

Child Welfare Pre-Service Training

Introduction to Interviewing

Participant Guide

July 2012



The materials for the **Child Welfare Pre-Service Training** curriculum were produced by Florida International University for the State of Florida, Department of Children and Families, Office of Family Safety.

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The materials for the **Child Welfare Pre-Service Training** curriculum were formatted and edited by the Child Welfare Training Consortium at the University of South Florida.

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Module 1: Basic Interviewing Skills

Building Rapport/Engaging the Family

Demonstrate common courtesy.

- Give the family information (e.g., explain your role, describe the agency, explain what will happen next, etc.).
- Ask parents how they would like to be addressed, and correctly pronounce names.
- Be responsive and respectful of the family's cultural beliefs.
- Address and acknowledge the family member's feelings.
- Allow family members to express their feelings.

Use techniques to build rapport.

- Demonstrate the 3 core conditions: genuineness, empathy, and respect.
- Be accepting of the family, but not of the maltreating behavior.
- Be honest, consistent, persistent, and follow through.
- Do not make promises you cannot keep.
- Meet the concrete needs of the family.
- Highlight strengths, no matter how small.
- Show empathy and be responsive to family apprehension.
- Be flexible.
- Use interpersonal skills effectively:
 - strategic use of questions, summarizations
 - non-verbal skills: eye contact, appropriate body language and facial expressions
- Give the family a sense of empowerment.

Encourage parent(s) to describe their perspective of the situation/problem.

- Acknowledge difficult feelings and encourage open and honest discussion of feelings.
- Be willing to use some self-disclosure.
- Ask for the family's perspective of a problem.
- Listen and be non-judgmental.

Mirror appropriate nonverbal behaviors.

- posture
- eye contact
- body language
- facial expressions
- hand gestures

Develop a Helping/Supportive Relationship

To build rapport with a family and ultimately develop a helping/supportive relationship, specific needs must be addressed.

- The parent/family member has a need to:
 - be treated as a unique individual rather than a case, a type, or a category
 - express both negative and positive feelings
 - You may feel sympathy and understanding and respond to the feelings expressed; however, there is a delicate balance between being personally and emotionally involved with the family and maintaining a degree of professional objectivity.
 - be accepted as people of worth and inherent dignity regardless of personal problems and past failures
 - be neither condemned nor judged for the difficulties in which they find themselves
 - make their own choices and decisions
 - share limited personal information

Offer non-participating family members an explanation of the importance of their presence.

Example:

“So, you feel the problem is between your wife and children, and you’re not sure why you need to be here. I understand and appreciate you being here. One of the things we will try to figure out is if you fit into the conflicts. If you aren’t directly involved, you could possibly be a big help in resolving some of the conflicts.”

Building a Trusting Relationship

The following 3 core conditions or interviewing skills are necessary for building a trusting relationship:

Genuineness/Authenticity

Being genuine is:

- Being “you”: being congruent in what you say and do
- Being honest and open, yet focusing on the family’s situation
- Being aware of your feelings and at the same time responding to the family member in a respectful manner that opens up rather than closes communication
- Reducing the emotional distance between you and the family member and
- Helping the family member identify you as another human being similar to him/herself

Demonstrate Genuineness by

- Being yourself and balancing this with your professional role
- Making sure that your nonverbal behavior, voice tone and verbal responses match or are congruent
- Communicating trustworthiness and acceptance
- Expressing yourself naturally without artificial behaviors
- Being non-defensive and willing to admit errors
- “O.K., I guess I got that wrong. Please explain it again so I can understand.”
- Self-disclosing in a purposeful and brief manner

Self-Disclosure

- Intentionally revealing information about oneself through both verbal expressions and nonverbal behaviors (smiling, grimacing, or shaking one’s head in disbelief).
- Appropriate self-disclosure encourages family members to reciprocate with trust and openness.
- Self-disclosing responses may or may not be appropriate, depending on the family member’s motivation for asking a particular question.
 - Authentic responses, when disclosing personal information, are often very appropriate when questions appear to be prompted by a natural desire for information.
 - However, questions that appear harmless may camouflage deep concerns or troubling feelings.
- When you have questions about a family member’s motivation for making personal inquiries:
- Before disclosing views or feelings, use open-ended or empathic responses to increase the probability that real concerns are shared.
- Consider the motivation behind the questions and judge whether to disclose.

Respect

Respect is believing that there is value in each human being and that there is potential in that person as well. Respect involves:

- your attitude or value about people and your ability to communicate respect in observable ways
- valuing the family member as an individual, separate from evaluation of behavior
- recognizing the dignity and worth in each human being
- communicating care and concern

Demonstrate Respect by

- communicating warmth
- showing commitment
- recognizing and using a person's strengths
- being open-minded and non-judgmental

Empathy

Empathy is a process in which you attempt to experience another person's world and then communicate an understanding of and compassion for the person's experience.

Accurate empathy helps create a climate where the family member is willing and able to explore his/her issues and problems. Thus empathy involves:

- developing a sense of what the situation means to the other individual
- being able to see through another's eyes
- demonstrating an understanding of another's world view and experiences

Elements of Empathy

- recognizing and grasping the parent's evident feelings immediately
- identifying underlying emotions and behaviors and exploring the meaning and personal significance of those emotions and behaviors
- identifying verbal messages, subtle cues, facial expressions, tone of voice, tempo of speech, posture, and gestures that amplify and sometimes contradict verbal meanings
- attempting to understand the parent's world experiences
- understanding and being aware of pressures imposed upon the parent by others
- remaining objective and not being overwhelmed by your own emotions
- focusing on the parent's affective state without losing perspective or taking on the parent's emotions
- responding verbally and nonverbally in ways that affirm an understanding of the parent's inner experiences

Demonstrate Empathy by

- recognizing the person's experience, feelings and nonverbal communication
- communicating with words your understanding of the person's experience

Demonstrate the 3 Core Conditions

Materials

- ◆ Scenarios for PIs and CM (below)

- Convene in groups of 3 by program area.
- Assign roles as follows:
 - Interviewer: Conduct a short interview to demonstrate all 3 of the core conditions. Use the scenario information below to prepare for your interview. Remember to introduce yourself and engage the parent in a non-confrontational manner. Then, use open-ended questions to get the parent to talk about the issues/problems. Focus the parent on the children's safety and well-being.
 - Interviewee (Mother): After the PI/CM introduces him/herself and engages you, use the quote for your program area (below) to respond to the PI/CM. Keep the interview going by responding to the interviewer, and if he/she is genuine, respectful, and empathetic and convinces you that the reason for his/her concern is your children's safety and well-being, de-escalate your emotions and "ease up" your confrontational responses (PI scenario) or your excuses (CM scenario).
 - Observer: Use the checklist, "Demonstrating Authenticity, Respect and Empathy" to guide your feedback to the interviewer you observed.
- Read the scenario relevant to your program area to prepare for your role in the interview.

PI Scenario:

- Current allegation: inadequate supervision/caretaker absent; medical neglect of 3 yr old with chronic asthma.
 - Prior removal due to environmental hazards/inadequate shelter, food, clothing; and inadequate supervision/caretaker absent - children, ages 3, 5, 7
- Parent: "I can't believe you people are in my life again. There is no way that you are taking my children from me this time!"
- PI: Try to get the parent to describe the situation surrounding the allegations before specifically telling the parent the allegations; then try to focus the mother on the children's need for safety and well-being.

CM Scenario:

- Same family as PI scenario - Children removed and case plan written; timeframe - 1 month after implementation of the case plan; you are conducting a visit with the mom to check on progress with tasks-taking child to medical appointments, assuring supervision)
 - Parent: "I am trying to do everything on the case plan to get my children back. But, I feel so overwhelmed because I don't have a car, and it is hard for me to get to all the medical appointments." (Don't dwell on the transportation issues, but continue to make excuses as to why you aren't getting your child to medical appointments. Don't divulge the true reasons for not getting your 3-yr old to appointments & being overwhelmed until the CM encourages you to tell the secret to ensure your children's safety and well-being.)
- Conduct the interviews and then discuss as a small group the observers' feedback. Include: Strengths and areas of greatest difficulty

Interviewing Techniques

Scene:

The CM is conducting a home visit at the mother's place of residence. The purpose of the visit is to review the case plan tasks with the mother and to see how she is doing. The CM knocks on the front door. The mother answers.

CM: Good morning Ms. Williams. I know you are busy and have to go to work in a couple of hours, so I really appreciate your making time to meet with me to review your case plan. Is there somewhere we can sit to discuss some things?

Mother: Sure. Come in and have a seat in the living room.

CM: I see you painted your living room. I really like the color. Kaitlin told me she helped pick out the color with you and helped you paint. Based on what she told me, it sounds like she had a really good time painting with you.

Mother: Yes, we had a great time together. Kaitlin and I laughed and giggled so much together the day we painted the living room.

CM: That is good that you and Kaitlin had a fun time together. Kaitlin seems to have a great personality, and she is so smart.

Mother: I do love my Kaitlin. She is very bright and is always there for me when I need her.

CM: How are you feeling today?

Mother: Not very well. I don't feel my normal self. I have been feeling ill all week.

CM: What kinds of symptoms are you having?

Mother: I have been suffering from bad headaches all week, so I have been very irritable. Everything seems to be on my nerves.

CM: It sounds like you are not your typical self and that the headaches are affecting your patience.

Mother: It's been difficult for me to wake up in the mornings. When I finally do, I struggle to get anything done because my headaches have been getting worse. They tend to be worse later in the evenings, and all I want to do is sleep.

CM: It must be hard getting through the nights with such severe headaches. I used to get bad headaches at one time in my life. What do you think is causing your headaches? (Pause)

Mother: Well, I think it is everything that is going on in my life right now. I have all these case plan tasks to complete. It's hard for me to get to all the appointments I am being made to go to because I have to take the bus wherever I go. I am just so stressed out.

CM: Nods her head and says, "I see."

Mother: I am trying very hard to work through everything.

CM: I do see that you are trying very diligently to accomplish your case plan tasks and to ensure your children's needs are being met. Would you like to review your case plan tasks together to see what you have accomplished so far?

Mother: Nods her head and then replies in a frustrated tone of voice, "Yes."

CM: Tell me about some of the things that you have learned in your parenting classes.

Mother: Last Monday, we discussed the age and development of children and the behaviors we might see at different ages. I found some of the things that were talked about very interesting.

CM: What kinds of things did you find interesting?

Mother: Well, Kaitlin, my 7 year old, is always moping around and complaining about having to take care of the baby. After sitting through the last parenting class, I suppose some of the things I ask Kaitlin to do might be unfair.

CM: Hmm, What kinds of things?

Mother: I realized during our discussion that maybe I put too much responsibility on Kaitlin such as changing the baby's diapers and feeding the baby all the time. It's just because she is the oldest, and I have a two and a four-year old as well, so I am always looking to her for help.

CM: So, you recognize that maybe you expect too much from your 7 year old. Now that you recognize it, what are some solutions that you can think of to take away some of Kaitlin's responsibilities?

Mother: I could start by taking on the responsibilities of changing and feeding the baby to allow more time for Kaitlin to be a child and do some of the things she enjoys doing.

CM: I think that allowing Kaitlin more time to do the things that a 7-year old would want to do will make her happy. It sounds like that is the first step in a good plan of action. In turn, because you are allowing her to have her own quality time, she may be more willing to help with the baby. I definitely support and recommend that you try giving her more time to herself. Let me know how that works out.

You also stated that you are having terrible headaches due to being stressed out about your case plan tasks. Let's talk about your daily routine and work out a schedule that will help you feel less stressed. Let's include some time for you to do something that you enjoy.

CM and mother work on a schedule and then discuss the rest of the case plan tasks.

CM: It appears as though you are conscientious about attending your parenting classes and that you are learning about your own behavior patterns as well as age appropriate behavior of your children. Let's review the highlights of our visit today and the upcoming tasks.

Today we reviewed the rest of your case plan tasks, and we discussed that you have two more sessions left for your parenting classes before you receive your certificate. You have a full time job at Publix, and you have provided me with copies of your pay stubs. Since you have completed your individual therapy sessions, the therapist has recommended that your children begin family therapy next week. Today we also wrote a daily schedule to help you feel less stressed, and it included setting aside 1 hour at night for you to do what you enjoy most, which is reading. And, you have agreed to see your doctor about the headaches.

You are really achieving the goals that you have set for yourself, and you should be proud of your accomplishments. I know you must feel really good about yourself.

The next judicial review hearing is scheduled in three weeks on Tuesday, November 15 at 10:00 am. Our next scheduled visit is next week, Thursday, at 3:00 p.m. At that time, I would like to find out how your family therapy session went. Do you have any questions or thoughts that you would like to share?

Mother: I really hadn't thought about all the things I accomplished. Thank you.

CM: Sure. I will see you next Thursday at 3:00 pm. I am so glad that you took the time to talk with me and share your thoughts and what you are learning in the parenting class. I look forward to our next visit.

Checklist: Demonstrating Authenticity/Genuineness, Respect, and Empathy

Authenticity/Genuineness

- Be yourself and balance this with your professional role.
- Be sincere and open.
- Express yourself naturally without artificial behaviors.
- Make sure that your nonverbal behavior, voice tone and verbal responses match or are consistent.
- Communicate trustworthiness and acceptance.
- Be non-defensive.
- Self-disclose in a purposeful and brief manner.

Respect

- Recognize the dignity and worth in each human being.
- Value the family member as an individual; separate from his/her behavior.
- Communicate care and concern.
- Communicate warmth.
- Show commitment.
- Recognize and use a person's strengths.
- Be open-minded and non-judgmental.

Empathy

- Recognize the person's experience, feelings and nonverbal communication.
- Express/demonstrate understanding of and compassion for the person's feelings and experiences.

Interviewing Techniques: Exploring

All 3 interviewing techniques (exploring, focusing, directing) incorporate the 3 core conditions: authenticity/genuineness, respect, and empathy.

