Interviewing Immigrant Children and Families for Suspected Child Maltreatment

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Elmhurst, IL

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Interviews with children and their families concerning child maltreatment may influence a host of important decisions, including the child’s placement, the caretaker’s criminal guilt or innocence, and termination of parental rights. When the alleged offenders in question are noncitizen immigrants, a finding of child maltreatment that is followed by criminal prosecution may also result in a parent’s deportation. This article aims to help professionals conduct productive interviews, investigations, assessments, evaluations, and medical exams related to child abuse in ways that are empowering to immigrant interviewees from a variety of cultures. For the sake of simplicity, the word interview is used to describe the various information-gathering conversations, and the word interviewer is used to describe the many professionals who gather information.

Professionals who interview children and families in a variety of settings share the same goal—just to get the facts. However, this process is usually stressful and challenging, particularly when the children are culturally different from the interviewer. Approximately 12.5% of people in the United States are foreign born, and one in five Americans speaks a language other than English at home (U.S. Census, 2005–07). As the number of children in the United States who are immigrants or offspring of immigrants increases, it becomes essential for professionals to acquire skills in competently interviewing children and families from diverse cultures.

Biases, cultural differences, and linguistic misunderstandings have the potential to exert a powerful influence in interviews with immigrants—even when interviewers have the best intentions. This article discusses some of the challenges of interviewing children who are immigrants themselves or who are children of immigrants, and suggests practices for making these interviews more effective. This article also discusses interviewing family members of suspected abuse victims.

Immigrants’ concerns vary greatly, depending on whether they are the first generation (born outside the country where they currently live), second generation (born in their current country of residence, but with at least one parent foreign-born), or third generation or greater (person and both parents born in their current country of residence). For interviewees who have emigrated themselves, the age when they moved, the number of years in the new country, and their ability to speak the new language will partly determine their level of acculturation.

This article focuses on interviewees who are less acculturated and whose native culture is quite different from that of the United States, because these are the interviewees who may require the most alteration of the standard interviewing process. An interviewee from a family that has recently immigrated to the United States from El Salvador or the Sudan and speaks no English would require numerous adjustments to the standard interviewing process, whereas an interviewee whose parents emigrated two decades earlier from England probably can be interviewed similarly to other U.S. interviewees.

Despite extensive research on child abuse interviewing, little research is available on interviewing immigrants about suspected child maltreatment. The following suggestions, therefore, are based on the little literature that does exist, on my own professional experience working with immigrant families, and on twenty years of exploring issues of child abuse and culture. I eagerly await published research that would cast further light on relevant issues.

Interviewing People for Whom English Is Not a First Language

The value of allowing people to be interviewed in their native language—whether through an interpreter or through a bilingual assessor—cannot be overemphasized. This interview is too important, and its consequences too far reaching, to force interviewees to give only approximate answers because they cannot find the right word in English. In addition, memory and presentation are both affected by the language chosen for the interview. Interviewees are apt to provide more details, look less depressed, and demonstrate the full range of their competence when they speak in their preferred language (see Fontes, 2008; Perez Foster, 1999).

We should remember that bilingual people may know differing words in each of their two languages. For instance, children may know “school words” such as ruler, blackboard, cafeteria, and recess in English, while knowing “home words” such as sofa, closet, and the names of family relationships in their first language. For this reason, bilingual children who are assessed in just one language may not be able to express their full vocabulary or full conceptual knowledge. They may, therefore, appear less advanced intellectually or developmentally than they really are.

Children who are not native speakers of English may have even more difficulty than other children with complex verb forms such as would have, should have, may have, might have once wanted, and so on. And imagine their discomfort with constructions such as, “Where were you when you first told someone that something had happened to you in the alley behind your aunt’s building?” Interviewers should keep their questions short and direct, using no embedded clauses. Every so often, interviewers should ask if the interviewee understands the questions. If the interviewer has the sense that the interviewee does not understand, the interviewer should pause and try to ascertain what is happening. Interviews with young children, and with people who are nonnative speakers of English, can move especially slowly, requiring a great deal of time and patience.

