ICMEC envisions a world where children can grow up safe from exploitation, abuse, or the risk of going missing. We believe every child deserves a safe childhood.
When speaking with adults or children of any age, your goal may be to obtain information, provide information or talk about feelings and emotions. In all of these situations, there are key strategies you can employ to optimize your interaction.

01 Base your decisions and actions on the best interests of the adult/child

The best interests of the child/adult client should be the top priority of service providers and should be considered when discussing options and making decisions that impact this individual or family.

02 Consider the impact of prior adverse experiences

An individual’s prior experiences may change how they view themselves, how they view you and others around them, and how they view the world in general. Traumatic events and adversity may cause a child/adult to adopt beliefs, thoughts, and behaviors that may protect them from future harm, yet these same reactions may cause them problems in non-threatening situations. For example, a child’s aggression, substance misuse or mood swings may represent their efforts to adapt to a highly stressful world or manage their memories of a negative event. While these behaviors may seem inappropriate, we need to respond to them with a nonjudgmental, open attitude, rather than a punitive or defensive one. Strive to understand the underlying function of the behavior and respond empathetically.

03 Build a sense of safety

Take steps to increase an individual’s sense of safety. This means ensuring the environment is warm, welcoming, and affirming of all identities; that information can be disclosed or collected privately and confidentially; and that you demonstrate your commitment to their voice and choice by encouraging questions and eliciting their priorities.

When asking questions about a distressing event, restrict your focus to information that is absolutely necessary for your work; avoid requesting irrelevant details, or asking questions out of sheer curiosity. Minimize the number of times the client must describe their experience. Monitor the individual for signs of emotional distress (e.g., fidgeting, breaking eye contact, tearing up, becoming visibly withdrawn) and take steps to reduce anxiety. If the client does become upset, provide reassurance and support (e.g., acknowledge and validate their emotions, pause, ask if they need a break, allow the client to determine whether they want to continue with their narrative) and have resources available to manage significant emotional distress.
Demonstrate respect and build trust

Take time to build rapport with the individual; show your interest in learning about who they are and their situation; avoid making assumptions. Demonstrate empathy and concern for the person’s well-being. Explain your role and the purpose of the visit; describe the reasons behind each activity (for example, the reason for asking personal questions; the purpose of the psychological assessment). Do this in a way the child/adult understands and give the individual an opportunity to ask questions.

Ensure they understand what activities are optional (e.g., they can refuse to answer questions) and obtain their consent/assent before beginning each step. Actively listen and remain nonjudgmental and open.

Engage and empower

Actively encourage the individual’s questions and opinions, facilitate a 2-way discussion, and ask the person for their thoughts about their situation/condition and the best way to address it. Encourage the individual to make choices and take control whenever possible throughout the visit.

Demonstrate sensitivity to diversity

Be aware of, sensitive to, and respectful of differences that may exist between you and the individual you are interviewing (e.g., differences in culture, nationality, race, ethnicity, religion, gender, or sexual orientation).

Actively seek to understand the person’s beliefs and perspectives as these pertain to their life, and their situation. Accommodate the individual’s preferences whenever these are safe, possible and feasible (e.g., gender of person conducting interview).

Do not tolerate discrimination and bias

Before your meeting, examine potential biases you may harbor that may impact your conversation; take steps to manage them. Carefully monitor your actions throughout the visit to ensure your biases do not influence your words, attitudes, or behaviors.

Be aware of biases/discrimination in your workplace. Do not condone these behaviors and attitudes, but instead actively facilitate a work culture of tolerance, open-mindedness, and support.
08 Maintain transparency, confidentiality

Before asking personal questions, take time to explain any limits of confidentiality in a way the child/adult understands. Be sure to explain why a mandated report or other type of information-sharing may be needed. Be clear about who may have access to what information (including verbal and written information, such as health records or psychological evaluation results). When at all possible, work with the individual to respect their desire for confidentiality, within the limits of laws and policies, and while prioritizing the safety of the individual. If authorities do need to be notified, be sure to explain this to the individual so they are aware of what is to come. Every client has a basic right to relevant information and a voice in the actions involving them.

09 Tailor your conversation to meet the needs of the individual

Take time to build rapport with the individual and consider their developmental stage, abilities/special needs, their mastery of the dominant language, and their need for a professional interpreter. Identify individual preferences and priorities (for example, gender of interviewer). Phrase your questions to be age and developmentally appropriate, using an open-ended format when possible and avoiding leading or suggestive questions. Use simple language and avoid technical jargon. Check frequently to be sure the individual is understanding you. When in doubt regarding language fluency, use a professional interpreter (NOT the individual’s companion or family member and never a child). Do not assume a child/adult is literate. Consider using multiple modes of communication when feasible (e.g., words, drawings, brochures, especially brochures with universal symbols/icons).

10 Provide resources or referrals

Maintain an updated list of local, regional, and national resources for the myriad needs of your clients. Those who have experienced major adversity often have wide-ranging needs such as housing, food, legal representation, interpretation services, education/vocational training, and counseling for mental health needs.

Bibliography
Substance Abuse and Mental Health Services Administration. (2014). SAMHSA’s concept of trauma and guidance for a trauma-informed approach. Substance Abuse and Mental Health Services Administration.
https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA_Trauma.pdf