Active Listening

Active listening is used to empower families to explore and discuss topics. It conveys your understanding of their situation. Listening:

- Is the most powerful interpersonal helping skill that promotes rapport/builds trust
- Is an active process and requires you to focus on what the family member is saying in both the
 - **content** of the message and
 - **emotional process** of the message
- Involves using both verbal and nonverbal messages to communicate your understanding of the family member's experience

Interviewer Techniques

- Focus verbal responses on what the person is describing, how the person is feeling, or both.
- Reflect what the person is saying and/or reflect what the person is feeling.

Example:

- "Sounds like you are concerned about being alone and at the same time relieved that your children are safe."

Attending Behaviors

Use these behaviors to convey respect, acceptance, and trust to family members. The two categories of attending behavior are physical and psychological attending.

Physical Attending

Physical attending is the intentional use of the environment and body to demonstrate respect for, acceptance, and interest in the family member.

- Create a comfortable environment absent of distractions.
- Assure open communication by not placing barriers between you and the family member.

Psychological Attending

This behavior involves observing and listening to the family member and responding.

- Observe the person's nonverbal behavior.
- Listen to what the person's voice communicates.
- Assess the congruence between the person's words and behaviors.

Interviewing Techniques: Exploring Reflecting

- Rephrase the statement to reflect the content and interviewee's feelings.

Examples:

- "It sounds like you are feeling stressed out."
- "You seem happy about getting your certificate."
- "What I am hearing you say is ..."

Encouraging

- Use minimal encouragers to elicit additional information.
- Nod your head and/or repeat words or phrases.

Examples:

- "I see", "Uh huh", "Of course"
- "Oh, can you tell me more?" or
- "Um-hmm" or "Really?"

Allowing Silence

Many interviewers are uncomfortable with silence and feel the need to keep the communication flowing. However, there are benefits to allowing silence:

- Allows interviewer and interviewee to process information.
- Can also be used to allow for de-escalating a situation.

Interviewing Techniques: Focusing

Reframing

Reframing is helping the person change his/her frame of reference so that the problem can be approached in a positive way.

Interviewer Techniques

- Assist the family member to identify a different framework for understanding and responding to a problem.
- Reframe change as a manageable stage leading to a new opportunity.

Example:

- Mother: "My husband tells me that I really need to get into treatment and deal with my problems. He is such a nag and is always telling me what to do."

This can be reframed this by saying:

- "Your husband must care a lot about you to tell you something he feels is important to you, knowing that you will likely get angry with him."

Clarifying

Clarification is a process you use to:

- Help family members develop an understanding and awareness of their feelings, thoughts and behaviors; and
- Facilitate the development of awareness and understanding of self

Examples:

- Parent: "I kicked my boyfriend out because I want my children to be safe. However, I am stressed out because I really don't know how I am going to afford to raise 2 kids on my own being a single parent and all."
- PI/CM: "I can see that keeping your children safe is the most important thing to you while at the same time you are concerned about not having enough money to support your children."

Questioning

Questions are used to focus a conversation and must be used carefully and sparsely.

Types of Questions

Effective communication involves combining different types of questions:

- Open-ended questions
- Closed-ended questions
- Indirect questions
- Solution-focused questions

Interviewing Techniques: Focusing

The Role of Questions

Questions assist the interviewer:

- Extend the range and depth of the interview
- Facilitate problem-solving
- Make transitions
- Clarify issues or situations
- Ensure all relevant information is disclosed

Questions help the interviewee:

- Tell his/her story and elaborate
- Organize thoughts
- Consider alternatives
- Model the interviewer's approach to problems

Open-ended Questions

Open-ended questions are used to encourage communication, gather information, and explore issues.

- Encourage narrative and free response
- Cannot be answered with a "Yes," "No," or other short answer
- Encourage interviewees to reveal areas of greatest concern
- Imply interest and respect for the interviewee and his/her ideas
- Questions starting with the words "How" or "What" encourage the person to explore and allow expression of feelings, views, and perceptions.

Examples:

- How you think this may have happened?
- What is another way that you might be able to address this problem?
- "What do you do when ___ happens?"
- "How do you think the agency can help?"

CAUTION: Too many open-ended questions can

- Threaten interviewees
- Be time-consuming
- Further alienate resistant interviewees

Interviewing Techniques: Focusing

Closed-ended Questions

Closed-ended questions can be answered with 1-2 words and

- are used to gather specific factual information
- provide direction when a family member is stalled or confused
- provide clarity and focus
- give the interviewer a way to introduce a topic the interviewee may be reluctant to bring up
- begin with who, when, will, is, or where

Examples:

- “Where do you work?”
- “Is Ted your uncle?”

CAUTION: Too many closed-ended questions can

- limit disclosure of information
- influence the interviewee to be a passive supplier of answers
- limit disclosure of feelings or intensity of feelings

Indirect Questions

Indirect questions are statements that imply a question. They can be used to explore sensitive subjects and can lessen the harshness of a series of questions:

Examples:

- “Tell me...” or “I’ve been wondering...”

The Continuum from Open to Closed-ended Questions:

- Ask open-ended questions to start the interview.
- Then move to more closed-ended questions to fill in information.
- Once the information is supplied, ask more open-ended questions again.
- The process of moving from open-ended to closed-ended questions must be repeated throughout the interview.

Interviewing Techniques: Focusing

Solution-focused Questions

Solution-focused questions are used to:

- Move from reframing to solutions
- Empower families to find their vision of success and their own strategies that have worked or will work for them

Examples:

- Parent: "I love Susan, and I want her to be safe."
- PI/CM: "How do you think you can make sure that Susan is safe every day?"
- PI/CM: "What would work for you and your family?"

Questions to Avoid

- "Why" questions make family members feel the need to justify and defend responses when they may not even understand "why."
- Leading or suggestive questions are inappropriate because they influence an interviewee to answer in a way the interviewer desires.

Example: the tag question:

- A statement is followed by a phrase like, "Don't you?" or "Did you?"
- Multiple questions
- Antagonizing questions

Summarizing

- Helps to synthesize a wide range of facts and feelings communicated.
- Contains no new or additional information, but brings together information regarding facts or feelings previously discussed.
- Can be used for a variety of purposes to:
 - Help focus the interview in rambling or disjointed conversations
 - Check your understanding of what the person is saying
 - Highlight contradictions or ambivalence i.e. "I am confused."
 - Structure the interview, particularly at the beginning and the end

Example:

Mother has been talking about her drug use and complaining about having to take time to talk with PI/CM. She expresses concern about how her use is affecting her children and how it is affecting her life.

PI/CM: "Let me stop and summarize what we've just talked about. You're not sure that you want to be here today, and you really only came because you love and care for your children. At the same time, you've had some nagging thoughts of your own about what's been happening, including how much you've been using recently, the safety of your children, and financial concerns. Did I miss anything?"

Interviewing Techniques: Directing

Give options, advice, support, direction or suggestions.

- To provide an opinion or suggestions to direct the person into a specific course of action.
- Using directing skills can provide options that the family member had not considered.
- Most effective after the family has come up with their vision of success and some steps they will take to begin to reach the vision.

Example:

- Mother: "I am really stressed out because I don't know how I am going to raise two children on my own being a single parent and all."
- PI/CM: "It seems like today there are more single parents raising children than two parent households. Because there are so many single parents raising children, there are many services offered in the community. I also know of several support groups that are offered in the community. I will be more than happy to go over some of the services and support groups that you may be interested in to help you through this difficult time."

Provide effective feedback.

- Use both positive and negative feedback to:
 - Reinforce or maintain desired behavior or to
 - Change behavior where needed
- Provide tangible or intangible approval for behavior and actions through:
 - Positive feedback
 - Positive reinforcement
 - Supportive statements
- Positive rewards are motivators and can empower the family into action.
- Effective feedback on strengths, needs, and/or progress are essential for the family to be aware of:
 - What is or is not working
 - Consequences of their behavior, both good and bad
 - Issues that they either avoided or did not consider

Example:

Mother: "I enrolled in the substance abuse treatment program yesterday."

PI/CM: "I commend you for having the courage to admit you have a substance abuse problem and that you are seeking assistance to improve the quality of your life and the lives of your children."

Interview Process Job Aid

Prepare

Engage the Family/Build Rapport

Begin/Conduct the Interview

- **Explore the issues/problems/causes.**
 - Ask open-ended questions that encourage parents to “tell their story.”
- **Ask Focused (more specific) questions as you learn information.**
 - Encourage the parent to explain or elaborate upon a new or current issue/problem/situation disclosed during the interview.
- Clarify your understanding of what the parent is saying.
- **Continue: Exploring → Focusing → Exploring → Focusing**
 - Look for verbal and non-verbal cues to...
 - Ask follow-up questions.
- **Explore Solutions.**
 - Ask solution-focused questions that solicit the parent’s idea of how to meet the child’s needs (safety, permanence, well-being).
- **Offer options, suggestions, support, direction. (Directing)**
 - To direct parents into a specific course of action provide feedback about what “is” and “is not” working.

Close the Interview

- Summarize accomplishments/decisions.
- Use praise.
- Invite questions.
- Inform parent re: what comes next

Interview Skills Checklist

Place a check by each skill you observe.

Core Conditions

- Genuineness/Authenticity
- Respect
- Empathy

Exploring Skills

- Active Listening
- Attending Behaviors
- Reflecting
- Encouraging
- Allowing Silence

Focusing Skills

- Reframing
- Clarifying
- Questioning:
 - Open-ended Questions
 - Closed-ended Questions
 - Indirect Questions
 - Solution-focused Questions
- Summarization

Directing Skills

- Give Options or Suggestions
- Give Advice, Support, or Direction
- Provide Effective Feedback

Interviewing Techniques: Script & Key

Some of the interviewing techniques and skills for this demonstration are identified next to the dialogue below. Use this key to assist in the facilitation of class discussion during your dialogue with the mother. Following the demonstration, use PG17, Interview Process Job Aid to emphasize the interview process.

Scene:

The CM is conducting a home visit at the mother's place of residence. The purpose of the visit is to review the case plan tasks with the mother and to see how she is doing. The CM knocks on the front door. The mother answers.

CM:

Good morning Ms. Williams. Thank you for taking the time out of your morning to meet with me to review your case plan. I know you are busy and have to go to work in a couple of hours, so I really appreciate your making time to meet with me. Is there somewhere we can sit to review some things? **(Engagement/Introduction-3 Core Conditions-Respect/Genuineness)**

Mother:

Sure. Come in and have a seat in the living room.

CM:

I see you painted your living room. I really like the color. Kaitlin told me she helped pick out the color with you and helped you paint. Based on what she told me, it sounds like she had a really good time painting with you. **(Engagement/Building Rapport)**

Mother:

Yes, we had a great time together. Kaitlin and I laughed and giggled so much together the day we painted the living room.

CM:

That is good that you and Kaitlin had a fun time together. Kaitlin seems to have a great personality, and she is so smart. **(Engagement/Building Rapport-Genuineness)**

Mother:

I do love my Kaitlin. She is very bright and she is always there for me when I need her.

Debrief: (Prior to beginning the interview): How did the interviewer engage the mother and build rapport?

CM:

How are you feeling today? **(Exploring: Using Open ended question)**

Mother:

Not very well. I don't feel my normal self. I have been feeling ill all week.

CM:

What kinds of symptoms are you having? **(Exploring/Focusing)**

Mother:

I have been suffering from bad headaches all week, so I have been very irritable. Everything seems to be on my nerves.

CM:

It sounds like you are not your typical self and that the headaches are affecting your patience.
(Reflection)

Mother:

It's been difficult for me to wake up in the mornings. When I finally do, I struggle to get anything done because my headaches have been getting worse. They tend to be worse later in the evenings, and all I want to do is sleep. **(Counselor-Active Listening)**

CM:

It must be hard getting through the nights with such severe headaches. **(Empathy)** I used to get bad headaches at one time in my life. **(Self-Disclosure)** What do you think is causing your headaches? (Pause, use of **Silence** to give mother time to process)

Mother:

Well, I think it is everything that is going on in my life right now. I have all these case plan tasks to complete. It's hard for me to get to all the appointments I am being made to go to because I have to take the bus wherever I go. I am just so stressed out. **(Counselor- Active Listening)**

CM:

Nods her head and says, "I see." **(Encouragement–minimal encouragers)**

Mother:

I am trying very hard to work through everything.

CM:

I do see that you are trying very diligently to accomplish your case plan tasks and to ensure your children's needs are being met. Would you like to review your case plan tasks together to see what you have accomplished so far? **(Encouraging, Questioning-closed ended)**

Mother:

Nods her head and then replies in a frustrated tone of voice, "Yes."

CM:

Tell me about some of the things that you have learned in your parenting classes.
(Explore/Focus - Indirect question)

Mother:

Last Monday, we discussed the age and development of children and the behaviors we might see at different ages. I found some of the things that were talked about very interesting.

CM:

What kinds of things did you find interesting? **(Explore: Open ended question)**

Mother:

Well, Kaitlin, my 7 year old, is always moping around and complaining about having to take care of the baby. After sitting through the last parenting class, I suppose some of the things I ask Kaitlin to do might be unfair.

CM: Hmm, What kinds of things? **(Minimal Encourager)**

Mother: I realized during our discussion that maybe I put too much responsibility on Kaitlin such as changing the baby's diapers and feeding the baby all the time. It's just because she is the oldest, and I have a two and a four-year old as well, so I am always looking to her for help.

CM: So, you recognize that maybe you expect too much from your 7 year old. Now that you recognize it, what are some solutions that you can think of to take away some of Kaitlin's responsibilities? **(Clarification) and (Solution-focused question-Explore Solutions)**

Mother:

I could start by taking on the responsibilities of changing and feeding the baby to allow more time for Kaitlin to be a child and do some of the things she enjoys doing.

