OF ARIZONA, Plaintiff, vs. JAMES CARTER HOWARD, Defendant.	No. CR 98-11958

REPORTER'S EXCERPTED TRANSCRIPT OF PROCEEDINGS

Phoenix, Arizona
February 4, 1999
12:45 o'clock p.m.

BEFORE: THE HONORABLE ALAN KAMIN, Superior Court Judge

REPORTED BY: DONNA FORD TERRELL, RDR, RMR, CRR

PREPARED FOR:

MR. KENNETH F. HULS

BRUSH & TERRELL
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I N D E X

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STATE'S WITNESSES:			
DUTTON, Wendy	4	19	30

APPEARANCES:

For the State: MS. LISA MARI ROBERTS, Deputy County Attorney,

For the Defendant: MR. KENNETH F. HULS, Deputy Public Defender

Phoenix, Arizona
February 4, 1999
12:45 o'clock p.m.

(DONNA FORD TERRELL was duly sworn to act as the Official Court Reporter herein.)

(Whereupon, the following is an excerpted transcript.)

(Whereupon, a recess was held from 2:15 p.m. to 2:35 p.m.)

THE COURT: All 15 jurors are present. Both counsel, the defendant and the detective are present.

Ms. Roberts, who are you going to call as the State's first witness?

MS. ROBERTS: State calls Wendy Dutton.

THE COURT: Ms. Dutton, if you'll step up here in front of my clerk she'll swear you in.

(Whereupon, WENDY DUTTON was duly sworn by the court clerk.)

THE COURT: Mrs. Dutton, why don't you have a seat over here.

Okay. Ms. Roberts, whenever you're ready.

W E N D Y D U T T O N,

called as a witness herein, having been first duly sworn, was examined and testified as follows:

D I R E C T E X A M I N A T I O N

BY MS. ROBERTS:

Q Please state your name.

A My name is Wendy Dutton.

Q And what is your present occupation?

A I'm a certified professional counsellor and forensic interviewer at the Child Abuse Assessment Center at St. Joseph's Hospital.

Q And how long have you been so employed?

A Since October of 1992.

Q Do you have any specialty in your work?

A My specialty is assessment and treatment of victims. I've worked with -- in the area of sexual deviance and sexual abuse for close to 15 years now.

Q Can you -- go ahead.

A And my primary duties now are to conduct forensic interviews of children alleging abuse.

Q What is a forensic interview?

A A forensic interview is basically a fact-finding interview approached from a neutral perspective, for the purpose of gaining factual information from children who are making allegations of abuse.

Q And can you tell the jurors first a little bit about your educational background?

A Yes. I have a Bachelor of Science degree in psychology from the University of Arizona. And I have a master of arts in marriage and family counseling from the University of Arizona.

And I'm currently a doctoral student at Arizona State University, specializing in the area of criminology and children's justice issues.

Q And can you give the jurors some information about your employment history?

A Yes. During my last year of my master's program, we were required to do a year's internship. I did my internship at the Arizona State Prison in Tucson, working with adult sex offenders.

After I graduated, I went into private practice at the Center Against Adult and Adolescent Sexual Aggression in Tucson.

It was a private practice where we contracted with State agencies such as the State Prison and Pima County Juvenile Probation. And the juvenile prison provided sexual treatment both in the institutions and in the community.

I was there until 1987, and I moved to Phoenix where I worked for about six months at the Department of Corrections in Juvenile Community Services.

My primary responsibilities there were to help juveniles transition from institutions back into the community. And I also did counseling for sex offenders at -- juvenile sex offenders as at a halfway house.

Later that year, in 1987, I went to -- or moved to Phoenix Memorial Hospital to the adolescent sexual abuse and addiction program. There was an inpatient treatment program for juvenile sex offenders and adolescent victims of sexual abuse. And I also provided some services to adult sex offenders there.

I was there for five years and then moved to St. Joseph's Hospital in 1992, and have been there ever since.

