

Trauma-Informed Virtual Interviewing

Why We Need This Approach

WEBINAR SERIES
Course Material
August 5, 2020



Presented by T9 Mastered, LLC
a joint venture of Public Interest Investigations, Inc. and
Sue Ann Van Dermynen, Esq. and Deborah Maddux, Esq.



T9 Mastered:
Trauma-Informed Virtual
Interviewing:
Why We Need This Approach
Resource Materials

August 5, 2020

T9 Mastered
770 L Street, Suite 950
Sacramento, CA 95814
916.245.2577
info@t9mastered.com
www.t9mastered.com

All materials are copyright 2020 by T9 Mastered Inc., unless otherwise specified. All rights reserved.

T9 Mastered LLC provides the materials in this manual for informational purposes only and not for the purpose of providing legal advice.



TABLE OF CONTENTS

1.	Biographies of Presenters	2
2.	PowerPoint Notes	4
3.	“Trauma-Informed Interviewing in Workplace Investigations,” Keith Rohman, Brenda Ingram and Cathleen Watkins <i>The AWI Journal</i> , Vol. 9 No. 2, July 2018	16
4.	“Being Trauma-Informed in the Time of COVID,” Keith Rohman, May 20, 2020, <i>The PII Blog</i>	22

Biographies

Dr. Brenda Ingram is a licensed clinical social worker who has over 30 years of working in the mental health and education fields specializing in trauma and cultural competence. She is the Director of Relationship and Sexual Violence Prevention and Services at the Student Counseling Center, Department of Psychiatry and Behavioral Sciences, USC Keck School of Medicine, where she is also a Clinical Assistant Professor.

She was formerly the Director of Clinical Services for Peace Over Violence, a non-profit that provides prevention and intervention for survivors of interpersonal violence and the Clinical Consultant/Coordinator for the YWCA Sexual Assault Crisis Services Program. She received her BA in psychology from UCLA, her Master of Social Work from California State University, Sacramento and Doctorate of Education from the University of Phoenix. She has been a consultant and trainer for various social service, mental health, criminal justice, law enforcement, and public health organizations on traumatic stress.



Keith Rohman is the founder and president of Public Interest Investigations, Inc., in Los Angeles, a legal investigations firm that has served educational institutions, public-sector employers, corporations, and the legal community since 1984. He has worked as an investigator in both the public and private sectors for more than 30 years.



During his career, Keith has been involved in numerous high-profile cases, including investigations involving the torture of prisoners at Abu Ghraib; the role of Blackwater, Inc., in the mass shooting of Iraqi citizens; the Rodney King case; and the enslavement of dozens of Thai workers in an El Monte, California, sweatshop. Keith has also conducted investigations in death penalty cases in California, Utah, Alaska, Arizona, and Washington.

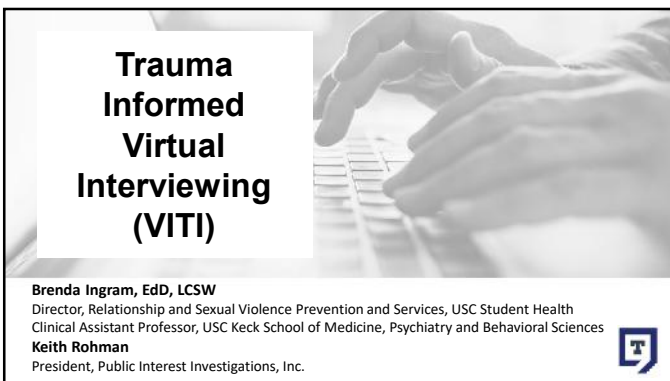
On campuses, Keith has investigated allegations of rape and other sexual assaults under Title IX at several Southern California campuses. He was the principal investigator for attorneys in landmark litigation filed on behalf of service women and men sexually assaulted in the U.S. military. In the workplace, Keith has conducted third-party investigations into allegations of sexual harassment, sexual assault, discrimination, and retaliation for private- and public-sector employers, including school districts and universities.