Where needed, foreign language interpreters should be secured in advance of interviews. Caretakers who bring children to interviews, and the children themselves, may have differing levels of English language fluency. Minor children should never be expected to interpret for their parents. Otherwise, they might be blamed if the outcome is not as the parents wish, they might not have the

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technical vocabulary required to interpret correctly, they might be confused as to whether they should be interpreting accurately or protecting their parents, and/or the interpreting situation might expose them to material they should not hear. In addition, it is exceptionally disempowering for parents to have to speak through their children.

Interpreters make it possible to listen to people who otherwise would be voiceless in our interviews. High-quality interpretation allows us to obtain information, gain interviewee’s confidence, reduce their isolation, understand their worldview, and convey information as needed. Poor-quality interpretation leads to frustration for all involved and can leave children even more vulnerable than before we interviewed them. Similarly, when interpreters are untrained or used inappropriately, problems often abound (Fontes, 2005; Fontes, 2008).

Interpreters do not simply convey the spoken word from both sides, although this is their primary stated function. They also serve as the agents of exchange and negotiation between the worlds of the interpreter and the interviewee (Davidson, 2000). It is not possible to interpret perfectly, since subtleties of meaning and context do differ across cultures. At best, an interpreter can convey what each party says and means in a “good enough” fashion to facilitate mutual understanding. For instance, there is no exact equivalent in Spanish for the concept of foster parent or foster care. Similarly, the concept of confidentiality is unknown in many cultures and there may be no exact term to render such a complicated idea. To translate accurately such ubiquitous terms, interpreters must explain these concepts in some detail.

We usually think of interpreters as conduits rather than participants in conversations. However, research shows that interpreters regularly edit, delete, emphasize, de-emphasize, and embellish statements from both parties. “Interpreters do not merely convey messages; they shape and, in some real sense, create those messages in the name of those for whom they speak” (Davidson, 2000, p. 382). Interpreters not only shape the content that is conveyed but they also make choices about when to speak, whom to interrupt when they speak, and which comments they will “let pass” without interpreting. For these reasons, interviewers are encouraged to read further to learn when and how to use interpreters, and how to make optimum use of interpreting services in child abuse interviews (Fontes, 2005; Fontes, 2008).

Professionals who speak a bit of a language that an interviewee speaks may be tempted to conduct interviews in that language, thus obviating the need for an interpreter. While this may save time and money, it is not advisable unless the interviewer is truly proficient in the language and culture of the interviewee. Clearly, conducting interviews without thoroughly dominating the language increases the likelihood of errors. Knowing the basics of a language is not sufficient to conduct an important and sensitive interview in that language. If an interviewer begins using the interviewee’s language but does not speak it adequately, this places the interviewee in the awkward position of not wanting to insult the interviewer by requesting an interpreter. Also, the interviewee may be reluctant to correct the interviewer’s faulty understanding.

Building Rapport and Conveying Respect
Interviewers set the foundation for a successful interview by making clear the process and goals of the interview at the very beginning. Remember, children and their caretakers may have little or no idea about the purpose of the interview and may mistakenly think it pertains to healthcare, housing, immigration, employment, or school. The more information that is provided about the context of the communication, the better it will be for the interviewee. In simple terms, interviewees need to know about the role and position of the interviewer and how the information will be used. Interviewers should convey as much as they can about the procedures governing the conversation, such as the time frame and expectations. Interviewees need to know if this is a one-time interview or the beginning of a longstanding relationship. Interviewers should be given time to ask questions themselves at various points in an interview. Since many interviewees are hesitant to ask questions of authorities such as interviewers, it can be helpful for an interviewer to say something like, “Now it’s your turn to ask me questions,” and to allow silence. If the interviewee still hesitates to ask a question, the interviewer can say something like, “Some people want to know X. Would it be helpful if I spoke about that?”

If the caretaker or child is coming into the interview situation with incorrect assumptions about what is going to take place, this could distort the interview or make it difficult to complete. Often children are uncooperative or overly frightened because they think the interviewer is trying to discover something crazy or evil within them or their histories, which might have potentially disastrous consequences if the badness is discovered. This may be especially true for children who have internalized a sense of blame or shame regarding abuse.

