

Child Welfare

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PRACTICE FORUM

## Breaking the Communication Barrier: The Initial Interview With an Abusing Parent

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*The extreme difficulty of establishing effective communication in an initial interview with a parent accused of child abuse can be mitigated if the social worker employs behavior techniques that facilitate exchange of feelings and information.*

The initial interview with an abusing parent is an emotionally charged situation that demands great skill on the part of the social worker. The parent is upset, whether wracked by guilt for having injured his child, shame for having lost control of himself, or embarrassment over having his "inadequacy" exposed. The parent fears the legal or psychiatric consequences of child abuse, the degradation ceremony through which his social identity is lowered, [5:420-424] the rite of transition from a normal position in society to a deviant role. [4:9-21]

Degradation ceremonies are part of the sociology of moral indignation, [5] and perhaps nothing arouses moral indignation so quickly as child abuse. The "suspect" is confronted by a representative of "decent" society; his act is judged to be criminal or psychiatric, and he is placed into a deviant role, criminal or patient—for a particular period of time. [4:9-21] Whereas most time-limited

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roles, such as that of student, terminate with a ceremony, such as a graduation that welcomes the person into the general community, deviant roles are bestowed with a ceremony and terminate with hardly a whisper. There is no public ceremony to remove the deviant role and restore the person to his former social status. Once labeled, he retains the label for life. [4:9-21]

Since the parent ordinarily encounters the social worker during or following public denouncement, is it any wonder that he may be hostile and withholding, may attempt to deny or justify the act, and may find it difficult to believe that the social worker wants to help him? Those whom society has labeled deviant are suspicious of the "normals," for their thoughts and feelings are likely to be seen as manifestations of their deviance. [6]

There is ample literature to suggest that abusive parents frequently have low self-esteem and are especially sensitive to and simultaneously fearful and expecting of criticism, condemnation and consequent abandonment. They are often reluctant to discuss any aspect of their lives lest they reveal what they perceive as a series of failures. [11] Thus, the communication barrier is hard to penetrate.

The social worker is not without feelings about child abuse. It is difficult for anyone who has seen a battered child to remain open to the parents. How can the social worker provide the comfort the abusing parent needs so much? How can the worker communicate to the parent that he sees him not as a monster, but as a person who needs help? Horror and indignation are natural reactions. Given the parent's expectation of condemnation, however, the worker, by a revealing gesture, tone or facial expression or poorly chosen words, can fulfill the parent's prophecy and close off any possible help. To do his job with even a moderate chance for success, the social worker must fight his own feelings the entire time he remains in this area of service.

The social worker also must understand the dynamics of child abuse and the needs of persons who seek support from their children only to experience frustration and rage at the inability of the children to provide it. He must understand the relationship between child abuse and a corporate society where systems of demand increase while systems of relationship decrease. And he must recognize that the parent is also a victim of depersonalization and dehumanization that lead to alienation and despair. The social

worker must also have a repertoire of intervention behaviors that he can use to break the communication barrier and facilitate exchange of information and engagement of feelings. This paper focuses on six such behaviors during the initial interview, and the conditions under which each is most appropriate.

### Behaviors for the Worker

The behaviors are 1) positioning, 2) reaching for feelings, 3) waiting, 4) "getting with" feelings, 5) asking for information, and 6) giving information. [8; 15]

#### *Positioning*

Positioning refers to body orientation, distance phenomena and direction of gaze. Since there is ample evidence to indicate that such nonverbal behavior affects comfort and communicates positive or negative feeling, to break the communication barrier, the worker should position himself in ways likely to increase the parent's comfort and convey positive feeling.

The worker should place his chair at about a 60° angle to the parent's chair. This angle tends to signal "I am with you," generally associated with a side-by-side seating arrangement (180°) [16] as well as "This is a conversation," generally associated with a corner-to-corner arrangement (90°). [16] Research indicates that face-to-face seating tends to signal confrontation or competition; hence it should be avoided. [16] The 60° angle arrangement also eliminates the problem of forced eye contact. The parent need not look directly at the worker, yet he can by turning his head or body. In the face-to-face situation, the only alternative to direct eye contact, which can be exceedingly uncomfortable, is focusing one's eyes on the ceiling, floor or another area of the room. This is distracting, and tends to convey negative feeling. [3:15-20; 2:88-106]