Q And have you had any other specialized training in your field that relates to your current job?

A Yes.

Q Can you tell the jurors a little bit about

that training?

A My certification in the State of Arizona requires that I do 40 hours of continuing education every two years.

Since I graduated from my master's program, I've had probably over 500 hours of continuing education, specifically in the area of sexual deviance or assessment and treatment of sexual offenders and victims.

About 150 of those hours have been strictly in the area of forensic interviews of children.

Q And approximately how many forensic interviews of children have you done?

A Approximately 3,000.

Q And during what time frame?

A From 1992 until now.

Q Have you published any books or articles that deal with your current area of work?

A I've published in the area of -- concerning my work with sex offenders.

Q And have you read literature with respect to interviewing children alleging abuse?

A Yes.

Q And is that something that you keep up on?

A Yes.

Q Do you have any teaching experience?

A Yes, I do.

Q And can you tell the jurors a little bit about that?

A When I lived in Tucson, I was an adjunct faculty member at Pima Community College. I taught classes at Arizona State Prison, primarily in the area of human sexuality and psychology of women.

After I moved to Phoenix, I was made an adjunct faculty member at Ottowa University, where I taught classes in advanced abnormal psychology and also classes in the assessment and treatment of victims of sexual abuse.

Q Have you testified in court in the area of the general characteristics of children who have been sexually abused?

A Yes.

Q And in which courts have you testified?

A I've testified in the Superior Courts of Maricopa County, Pinal County, Pima County, Santa Cruz County, Graham County, Greenlee County and Coconino County.

I've also testified in the United States District Court in Phoenix and also in the Superior Court of Clark County, Nevada.

Q And approximately how many times have you testified in the area of general characteristics of children who have been sexually abused?

A I would say roughly around 30 times.

Q Have you ever been consulted by a defense attorney in that area?

A Yes.

Q And on how many occasions has that occurred?

A Once.

Q And did you actually testify in that situation?

A No. The case has not gone to trial yet.

Q Are you paid for your testimony today?

A I'm being paid my regular salary from the hospital.

Q Can you explain to the jurors if there is a fee to someone for your testimony?

A The hospital I work with charges $120 an hour for my time here. But I don't -- I get paid my regular salary.

Q And approximately what percentage of your work involves actual in court testimony in this type of a situation?

THE COURT: Are you talking about the actual testimony itself or are you talking about the preparation and the testimony?

BY MS. ROBERTS:

Q Both.

A I would say roughly between four and six hours a month.

Q And how many hours a month do you work approximately?

A 160 hours a month usually. 40-hour weeks.

Q Can you explain to the jurors how it is that you became involved in working in the field of child sexual abuse?

A Well, as I said, during my last year of my master's program, we are required to do an internship.

At that time, the internship at the State Prison was being offered, and I decided I could do anything for a year. And then after that year was over, I felt it was important work in which I could make contribution.

Q Now, you mentioned that you conduct forensic interviews of prospective victims.

Have you worked with other victims in other settings as well?

A Yes.

Q And what other settings?

A Both in outpatient treatment and inpatient hospital treatment.

Q Are you familiar with literature that exists in your profession that recognizes research and study regarding general characteristics of children who have been

sexually abused?

A Yes.

Q And have you worked with any of the individuals that have produced that literature?

A Yes.

Q And can you tell the jurors just a little bit about that?

A Yes. I have -- one of my colleagues at Phoenix Memorial Hospital has published in the area, and especially in the area of characteristics of victims.

Q All right. Now, is there -- based on your experience and training and review of the literature, does there appear to be a consensus among experts in this field regarding general characteristics of sexually-abused children?

A Yes.

Q And what is that census?

A Well, we know from the research that most children do not disclose sexual abuse. And when they do disclose, they tend to do so after a significant delay.

Once children do make the decision to disclose, they typically do not tell or give a whole account of everything that's happened to them during the course of the abusive events.