Keith is the past President of the Association of Workplace Investigators (AWI), a professional membership association for attorneys, human resource professionals, private investigators, and others who conduct or manage workplace investigations. Additionally, Keith is an Adjunct Professor of Law at Loyola Law School, where he teaches fact investigation. Previously, he was appointed by the L.A. County Board of Supervisors to the Equity Oversight Panel (EOP) of the Los Angeles Sheriff's Department, a civilian oversight board that oversees Internal Affairs investigations.

Keith has appeared as a guest on "CNN" and "Good Morning, America" and has been quoted in *The New Yorker*, *Newsweek*, and the *Los Angeles Times*. His articles have appeared in the *Cardozo Law Review* (Keith Rohman, *Diagnosing and Analyzing Flawed Investigations: Abu Ghraib as a Case Study*, 2009 *Cardozo L. Rev.* de novo 96), *Los Angeles Daily Journal* and the *Daily News*.







Learning Objectives

- Understand trauma and trauma-informed approaches
- Apply a trauma-informed framework for interviewing complainants and respondents for a Title IX investigation using virtual technology



Trauma

Understanding trauma is not just about acquiring knowledge:

- Changes the way you view the world
- Changes the helping paradigm from:
 “What is wrong with you?” to
 “**What happened to you?**”

- Sandra Bloom (2007)



What is Trauma?

Trauma is defined using eight general dimensions:

- Threat to life or limb;
- severe physical harm or injury, including sexual assault;
- receipt of intentional injury or harm;
- exposure to the grotesque;
- Violent, sudden loss of a loved one;
- Witnessing or learning of violence to a loved one;
- Learning of exposure to a noxious agent; and
- Causing death or severe harm to another

(Wilson & Sigman, 2000)



Type of Traumatic Experiences

- Physical trauma
- Medical trauma
- Psychological trauma
- Social or Collective trauma
- Historical or Intergenerational trauma
- Immigration trauma
- Developmental trauma
- Ongoing, chronic, and enduring trauma
- Vicarious or secondary trauma or “compassion fatigue”



Trauma

Psychological trauma is characterized by feelings of:

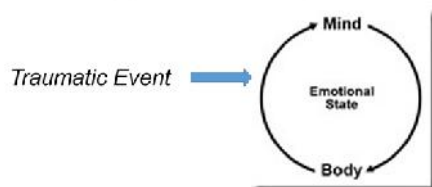
- Intense fear
- Helplessness
- Loss of control
- Threat of annihilation

Judith Herman, *Trauma and Recovery* (1992)



Trauma

Traumatic events are external, but they quickly become incorporated into the mind (Terr, 1990) and the body (Van Der Kolk, 1991).



Prevalence of Traumatic Experiences or Exposure

- Almost 70% of Kaiser adult patients (n=17,000) reported at least one traumatic experience before the age of 18. And about half reported 1-3 adverse experiences (ACE Study, 2010)
- Studies have reported 56-89% of college students have had at least one ACE, including the more severe ACEs and 22% reported symptoms consistent with PTSD (Doughty, 2018)
 - Community college students report an even higher rate (Anders et al., 2012)



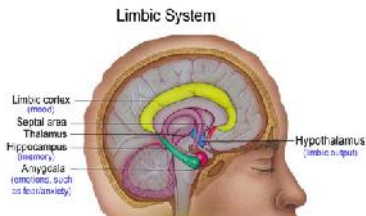
Prevalence of Traumatic Experiences for College-Age Students

- According to the AAU Survey (2015) about 23% of undergraduate women and 5.4% of men reported being sexually assaulted by physical force, incapacitation, or coercion.
 - Some student cohorts have even higher rates of traumatic experiences, e.g., Native American, LGBTQ, African American, and Latino.
- 66% of college students report experiences of sexual harassment. (National Sexual Violence Resource Center, 2018)
- Students who had traumatic experiences had a harder time adjusting to college.