Subtleties in the interviewer’s tone, attitude, and word choice can make the interviewee feel ashamed, victimized, accused, bullied, humiliated, encouraged, empowered, exonerated, confirmed, or supported. Child abuse interviewers should minimize any possible aura of invasion or intrusion by paying special attention to their voice, phrasing, and a host of nonverbal elements (see Fontes, 2008). As much as possible, the inquiry should affirm the interviewee’s worth and value as a human being, even as the interviewer is especially careful not to reward specific responses.

Experiences with discrimination lead many immigrants to be acutely sensitive to possible demonstrations of disrespect. After multiple experiences of being overlooked or discriminated against, some people from minority groups alternate between feeling weary, angry, determined, defensive, amused, and paranoid. They bring these feelings with them to subsequent encounters, including our interviews. Becoming involved with the child welfare system is often embarrassing and even humiliating for clients. By doing our utmost to convey respect, we can thwart these shameful feelings and help clients maintain and recover their dignity.

How do we know if we are behaving in a way that is respectful? We pay careful attention to what we say and how we present ourselves, and then we try to figure out how the interviewee hears us. To be able to try on the interviewee's shoes, we need to accept the idea of a mismatch between the way we want to be seen and heard and the image we are actually conveying. We must examine our demeanor.
when we pose questions, explain procedures, observe interactions, examine injuries, review transcripts, and fill out forms—and we should explore how these activities may feel from the perspective of the interviewees. As we catch ourselves conveying any trace of disrespect, we must have the courage to try something new. In our professional roles, we may still need to do things that interviewees would rather we did not do, but a respectful manner will make these actions easier to accept.

We should also check in regularly with the people we are interviewing, asking versions of, “How are you doing?” “How is it going?” “Are you okay?” “Is there anything else you’d like to tell me at this point?”

**Demeanor**

The set of nonverbal behaviors that communicates an interviewer’s interest in the interviewee has been termed *attending behaviors*. These behaviors include making appropriate eye contact, nodding, and leaning forward. But if these actions are imposed too mechanically from the outside without inner feelings, they will be insufficient. Interviewers should do more than simply demonstrate certain actions to look “as if” they care. I encourage them, rather, to try their best to open their hearts and their humanity to the interviewee so they actually do care about their well-being. Whether the interviewee is someone who attracts or repels an interviewer, the quantity and quality of the information garnered will be improved if the interviewer can connect on a level of true feeling.

Rapport continues to build throughout an interview as new topics are raised and the relationship deepens. Many professionals become cold and distant when they step into their interviewer roles. In fact, some misguided district attorneys protest when interviewers appear warm and kind. This is a mistake. Research has found that when interviewers are warm and friendly, their interviews will be more likely to produce correct information, and the interviewees will be more willing to correct the interviewer’s mistakes if necessary (Davis & Bottoms, 2002). Interviewers would do well to appear warm, relaxed, supportive, and nonjudgmental, particularly in cross-cultural interviews, where the interviewee may need substantial reassurance. Interviewers will want to communicate that they care, they are interested in what the interviewee has to say, and they can be trusted. Interviewers should try to show interviewees a personal and specific caring for them as individuals, not merely a generalized empathy. This can be achieved through asking about personal likes and dislikes, inquiring about hobbies, truly listening, and repeating details provided by interviewees about their specific situation.

A fascinating but disturbing study found that in interviews with children who had made a prior disclosure but had declined to disclose in the context of a forensic interview, the forensic interviewers gave less support to these reluctant children than to children who made allegations during the interview (Hershkowitz et al., 2007). The authors wrote, “This finding suggests that interviewers reacted to their own frustration rather than to the children’s needs. Whether nondisclosers were affected by feelings of guilt, shame, commitment, or fear, reluctant children are likely to experience forensic interviews as stressful and to perceive the interviewers as threatening (p. 109).” Support and human warmth are especially important in interviews with immigrant children and families, who may feel especially threatened in the official kinds of settings where interviews typically take place, and who may be nervous around people from outside their culture.