They typically tend to tell in a piecemeal

fashion, by telling a little bit of the abuse at a time.

And then one other characteristic we know about children who allege abuse is that sometimes children recant true allegations of abuse.

There are also research studies that have addressed issues of what types of symptoms -- emotional, behavioral symptoms or psychological symptoms we see in victims.

And we find that many victims may be totally asymptomatic, meaning they have no emotional or behavioral symptoms that would lead them to the attention of the mental health system.

But there are a significant number of children who do show symptoms. And when they do show symptoms, they tend to show symptoms in common with children who have experienced other types of abuse or other types of trauma.

With the exception of two: That is, precocious sexual behavior and post-traumatic stress disorder. Those two symptoms seem to be more associated with children who experience sexual abuse.

Q Now, in your experience and training, is there a distinction in children who have been abused by someone known to them versus a stranger?

A Yes.

Q And can you explain that to the jurors, please?

A We know that most children are sexually abused by someone who is known to them; usually a respected or trusted adult.

In fact, only in about ten to 15 percent of cases are children sexually abused by somebody who is a complete stranger to them.

Q And what, if any, impact does that have on the general characteristics that you have seen as a part of your work experience?

A Well, we know that children who are abused by somebody they know or somebody they love or somebody they trust, are far less likely to disclose the abuse or to disclose it right away; and will instead learn how to live with or cope with the abuse, as opposed to fighting back or telling.

Q Now, has your personal experience in talking with the victims that you've talked to, been consistent with what the research and literature report?

A Yes.

Q And have you become aware of some of the factors that influence the timing on disclosure, or if disclosure will, in fact, ever occur?

A Yes.

Q And what have you found some of those factors to be?

A Well, there are several main factors. One of the most common is that if a child is fearful that their younger brother or sister may become a victim of the same perpetrator, that may often prompt their disclosure.

Other children disclose after they've learned about sexual abuse, either through a school prevention program or somebody asks them about it.

Other children disclose if the offender left the environment, either moved away or left the home, due to divorce or that type of situation.

Still other children disclose if the offender is about to come back into their life, say, for a visit during the holidays. That may often prompt a child to tell.

Other children may tell if they've become angry with the offender for something else, which kind of gives them the emotional courage to be able to disclose the abuse.

And other children disclose after the abuse begins to become more and more intrusive, and more and more uncomfortable for the victim.

Q Now, based on your experience, as well as the literature in the area, do you have an opinion as to

whether a child will typically have mixed or contradictory emotions about the abuser?

A Yes, I do have an opinion about that.

Q And what is that opinion?

A Many times, children do have mixed emotions or mixed feelings about the perpetrator -- about the person who is sexually abusing them.

Quite often, children report that they love or like the offender, but don't like the offender's behavior, and wish the behavior would stop, but still want to keep the relationship with that offender.

Q What have you found with respect to whom a child typically discloses abuse to?

A Yes. Children most typically disclose to their mother.

Q Now, you alluded to the term recantation earlier in your testimony.

Can you tell the jurors a little bit about what your experience and training has taught you with respect to that phenomenon?

A Yes. Children may recant true allegations of sexual abuse.

And they do so for several common reasons. The most common is pressure from their family or pressure from the offender to recant, especially in situations where

their family does not believe them or sides -- or it comes down to the side of either -- the offender, as opposed to the child.

Other children may recant if something bad or a negative result happens as a result of their disclosure. For example, they're pulled out of the home and placed in foster care, they're not believed. The family loses its major breadwinner, and economic disaster befalls the family as a result.

Other children recant if they're faced with multiple interviews of being questioned over and over again by several different people about the abuse.

And still other children may recant when faced with the possibility of testifying in court.

Q Based on your experience and training, have you observed different levels of emotion in children describing events of sexual abuse?

A Yes.

Q And can you tell the jurors a little bit about that?

A Well, when I interview children, I see a wide range of emotional responses as they're disclosing abuse to me.