The Stress Response

- The Brain

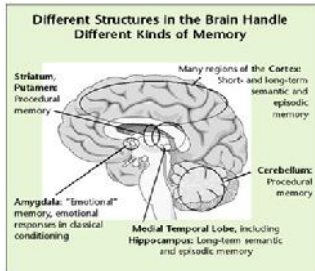


Traumatic Stress

- The reactions someone may develop after a traumatic event due to experiencing extreme stress.
- Reactions vary considerably.
- Some people experience anxiety, fear, shock and upset or even numbness.
- Some report disturbances in sleep, with nightmares.
- These reactions can interfere with activities of daily living.



Trauma and Memory



Trauma and Memory

- One of the mantras within the criminal justice system is
 - "Inconsistent statements equal a lie."
- Nothing could be further from the truth when stress and trauma impact memory, research shows.
- In fact, good solid neurobiological science routinely demonstrates that, when a person is stressed or traumatized, inconsistent statements are not only the norm, but sometimes strong evidence that the memory was encoded in the context of severe stress and trauma.

Strand (2013)

The Impact of Trauma on Victim Behavior

- The **effects** of trauma can **influence behavior** of a victim during an interview.
- People are often **reluctant** to recall experiences that evoke negative feelings and emotions such as anger, fear, humiliation, or sadness (Strand, 2013)
- Interviewees can be emotionally reactive and labile during an interview.



Trauma-Informed Care (TIC)

- An organizational structure and treatment framework that involves **understanding, recognizing, and responding** to the effects of all types of trauma on the well-being and behavior of survivors.
- TIC **emphasizes** physical, psychological, social and **moral safety** for both consumers and providers.
- TIC helps survivors **rebuild** a sense of control and empowerment..
- Additionally, a trauma-informed system of care requires closely knit collaborative relationships with other service system partners who should be trauma-informed as well.



What Does It Mean to Be Trauma-Informed?

- Acknowledging the pervasiveness of traumatic experiences in the general population, but also the extent that these experiences can influence a person's total well-being and functioning.
- Recognizing the signs of trauma in the interviewing process and how it impacts outcomes.
- Implementing techniques and practices that help interviewees feel safe and reduce the likelihood of re-traumatization.



Essentials of Trauma-Informed Care

- **Connect** – focus on relationships
- **Protect** – promote safety and trustworthiness
- **Respect** – engage in choice and collaboration
- **Redirect** (teach and reinforce) – encourage skill-building and competence

Hummer, Crosland, & Dollard, 2009



Trauma-Informed Forensic Interviewing

- The goals of a trauma informed forensic interview are to minimize any potential trauma to the victim, maximize information obtained from victims and witnesses, reduce contamination of the victim's memory of the alleged event(s), and maintain the integrity of the investigative process.
- The **Forensic Experiential Trauma Interviews (FETI)** is a trauma-informed interviewing approach.

Strand, 2013



Trauma-Informed Forensic Interviewing

- **FETI** is highly effective technique for victim, witness and some suspect/subject interviews.
- This concept and approach of this technique can be described as a *forensic psychophysiological investigation* - an opportunity for the victim to describe the experience of the sexual assault or other traumatic and/or fear producing event, physically and emotionally (Strand, 2013).



Trauma-Informed Forensic Interviewing

Interviewees need to feel safe at all times.

- Make sure the environment is comfortable, quiet, private
- Ask questions about how the person is feeling about the process so far. Acknowledge how difficult this can be to go through this process.
- Explain your role and what you will be asking in general.
- Use empathy to build a relationship with the interviewee.



Trauma-Informed Forensic Interviewing

- Ask what is the person able to tell you about their experience.
 - "tell me more about that..."
 - "what do you remember about that..."
- Ask the person if they remember any smells, sounds, tastes, or sights. This triggers the memories of the event
 - "Do you remember any smells?"
 - "Do you remember if he/she had a particular smell?"
 - "Do you remember any sounds in the room or outside?"
- "What was the most difficult part of this experience for you?"
- "Is there anything about this experience that you can't forget?"