The personal relationship is key to interviewing people from most cultures. In Korean, the concept jeong expresses a “combination of empathy, sympathy, compassion, emotional attachment, and tenderness, in varying degrees, according to the social context” (Kim & Ryu, 2005, p. 353). A Korean will be observing an interviewer for signs of jeong, which may be demonstrated by showing concern for another person’s comfort and by revealing one’s own humanity. English has no word that is the exact equivalent of jeong. Regardless, interviewees sense this quality and respond well when it is present.

How rare it is for people to listen to each other with full attention! So often, especially when children speak, adults are doing other tasks as they listen, whether driving, doing household chores, or attending to other children. The formal interview presents the requirement, and opportunity, to pay full attention to the interviewee. When they have the interviewee’s full attention, children are more likely to speak openly. (The exception to this rule concerns young children and adolescents, who sometimes prefer if an interviewer doodles or in some other way helps them feel less “on the spot.”)

**Voice Quality in the Interviewer and Interviewee**

In people who are right-handed, the left hemisphere of the brain hears words while the right side hears the melody of the words (Givens, 2005). Therefore, when we speak, we are literally speaking to two different aspects of the listener’s brain—one that processes our word meanings and the other that processes our voice quality and nonverbal signals. A pleasantly pitched and modulated voice communicates kindness to one side of the interviewee’s brain, while our words communicate it to the other side.

Around the world, people tend to use higher-pitched voices and speak in a sweet, sing-song manner with children when they are not angry. This language, which has been called “motherese,” is considered friendly and would be appropriate with a young child. A sweet voice with a varying tone suggests that the interviewer does not have aggressive intentions. However, interviewers should be careful not to speak in this way to teens and adults—it could be considered condescending.

Interviewers who speak in a dry, steady monotone may be perceived as unfriendly, cold, and intimidating. How interviewers use their voices goes a long way to convey caring in a professional relationship. In most circumstances, interviewers will want to use a gentle but firm voice, responding matter-of-factly to even painful material. If an interviewee is extremely anxious, the interviewer may choose to use a soothing voice.

Interviewers should review video or audiotapes of their work from time to time and pay attention to what they really sound like during the process. Did the interviewee have to strain to hear because the interviewer was speaking so quietly? Was the interviewer speaking so loudly that the interviewee seemed frightened?
It is difficult for interviewers to avoid rushing or appear rushed if they are constrained by large caseloads, deadlines, productivity quotas, or busy schedules or if their supervisor has told them they have only one interview in which to "get all the facts" about alleged abuse. Taking one's time at the beginning of an interview to establish the relationship may help build the sense of trust that will make a bit of rushing later on seem less problematic. To accommodate the more relaxed sense of time of people from a variety of cultures, many professionals schedule longer sessions with their immigrant clients, particularly early in the course of their work together. Additionally, research shows that children are more likely to disclose, and to disclose more information, if they are interviewed more than once (Faller, 2007). Developing rapport with an immigrant child may take more time and effort than usual, and this might easily require extra interview sessions.

Trauma Symptoms in Children That May Not Stem From Caretaker Abuse

Refugee children commonly face traumas prior to migration, during the migration process, and after migration. These damaging traumas may include the "disappearance" of family members, hunger, thirst, illness, homelessness, sexual assaults, seeing dead bodies, being wounded, physical threats and beatings, confinement, torture, rape, seeing relatives killed, witnessing atrocities, being forced to violate their own moral code, and/or living for prolonged periods in fear for their lives (Delgado, Jones, & Rohani, 2005). Also, life in the refugee camps is often tenuous, traumatic, and overcrowded. Immigrants who are not formally refugees but who have come from countries with repressive governments may also have experienced trauma in their countries of origin or during an arduous voyage to their new lands, or both. Life in the new country may still not be safe or secure for immigrant children, who may observe that their parents are unable to communicate, uncertain of how to proceed, and subject to the vagaries of bosses, landlords, social service providers, and others. Additionally, it is traumatic for children to live as undocumented aliens or to know that their loved ones are undocumented and risk deportation on a daily basis.