CM:

I think that allowing Kaitlin more time to do the things that a 7-year old would want to do will make her happy. It sounds like that is the first step in a good plan of action. In turn, because you will be allowing her to have her own quality time, she may be more willing to help with the baby. I definitely support and recommend that you try giving her more time to herself. Let me know how that works out. **(Options, directions, feedback, suggestions)**

You also stated that you are having terrible headaches due to being stressed out about your case plan tasks. Let's talk about your daily routine and work out a schedule that will help you feel less stressed. Let's include some time for you to do something that you enjoy.

(Reframing)

CM and mother work on a schedule and then discuss the rest of the case plan tasks.

CM: (Interview Closing) It appears as though you are conscientious about attending your parenting classes and that you are learning about your own behavior patterns as well as age appropriate behavior of your children. Let's review the highlights of our visit today and the upcoming tasks. **(Summarizing)**

Today we reviewed the rest of your case plan tasks, and we discussed that you have two more sessions left for your parenting classes before you receive your certificate. You have a full time job at Publix, and you have provided me with copies of your pay stubs. Since you have completed your individual therapy sessions, the therapist has recommended that your children begin family therapy next week. Today we also wrote a daily schedule to help you feel less stressed, and it included setting aside 1 hour at night for you to do what you enjoy most, which is reading. And, you have agreed to see your doctor about the headaches. **(Summarizing)**

You are really achieving the goals that you have set for yourself, and you should be proud of your accomplishments. I know you must feel really good about yourself. **(Praise)** The next judicial review hearing is scheduled in three weeks on Tuesday, November 15 at 10:00 am. Our next scheduled visit is next week, Thursday, at 3:00 p.m. At that time, I would like to find out how your family therapy session went. **(Inform parent re: What comes next.)** Do you have any questions or thoughts that you would like to share? **(Invite Questions)**

Mother: I really hadn't thought about all the things I accomplished. Thank you.

CM: Sure. I will see you next Thursday at 3:00 pm. I am so glad that you took the time to talk with me and share your thoughts and what you are learning in the parenting class. I look forward to our next visit.

The Crystal Smith Interview

Materials

- ◆ PG17 Interview Process Job Aid
- ◆ PG18 Interview Skills Checklist

Discussion Questions

Discuss/Answer the following questions with your group members following the video:

1. How does the interviewer engage the mother and build rapport?

2. How does he exhibit the 3 core conditions:
Genuineness?
Respect?
Empathy?

3. Does he use his **authority** effectively and appropriately? How?

4. Explain his interviewing skills to:
 - “Explore” issues, problems, and solutions?
(listening, reflecting, encouraging, allowing silence)
 - “Focus” the interview questions to learn more about an issue/problem or clarify his understanding of what the parent was saying?
(Reframing, clarifying, questioning, summarizing)
 - “Direct” the interviewee?
(advice, support, reassurance, options, feedback)

5. What are the interviewer’s strengths and “areas for improvement”?

Interview Questions

6. Skim the next 9 pages, **Adult Interview Questions** and discuss/record how the interviewer gathered information for the topics under the following assessment categories:
 - The Family Environment
 - Parenting and the Parent’s (Crystal’s) Relationship with her Children
 - Vulnerability of the Children

7. Are these topics relevant to initial and on-going assessment? Discuss your reasons.

Interviewing Adults: Family Environment

Basic Resources	Nature of Crisis in Family
<p>Receiving basic resources often removes the threat of maltreatment. It is important to identify the role that poverty and the lack of basic resources plays in maltreatment situations. Appearances are deceiving. The seeming lack of a basic resource does not automatically render a child unsafe. For instance, just because there is no food in the cupboards, does not mean that there is maltreatment. If the children eat breakfast and lunch at school every day and eat supper at their grandmother's house every night, then they are being adequately fed and the lack of food in the house is not a threat to their safety. Explore ways the family is coping with their situation and providing for their children:</p> <ul style="list-style-type: none"> • How do you feel about things here at home on a day-to-day basis? • If you could have something that would make it easier for you to take care of your home and children, what would it be? • What is happening when you are feeling overwhelmed with the responsibilities of running a home? • Has there ever been a time when you were worried about or not able to provide meals, adequate clothing, or housing for your family? How did you manage to get through that? • What items do you buy at the grocery store on a regular basis? <ul style="list-style-type: none"> • How much do you usually spend and how often? • Are you satisfied with what you can provide for your children? • Have you ever had your utilities turned off? If so, why? 	<p>Families who are experiencing a crisis as the result of an isolated situation are usually much better able to provide safe and stable homes for their children in the long-term. Families who are in constant crisis often represent a greater safety risk to the child; they generally require more support in their efforts to provide a safe home for the child. Explore the nature of the crisis:</p> <ul style="list-style-type: none"> • Can you tell me why you think I am here or why you think the report was made to the department? • What are the most important needs in your family that you would like to address first? What is the next important need you have? What next? • Can you describe your family for me? • Is there anything happening in your life/family right now that is upsetting for you? <ul style="list-style-type: none"> • How are you dealing with it? • Do you think that my being here might be of any help to you? • Who has helped you in the past? How was their assistance helpful? • What might prevent you from requesting help again?

Interviewing Adults

Parenting/Parents' Relationship with the Child

Outside Supports Used/Family Isolation	Domestic Violence
<p>Because they are less visible, it is more challenging for isolated families to deal with stress or crisis because they have less opportunity to receive assistance for their needs from outside sources such as extended family members or other agencies or social workers. Explore the family's current or potential supports/assistance and their visibility in the community.</p> <ul style="list-style-type: none">• Who do you talk to when you have a problem?• If you ever need help, is there someone you can ask who would help you?• Do you have any other family members close by that you can confide in?• How often do you have contact with you family members? How often do they visit you?• Has any other social worker or a nurse ever been out to your home to visit you or the children? How often did they come? Do you remember the purpose of the visit and what the result was?• Do you and/or the kids go to church/mass? How involved are you in your church/synagogue? Do you talk to your minister/priest/rabbi?• Have you ever visited your child's school? Who did you meet with? What did you discuss?<ul style="list-style-type: none">• Do you go to the school holiday shows, open houses or PTA meetings?• Do you ever talk to your child's teachers?• What do you do to let off steam when the stress is too much?• How do you spend your day?	<p>The presence of domestic violence in a home greatly increases the likelihood that child maltreatment is also occurring or will occur and that the child will not be safe in the home. It is important to keep in mind that domestic violence may be occurring whether the batterer resides in the home or not. Explore relationships with the spouse/paramour:</p> <ul style="list-style-type: none">• Are you involved in a relationship at this time?• How would you describe your relationship with your spouse/partner?• Have you ever had disagreements with your partner about major or minor household/family issues?• Who makes most of the decisions in the family?• How often do you disagree and how are your disagreements usually handled?• When you get very upset or frustrated during a disagreement with your partner, what usually ends up happening?• Have you ever felt that your point of view was not important to your partner?• Are you ever afraid to disagree with anyone in the family?• Do you think that you and your (spouse, paramour) disagree more than normal?• Have you ever had to miss an important function like church, school, or work due to something that happened between you and your partner?• Have you or your partner ever handled an argument by name-calling, yelling, damaging property or becoming physically aggressive? What happened?• Have you or your partner ever had to seek medical attention after ____?

Interviewing Adults

Parenting/Parents' Relationship with the Child

Parent's History	Family's Perception of Situation
<p>It is important to know the history of any parents in the home because parents often use many of the same parenting approaches and techniques that were used with them as children. Ask questions and make observations that will provide insight about power struggles in the home, how discipline and power issues are resolved and how they were resolved in the parent's family, dominance of one adult over another/fear of adult in the household, level of parent's self-esteem, or a child's fear of a parent.</p> <ul style="list-style-type: none">• How were you disciplined as a child?• How do you discipline your children?• How did your parents resolve their disagreements?• How were your disagreements with your parents or siblings resolved?• How do you feel about the way your parents resolved disagreements?	<p>All people have different perceptions of what makes a safe home for a child and what acceptable child-rearing practices are. The family needs to be clear about why you are in their home and what the agency perceives as a problem. If the parent's behaviors are placing the child(ren) at risk of abuse or neglect AND the parents have no clue as to why their behaviors are unsafe, then the parents may have difficulty providing the child a safe home.</p> <ul style="list-style-type: none">• What things do you think your child needs to keep him/her safe?• Tell me why other people might think (maltreatment) is a problem.• Do you think that it is a problem for your family?• Do you think that there is a problem that we could work on together?• What do you think could help?

Interviewing Adults

Parenting/Parents' Relationship with the Child

Parent's Perception of Child/Attitudes toward Child	Parent's Willingness/Ability to Care/Protect the Child
<p>If parents perceive a child as contributing to causing any of the family's problems, then he/she is at increased risk for abuse/neglect. Unrealistic expectations of children at certain ages and developmental levels may place the child at risk for maltreatment. (Refer to Child Vulnerability.)</p> <p>What kinds of things do you do with your children?</p> <ul style="list-style-type: none">• How would you describe a good child?<ul style="list-style-type: none">• Is ___ usually a good child?• Does your child seem to require special attention?• Does your child feel close to you?• How does your child show closeness or lack of closeness?• Can you describe for me what today has been like? The last few days?• Has anything particularly bothersome or bad happened in the last day or two?• What has ___ been doing today? How does ___ usually behave?• What can ___ do to keep this from happening again?• What can you do to keep this from happening again?	<p>A parent's inability to care for the child may be due to illness, incapacitation, lack of resources, or domestic violence, etc. If a parent is unwilling to protect a child from future maltreatment, the child is at imminent risk.</p> <ul style="list-style-type: none">• Do you believe what (child) says about (maltreatment incident)?• Does (alleged person responsible) have any access to any of the children in the family now?<ul style="list-style-type: none">• Do you think that you can keep (maltreatment) from happening again?• How will you keep ___ from happening again?• Are you willing to take care of ___ for a while by yourself and not let ___ around any of your children?• How does (perpetrator's) not being allowed in the home affect you financially?• Are you afraid of (alleged abuser)?

Interviewing Adults Parenting/Parents' Relationship with the Child

Discipline Practices	Substance Abuse
<p>There is a difference between corporal discipline and abuse. If an intended disciplinary act leaves lasting marks on a child, results in the need for medical attention, or is extremely bizarre or sexual in nature, it is not discipline; it is abuse. The spanking of a child with a belt, switch, etc. in and of itself does not constitute abuse.</p> <ul style="list-style-type: none"> • What does discipline mean to you? <ul style="list-style-type: none"> • Do you think there is a difference between discipline and punishment? • What types of behaviors should be disciplined? • Why do you discipline? <ul style="list-style-type: none"> • What do you think that discipline tells a child? • How do you usually discipline your child? • What kinds of discipline do you believe are appropriate for (whatever is age-appropriate): <ul style="list-style-type: none"> • wetting bed, wetting pants, spilling drink • running and shouting • sassing, lying, stealing, smoking, etc. • What kinds of discipline do you believe to be appropriate for _____? (child's name) • How often do you discipline? 	<p>Substance abuse in and of itself in a home does not constitute abuse or neglect (A/N). However, it may be related to past A/N or results in behavior that threatens A/N. Substance abuse impairs the ability to adhere to a safety plan or to case plan tasks.</p> <ul style="list-style-type: none"> • Has law enforcement ever been involved with your family because of alcohol/drugs? • Has your job or a relationship with a partner ever been affected by your drug or alcohol use? • How often do you drink/use (drug)? <ul style="list-style-type: none"> • Do you ever feel like you drink/use (drug) too often? • When do you know you've had enough or too much? • Do you hide empties and dispose of them secretly? • Have you ever been concerned about the amount you drink or use drugs? • Has anyone ever told you that they think you have a drinking or a drug problem? • When do you usually drink or use drugs? • Have you ever failed to pay a bill or buy necessary items because you instead used the money to buy alcohol or drugs? • Do you drink or use drugs when under pressure or after an argument? • Have you ever tried to hide your drinking or use of drugs? Why? • Do you wonder if anyone knows how much alcohol and/or drugs you use to get through the day or how much you spend on them? • Are you often permissive with your children because you feel guilty about the way you were behaving when you were drinking or using drugs? • What happens in the home when drinking/drug use occurs? <ul style="list-style-type: none"> • How do the drugs/alcohol affect your personality? • Do you ever leave home? <ul style="list-style-type: none"> • Who takes care of the children? • Is there someone else (older sibling, relative, neighbor) who can take care of the child(ren) when drinking/drug use occurs?

Interviewing Adults

Parenting/Parents' Relationship with the Child

Discipline Practices	Substance Abuse
	<p>RED FLAGS that substance abuse (SA) may lead to future A/N: Parent/caretaker:</p> <ul style="list-style-type: none">• is spending all money on alcohol/drugs and lacks adequate resources to care for family.• becomes violent when using drug or alcohol• becomes depressed when using drug/alcohol• uses tactics to conceal amount of drugs/alcohol purchased or consumed• has blackouts or periods of forgetting because of SA• carries substance on person in purse or pocket• becomes defensive when asked about the abuse• uses substance when under pressure or after an argument• tries to cover up for forgetting commitments, losing or misplacing things• uses substance to self-medicate, escape, or sleep• has lost job or been disciplined because of SA• has lost relationships because of SA

Interviewing Adults

Child Vulnerability

Child's Age, Ability, and Developmental Level	Child's Visibility in the Community
<p>The child's age and ability to protect him/herself and adhere to a safety plan are critical factors in determining child safety. Ask questions which explore the child's physical, intellectual, social, and emotional development. Children who are abused/neglected are often delayed in their development or may show abnormal patterns of development.</p> <ul style="list-style-type: none"> • Tell me about your child's health? • What was it like when you were potty-training your child? • Has your child ever been treated for a developmental problem? • Do you feel that your child's physical abilities match other children his/her age? • Do you think that your child learns (at school or other) the same as other children his/her age? • What kinds of activities does ____ like? • What toys/games does ____ like to play with? • Does ____ like to read (or be read to)? What kinds of things does ____ read? 	<p>Visibility is a very important safety consideration. The less interaction a child has with people outside the home, the less likely that maltreatment, if it exists, can be detected. Children who are very young/non-verbal are especially invisible because staying indoors is normal. Explore the child's visibility outside the home:</p> <ul style="list-style-type: none"> • Does ____ go to school/pre-school/daycare? • What activities does ____ enjoy? • What activities does ____ regularly participate in? (e.g. church, Boys/Girls Club, sports in school or at neighborhood parks) • How often does ____ play outside? Who watches him/her? • Tell me about ____'s friends. • Does ____ ever have friends come over to play? Who comes over? • Does ____ ever play with or visit friends at their homes? • Whose homes do your child visit? (neighbors, relatives, classmates, other) <ul style="list-style-type: none"> • How often? • Who supervises?