Trauma-Informed Forensic Interviewing

- Ask interviewees how they were feeling during the incident. Non-consensual sex vs coerced/forced sex are different:
 - Embarrassment
 - Fear
 - Shame
 - Humiliation



Trauma-Informed Forensic Interviewing

- Here are some statements that you might hear from victims that help to corroborate their story:
 - “I thought I was going to die”; “I tried to move but my arms or legs did not work”; “I couldn’t stop him/her”—not said during consensual sex
- Argumentative with interviewer
 - Don’t personalize
- Difficulty focusing or concentrating on questions
- Flat affect, mood swings, anger
- Allow the interviewee to control the narrative; interviewer is a facilitator



Virtual Interviews

- Virtual Interviewing: Conducting an interview with someone either through a phone call or digital/video platform, e.g., Skype, Zoom, etc.
- Trauma-Informed Virtual Interviewing (TIVI): Using the principles and practices of a trauma-informed interview in a digital/video/telephonic modality
- Differences between investigators and mental health professionals in trauma-informed practice



Disadvantages of virtual interviews—

- Talking to a computer screen about highly stressful or personal issues
- Problems developing rapport and showing empathy
- Privacy and safety issues
- “Zoom Fatigue”



Advantages of virtual interviews–

- Some may feel safer talking from familiar environment
- Avoids intimidating meetings in anonymous conference rooms
- In this time of COVID-19, in-person interviews are not what they used to be. . .
- Ability to include advisors and others from far away



Pre-interview technology issues–

- Strong reliable internet
- Camera placement
- Pre-interview testing
- Have a back-up plan



How you appear on screen–

- A room of your own.
 - Quiet. Private. No interruptions.
- Professional and clutter-free background
- Lighting matters
- Dress the part
- Pets - the X factor



Trauma Informed Virtual Interviewing (TIVI)

- Building rapport is paramount when conducting interviews, especially virtual interviews.
- All standard in-person interview rules apply– speak clearly, slowly, wait before speaking, don't do over-talk, etc.
- Make "eye contact." Don't stare at the computer screen during your virtual interview or it will seem that you are peering downward. Instead, look directly at the camera to create the appearance of direct eye contact;
- Create a "digital handshake."
- In-person interviews start with a handshake. Since you can't do this virtually consider how to create a friendly opener. A wave is too informal, but you may choose to nod and say "It's so nice to speak with you today."
- Body language and facial expressions matter. Smile, maintain good posture, and avoid too much movement or gesturing. Aim to convey warmth and confidence.



Role Plays Videos

- We are going to watch 2 role play videos with Keith, a Title IX investigator and Jane, a student complainant.
- After each video we will take a couple of minutes to debrief it.
 - What behaviors of Keith reflected a trauma-informed approach?
 - What behaviors were problematic for a trauma-informed approach?



After the Interview

- **Debrief with the person about the interview**
 - Check-in with interviewee to make sure they are "ok" to leave. Remember this is a challenging experience for interviewee and you want to try to help them get some closure before they leave the interview.
 - Let the interviewee know that things may come up in their memory and how to contact you to give more information.
 - Explain next steps in the investigation process.
- **Make sure interviewee is given resources for emotional support**
 - Inform interviewee that these types of interviews can trigger other stressful memories
 - Give some tips on how to handle triggers when they arise from interview



Self Care When Working with Trauma Survivors

- Trauma is contagious.
- Like the interviewee, an interviewer may experience a variety of emotional reactions that manifest itself as secondary or vicarious traumatization or compassion fatigue.
- An interviewer could experience PTSD reactions, relive a personally traumatic experience, or suffer from witness guilt.
- Because forensic interviewers may experience a wide array of emotional reactions after an intense interviewing session, they must implement various safeguards to ensure a supportive and safe work environment.
- Before an interview, an interviewer should anticipate vicarious trauma reactions, and after an interview, the interviewer should debrief after hearing a traumatic story.



Self-Care Activities

- Practice deep breathing
- Progressive muscle relaxation
- Guided imagery
- Taking mini-vacations
- Mental health days
- Gardening
- Exercise, yoga, dancing
- Meditation, spiritual, religious activities
- Having fun





Trauma-Informed Interviewing in Workplace Investigations

By Keith Rohman, Brenda Ingram, and Cathleen Watkins



Trauma is part of the world we live in, and trauma survivors are present in every workplace. Some people are exposed to trauma on a daily basis as part of their jobs, such as first responders or mental health professionals. Others experience trauma as part of a work-related incident, such as workplace violence, a serious industrial accident, or a sexual assault. Finally, some employees experience trauma in their personal lives that influences how they respond to events at work.