Some children -- I would say a minority of the children become tearful and upset. Other children

become embarrassed and shy, and they giggle or laugh inappropriately.

Other children may have a completely -- what we call flat affect, meaning they show no emotion. They just kind of tell me the facts and have a very matter of fact approach to it.

Q Has your experience taught you anything about what would impact the different types of emotion?

A Well, it really depends. You know, every -- every individual is different in how they react to a situation.

I see a difference in -- based on the age of the child. Older children tend to understand the ramifications of what they're talking about. They tend to become more emotional.

Small children tend to have no conception of the ramifications of what's happened to them, and often tend to be very matter of fact or even giggly when describing what has happened to them.

Q Ms. Dutton, have you reviewed any of the police reports in this case?

A No.

Q Have you ever talked to the alleged victim?

A No.

Q And do you have a reason for not reviewing

materials in a particular case?

A Yes.

Q And what is that reason?

A The primary reason is when I come to testify in cases like this, I don't want to inadvertently taylor my testimony to the facts of the case.

So I prefer not to know anything about it, and simply talk about the research and my experience in the field, without knowing any of the facts of the case.

Q Based on your experience and training, are there behavioral indicators that all child sexual abusers you would expect to exhibit?

A Not 100 percent all of them, no.

Q And the factors that you have just described to the jurors, certainly, could those be caused by something other than sexual abuse in some instances?

A Yes. With the exception of precocious sexual behavior that I talked about earlier.

That tends to signify that the child has been sexualized somehow, either through sexual abuse or exposure to pornography or witnessing adults engaging in sexual activity.

Q And just for clarification, what's precocious sexual behavior?

A Sexual behavior that is beyond the

developmental level of the child. For example, two three-year-old children performing oral sex on each other is way out of their developmental experience, and nothing that they should know for their age group.

MS. ROBERTS: I don't have any further questions.

THE COURT: Okay. Cross-examination?

MR. HULS: Thank you, judge.

C R O S S - E X A M I N A T I O N

BY MR. HULS:

Q Good afternoon, Ms. Dutton.

A Good afternoon.

Q The clinic you're working for -- maybe I should back up.

Is it fair to call it a clinic that you're currently working for? I don't know the structure of the organization.

A I'm employed by St. Joseph's Hospital. And our program, the Child Abuse Assessment Center, is part of a larger specialty pediatric clinic called the Cimarron Clinic.

Q Okay. And that clinic, or at least St. Joseph's Hospital, did receive reimbursement or compensation for your testifying today, correct?

A Yes, it does.

Q So at least part of the funding of that program comes from your providing expert assistance to the State in court, correct?

A Yes, the hospital does get paid for my services.

Q Now, is it fair to say that a lot of principles -- the general characteristics that you're talking about today are used to dispel myths concerning victims or alleged victims of sexual abuse?

A Yes.

Q You're not an expert in lying, right?

A No.

Q Okay. And you've testified that you've never met Antionette Brown or even observed a videotape of what she's said before; is that right?

A That's correct.

Q Would you agree that an important part of your job consists of advocacy for children?

A Yes. I would say that part of my job has been to advocate for children, specifically in the area of making criminal investigations less traumatic for children.

Q And part of your job or responsibilities is to educate prosecutors also?

A Yes.

Q Police officers?
A Yes.
Q As well as the community?
A Yes.
Q Now, a lot of the principles you've been talking about so far, are they -- are they, in part at least, derived from a watershed peace of work done by Roland Summit?
A Yes, in part.
Q And did he call his work, or the principles that he espoused, "The Child Sexual Accommodation Syndrome"?
A It's titled "The Child Sexual Abuse Accommodation Syndrome," yes.
Q Okay. "Child Sexual Abuse Accommodation Syndrome." I'll try to get it right.
Now, the purpose of his article, I believe, was to promote more effective clinical advocacy for the child within the community and the criminal justice system; is that -- would that be fair to say?
A Yes, that was part of his intent.
Q Now, that was primarily an explanation of delayed reporting and recantation, some of which you've talked about today; correct?
A Yes.
Q Now, have you yourself ever conducted any

independent studies to confirm the child's sexual abuse accommodation syndrome?