Interviewing Adults Child Vulnerability

Child's Role in the Family/Unrealistic Expectations	Access to Child by Alleged Person Responsible
<p>Children who are expected to fulfill roles that are inappropriate are more vulnerable to being objects of frustration, disappointment, or criticism. Unrealistic expectations of children at certain ages and developmental levels may place the child at risk for maltreatment.</p> <p>Explore the parent's expectations for the child: Is the child: expected to take on the role as "parent" by supporting or protecting other family members; described by parents as contributing to or creating stressful situations in the family; described as "a disappointment" or "a failure" for not meeting expectations? (Refer to Parenting, "Parent's Perception of Child.")</p> <ul style="list-style-type: none"> • What expectations or responsibilities were given to you as a child? • What chores does your child help you with? • Do you feel that your child is helpful around the house? • Does he/she ever refuse to do the chores they are assigned? • How do you respond to your child's resistance? 	<p>If maltreatment is suspected, the greater access to the child by the alleged person, the more vulnerable the child is, especially if the child is too young to protect him/herself. (Refer to Parenting: Parent's Willingness to Protect the Child)</p> <ul style="list-style-type: none"> • How do you feel about (Insert Perpetrator's Name)'s inability to have contact with your child? • Why do you believe it is so important that (Insert Perpetrator's Name) does not see your child until the court order says it's okay? • What do you think would happen if the child had contact with (Insert Perpetrator's Name) prior to the judge ordering it?

Interviewing Adults Child Vulnerability

Children with Medical or Psychological Special Needs

The presence of a special needs child in a home may place increased stresses and frustration on a family which may potentially increase that child's vulnerability to maltreatment.

- Do any of your children have an ongoing medical problem?
- How do you think ___ copes with his/her illness? How do you and other family members cope with his/her illness?
- Have you ever sought medical attention for anything other than the normal childhood ailments (measles, mumps, colds, etc.)?
- Has your child ever received services from a counselor or psychiatrist? Who made the referral? Why?
- If child has ever received services, how do you believe he/she benefited? Why did services terminate?
- Has your child ever had to abruptly stop services with a provider? Why?
- What mental health services are being provided to your child at this time?
- What have doctors/nurses/school counselors ever told you about your child?
- Do any of your children display extraordinary behaviors? (e.g. hyperactivity, uncontrollability, self-injuriousness)
- Has your child ever told you or anyone that he felt unsafe, or like harming himself/herself?
- How did you or that person handle the situation?
- Has your child ever made an attempt to hurt himself or another person?
 - What happened?
- Have you ever had to call law enforcement to control one of your children?
- Has your child ever been admitted to an emergency room or hospital because their behavior was out of control?
 - What happened?

Module 2: Facilitating the Interview

Stages of the Interview

Preparation

- Consider the purpose of the interview.
- Obtain and analyze available information; obtain additional information, if necessary.
- Decide who will be interviewed; when; and where
- Decide what information needs to be obtained based upon the purpose/type of interview.
- Develop a checklist with major points to cover during the interview.
- Consider how you will engage the interviewee and build rapport.
- Plan your introduction/greeting with the family.
- Plan when and how you will document/take notes.

Engagement

There are two important processes within the engagement stage: engaging the family and building rapport. Strategies to engage the family and build rapport are:

- Introduce yourself (show/display ID), explain your role/agency; state the purpose for your visit.
- Once inside, initiate informal conversation and point out something positive.
- Build rapport by demonstrating authenticity/genuineness, respect, empathy.
- Be responsive and respectful of the family's perspectives, strengths, culture.
- Address the family's needs.

The Interview

- Obtain information that addresses the purpose for the interview.
- Use your checklist to ensure that you cover all major points.
- Focus on the child's needs for safety, permanence, and well-being.
- Use interviewing techniques that facilitate the interview. (listen, reflect, encourage, reframe, clarify, question, give options/feedback, summarize)
- Build a trusting relationship: demonstrate genuineness, respect, empathy.
- Be aware of your non-verbal (eye contact, facial expressions, nods, smiles, looks of concern) and paralinguistic behaviors (moderate calm speech, etc).

Closing

- Summarize what has been accomplished and what is left to accomplish.
- Use praise to recognize efforts.
- Invite questions and answer them honestly.
- Offer assurance and support; avoid unrealistic reassurances or promises.
- Thank the person(s) and set a time and date for the next interview.

Documentation

- Decide how and when note-taking is appropriate.
- Document the interview in FSN.

Planning for an Interview

WHO?

- Analyze available information.
- Decide who should be interviewed.

Who should be involved and who is involved?

- If other providers are involved, do the following:
 - Get the family/family member's permission to contact other providers.
 - Contact other counselors to collaborate.
 - Elicit the treatment provider's perception of the family's difficulty.
- Find out:
 - WHO did WHAT to solve WHICH problem?
 - What WORKED?
 - What DID NOT WORK?
 - What goals have been established by the other providers?

WHAT?

- Decide the purpose of the interview to focus on gathering information.
 - Goals for the interview
 - Specific information to gather
- What behavior must be purposefully modeled for this family?
 - Reasonable thought
 - Problem-solving
 - Consistency
 - Maturity
 - Attentiveness
 - Communication
 - Sincerity and respect
 - Limit-setting

WHEN?

- Florida Statute and Administrative Code include requirements for when and where interviews/contacts by PIs/CMs must occur. Refer to the Checklists for PIs and CMs, "Contacts/Interviews" to locate cite references for:
 - initial contacts and monthly contacts
 - shelter contacts
- Decide the best time of day for the interview:
 - Consider parents' work schedules and children's school schedules.
 - How much time should be scheduled for the interview?

WHERE?

The Interview Setting

The setting must:

- Allow honest and open discussion.
- Allow observation of the family's typical ways of functioning.
- Allow the family the greatest degree of safety and confidentiality.
- Protect all participants from the actions of family violence.
- Help provide reliable and relevant information.

HOW?

Plan how to conduct the interview.

- Decide what information to collect.
- Consider how to elicit the information needed or what techniques to use to accomplish goals.
- Examine any additional sources (e.g., prior client history and records, significant others, and other service professionals).

Plan for contingencies in case things don't go as anticipated.

- How will this new information be handled?
- How will you handle letting the family know that information that is revealed cannot be suppressed?
- Information revealed relating to child safety cannot be overlooked. You will need to discuss the purpose and use for the information discussed.

? Should you allow it to surface and remember it for future interviews?

? Should you allow it to surface and then deal with it?

Think about what behaviors to model; for example, consider:

- How to engage this family;
- How will skills be used to accomplish interview purpose/goals;
- That adults in crisis need positive role models

Documenting the Interview

You must decide if taking notes during an interview session is appropriate. During your initial contact interview; however, it is inevitable that notes must be taken. The volume will depend upon the complexity of the interview or what type of information is being sought.

Note-Taking Considerations

The purpose of note-taking is to record detailed information or to refresh your memory when entering documentation into FSFN. Consider the following if note-taking is necessary:

Interviewee's Perceptions of Note-taking

- Note-taking may increase interviewees' selective attention.
- Interviewees may perceive some issues as significant because the interviewer jotted notes as they were discussed.
- Note-taking may indicate to the interviewees that the interviewer is attending to what was said, not what is being said.
- Some interviewees may believe they are not being given full attention.

Note-Taking Skills

- You should evaluate your skills at in-session note-taking to:
 - Decide if you can take notes without distracting the family member(s) or without breaking eye contact with the family member
 - Jot quick, key-phrase notes that can later be used to reconstruct the significant information
- However the notes are taken, spend some time after the interview reviewing and evaluating the meeting.
- If you feel there are details that you may forget prior to documenting the interview session in FSFN, then jot them down immediately after leaving the session.

Documenting the Interview

- Use your notes and all information recalled to document the interview/contact in the case notes of FSFN.
- Documentation of the interview must occur immediately, and not to exceed 48 hours following the interview/contact.
- All notes taken must be included in the hard copy file for the file.

Preparing for an Interview

Materials

- ◆ **PG1** Stages of the Interview
- ◆ **PG2-3** Planning for an Interview
- ◆ Scenarios for PI and CM (below)
- ◆ Flipchart entitled: Stage One: Interview Preparation

Directions

- Convene in groups of 4 by program area.
- Review **PG1, Stages of the Interview: “Preparation” and “Engagement.”**
- As a group, prepare for your interview by planning your introduction, engagement, and interviewing strategies.
- Use the scenario relevant to your program area:
 - **Investigations:** Interview with Brian Smith, Crystal's brother: During your interview with Crystal's boyfriend, Colin, you learned that Crystal's brother, Brian Smith, supported her and helped her to stop her drug use the last time the agency was involved with Crystal. You want to interview Brian and inquire/encourage Brian to support Crystal once again. Also, you want to find out more about Crystal's current use of drugs and how it is affecting the safety and well-being of her children.
 - **Case Management:** Interview with Sheila Smith, Crystal's mother: During your family assessment, you learned that although Crystal and her mother, Sheila Smith, often don't see “eye to eye” on things, Crystal used to be close to her mother and seems to respect her. You wish to speak with Sheila as a possible resource and support for Crystal and her children. You hope to get Crystal back into the job training program and also ensure that she has sufficient supervision for her children. Thus, your goal is to solicit Sheila's support for Crystal and the children and suggest that Sheila participate in a family conference to discuss the best course of action for Crystal and her children. You must attempt to get Sheila to commit to the family conference and to agree to commit her assistance to Crystal and the children at the family conference.
- List your introduction, engagement, and interviewing strategies on flipchart under the topic, Stage One: Interview Preparation.
- Present your preparation steps to the class. Refer to the “Preparation” checklist on **PG1, Stages of the Interview**, and be sure to include:
 - How you plan to engage the family member and build rapport
 - Type of information to gather and some of the questions you will ask to explore the issues and obtain information.

You will conduct this interview (activity guide on PG5) following your presentations.

Engaging and Interviewing the Family

Materials

- ◆ **PG9 Module 1** Demonstrating Authenticity/Genuineness, Respect, and Empathy
- ◆ **PG18 Module 1** Interview Skills Checklist
- ◆ **PG1** Stages of the Interview
- ◆ Flipchart paper to record group's strengths and areas of difficulty

Preparation

- Review **PG5** Scenarios, and **PG1, Stages of the Interview**, "Engagement," "The Interview," and "Closing."
- Use the key points from the planning steps on flipchart (previous activity) and your checklist of major points to cover during the interview.

Engagement, the Interview, Closing, Documentation

- Use your group's scenario, and work in pairs to practice introducing yourself, engaging the family member, and then conducting the interview and an interview closing.

Interviewees: Keep the interview going by responding to the interviewer re: your role in the scenario. Ease up your resistance to disclose information when the interviewer uses skills and techniques to gain your cooperation and trust.

Interviewers: After introducing yourself, engage the family member in a positive manner to build rapport, and then ask questions that encourage family members to **"tell their story"** and divulge information. Focus the family member on the children's safety, well-being, and permanence.

Evaluation

- Use **PG1, Stages of the Interview** to evaluate/discuss with the interviewer his/her techniques to implement all stages of the interview.
- Discuss the interviewer's use of genuineness, respect, and empathy and also use of interviewing techniques: exploring, focusing, directing.
 - Discuss strengths and areas of difficulty.
 - Discuss alternatives and other strategies that could have been used.
 - Discuss the interviewer's use of documenting during the interview.
- Switch roles so both can practice interviewing and receive feedback.

Keeping the Interview on Track

Developing the Interview Purpose and Goals

Early interviews will likely have an implicit purpose, but you must still make every effort to include the family members in developing some of the goals for the interview.

- Family members will buy into the process if they feel they have some control over it.
- Later in the process, when interviews are becoming more supportive (therapeutic) in nature, family members must take an increasingly active role in developing some of the interview goals.
- Develop and use a checklist with major points to cover during the interview to help make the most of interview time and effort.
- Optimally, these checklists will be developed and shared with family members.

Attend to the purpose of the interview.

- At the beginning of the interview, mutually arrive at goals for the interview that are geared to your required purpose.
- Use a checklist with major points to cover - share this with the family/family member.
- Stay focused on your role.
- Stay focused on specific topics.
- Attend to exceptions - times when the problems do not occur.

If necessary, establish ground rules.

Together, establish ground rules that everyone agrees to observe. For example:

- Allow one speaker at a time.
- Refrain from making hurtful remarks.
- Respect your lead in directing discussion.
- Agree that it may not be possible to address all issues arising during the interview, but those not addressed will be “parked” for later interviews.

Use techniques to facilitate the interview process.

- Use empathy and reflection to keep the interview going.
- Don't do all the work. Use silence and pauses to give family members an opportunity to contribute.
- Allow each member present to speak.
- Invite participation and reestablish participation if a speaker is interrupted.

When off-topic, direct the interview.

As the interview progresses, continually evaluate if significant information is being elicited.

- Do not hesitate to take charge of the interview.
- Remain calm, receptive, and supportive, but assert leadership when the interview stalls.
- If necessary, interrupt and redirect the focus, framing statements in a respectful, courteous manner.
- Direct the interview process using verbal signals that guide the discussion.
- Sensitively respond to the family member/family-initiated topics during the interview.
- If, however the topic is not related to the purpose and not creating a crisis for the family, explain that you would like to hold that topic for later or for the next appointment.
- As soon as you realize the family member is off-topic, say something like:
 - “Excuse me, I’m not sure I understand how this fits with what we agreed to discuss.”
 - “Let me stop you for a moment and go back to what we were discussing earlier.”