To conduct effective investigations, workplace investigators need to recognize the signs of trauma and understand how it affects complainants, respondents, and witnesses. Recent studies in neuroscience show that trauma leaves an indelible imprint on the brain and impacts memory, perception, and the ability to recount specific events. In this article, we suggest a new paradigm for workplace investigators when interviewing those who have been directly exposed to trauma or are closely connected to those who have.

What Is Trauma?

We now know that the impact of trauma is not confined to veterans suffering from combat fatigue, and many people have been exposed to traumatic events, either directly or indirectly, or are close to those who have. The Substance Abuse and Mental Health Services Administration, an agency within the U.S. Department of Health and Human Services, defines trauma as resulting from “an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional or spiritual well-being.”¹

Other researchers define psychological trauma as “the unique individual experience of an event or enduring condition, in which: the individual’s ability to integrate his/her emotional experience is overwhelmed, or the individual experiences (subjectively) a threat to life, bodily integrity, or sanity.”²

Based on these definitions, job-related trauma can be caused by sexual assault; severe or pervasive sexual harassment; experiencing an accident on the job, either by being the victim or a witness; workplace violence or bullying; stalking; operational decisions such as downsizing, mergers, or forced reassignments; and discriminatory or retaliatory behavior that leads an employee to feel overwhelmed and unable to cope.

Additionally, survivors of child abuse, domestic violence, serious criminal acts, natural disasters, or military conflict are employed in all types of jobs; they are managers, support staff, line operators, IT personnel, and customer service representatives. In short, they are our coworkers, and they may become part of a workplace investigation. Their life experiences may impact how they recall events or react to future events in the workplace.

Differences in Professions

The term “trauma-informed” is now used in the fields of health care, mental health, law enforcement, education, and social work. It describes a way of interacting with people in a professional capacity that recognizes they may have been impacted by trauma.

Workplace investigators are not typically mental health professionals. Even if they had such training, their role as an investigator places them in a substantially different relationship with the people they are interviewing. This article is a collaboration of two experienced investigators and a clinical social worker, and we are mindful of the important distinctions between the two professions. Psychologists, social workers, therapists, and others working in mental health have different objectives, different confidentiality restrictions, different reporting requirements, and different training than investigators have. In addition, investigators’ procedures and the resulting reports are scrutinized in different ways than the work of mental health professionals and are sometimes subjected to legal challenges.

Despite the differences, however, both professions rely on asking people about information they possess and learning from the narratives that unfold. Professionals in both fields struggle at times when asking people to describe difficult experiences. These challenges are magnified when the interviewee shows signs of trauma and is at risk of being retraumatized by talking about what happened.

Your job as an investigator is to conduct the investigation even when trauma is a factor. Given the goal of obtaining the maximum amount of information without causing the interviewee unnecessary stress, interviewers are reconsidering how they approach traumatized witnesses. The Forensic Experiential Trauma Interview (FETI) process was developed by Russell Strand, formerly a senior special agent in the United States Army Criminal Investigations Command.³ FETI was designed especially for interviewing traumatized individuals and is discussed in more detail below.

The FETI approach recognizes that when a person is traumatized, his or her ability to recall information is changed. Usually interviewers ask questions that use the “cognitive” brain (the thinking brain, or the prefrontal cortex). However, when someone has undergone an extreme stressful event, the “cognitive” brain tends to shut down, and the more “primitive” brain (limbic system and brain stem) takes over.⁴

How Trauma Affects People

Bottom line, trauma impacts memory. As J. Douglas Bremner, MD, of Emory University School of Medicine wrote, “Clinical studies have shown alteration in memory function following traumatic stress, as well as changes in a circuit of brain areas . . . that mediate alterations in memory. The hippocampus, a brain area involved in verbal declarative memory, is very sensitive to the effects of stress.”⁵

Following a trauma, a person may only have fragmented memories, or memory gaps and inconsistencies.⁶ Studies have shown that certain details that were most significant to the person experiencing the trauma can be strongly encoded and stored, while “peripheral details” may not be remembered. These details can fade quickly or be recalled inconsistently.⁷ The authors of this article have direct experience with people reporting sexual assault, who often tell us they have snippets or flashes of memory, rather than full, linear recollections.