A Not yet, no.

Q You hope to someday?

A Yes.

Q Okay. Has anyone in your field at all conducted any controlled studies to confirm the child's sexual abuse accommodation syndrome?

A Not in its totality, but certain ideas or concepts contained in Roland Summit's article, "Child Sexual Abuse Accommodation Syndrome" have been investigated and validated by other researchers.

Q So there's support for it?

A Yes.

Q All right. Now, Doctor Summit's article is based on his assumption at the time, that his patients had indeed been sexually abused; isn't that right?

A Yes.

Q And, in fact, that's an operating principle for most clinicians who are actually doing clinical work with abused or allegedly abused children; isn't that correct?

A Yes, in clinical settings.

Q Because it would be important to support the child psychologically. That would be the concept?

A Yes.

Q Now, there are mental health experts and other experts in your field that have criticized the use of the child's sexual abuse accommodation syndrome as it's been used in court from time to time; is that right?

A Yes.

Q And that's when it's used to try to forensically determine whether the truth has been told or not; isn't that right?

A That's correct.

Q It was not intended as a means for verifying whether someone had told the truth, right?

A That's correct. It was not designed to be a truth-telling device or a diagnosis as a way of -- or a checklist as a way of diagnosing sexual abuse.

It was used primarily as a way to dispel commonly-held myths about how sexually-abused children behave.

Q In fact, Doctor Summit has said that the child's sexual abuse accommodation syndrome is not an admonition to assume that every disclosure is real; isn't that right?

A Yes.

Q And in fact, it's true that there is no clinical method available to distinguish valid claims from

those that should be treated as fantasy or deception.

And again, the child sexual abuse accommodation syndrome gives no guidelines for discrimination; isn't that right?

A That's correct. There's no single test that determines the truth or falsehood of sexual abuse allegations.

Q There's no such tool or whatever that a psychologist would use, correct?

A No.

THE COURT: That's a correct statement that Mr. Huls just made, yes?

A No, there is no tool.

THE COURT: Okay.

MR. HULS: Thank you.

Q Now, I believe you've testified on direct examination that a certain number of child-abuse victims are asymptomatic, or in other words, don't display any symptoms at all; right?

A Yes.

Q Could you put a figure on that? Is that possible due to your research and your reading?

A Well, it depends on the study you read. But it ranges between 40 to 60 percent of children are asymptomatic.

Q So depending on who you're referring to, or whose studies you're referring to, about as many as not, show symptoms; is that fair to say?

A Yes.

Q So showing symptoms could be consistent with being a victim of child sexual abuse, correct?

A It could be, yes.

Q And not displaying any symptoms or behavioral characteristics could be consistent with being a victim, correct?

A It could be.

Q And not every child displays any symptoms or behaviors at all that would be detectable to any clinician; isn't that right?

A Could you repeat the question, please?

Q Sure. Not every child displays any symptoms or behaviors or characteristics that would be detectable to a clinician or an expert in the field; isn't that right?

A I would say some children do show symptoms. Others don't.

Q And along those lines, I believe you've said that some children disclose who have been victims, right?

A Yes.

Q And some do not?

A And some do not, yes.

Q And you can't necessarily infer anything from either one of those things, correct?

A That's correct.

Q And when children do disclose, sometimes there's immediate disclosure; isn't that right?

A Yes.

Q And, in fact, isn't that true that that's more common in adolescent or teenage children?

A No. There's no research to support that, other than it happens in a minority of cases.

Q Do you remember testifying in State v. Donald Beauchamp -- and I'll give you a date on that. It was May 12, 1998.

THE COURT: Which court was that, counsel?

MR. HULS: Judge, that was before the Honorable Carey Snyder Hyatt.