If hostility or arguing occurs,

- Call a “time out” for a few seconds; then ask direct questions to one or more family members.
- If excessive arguing occurs, assertively, loudly, emphatically say, “Hold on!” and use nonverbal communication to emphasize your intercession:
 - raise one hand (as in STOP) and
 - lean forward, stand up, etc.
- Call an intermission for 5-10 minutes, if necessary and
 - Leave the family member/family and review the information you have gathered so far.
 - Jot down the points you need to clarify or necessary information you have not collected,
 - Then return to the family, and cover identified issues.
- You may need to:
 - Assertively direct the interaction to closure.
 - Explain that many issues are unresolved and make notes to address them in later interviews.

Barriers to Effective Communication

When communication has broken down during an interview, assess your responses to decide if you have demonstrated any of the following barriers to effective communication.

Barriers Demonstrated

? Which of these barriers do you think might you use most frequently?

? Which ones have you demonstrated or caught yourself thinking?

- moralizing by using “shoulds” and “oughts”
- judging, criticizing or placing blame
- advising and giving suggestions or solutions prematurely
- persuading or giving logical arguments, lecturing, instructing, arguing, intellectualizing
- analyzing, diagnosing, making glib or dramatic interpretations; labeling family members’ behaviors
- reassuring, sympathizing, consoling, excusing
- using sarcasm or employing humor that is destructive or makes light of the family’s problems
- threatening, warning, counterattacking
- stacking questions
- asking leading questions
- interrupting inappropriately or excessively
- dominating interaction
- fostering social interaction
- responding passively
- overusing certain phrases or clichés
- dwelling on the remote past

Barriers Demonstrated by Parents or Family Members

? What are some communication barriers used by parents?

- Making excuses rather than revealing the underlying reasons for behaviors
- Avoiding specifics by using words such as “some of the time” or “occasionally”
 - You must explore the reasons for excuses to decide the underlying causes and
 - Use questioning that forces specifics and doesn’t allow generalities.

Managing Challenges

Resistance/Lack of Participation

- Resistance is behavior that opposes or works against something. It is intended to keep one from yielding to or accepting.
- Resistance is a predictable and natural reaction to being forced to change or face difficult issues, in which one feels vulnerable or controlled.

Signs of Resistance

- Arriving late for appointments
- Breaking contracts
- Not following through on tasks

Techniques to Manage Resistant Behavior

- Since resistance may be a reaction to lack of control, apply these empowerment principles:
 - Validate feelings.
 - Focus on strengths.
 - Allow the individual to define his or her needs.
 - Ask the person for solutions.
- If family members engage in separate conversations:
 - Make eye contact with them.
 - Ask them to share their thoughts.
 - Ask them if they have questions.
 - Ask them to attend to the whole family interaction.
- If the family member will not participate:
 - Comment on the person's "thoughtful observation," and then ask for input.
 - Make eye contact with the person after asking a question.
 - Remind family members that everyone's input is valuable.

Manipulation

- Manipulative clients use communication that does not address, or only subtly addresses, the main issue.
- They use words to confuse, convince, or cover up in order to influence you favorably.

Examples of Manipulative Behaviors

Manipulative family members may respond as follows:

- Intellectualize - reduce emotional aspects of the situation with logic
- Rationalize - attempt to show reason for behavior and thereby gain acceptance by others
- Fantasize - indicate imaginary success
- Compensate - cover weakness by pointing out other strengths

Techniques to Respond to Manipulation

- Listen to the distortion of reality or the discrepancy in what a person says.
- Confront the distortion and not the person - specifically and concisely identify discrepancies in a person's behavior.
- If a family member dominates the interview:
 - Break eye contact.
 - Ask for input from others.
 - Put hand up to signal no interruptions.
 - Refer to agreed-upon ground rules - when someone is speaking others should listen.

Anger

- Anger is a feeling of resentment or vengeful displeasure resulting from injury, mistreatment, or violation of one's rights.

Manifestations of Anger

- nonverbal communication such as hand gestures or turning the body away
- withholding information
- sarcasm or insults
- yelling, screaming, or crying
- making demands
- questioning credentials
- violence

Techniques to Manage/Diffuse Anger

- In response to anger, you must control your own emotions, remain calm, give the individual plenty of space, and
 - reflect feelings
 - acknowledge feelings
 - give permission with rules
 - remove oneself from the situation
- If a family member offends or verbally attacks another family member
 - Refer to established ground rules.
 - Acknowledge the person's right to feelings, but ask for her or him to express views in a less offensive way.
 - Call time-out. In extreme cases, call for an intermission.

Hostility

- Hostility is a long-lasting emotional response connected to a belief and value system.
- It can be directed against an individual, a nation, a culture, an organization, government entities, etc.
- Hostility is similar to anger, but is deep-seated and connected to a belief system; anger is a response to a perceived or actual injustice.

Techniques to Diffuse Hostility

- If a family member becomes hostile:
 - Remain calm, lower your voice, and speak slowly.
 - Don't become defensive.
 - Focus on content.
 - Reflect the person's emotions verbally.
 - Ask other family members how they feel about this issue.
 - Reframe the anger as part of the change process.
 - Use the techniques for diffusing anger.

Hostility is difficult to eliminate.

- Hostility is deep-seated and connected to a belief system.
- It may be eliminated only when the hostile person chooses to re-examine his or her own views relating to the belief system.
- Because the interviewer cannot impose this choice, coping mechanisms should be used.
- Two possible coping skills are not taking the hostility personally, and when other options have been exhausted, refer the person to another PI/CM.

Depression

- Depression is a high level of anxiety presented as immobilizing behavior.
- It can be either from long-standing problems or a recent reaction to a life circumstance.

Examples of Behaviors

- Depressed family members exhibit various behaviors. Some of these may include the following:
 - Denial - refusal to face the reality of the situation
 - Repression - preventing oneself from considering painful or dangerous thoughts
 - Emotional insulation - withdrawing into passivity as protection from hurt
 - Seek sympathy - striving to gain sympathy to bolster one's self, despite failures

Techniques for Responding to a Depressed Person

- Because depression is a medical condition, do not try to talk a depressed person "out of their feelings." However, you can respond in other ways that are helpful, such as:
 - provide support
 - recognize strengths
 - build self-esteem
- Identify structured activities and tasks with definite time limits.
- Be very specific about what the family or family members need to do by the next meeting or another given time.
- Depression can be chemically treated in many cases. You must refer very depressed clients to a doctor.
- Always take any person's comments pertaining to "hurting themselves" seriously.

Techniques to Deal with Resistant, Hostile, or Threatening

Family Members

Reframing

- This technique is based on the fact that the individual may be influenced by an overwhelming negative perspective about life in his or her specific circumstances.
- This technique seeks to help someone develop a new perspective about a problem or situation.
- Example:
 - “Now that this problem is out in the open, you can find some help and relief which you deserve and get help for working on _____.”
 - “In the long run this will be better for both you and your children.”

Utilizing or Joining Resistance

- This technique serves to weaken the effect of the resistance and takes away the need to resist.
- Rather than trying to break through or overpower resistance, you join in, almost promote resistance, or even align with the resistor.
- Examples:
 - “You should be upset.” “I’d be really angry, too.”
 - “I can certainly see why you feel that way.”
 - “What can we do to resolve this and to satisfy you?”

Role Replacement

- This technique works best when it is not too structured but is very spontaneous. The purpose is to help the individual see another perspective, to put himself or herself in another’s shoes, and to enhance understanding of others.
- Ask the individual to assume the role of someone else and to explore how he or she feels, what that person’s motivations are, etc.
- Examples:
 - “What would you do if you saw someone possibly abusing her children?”
 - “If you were (child’s name) and a grown-up did this to you, how would you feel?”

Selective Learning

- This technique works best with individuals who are using obscene language, who respond abruptly, or who are defensive.
- Do not reply or acknowledge abusive or destructive statements.
- Respond only to constructive statements.

Broken Record (Repeat key questions.)

- This technique works well with individuals who are delusional or are hallucinating. This is a high-risk situation. It also works well with individuals who are vague or confused.
- Don't challenge the delusion or hallucination. Avoid arguing. Listen carefully and respectfully.
- Accept the delusion or hallucination as part of the individual's reality, but express that it is unreal for you.
- Patiently help the individual to refocus into the present circumstance.
- Repeat key questions, emphasizing closed questions to help focus the individual.

Disarming Anger

- This is useful with clients who use verbal threats or who refuse to follow directions.
- This is an agreement between you and the individual that you will talk about the issue at hand or continue with the interview ONLY after the individual calms down and/or stops specified angry behaviors.
- Use "I" statements to indicate reaction to behavior.
- Remain calm.
- Use selective ignoring and empathy.
- Talk only about one issue.
- Get overt agreement that the interview can continue only after the individual stops the abusive behavior.

Managing Challenges

Materials

- ◆ **PG9** **Module 1** Demonstrating Authenticity/Genuineness, Respect, and Empathy
- ◆ **PG17** **Module 1** Interview Process Job Aid
- ◆ **PG1** Stages of the Interview
- ◆ **PG10-13** Managing Challenges
- ◆ **PG14-15** Techniques to Deal with Resistant, Hostile, or Threatening Family Members

- Read the scenario for your program area:

PI Scenario: You need to interview Colin, Crystal Smith's boyfriend, to find out more information about the safety and well-being of Crystal's children, Christian and Carley. You want to find out more about his role in the family and if he is a possible support. Colin feels personally threatened by your visit and is resistant to give you information about the children and most especially about Crystal's drug use and supervision of the children. You need to build his trust and show your concern for Crystal and her children, so Colin will understand that you are there to make sure that the children are safe, and you are not there to punish Crystal.

CM Scenario: You will interview Crystal about the benefits of a family conference. You have completed your family assessment and have spoken with Crystal's mother who has agreed to support Crystal. Colin has also agreed to play an active role in helping Crystal with her drug problem and also in supervising the children while she is in the job training program or seeing the therapist. You want to plan a family conference to get everyone together to plan and write the case plan. Crystal does not want to confront her mother and brother because she feels they are still upset with her due to her lack of follow through following her previous voluntary case plan. Her brother and mother have not been in contact with her since they heard she had lapsed back into "old habits," and she expressed to you that "they were judging her too harshly." Crystal is resistant to the idea of including her mother and brother. She thinks that Colin can provide her with sufficient support this time.

- **PIs:** Interview Colin using techniques to eliminate his resistance to sharing information; demonstrate your concern and interest in Crystal, her children, and in his role as a “father figure.” Draw him into talking about the issues and continue to persist with demonstrating your concern about Crystal and the children’s well-being.
- **CMs:** Interview Crystal using techniques to overcome Crystal’s resistance to a family conference. Reassure her that her brother and mother and Colin are supportive and that the family conference is a positive step in writing a case plan to assist with her children’s safety and well-being. You need to convince her that her brother, Brian, and her mother are important resources/support for her and her children and that it is unlikely that Colin can provide all of the support she needs.
- **Prepare** for your interview by thinking of how you will engage either Colin or Crystal. Write down what you might say to begin on a positive note after introducing yourself. Then write down some questions that will help you to begin exploring his/her perspectives and then focusing on the issues that need to be addressed (i.e. supports for Crystal).

Interviewing People with Disabilities

Note: Consensus does not exist among people with disabilities, their families, or the organizations serving them about preferred terminology. Listen carefully to the words the family uses and take your cue from them.

Words with Dignity

(Words to Avoid in Bold)

- Person with a disability, NOT **crippled/handicapped/handicap/invalid** (literally, invalid means “not valid.”). Example: John is a person with a disability, not a handicapped person.
- Person who has..., person who experienced..., person with..., NOT a **victim afflicted by**
Example: Albert is a person who has cerebral palsy, not a victim of cerebral palsy.
- Uses a wheelchair, NOT **restricted, confined to wheelchair, wheelchair bound**. (The wheelchair enables mobility. Without it a person may be confined to bed.)
- Non-disabled, NOT **normal**. (Referring to persons who are non-disabled persons as “normal” insinuates that people with disabilities are abnormal.)
- Deaf, without speech/non-verbal, NOT **deaf mute or deaf and dumb**. Example: Fran is deaf and nonverbal.
- Seizures, NOT **fits**
- Developmental delay, NOT **developmentally delayed, slow**
- Disabled since birth, NOT **born with birth defect**
- Emotional disorder, mental illness, NOT **insane or crazy**

Other Terms to Avoid

These terms must also generally be avoided because they have negative connotations and tend to evoke pity.

abnormal
deformed
incapacitated
moron
physically challenged
spastic

burden
differently-abled
imbecile
palsied
pitiful/tragic
stricken with

condition
disfigured
maimed
pathetic
poor
suffer

Preferred Terminology

- blind (no visual capability)
- visually impaired (some visual capability)
- deaf/profoundly deaf (no hearing capability)
- hearing impaired (some hearing capability)
- hemiplegia (paralysis of one side of the body)

- quadriplegia (paralysis of both arms and legs)
- paraplegia(loss of function in lower body)
- Down Syndrome (congenital disorder characterized by moderate to severe mental retardation.)

Disability Etiquette (Basic Guidelines)

- Make reference to the person first, then the disability.
 - Say “a person with a disability” rather than “a disabled person.” The term “handicapped” is derived from the image of a person standing on the corner with a cap in hand, begging for money.
- People with disabilities do not want to be recipients of charity.
 - They want to participate equally with the rest of the community. A disability is a functional limitation that interferes with a person’s ability to walk, hear, talk, learn, etc.
 - If the disability is not germane to the story or conversation, do not mention it.
- Remember, a person who has a disability is not necessarily chronically sick or unhealthy; he or she often is just disabled.
- BECAUSE a person is NOT a condition, avoid describing a person in such a manner. Don’t present someone as “epileptic” or “a post-polio.” Say instead, “a person with epilepsy” or “a person who had polio.”