Sometimes professionals assume that a child who was very young during traumatic experiences was somehow shielded from them. However, research suggests that when children have experienced trauma before they developed language skills, they actually have a more difficult time healing than older children who transformed their experiences into words as the events occurred (Pynoos, Steinberg, & Goenjian, 1996).

Children may demonstrate traumatic symptoms that do not stem from caretaker abuse, but these symptoms can easily be misinterpreted as stemming from abuse. For instance, a child who has been traumatized for whatever reason may suffer from any combination of separation anxiety, school phobia, bedwetting, encopresis, depression, anxiety, poor concentration, mood disorders, anger, substance abuse, suicidality, nightmares, and/or compulsive behaviors, including masturbation. A child who has been traumatized may be afraid of loud noises, sirens, yelling, airplanes, and fire alarms and may startle easily. Conversely, a child who has been traumatized may seem to seek out frightening situations, appear to be afraid of nothing, and respond violently to minor incidents. A traumatized child may have to be coaxed into eating or may bolt down food.
quickly and sloppily, looking as if this is his or her last meal. These symptoms present a confusing picture to professionals.

When possible, professionals should take a full trauma history and inquire about the child’s behavioral changes over time. Sometimes children seem to “fall apart” when they are finally safe from the source of the trauma, whether it is war, a natural disaster, or a violent caretaker. When working with children who were adopted, who come from extremely chaotic environments, or whose caretakers are themselves traumatized, such a thorough history may not be possible. Parents from some cultures will not want to rehash the past, believing it is unlucky or simply unwise to discuss horrific incidents. Parents may feel shame due to incidents that they and their children have endured. Parents may also fail to see a connection between these past incidents and the child’s current behavior, believing instead that the child is willfully misbehaving, is possessed by spirits, or is physically ill. Remember, also, that refugees sometimes take in others’ children and claim them as their own so the children can be raised safely. In these situations, the people acting as parents may be hesitant to discuss a child’s history because they do not know that early history. Sometimes interviewers can learn through readings or consultations that a child who is being interviewed is a member of a group that is likely to have undergone certain traumatic experiences, even if there is no specific documentation of these experiences for this particular child.

When interviewers note symptoms that often indicate an abuse history in children but are unable to determine the source of the trauma, it is important not to assume these traumas are inflicted by caretakers. Immigrant children may have been subjected to traumas that are not inflicted by caretakers and that may be less familiar to the interviewers.

The process of immigration itself has been found to be traumatizing for many children and families, as are chronic experiences of racism, discrimination, and exclusion (Bryant-Davis & Ocampo, 2005). Consider the ongoing trauma of children who are thrust into an unfamiliar school filled with people who speak another language and who have different sets of behavioral norms. The children are apt to feel isolated, confused, and perhaps invisible for hours every day without end. Children whose caretakers are unable to serve as a bridge to the school system are apt to feel particularly lost without a guide in their new environment.

Conclusion

When an interviewer meets with an interviewee only one time and in one location, the interviewer obtains a snapshot of the person at that time and in that place. It is necessarily just one limited picture, and the interviewee’s ability to draw inferences about the person and likelihood of child maltreatment is severely limited. When the interviewee is from a different culture than the interviewer, it can be especially difficult for that interviewer to know how to interpret what he or she is seeing and hearing. This article is a brief outline of some of the issues faced by professionals who interview, interrogate, examine, assess, and evaluate immigrant children and their families when there is a suspicion of child maltreatment. Professionals are encouraged to read further in this area, to learn about other important issues, such as nonverbal behavior, the use of silence, biases, boundaries, phrasing questions, and more, particularly as these pertain to interviewing immigrant children and their families (see Fontes, 2005; Fontes, 2008). When interviewers take positive steps to improve their cultural competence and when they give careful thought to their interviews with immigrants, they will be able to improve the accuracy and fairness of their work. This is especially critical when there is a suspicion of child maltreatment and there is so very much at stake.

Note


References


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