THE COURT: Okay. It's in Maricopa County.

MR. HULS: That's correct, Your Honor. And Ms. Laura Reckart was counsel for the State. Counsel for the defense was Candice Kent and Sherry Haug.

Does that ring a bell at all?

A Yes.

Q Would it refresh your memory about what you said a minute ago as not being accurate, if I could show you a copy of an official transcript?

A Yes.

MR. HULS: Okay. May I approach, judge?

THE COURT: Sure.

BY MR. HULS:

Q It's been highlighted right there.

A (Witness reading.)

THE COURT: Okay. The witness has now indicated she read the language you pointed out to her.

BY MR. HULS:

Q Does that refresh your memory about prior testimony that you've given?

A Yes.

Q Have you testified before that we tend to see more immediate disclosures in older children, as opposed to younger children?

A Yes.

Q And in addition, some children who have been victims contemporaneously disclose; isn't that right?

A You mean disclose as to the abuse is happening?

Q Well, contemporaneous is -- is a tough word. Let's see. How about immediately right after?

A Some children do disclose immediately after.

Q Okay. Now, that's not all that common, right?

A No, it's more -- it's less common than delayed disclosure.

Q Okay. But does it occur?

A It does occur.

Q Now, in addition, some children, you've testified, recant allegations of sexual abuse?

A Yes.

Q In other words, they take it back later on?

A Yes.

Q And some don't?

A Correct.

Q And either one of those things can be consistent with being a victim of child sexual abuse?

A It may be, yes.

Q There are false allegations however, correct?

A Yes, there are.

Q Is it true that there are two age groups where it's a little more common to see false allegations?

A Yes.

Q And one would be preschool, maybe down to very young children?

A Yes.

Q And it's true that -- or they found that in those situations, it's often associated with a custody

dispute or something along those lines; isn't that right?

A Yes.

Q In other words, there's that kind of pressure exerted on the child, right?

A Yes, but most typically in those cases, the false allegations originate from the parent involved in the custody dispute.

Q Okay. And the second age group in which they're -- in the grand scheme of things it's more common for there to be a false allegations, would be with teenage girls; isn't that right?

A Yes.

Q And in those situations, there's usually some kind of clear evidence of a secondary gain to the teenager; isn't that right?

A Yes.

THE COURT: I don't know if the jury knows what a secondary gain is.

BY MR. HULS:

Q They're getting something in return for making the false allegation. There's some benefit to their life for creating a lie.

A Yes. Most often in situations where there's a false allegation involving an adolescent, it's typically they want to change their living situation or cover up

consentual sexual activity that's occurring.

MR. HULS: Just one moment, Your Honor.

THE COURT: Sure.

MR. HULS: I have nothing further, Your Honor.

THE COURT: Okay. Redirect?

R E D I R E C T E X A M I N A T I O N

BY MS. ROBERTS:

Q Ms. Dutton, you have responded to some questions regarding the Roland Summit article?

A Yes.

Q And approximately when did that article come out?

A It first appeared in 1983.

Q And who is Roland Summit?

A Roland Summit is a psychiatrist. He's now retired. But he was at U.C.L.A. Harvard U.

Q And you had some questions from Mr. Huls about his intent. Are you aware of what the intent was in his research in that article?

A Yes.

Q And what was it?

A Doctor Summit's intent in writing that article was to dispel commonly-held myths that both the

general community and professionals in the field had about child sexual abuse: Namely, that if a child were truly sexually abused, they would fight back.

They would tell somebody at the first opportunity, and they would do so in a way that was clear, concise and complete. And they would never recant their allegation.

And what we found in clinical experience is that simply isn't the case.

Q And has your personal experience been consistent with the findings of Doctor Summit and his study?

A Yes.

Q You also mentioned that some of the concepts of that study have been investigated and validated?

A Yes.

Q Could you tell the jurors a little bit about which concepts have been investigated and validated?