Trauma leaves an indelible imprint on the brain and impacts memory, perception, and the ability to recount specific events.

Significantly, as Jim Hooper, PhD, writing in *Psychology Today* noted, the interviewee’s idea of what was central and what was peripheral may be very different from the person asking the questions.⁸ Put more simply, what is important for us as investigators may not have been that important to the person experiencing the trauma. A person experiencing a sexual assault or other trauma will sometimes withdraw mentally and focus on a seemingly incidental detail, such as an object in the room where the assault occurred, or a sound in the distance.⁹

“Remembering always involves reconstruction and is never totally complete or perfectly accurate,” Hooper writes. “Such gaps and inconsistencies are simply how memory works—*especially* for highly stressful and traumatic experiences . . . where the differential encoding and storage of central vs. peripheral details is the greatest.”¹⁰ This reality undoubtedly impacts the investigator’s

primary objective, which is to collect memory-based information, sometimes weeks or months after an incident has occurred.

Addressing Trauma’s Impact on the Investigation

Investigators are highly dependent on peoples’ memories, and routinely want to know who, what, where, when, why, and how from witnesses. Workplace investigators routinely ask about prior conversations, the chronological order of events, and thought processes and decision making.

These basic investigative questions target information that is accessed through the integrative functions of the prefrontal cortex, which brings together various types of memories stored in other brain structures into a chronologically ordered narrative. Generally, most people are able to give dependable, fact-intensive descriptions of events. In the majority of cases, the tried-and-true interview techniques used to investigate workplace allegations of misconduct are still reliable.

However, investigators may be required to interview those who fall outside this normal paradigm. Neuroscience and the neurobiology of trauma tell us that when witnesses have been stressed or traumatized, inconsistent statements should be expected, and could even be evidence the memory was laid down in the brain at a time of high stress and trauma.¹¹ As Strand notes, “Most trauma victims . . . are not only unable to accurately provide . . . information [about specific details], but when asked to do so often inadvertently provide inaccurate information and details which frequently cause the fact-finder to become suspicious of the information provided.”¹²

These observations about trauma and memory upend significant assumptions workplace investigators and others in the law make about credibility. For investigators and attorneys, inconsistent statements are typically seen as undermining the witness’s credibility and can factor significantly in how witness information is analyzed. In fact, the California Civil Jury Instructions cite inconsistent statements as among the factors jurors can use in assessing witness credibility.¹³

We understand that these new concepts about the impact on trauma on memory may be unsettling and controversial for experienced workplace investigators. And we recognize that this article will not resolve this controversy. Scientific research into trauma and memory is still unfolding, and there is no clear consensus yet on how investigators should navigate the credibility issues entwined in trauma and witness inconsistencies.

Fortunately, we do not need to resolve all these issues to conduct effective interviews with trauma survivors. There are relatively simple techniques that workplace investigators can utilize to draw out a witness’s fullest recollections, some of which are already part of current practice. Making other small changes in how interviews are conducted and how questions are worded (discussed

below) can go a long way toward obtaining more accurate and useful information.

Interviewing More Primitive Parts of the Brain

As discussed above, the more developed parts of the brain, which constitute our consciousness, may not be able to access key details fully when undergoing trauma. Several parts of the brain—the amygdala, hippocampus, and prefrontal cortex—play important roles in both stress response and memory. This interplay between memory and trauma response can provide directions on how to effectively interview trauma survivors.¹⁴

To overcome the hurdles associated with incomplete memory recall, the FETI process works to increase the investigator's understanding of the witness's experience, and thus develop a better picture of the totality of the event.¹⁵

Many of the objectives of the FETI process align with our usual goals in an interview. We want to maximize the information obtained, reduce contaminating the interviewee's memory, and maintain the integrity of the investigation. The FETI process also seeks to minimize potential harm from retraumatization of the interviewee, which further serves the general goal of getting reliable information.