Common Courtesies

- Don’t feel obligated to act as a caregiver to people with disabilities.
 - It is courteous to offer assistance to a person with a disability, but wait until your offer is accepted before you help.
 - Listen to instructions the person may give.
- Leaning on a person’s wheelchair is similar to leaning or hanging on a person and
 - It is usually considered annoying and rude.
 - The chair is part of the person’s body space.
- Share the same social courtesies with people with disabilities that you would share with anyone else.
 - If you shake hands with people you meet, offer your hand to all you meet, whether or not they have a disability.
 - If the person with a disability is not able to shake your hand, he or she will tell you.
- When offering assistance to a person with a visual impairment, allow that person to take your arm.
 - This will enable you to guide, rather than propel or lead the person.
 - Use specific directions, such as “left 100 feet” or “right 2 yards,” when directing a person with visual impairment.
- When speaking about people with disabilities, emphasize their achievements, abilities, and individual qualities. Portray them as they are in real life: parents, employees, business owners, etc.

Interviewing Family Groups

Benefits of the Family Interview

Family interviewing maximizes interview time by eliminating the need for many individual interviews.

Benefits to the Family

A family interview:

- allows family members to hear feelings and experiences of others in the family
- explores the interactive patterns in which the problem is embedded
- creates new thinking on the part of the family members
- empowers family members to participate in the change process
- helps family members identify personal resources
- promotes family connection instead of disconnection
- can help the family develop new skills and behaviors

Opportunities

Family interviewing provides an opportunity to:

- clarify the purpose(s) of agency involvement so all family members hear the same thing
- gather pertinent family information at one time rather than in duplicate interviews
- assess family strengths and resources
- build a collaborative relationship with the family
- observe:
 - family dynamics
 - roles of the various family members
 - interactions among family members
 - communication patterns
 - problems as they are experienced in the natural context

Deciding When to Conduct the Family Interview

When a Family Interview May be Appropriate

Family difficulties are complex and emotional, and the presenting problems may simply be too involved to manage in a group-interview setting. Inquire as to your agency's interview protocol for family interviews. Family interviews may be appropriate for:

- ongoing or established services cases
- initial contact interviews-when the family is cooperative and there are no indicators of physical or sexual abuse, domestic violence or substance abuse and the safety of the child is not an issue

When Family Members should be Interviewed Individually

The decision to conduct a family interview or not often depends on the purpose of the interview. Individual interviews are more appropriate when:

- There are allegations of
 - child physical or sexual abuse
 - domestic violence or substance abuse, and if
 - weapons are involved
- Retribution is a possibility.
- The child may be confronted with the alleged abuser.
 - After the child's healing has started to take place, he or she may want to be interviewed with the offender in a controlled, supervised setting.
- You have become a referee in an ongoing family dispute.
- Domestic violence is present.
 - Many batterers are able to conduct themselves congenially in a family meeting.
 - Although they may appear to be caring, concerned, and agreeable, they are likely to unload their anger on their spouse or partner behind closed doors.

Considerations for Including the Child in the Family Interview

The decision to include an allegedly abused child in a family interview must be based upon these factors:

- severity of the allegations
- age of the child
- indicators that the child fears retribution
- reports of prior abuse
- uncooperative or hostile caretakers

General Considerations for Family Interviews

Your skills and abilities for conducting family interviews include demonstrating the 3 core conditions and implementing effective interviewing techniques. It is important that you:

- perceive the inner feelings of family members accurately and sensitively.
- communicate understanding in appropriate language.
- demonstrate understanding through both verbal and nonverbal communication to show family members that the goal is to help them.
- demonstrate empathic communication to nurture and sustain a supportive relationship.

Module 3: Child Interviews

Stages of the Child Interview

Preparation

- Consider the purpose for the interview.
- Obtain all background information prior to the interview.
- Decide what information to obtain from the child.
- Consider the developmental characteristics for the child's age.
- Plan your interview setting and how to engage the child.

Engagement

- Greet the child, introduce yourself, and establish rapport.
- Explain note-taking.
- Interact with the child by using light, friendly discussion about things familiar to the child.
- Assess the child's development, concept understanding and ability to relate information.
- Assess the child's understanding of truth and lies.
- Discuss answering questions.

The Interview

- Use eye contact and appropriate body positioning.
- Discuss the reason for the interview.
- Gather information related to the interview purpose.
- Ask questions appropriate to the child's developmental level and understanding.
- Clarify the child's statements.
- Use listening and attending skills.
- Demonstrate empathy, respect, and genuineness.

Closing

- Praise the child's efforts, not specific content.
- Reassure the child w/out making any untrue statements or false promises.
- Assure the child that he/she did nothing wrong.
- Offer support.
- Invite questions.
- Explain what will happen next/what to expect.

Documentation

- Write up the interview immediately.
- Document the interview in FSFN.

Engagement Techniques for Child Interviews

Building Rapport

- Greet the child by name and provide your name:
 - “Hello, you must be Robby.”
 - “I’m John Kilgore. You can call me John.”
- Begin with light, friendly discussion about things familiar to the child:
 - school, friends, siblings
 - play, sports, toys
 - likes, dislikes
- Use this time to assess the child’s:
 - language development
 - concept development
 - ability to relate information
- When engaging young children, there is a natural tendency to touch them in an effort to comfort them and put them at ease.
- Children who have been maltreated, or traumatized in some way may be very sensitive to touch, especially from an adult, and most especially from a stranger, so **refrain from touching the child as a general rule.**

A Child’s Concept of the Truth

- You must assure the child knows the difference between:
 - telling the truth and telling a lie
 - make-believe and pretend
- In the late stages of engagement, make this agreement with the child:
 - Both of us will tell only the truth and talk only about things that really happened.

Examples:

- To child over age 10: “It is important that we both tell the truth while we are talking to each other. I am going to make sure I tell you the truth, and I want to know if you will tell me the truth. Will you do that?”
- To preschool and young school-age child: “Today we will only talk about things that really happened. Pretend and make-believe will not be part of the conversation.”
- Explain that some questions will be hard to answer, even for adults.
- Tell the child that if he/she does not have an answer for a question, it is okay to say, “I don’t know,” “I don’t remember,” or “I don’t understand.”
- Wait on or set up a natural opportunity for the child to say, “I don’t know.” and then ask, “What kind of pets do I have?” to see if the child will say, “I don’t know.”
- When the child says, “I don’t know,” say, “I am glad you were able to tell me you did not know. You probably will not know the answers to all my questions. When you do not know other answers, will you tell me then, too?”
- Stress to the child that it is all right to say, “I don’t want to answer right now.”

Engaging and Interviewing the Child

Materials

- ◆ **PG1** Stages of the Child Interview
- ◆ **PG5** Child Interviews: Building Rapport and Gathering Information
- ◆ **PG6-9** Interviewing Children

- Read the discussion questions below prior to watching the video.
- Watch the video interview of Julia, age 6, at school.
- Answer the discussion questions as a group and write them on flipchart to present to the class.
- Following the video, as individuals, mark the skills you observed during the video on **PG5, Child Interviews: Building Rapport and Gathering Information.**

Discussion Questions

With group members, discuss and answer the following questions regarding the interviewer's skills:

1. How did the interviewer:
 - Introduce herself and briefly explain her role without mentioning the abuse?
 - Explain note-taking?
 - Engage Julia in friendly conversation and also show interest in her responses?
 - Assess Julia's language and developmental level?
 - Assess Julia's understanding of truth vs. telling a lie?
 - Establish ground rules for answering questions?
2. How did the interviewer begin questioning Julia to get her to talk about the abuse event and who abused her?
3. What kinds of questions were asked to determine the daily care and supervision of the child?
 - Refer to **PG6-9, Interviewing Children**, "Care," "Environment," "People."
 - Why is this information important?
4. How did the interviewer question the child to gather the details of the abuse?
5. What questions did she ask to determine when the abuse occurred and if it occurred more than once? Refer to **PG7**, "Context Questions."
6. How did the interviewer question Julia to probe deeper about other possible maltreatment?
 - DV, substance misuse, sexual abuse
7. Did the interviewer ask any leading questions? If so, what were they?
8. How did the interviewer close the interview?

Child Interviews: Building Rapport and Gathering Information

ENGAGEMENT

Introductions and Rapport Building

Initial engagement with the child consists of introductions and rapport building. This stage of the interview process allows the child to become more comfortable with the environment and the adult. It enables you to:

- Greet the child, introduce yourself, and explain your role.
- Explain note taking.
- Ask open-ended questions to engage the child in narrative conversations about life situations and non-abuse related memorable events to
 - Encourage narrative responses.
 - Assess the child's use and understanding of language: i.e. knowledge and use of prepositions.
 - Assess child's cognitive level, i.e. understanding of numbers and time, etc.
- Engage the child in friendly conversation and convey interest in the child's responses by asking follow-up questions.
- Establish ground rules for child's response such as "I don't know" or "I don't remember" and emphasize that there are no right or wrong answers.
- Conduct credibility assessment (understanding of the difference between the truth and a lie).
- Emphasize the need to provide complete answers to questions the child does know.

THE INTERVIEW

Beginning the Interview and Gathering Information

Following rapport building, you move to the purpose for the interview and gathering information:

- Initial questioning must not be abuse/neglect specific. Ask about the critical event in an open-ended manner:
 - "Do you know why we are talking?" or
 - "Do you know why I came here to talk with you today?"
- If child denies the event, narrow the focus of the question:
 - "Remember I told you that my job is to talk with kids? Well, sometimes I talk with kids who have a problem. Have you had a problem with someone?" or..
 - "Do you have any problems that we should talk about?"
- When child acknowledges abuse/neglect i.e. "the problem," move on to information gathering.
- Questioning techniques should reflect the child's age and developmental level.

Interviewing Children: Possible Maltreatment

Care	Environment	People
<ul style="list-style-type: none"> • Who takes care of you? <ul style="list-style-type: none"> • How do they do it? • Are there things you like about how they do this? • Are there any things you don't like? • When __ isn't there, who takes care of you? • Who takes care of you when you're sick? • Are there times when you take care of yourself? <ul style="list-style-type: none"> • Is there someone you can call? • How long are you alone? • Are there any younger kids you look out for? • Can you tell me about the last time you took care of yourself? • Who helps you get dressed? • Who sees that you get to school? • Who puts you to bed? <ul style="list-style-type: none"> • What time? Is it dark? • What do you do before bed? • Who cooks? What meals do you eat? <ul style="list-style-type: none"> • Are there any times when there is no food? • What do you do then? 	<ul style="list-style-type: none"> • Who lives in your house? • Tell me what your house is like. <ul style="list-style-type: none"> • Do you like it there? • Is it cleaner, not as clean, or the same as your foster home? • Where do you sleep? • Do you have a bed? • Where do others sleep? • Where do the animals go to the bathroom? • Who does the laundry? • Who cleans? 	<ul style="list-style-type: none"> • Tell me about ____. • What is ____ like? • Are there things you and ____ do together? • Do you do things alone with ____? • What do you like about ____? • What don't you like about ____? • Are there any things that ____ does to you that you don't like? • Are there any things ____ does to your body that you don't like? <ul style="list-style-type: none"> • To what part? • Does ____ ever hurt you in any way? <ul style="list-style-type: none"> • How?

Interviewing Children: Possible Maltreatment

Discipline	Emotional Maltreatment	Context Questions
<ul style="list-style-type: none"> • What happens when you (or your brother or sister) misbehave? • Are there any other ways they treat you when you misbehave? • What ways do they punish at your house? • About how many times a week do you get ___? (Use child's words for type of punishment, i.e. spanked, hit, etc.) <ul style="list-style-type: none"> • What for? • Does it ever leave a mark? • What does the mark look like? • Usually, how long does it take for it to go away? • Do your parents ever disagree about how you get punished? • Did you ever have to go to the doctor because of a punishment? 	<ul style="list-style-type: none"> • Does anyone ever praise you? <ul style="list-style-type: none"> • Who? • What for? • How often? • Do you think you are treated the same as other kids in the family or different? Worse or better? • How are you treated? • When you have problems, who can you talk to? • When you are really upset, what do your parents do? • Does anyone ever yell at you or call you names? • Can you tell me about that? • Are there ever times when grown-ups tell you to break the law? <ul style="list-style-type: none"> • Can you tell me about that? 	<ul style="list-style-type: none"> • Most relevant to sexual abuse, but may be relevant to other kinds of trauma: • Do you remember the last time this happened? • Can you tell me everything you remember about the last time? • Do you know how old you were when it started? • Can you tell me everything you remember about the first time? • Did it happen 1 time, 2 times, lots of times? • Where did it happen? • Where was your mom when it happened? • Where were the other kids? • Did it happen in the day or night or both? • Was it on a day you go to school or not? • Do you remember what time of year it was? • Do you remember what you were wearing? • Did ___ say anything about telling or not telling? <ul style="list-style-type: none"> • Did you tell? What did you tell? • What did they do when you told?