A The concept of delayed disclosure and accidental versus purposeful disclosure were written about in an article by a Tina Sorenson and Barbara Snow.

And what they found was the majority of children who were in their study that had been confirmed to have been sexually abused, the majority of them delayed disclosure. And in fact, many children, when first asked about it, denied that they had been sexually abused.

Those authors also found that children recanted even true allegations of abuse in a significant proportion of time, and that they later reaffirmed those allegations when they were in treatment later on.

Another article -- author named John Greer has talked a great deal about how children learn to live with or cope with the abuse, based on his research with victims of sexual abuse.

Q And are you familiar with that research?

A Yes.

Q Is it contained in one article or more than--

A No.

Q -- or more than one?

A More than one.

Q And is it by more than one person than Doctor Greer?

A Yes.

Q And what has that research revealed with respect to coping mechanisms? What types of coping mechanisms?

A Well, one of the most common ways that children cope with abuse is by dissociating or just trying to put themselves mentally somewhere more pleasant as the abuse is occurring, by thinking about something more

pleasant: Imagining that they're playing with their best friend or imagining that they're somebody else, or imagining that they're out of their body up on the ceiling watching the abuse happen to them, as opposed to being in their body.

Other children, fantasize about being bigger and stronger than the offender and being able to fight back.

Still other children continued to focus on the sexual stimulation that's occurring during the abuse, especially if the offender is deliberately trying to elicit sexual arousal or orgasm in the child, and may oftentimes imagine that the offender is their boyfriend or girlfriend and that this is a desired activity, as opposed to abuse.

Q Now, you were asked a specific question about your testimony in the prior court proceeding, and you reviewed a transcript.

A Yes.

Q And is there a distinction in your mind between the term older children and adolescent teenagers, --

A Yes.

Q -- or not?

And is that -- does that distinction in your mind, go to the difference between the prior testimony and what you've told the jurors today?

A Yes.

Q Can you please explain to them what might

seem like an apparent inconsistency?

A We -- we know that in general, children do not disclose immediately. But when they do, we tend to see that in older children; not necessarily adolescents.

Q What's the distinction?

A Older children, I term as, say, six to 12 years old. Adolescents are teenagers.

Q Now, you were asked about the concept of false allegations?

A Yes.

Q And without quantifying a percentage in your experience, are false allegations common in cases such as these?

A No.

Q And what is the basis of your opinion?

A It's based on several research studies that have been conducted by different researchers in the field.

MS. ROBERTS: I don't have any further questions.

THE COURT: Okay. Thank you, Ms. Dutton. You're excused.

Hang on one second. Do you have a question?

A JUROR: I have a question, yeah.

THE COURT: Okay. Ms. Dutton, if you'll resume the stand.

The juror that just asked that was Susan

Allen.

Ms. Allen, was this question answered now by the redirect examination?

A JUROR: You know, I guess I missed that. I guess I must have missed it.

THE COURT: Let me just share this with counsel.

(Whereupon, a discussion was held at the bench between the judge and both counsel off the record.)

A JUROR: I probably missed it because I was writing a question.

THE COURT: Okay. In all fairness to both sides, I believe the question was answered. Okay? It was answered on redirect, to the extent that it can be answered.

Okay. So I'm going to give the question to my clerk.

A JUROR: So when we deliberate--

THE COURT: And, Ms. Dutton, you're free to leave.

A JUROR: When we deliberate,--

THE COURT: Excuse me, Ms. Allen. Please, if you have anything to say, put it in writing, okay? Don't say it in open court the way you just did. Thank you.

Okay. Ms. Roberts, do you want to call your next witness?

* * * *

I, DONNA FORD TERRELL, having been first duly sworn and appointed as Official Court Reporter herein, do hereby certify that the foregoing pages numbered from 2 to 35, inclusive, constitute an excerpted transcript of the proceedings had in the above matter, all done to the best of my skill and ability.

DATED this 25th day of February, 1999.

_____

COURT REPORTER