Anthropological research suggests that the worker place his chair 20 to 36 inches from the parent, a distance North Americans tend to associate with the communication of personal, although not necessarily confidential, subject matter. [9:163-164] Confidential matter is ordinarily discussed at 12 to 20 inches. [9]

To communicate positive feeling, the worker should use asym-

metrical arm and leg positions, [12:359-372; 13:203-207] lean forward slightly, [14:204-236; 12] and engage in frequent, though not continual, eye contact. [3; 2] His voice should be moderate both in pitch and volume, [17:63-72] and he should avoid rapid speech, excessive gesticulation, [13] and fidgeting. [1:239-244; 14; 2]

In the following example, the worker begins his initial interview with an allegedly abusive mother by using the suggested positioning behavior. Note that the worker's initial statements are directed toward the emotional experience of the mother.

When I went into the room, Mrs. C. was already there. I pulled a chair over so we would be about 2 feet apart, angled it at about 60° to her, and sat down. "They really put you through the mill today," I said, leaning forward slightly. She turned her head toward me, and for a moment our eyes met. Then she turned away and said, "So what." "It can be a scary thing to go through," I said. Still looking straight ahead, she nodded a little. I waited.

#### *Reaching for Feelings [7]*

Reaching for feelings refers to the use of statements that either verbalize nonverbal behavior, such as "You are frowning," or describe the feelings people in this situation commonly experience, such as "That can be frightening." In most instances, statements of these types are preferable to questions such as "How do you feel?", for questions demand answers that the parent may be unwilling or unable to give. In the former instance, the question could further alienate the parent; in the latter, it could reduce his already low self-esteem. In either case, the communication barrier would increase. The idea is to give the parent a chance to verbalize his experience, not to demand that he do so.

It is particularly important to reach for feelings when 1) the parent does not express any emotion, 2) his expression of emotion is nonverbal, or 3) he expresses feelings not appropriate to such a situation. At such times, worker statements that reach for feelings can convey concern for the parent, and thus begin to break the communication barrier.

In the following example, a mother expresses incongruent emotion. The worker reaches for her feelings by describing the feelings generally experienced in such situations.

Mrs. L. said that her neighbors probably got sick of hearing Billy crying and screaming all the time. She said, "God knows, I don't blame them; I get sick of it myself sometimes. "But," she said, laughing, "I don't know why they called you people. That's the funny part." She continued to laugh. I said, "It can be upsetting to have a protective services worker come to your house like this." "You're damn right!" she said. "It isn't enough to have a kid that never stops screaming. Now everybody's trying to make out like I beat him up all the time."

In the next example, the worker reaches for a mother's feelings when she does not express any emotion.

Mrs. J. said, in a matter-of-fact way, that since her husband left her and the kids she's been managing fine by working at night and taking care of the two littlest ones during the day. "That can be exhausting," I said. "I am tired," she replied. "They won't even nap or anything and I hardly get any sleep at all."

In the following example, the worker reaches for the feelings of an allegedly abusive father by verbalizing the father's nonverbal behavior that seems to express emotion his verbal behavior does not.

Mr. K. told me, in a high-pitched, shaking voice, that he appreciated the hospital's concern for kids and was glad that doctors and nurses and social workers wanted to be sure that accidents were really accidents before letting a kid go back home. He said that people who use kids for punching bags don't deserve to have them. I said, softly, "Your voice is really trembling." There was a long pause, after which Mr. K. asked me if doctors could really tell the difference between accidental and intentional injury.

### Waiting

Once the worker has reached for feelings, it is important that he remain silent while the parent experiences whatever emotions the reaching behavior has generated. It is also appropriate for the worker to wait silently when the parent abruptly stops speaking or his nonverbal behavior seems to signal "time out." Waiting allows the

parent to engage in an internal dialogue through which he can contact his confusing or painful feelings, and/or compose himself to project an ego-syntonic self-image.

In the following example, the social worker reaches for feelings and then waits silently.

Mrs. D. said Bobby was always a handful, that spanking was the only thing he understood. Mr. D. agreed and gave a few examples of Bobby's disobedience. Mrs. D. added other examples, during which Mr. D.'s eyes filled up. "Mr. D.," I said, gently, "You look like you are about to cry." He denied it, and there was a long silence. I waited. Then tears rolled down his cheeks.