Interviewing Children: Endangering Behaviors

Family Violence	Substance Abuse (alcohol)	Substance Abuse (drugs)
<ul style="list-style-type: none"> • Do your mom and dad have disagreements? • What do your mom & dad do when they have disagreements? • Do they ever have fights? <ul style="list-style-type: none"> • What do they fight about? • How do they fight? • Do they yell, or do they ever hit? • What do you do if or when your dad pushes, shoves, or hits your mom? Do you stay or leave? • Does anyone ever get hurt? • Can you describe any fights between your parents that you saw or heard? What happened? What did you feel/think afterward? What did you do? • Does this happen a lot or has it happened just a few times? • Does anyone ever have to go to the hospital? • Do any kids ever get hurt when they are fighting? • Does anyone in your family have a gun or knife? <ul style="list-style-type: none"> • Who? • What can you tell me about the (gun or knife)? 	<ul style="list-style-type: none"> • Does anyone in your house ever drink alcohol? • Does anyone in your house ever drink beer? • Does anyone in your house ever drink whiskey? • How many times a week does ___ drink? • Does this happen a lot or every once in a while? • How does ___ act when he/she drinks? • Does ___ ever fall down? • Can ___ take care of you when drinking? • Does he/she ever fall asleep? • Does ___ ever go to a bar? How often? • Does ___ ever hurt anyone when drinking? • Does ___ ever drive a car when drinking? • Did ___ ever have an accident? • Did ___ ever have to go to the hospital/counselor for drinking? 	<ul style="list-style-type: none"> • Are there any drugs at your house? <ul style="list-style-type: none"> • Do you know which ones? • Who uses them? • What happens when ___ uses them? • Do you know how ___ gets them? • Where does the money come from to buy them? • Did ___ ever get sick from drugs? • Then what happened? • Did ___ ever have to go to the hospital? • Do you know how old you were when ___ started using drugs? • Do you know how many times a day/week ___ has to have the drug?

Interviewing Children: Endangering Behaviors

Criminal Activity	Prostitution	Mental Illness
<ul style="list-style-type: none"> • Does ___ ever get in trouble with the police? <ul style="list-style-type: none"> • What for? • Did the police ever come to your house? <ul style="list-style-type: none"> • What for? • Did ___ ever get arrested? • Did ___ ever have to go to jail? • Did ___ ever have to go to court? • Did anyone in your house ever steal anything? <ul style="list-style-type: none"> • What? • What happened next? • Does ___ ever get in fights? <ul style="list-style-type: none"> • When? • Where? • Who with? 	<ul style="list-style-type: none"> • Does your mom have lots of boyfriends • Do you know those men who come to your house? • How do those men treat your mom? • What do you do when they are there? • Does ___ ever give your mom money? • What does your mom do when she goes out? • Does anyone ever baby-sit for you when she's out? 	<ul style="list-style-type: none"> • How does ___ act when you are around? • What does ___ do? • Can he/she take care of you when acting ___ (Use child's words.)? • What do you do when ___ is like that? • Did ___ ever have to go to the hospital for that? • Does ___ take medicine? • Does ___ ever NOT take the medicine? <ul style="list-style-type: none"> • What happens then?

Length and Timing of Child Interviews

Guidelines for Interview Length

Age	Time allowed
Young Preschool	30 minutes maximum
Preschool	30-40 minutes (This gives about 10-15 minutes of focused information.)
School-Age	45-50 minutes
Adolescent	50 minutes

Tips about Interview Timing

- Assess what you know first, and then decide what specific information you need to get from a child.
- Get as much background information as possible before the interview.
- Avoid keeping a child waiting for an interview.
- Keep the length of the interview appropriate for the child's age.
- Keep the interview as short as possible but complete. Be efficient with questioning.
- Interviews must not be rushed, and children must not feel pushed for information because of the interviewer's schedule.
- Avoid interviewing a young child
 - at his or her regular nap time,
 - late in the afternoon,
 - after a distressing event such as a medical or dental appointment, or
 - just before or during mealtime.

Children's Language Skills

Age 3-4 (On Average)

- uses language of a grammatical complexity similar to an adult's everyday language
- vocabulary can range from about 500 to 3,000 words
- can identify more than five parts of their own bodies

Age 5-6

- Basic language structures of most children are well established although not yet fully mature, and they can:
 - define some simple words
 - accurately name three or four colors
- With a vocabulary generally estimated at around 14,000 words, their language sounds (on the surface) like an adult's.
- This misleading surface similarity of language does not mean, however, that these children have achieved mastery of their language.
- Late acquisitions include (but are not limited to) the ability to handle the syntactic elements listed below:
 - complex sentences containing relative (who, which, that) or adverbial (when, before, after, while) clauses
 - some critical verb structures like passives
 - complex negation
 - complex structural distinctions such as those between ask and tell, know and think, easy to and eager to (see/please/etc.) and some syntactic aspects of the verb promise

Language and Concept Understanding

- The apparent similarity between 5-6 year olds' and adults' language does not mean children this age have mastered all those concepts expressed in language, such as:
 - abstractions (e.g., truth or misunderstanding),
 - relation of age, time, speed, size and duration (How old is she? When did it happen? How fast was the car going? How big was the knife? How many times did it happen to you?)
- They do not fully understand the family relationships expressed by kinship terms such as parents, aunts, grandfather, etc.

Age 10-11

Most children have acquired the ability to use most of these relational words in an adult fashion.

How Young Children Think

Numbers

Young children may not be able to count events. Even if a child can count from 1 to 10, he or she may be recalling numbers by rote without understanding number concepts.

Practice Implication

- Decide if the child understands number concepts:
 - Ask the child to choose four blocks from a pile or to hand you six pennies from a display of a dozen pennies.
- Counting the number of times something happened is a more difficult task than counting blocks.
- Children who can count objects may not be able to count events accurately.
- Specific acts may be easier for the child to count.
 - For example, if you ask a little boy how often his mom left him alone, he may count only the times she was gone, and he wasn't watching his favorite cartoon show.

Time

Children do not learn to tell time until about the second grade. Clock time and calendar time are confusing for young children.

Practice Implication

- To establish a time, ask questions relating to familiar routines:
 - right before bedtime or after lunch
 - nighttime or daytime
- For clues to time frames, ask questions relating to people, places and events:
 - "Who was your teacher when this happened?"
 - "Where were you staying that day?"
 - "Was it hot outside or cold?"

Personal Descriptions

Asking preschoolers about a person's age and physical characteristics may elicit erroneous information.

- Young children cannot accurately respond to a question about a person's age, but may be able to respond to questions about life-stage.
- For example, when trying to establish the age of an offender, ask if the person is old enough to:
 - be a daddy,
 - drive a car,
 - be a grandmother, and so on.
- Children are often unable to give a description of an unfamiliar person's appearance because of their limited ability to attend to multiple details.
 - They may concentrate only on one striking characteristic (scary face, bushy eyebrows, mustache, and beard).

Practice Implication

- Ask many clarifying and probing questions when trying to establish personal descriptions.
- Check out previous answers with differently worded questions.

Assumptions

- Children assume that adults see things just as they do.
- They may even believe the adult is thinking the same thoughts about the event as they are or that adults are privy to knowledge only the child really knows.
- It seldom occurs to children that adults can misinterpret what they have said.

Practice Implication

- If you have misinterpreted what a child has said, he or she will not tell you that you have misunderstood and may not even realize the misinterpretation exists.
- Use focusing skills: clarify, summarize, paraphrase, reframe

Perspective

- Preschoolers have great difficulty viewing the world from another's point of view.

Practice Implication

- Do not ask children to speculate about people's intentions, thinking, feelings and perceptions.

Causality and Magical Thinking

- There is a brief developmental phase in which children think inanimate objects are endowed with animate attributes, such as thoughts, feelings, or willfulness:
 - A child may think when a paper is cut, the paper feels pain, or
 - A vacuum cleaner is purposefully trying to get them.
- Children may misunderstand causality:
 - A child may think the mom got upset because the child was a victim of sexual abuse and not realize that the mom is upset because of the abuser's actions.
 - This, in part, explains why children feel blame for the abuse they have experienced.

Practice Implication

- Don't mistake this kind of thinking for fantasies or lies.

Misunderstanding

- Children aren't always aware of what they do not know.
- They may try to answer confusing questions, thinking that they do in fact understand them.
- They may respond to a small part of the question they did understand, ignoring other parts of the question that may be crucial to your getting complete information.

Practice Implication

- Anticipate the difficulties young children have in understanding some of the concepts or you might misinterpret their responses. Make sure that you clarify what the child thinks a concept means.
- It is a mistake to wait for a preschooler to tell you she/he doesn't understand.
- It is helpful to explain to a child that answering "I don't know" or "I don't remember" is okay. You can test willingness to do this by asking a question you are sure the child cannot answer.

Questioning Children

When Questioning Children

- Discuss with the child how he or she may answer questions.
- Explain that some questions are hard to answer, even for adults. Say, "Sometimes we don't have an answer for a question. If I ask you a question and you don't know the answer you can say 'I don't know' or 'I don't remember'."
- When necessary, use multiple choice questions - offer more than two choices and ask the question again with the choices reordered.
- Use open-ended questions.
- Use ridiculous questions to help elicit a clarifying response.

Avoid

- leading questions
- tag questions
- multiple questions
- garbled questions
- "why" questions
- repeating the same question; rephrase the question
 - The child may assume their first answer was incorrect.
- responding to every answer the child gives with another question

Children are literal and concrete.

- Be alert to the tendency of young children to be very literal and concrete in their language.
 - "Did you have your clothes on?" might elicit a "no" answer if the child had on pajamas or a swimsuit.
- Do not tell a child to answer a question with "yes" or "no."
 - Because of children's literal view of language, they can interpret that to mean they can't answer "I don't know," or "I don't remember."
- Take care when using "Wh" questions (what, where, who, why, how, when). These words can be confusing or indistinct to children whose cognitive response may not be appropriate to why, how and when until age 10.
- Consider the child's language development when asking these questions.

Words To Avoid

- Avoid legal jargon like, “We’ve ascertained that...,” “What, if anything...” or “Did there come a time when...”
- Avoid using the words, story, make-believe, or pretend that suggest fictional accounts to children. Examples:
 - “Tell me your story in your own words.”
 - “Pretend you are back at Uncle Robert’s house.”
 - “Make believe that your daddy is here. What will he do?”
- Avoid words that mean one thing in a child’s world and another in an adult’s world, because they produce inaccurate information.
- Avoid overuse of phrases or remarks that suggest evaluation of the child’s responses. Examples:
 - “That’s good.”
 - “Good girl” or “Good boy”
 - “Great!”
 - “You’re answering all my questions so nicely.”
 - These statements attach value to the child’s answers, not to his or her effort and can pressure the child. The child may give answers that please the interviewer instead of describing what actually happened.

Interviewing Techniques

- Praise for the child’s efforts with neutral language, not his or her responses.
 - “You’re really trying hard.”
 - “I know some of this is hard to talk about.”
 - “I see you’re really trying.”
- Tell the child when you are moving from one subject to another or from past to present.
 - This helps the child relate comments to an established context.
- Assure the child that what has happened is not his or her fault. (This is especially important if the child discloses sexual abuse.)
- Pretend you do not understand or know something to encourage a child to elaborate or clarify.
- Use feigned forgetfulness to invite a child to elaborate or clarify.
- Use deliberate misstatements to see if a child feels comfortable enough to correct your errors. “Now, you’re four years old, right?” or “Your last (or other) name is Jones, isn’t it?”
- Do not assume that the abused child has negative feelings about the abuser or that a sexually abused child has negative feelings about the abuse.

Interviewing Techniques

In general, communicate with children by

- Using empathy, reflective listening, and attending skills
- Break eye contact during difficult points in the interview (look at your hands or elsewhere) to relieve pressure or a child's feelings of being scrutinized.
- Using encouraging responses, such as, "Oh, really!" or "I see."
- Using names rather than pronouns
- Asking the child to demonstrate understanding rather than asking, "Do you understand?"
- Choosing easy words over hard ones
- Using show me or tell me rather than describe or identify
- Using short sentences
- Asking short questions

When closing the interview...

- Ask the child if he or she has questions to ask you.
- Ask what the child wants, hopes, or fears will happen next.
- Praise the child's efforts, not specific content information.

Principles of Child Development

Principle 1: As children grow, they construct their own rules for how the world operates.

- Sometimes the rules children construct do not match an adults' understanding of a situation, but their misunderstandings are corrected over time as the ideas are tested and receive feedback.
- Children reason idiosyncratically and create their own explanations for their experiences.
- Do not assume that children understand an experience, a question, or even a word in the same way an adult would. Do not assume that children of the same age understand something in the same way.
- Adults may misunderstand children's answers; they forget that in many ways, they speak a different language than children.
- An interviewer who misunderstands a child might inadvertently stop an investigation prematurely, leaving a child with a burdensome secret or exposed to further abuse.
- Or the interviewer might proceed with faulty assumptions that cause unnecessary pain to innocent people.

Principle 2: Children develop in phases.

- You must know what skills an average child in a particular age range should have.
- It is your responsibility to gear the interview to the child's developmental level.

Principle 3: Because children vary greatly in the rate at which they develop certain skills, each child should be assessed individually.

- Some children are advanced for their age, while others are delayed.
- Advancement can be the result of exposure and practice of related skills.

Principle 4: Different domains develop separately and at different rates; maturity in one may precede another.

- These domains include speech and language, visual perception, motor coordination, emotional maturity, cognitive reasoning, and social skills.
- A child may be very advanced in one area (e.g., very verbal and articulate), but delayed in another (e.g., awkward and clumsy).
- One cannot generalize about a child's developmental level.
- There is no such thing as being exactly 5 years old in all domains of development at the same time.

Developmental Considerations for Child Interviews

Birth to 14 Months

Can be affectionate with caregivers but may be shy around new acquaintances; very limited verbal skills; mobile and exploratory, touching objects is very important; memory not well developed.

14-24 Months

Loves to practice new skills, like scribbling, climbing or block-stacking; may show testing and “no” responses; self-absorbed; thinking ability is improving but can still understand more than can speak; memory improving; relates to images, experiments with cause and effect.

2-3 Years

Muscle control allows manipulation of objects like puzzles, blocks, and toys; able to converse and loves to talk to self and others; a beginning interest in peers; can think before acting; enjoys creative activities (e.g., art).

3-4 Years

Boundless energy and much improved muscle control; knows name, sex, age, and sees self as part of family unit; likes to be “big” and achieve new skills; asks “why” questions; able to reason things out; fantasy life is strong, loves to imitate and role play; understands some number concepts and can make comparisons; limited ability to draw.