In the next example, the worker waits silently when a father falls silent.

Mr. T. said Eddie must have gotten into another fight with the kids at school. He said Eddie didn't look too good at dinner, but that he didn't know the boy was really bad off until he passed out on the steps. "I picked him up and rushed him over to emergency right away. They said he'll be okay, y'know, but . . ." I leaned forward a little and waited. After several minutes Mr. T. banged his fist on the chair and said slowly, in a tight voice, "It could happen again!"

In the next example, a mother's nonverbal behavior seems to signal "time out," so the worker waits silently.

Mrs. S. said all she did was slap him, that every mother slaps her kid once in a while. She said she loves Richard, that she hadn't meant to hit him that hard. Then she tilted her head back and covered her face with both hands. I waited. After a minute or two, with her face still covered, she said in a tiny, tearful voice, "I did it . . . I did it."

### "Getting With" Feelings

When a parent puts his feelings into words, it is crucial that the social worker "get with" those feelings by making a congruent statement such as "That's so hard," "They really put it to you," or "Wow." Thus the worker indicates to the parent that his feelings are understandable, and have been understood. It is hard for a par-

ent to talk openly without evidence that the worker understands how it is for him. Congruent statements are preferable to the common response, "I understand how you feel." From such a response, the parent has no way of knowing whether the worker really understands. Congruent statements demonstrate understanding, and are therefore more likely to break down the communication barrier.

In the following example, a social worker "gets with" the feelings of a young, allegedly abusive father.

Mr. H. said angrily that everybody wants and wants and wants. He said, "You might think it's enough I work two different jobs. Yeh. Full time at a department store and part time at a gas station. And what do I get when I finally drag my ass home at night? How tired *she* is. Y'know, I dropped out of college to marry her." There was a short pause during which he rubbed his hands together and looked at the floor. I waited. When he looked up again he said, "And the baby yells . . . and she tells me it's my turn because she's had it all day. It's a nightmare." "Wow," I said, "You keep giving, but nobody gives you anything." "It's gotta stop," he said.

### Asking for Information

Open-ended questions, such as "What happened?", are useful for exploration, while close-ended questions, such as "Did you call Mary?", can focus attention on key issues and clarify information provided. [10]

Open-ended questions generally yield more information per question, and allow the worker to avoid asking a string of close-ended questions that make an interview sound like an interrogation. It is also preferable to ask questions such as "What made you angry?" rather than questions such as "Why were you angry?" What-type questions asking descriptive information are far less threatening than why-type questions requiring the parent to formulate reasons, explain himself and submit his explanation to the social worker for a judgment.

In the following example, the worker "gets with" feelings, then asks an open-ended question.

Mrs. B. said everything is up in the air and she doesn't know if she is coming or going. "Wow," I said, "What's happening?"

In the next example, the worker uses a close-ended question to clarify information provided.

"They never did want me to keep the baby. Well, if the cops and everybody believe I did it, they'll get their way." "Who?", I asked. "My mom and her boyfriend," she said. "They're the ones who said it was me."

### Giving Information

Information given to the parent reduces uncertainty and the accompanying discomfort. The parent accused of child abuse needs to know what lies ahead of him, what alternatives are available, and the possible consequences of each. He also needs to know the condition of and prognosis for the child. Provision of such facts increases the parent's knowledge of the situation, hence his power to make choices.

In the following example, the social worker "gets with" a mother's feelings and provides information.

Mrs. O. was crying and rocking back and forth in her chair. "You've had a terribly hard day," I said. She looked at me and nodded. "Cindy?", she asked, with tears still running down her face. "Cindy has a broken arm and some bruises," I said. "The doctor said it was a clean break and should heal without much difficulty."

### Conclusion

Use of the six behaviors described is not limited to the initial interview, or to interviews with abusing parents. These behaviors are generic communication aids, helpful in work with colleagues as well as with clients. Reports from social workers indicate that use of the feeling-related behaviors tends to increase both the affect and the information that the other person—client or colleague—provides. ♦

### References

1. Dittman, Allen T.; Parloff, Morris B., and Boomer, Donald S. "Facial and Bodily Expression: A Study of Receptivity of Emotional Clues," *Psychiatry*, XXCC111 (1965).