4-6 Years

Able to share and take turns; dexterity allows the use of scissors, pencil, and supplies; likes to climb, skip and jump; protects self and stands up for rights; identifies with parents and likes to imitate them; likes to show adults what he/she can do; forms images of self based on the views of others; dramatic play is closer to reality and attends to details; expresses ideas; speaks clearly; able to draw representative pictures; knows and can name family and friends.

6-12 Years

Interest in achieving in sports; unique individual; can be alternately self-assured or childish and silly; school success influences self-confidence; plays most exclusively with same sex; peer group identity very important - may have value conflicts with parents; strong sense of fair play; uses language creatively; asks fact-oriented questions; likes to make up stories, plays, puppet shows; can deal with abstract ideas.

12-18 Years (Adolescence)

Experiences growth and hormonal changes; anxiety over maturation; increased sexual drives and difficulty expressing anger; struggles for independence; developing personal code of morality; ability to reason, hypothesize and test conclusions; capable of introspection; interested in vocational options and earning money.

Source: “Interviewing the Child with Minimal Trauma,” Child Abuse and Neglect Intervention Training, FDLE, 1986

Characteristics of School-Age Children (Ages 6 – 12)

Physical

- become noticeably more agile in both their large-muscle and small-muscle movements, and
- enjoy trying out many different activities
- want to engage in interesting, worthwhile activities in which they feel they have accomplished or produced something

Cognitive

- are better able than preschoolers to focus attention and integrate increasing amounts of information
- are more aware of the differences between what they remember, do not remember, do know and do not know
- show marked advances in their cognitive abilities
- have extensive vocabularies, but abstractions may still be problematic
- are able to recognize more ways in which the concepts of father, mother, stepmother, cousin, grandparents, and remarriage can be connected
- are beginning to use more sophisticated strategies for recalling information and experiences
- may assume adults know the answers to the questions they ask, since this is the model they become accustomed to in school (Teachers ask questions to which they know the answers)

Social/Emotional

- choose same-sex friends almost exclusively
- have a strong sense of fair play
- like to make up stories, plays, puppet shows

Interviewing Adolescents

Engage in a Relationship

- Use simple, informal language when conversing with teens.
- Use humor.
- Be shock-proof.
- Avoid labeling behavior.
- Avoid giving advice.

Model the Change Process that will be Used

- Negotiate within limits to give a sense of power and control.
- Clarify which limits are non-negotiable.
- Model limit-setting.
- Contract for goals, tasks, payoffs and consequences.

Initiate Ego-Building and Develop Complementary Relationships

- Refuse to impose personal beliefs or give ultimatums.
- Carefully use praise and compliments.
- Decide together on alternative meeting places.
- Convey hope, energy, and enthusiasm.

Use Writing Activities for Adolescents and Older Children

- Ask adolescents keep a journal or diary and bring it to interview sessions.
- Ask adolescents to write you notes or letters about things they are concerned about and need to discuss.

Use Sentence Completion to Encourage Verbalization

What I really want most is	My brother....	If I could I would ...
What I like most about my life is...	When I'm sad...	My sister...
What I hate most about my life is...	When I'm angry...	I like...
When I'm afraid...	My mom...	One day...
My friends...	My dad...	I hope...
I worry about...	My greatest fear is...	What bothers me most is...
I'm best at...	My future...	I would like to change...

Role-Play

Use role-playing to help adolescents work through difficult upcoming interactions such as court appearances, reunification with a caregiver or confronting a caregiver about an issue. Any scene can be played out several times, each with a different outcome.

Adolescent Characteristics

Physical

- are concerned with how to manage sexual drives that have been newly stimulated by the arrival of puberty
- may experience identity problems resulting from feeling overwhelmed by body changes and a flood of alternatives from the environment

Cognitive

- are able to grasp concepts and employ cognitive strategies that eluded them during childhood
- can now manipulate abstractions, apply generalizations, and comprehend relationships
- are increasingly more adult-like intellectually
- are able to hypothesize and solve abstract problems
- are intellectually curious and display a wide range of exploratory interests, skills, and abilities
- are likely to frequently set goals they cannot reach
- are likely to over-generalize when making judgments based on available information

Social/Emotional

- are less concerned with their parents' social and moral values than with their peers' values and the images furnished by mass-media (films, television, videotapes, and magazines become increasingly important models for social behavior)
- need to feel a sense of belonging in their families even though they are less concerned with parental social and moral values
- typically over-identify with peers, cliques, and crowds
- grow tired of hearing adults lecture them
- need privacy and time alone
- have a "know-it-all" attitude and resent helpful advice although their information about health and well-being topics is often incomplete, full of distortions, and untruths
- experience rapid mood changes
- take personal grooming very seriously
- can be emotionally cruel to each other
- are highly present-oriented
- have a strong need for independence
- can have a selfish, "hands-off-my-property" attitude
- have an outward, sincere expression of concern for people who are less fortunate

- have a better understanding of the roles that parents and children must play in order to build a wholesome family relationship
- have a better understanding of the value of money and its relationship to other material possessions
- fear that the world will be one big garbage heap by the time they are as old as their parents
- fear the escalating violence in society
- have a low tolerance for hypocrisy or double standards
- respect honesty and straightforward communication
- do not respond to a condescending attitude and want to be treated like equals
- have behavior that fluctuates from being adult to childlike
- Their regression is an effort to retain some of the positive, secure feelings of childhood.
- respond to a relaxed, friendly approach and do not respect adults who use teen language

Child Interview Checklist

Directions

- Check the boxes if the interviewer has demonstrated the skill.

Skills

Language Skills

- Uses vocabulary appropriate to child's age/developmental level
- Avoids professional jargon
- Uses simple sentences
- Minimizes abstractions

Developmental Considerations

- Asks questions appropriate for child's developmental level
- Demonstrates appropriate cognitive expectations
- Understands child's concept of relationships
- Has appropriate expectations of numbers, time, and perspective

Questioning Skills

- Avoids "why" questions
- Uses open-ended questions
- Avoids leading questions
- Uses simple questions
- Allows child to ask questions
- Avoids over-use of evaluative responses ("That's good.")

General Skills and Behaviors

- Demonstrates empathy, respect, and genuineness
- Uses listening and attending skills
- Uses appropriate eye contact and body positioning
- Handles challenging behaviors

Interviewing Children

- Select one of the following scenarios (A - F) most applicable to your work:
 - A. 12-year-old child must be removed immediately due to physical abuse (**#s 1-7; 8-11;13**)
 - B. 3 and 6-year old children, left alone for 2 hours while mom shops with a friend (**#s 1-7; 8-10**)
 - C. 9-year-old who is being aggressive and destructive at foster home (**#s 1-7;10,11,13, 14**)
 - D. 5-year-old child in foster care for 11 months-moving to an adoptive home (**#s 1-7; 10; 12-14**)
 - E. 10-year old child in foster care - CM visits to monitor child's safety (**#s 1-7; 14**)
 - F. 16-year old female in foster care for 3 years wants to move into Subsidized Independent Living (**#s 1-7; 15**)
- Select 2 or 3 of the topics listed by the scenario to focus your sample interview questions.
- Ensure your questions are appropriate for the child's age/developmental level.
- As a group, prepare for the interview and discuss how you will engage the child.
- Divide into pairs; each should practice interviewing the child.
- Provide feedback to each other as to strengths and areas of difficulty using **PG1, Stages of the Child Interview, PG5, Building Rapport, PG6-9, Interviewing Children;** and **PG24, Child Interview Checklist.**
- Select 2 persons from your group to demonstrate your interview to the class.

Topics

The #s listed with scenarios are applicable topics. Note that topics 1-7 apply to all scenarios.

1. Child's current condition
2. Unusual or inappropriate behaviors or feelings
3. Others who reside in the home
4. Child's relationship with and feelings toward siblings and parents
5. Child's perception of the relationship among others in the household
6. Child's relationship with peers, extended family, and other significant persons
7. Child's daily routine
8. Events related to the alleged maltreatment: details about when and where the incident occurred and who was present; answer to who, what, when, where questions
9. The type, severity, and frequency of the alleged maltreatment
10. Effects of the alleged maltreatment (e.g., extreme withdrawal, fear of parents)
11. Child's perception of how family problems are addressed
12. Child's concerns and happy expectations about prospective adoptive parents
13. Child's understanding of the reasons for removal (child or parent removal)
14. Child's relationship with and feelings toward foster parents and other children in the foster home
15. Child's concerns and expectations about Independent Living

Slide 7

Difficulties in Establishing Relationships

Families members may:

- resist intrusion
- find it difficult to commit to change
- not trust strangers or be open with them
- be so overwhelmed, issues are difficult to discuss
- be indifferent to your efforts, see you as the problem, or simply ignore you

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Slide 8

Building Rapport

To build rapport with a family and develop a positive relationship:

- Plan your introduction/engagement
- Demonstrate genuineness, respect, & empathy
- Be responsive & respectful of the family's *strengths, culture, & perspectives*
- Address immediate needs

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Slide 9

Three Core Helping Conditions to Build a Trusting Relationship

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Slide 10

Self-Disclosure

Intentionally reveal information about yourself.

Self disclosure responses may or may not be appropriate.

Verbal Expressions

Non-Verbal Behaviors (smiling, grimacing, or shaking one's head in disbelief)

depends on why you're asking the question

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Self-Disclosure

If you are uncomfortable answering a personal question:

- Feel free not to answer & explain why
- Provide a short, factual response
- Return focus to family member

Module 1: Basic Interviewing Skills Core 115_INT_PPT_July 2012 PPT 11

Slide 12

Interview Facilitation Techniques

Exploring

Focusing

Directing

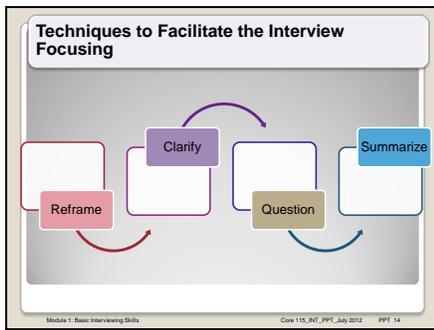
- ⇨ While using these techniques, be...
- * Genuine
- * Respectful
- * Empathetic

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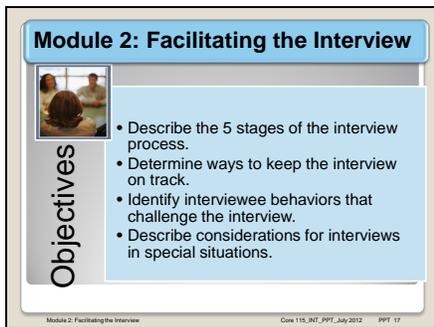
Slide 15

- Questions to Avoid**
- Antagonizing
 - "Why"
 - Multiple
 - Leading/suggestive
- At the bottom of the slide, there is small text: "Module 1: Basic Interviewing Skills", "Core 115_INT_PG_July 2012", and "PPT 15".

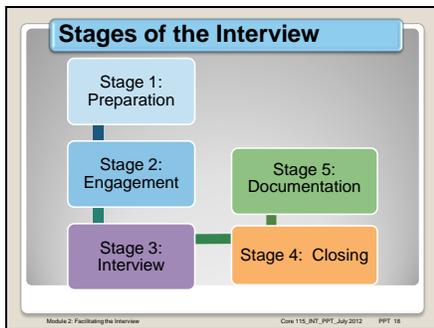
Slide 16



Slide 17



Slide 18



Slide 19

Stage One: Preparation

Determine	<ul style="list-style-type: none">• The interview's purpose• What information you need to get
Analyze	<ul style="list-style-type: none">• Available information & get additional information if needed
Decide	<ul style="list-style-type: none">• Who to interview• When• Where• How will you engage & build rapport with the family
Plan	<ul style="list-style-type: none">• When & how you will document

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Stage Two: Engagement

Two important processes: <ul style="list-style-type: none">• Engagement• Rapport Building	How can your first encounter with a family affect: <ul style="list-style-type: none">• Relationships with family members• Your ability to complete critical tasks
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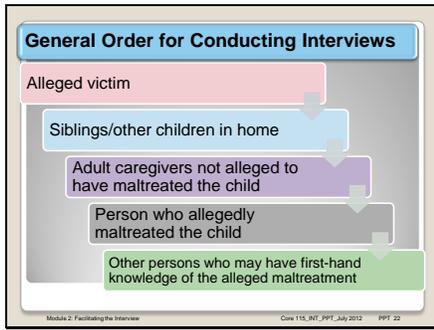
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Stage Three: The Interview

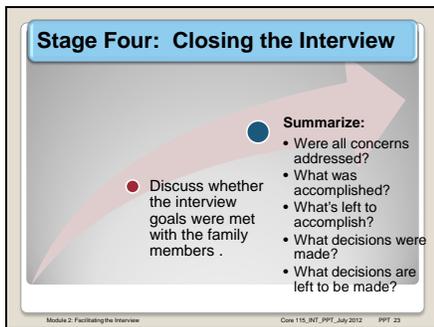
The "meat" of the interview process	Addresses the "purpose" of the interview
Investigator's Focus: child, family, family members, & maltreatment events	Case Managers focus: assess & intervene to ensure the child's immediate & on-going safety, permanence, and well-being

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Stage Five: Documentation

Decide how to document the interview during the planning stages.

Note-taking is very important to document family demographics & chronological events.

Accuracy is vital.

All interviews with subjects of the investigation must be documented in FSN.

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Challenging Interviewee Behaviors

Resistance Manipulation Anger

Hostility Depression

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Responding Assertively

Make requests firm & decisive, delivered with assertive nonverbal behavior

Don't make requests in uncertain language • Parents may doubt that you expect them to comply.

Provide a firm request to replace these uncertain ones:

- Would you mind turning the T.V. off? I'm having a hard time hearing you.
- Would you mind asking your friends to go outside or to another room?
- Would it be all right if I come inside?
- If it is not too much trouble, could I look through your house?

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Young Children's Thought Processes



Concepts of numbers, time, assumptions, perspective, causality/magical thinking, & misunderstandings develop gradually

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