Aspects of the FETI approach that are already familiar to skilled workplace investigators include building rapport, explaining our role in a transparent manner, and using active listening skills and a neutral, nonleading process.

The FETI process adds another useful layer to our long-used interview practices. This approach starts even before the investigator asks the first question. Because those affected by trauma need to feel safe, investigators should have a comfortable, quiet, and private space for the interview, and have water and tissues available. Allowing the witness to choose where to sit is also important. Because traumatized witnesses worry about giving up control, let the witness select where to sit before the interview starts, even if it merely means picking one chair over another.¹⁶ Offering witnesses this choice is a simple way of giving them some control to create a comfortable environment.

Once the interview starts, investigators need to be able to recognize the signs of trauma and be alert for them. These signs include lack of focus, fragmented or inconsistent memories, memory gaps, nervousness, confusion, disorientation, exhaustion, anxiety, and blunt affect.

Witnesses who are very anxious or stressed can sometimes feel compelled to use their hands and will benefit from doodling, playing with pipe cleaners, or using a fidget spinner. Article authors Rohman and Watkins once interviewed a college student about a sexual assault, and while responding to questions, the witness unwittingly shredded their business cards into countless little pieces.

For this witness, having fidget objects within reach likely would have had a calming effect and also alleviated the awkward apology the witness offered later for destroying the cards.

Offering a drink of water to someone revisiting trauma has several beneficial aspects. There is the basic caring dynamic involved in offering a drink, which can help build rapport. In addition, the act of drinking water requires a person to also breathe, which can be inherently calming.

Many, if not most, people find speaking to an investigator akin to going to the dentist, and any witness can be mistrustful and apprehensive. Investigators already know the opening moments of any interview are critical to building rapport, but this is magnified exponentially when trauma is a factor. When talking to trauma survivors, investigators need to demonstrate transparency and build trust. Before posing any questions, explain your role and what you'll be asking. If the witness seems reluctant, be prepared to offer a motivational statement that will encourage participation. For example, in sexual harassment investigations, reticent witnesses will sometimes open up if they believe that by doing so, they may help others or prevent harm to others.

When witnesses have been stressed or traumatized, inconsistent statements should be expected.

It can be helpful to let the interviewee know he or she is not alone, that others have also come forward. Although a workplace investigator cannot usually identify other witnesses, a motivational statement in this situation might be: "We are talking to lots of employees about this situation. Your experience will help management put together a complete picture of what happened."

Once the witness is comfortable, the FETI process, like other effective interview practices, advises the investigator to actively listen and to show empathy. Acknowledging that the witness experienced a traumatic event goes a long way toward achieving witness trust, but this must be done in a way consistent with our role as neutral investigators. Although therapists can use phrases like, "I'm so sorry this happened to you," or "I know this was a tough thing to experience," such statements are inappropriate coming from a neutral fact finder.

Neutral investigators can show empathy by recognizing the difficulty of the complaint process without acknowledging that an incident took place. Phrases like, "I can see this is hard for you to talk about," can show empathy without confirming any factual bases.

Asking Trauma-Informed Questions

Front and center in most investigators' traditional toolkit is a basic set of questions, many of which focus on chronological order. How many times have you told a witness to "start at the beginning," or asked "What happened next"? These techniques target sequencing information stored in the prefrontal cortex and are designed to elicit a linear narrative.

A trauma-informed process is built on a different paradigm. It is designed to get at information stored in other parts of the brain, and to build the investigator's full understanding of the events, even when the witness has only fragmented memories.

Because trauma so significantly impacts the whole memory process, FETI focuses on drawing out what the witness is able to share. Rather than leading with, "Start at the beginning," investigators can say, "Start where you feel comfortable," or "Tell me what you remember." This simple, but effective, technique lets the witness choose a starting point. It gives the witness control over how the narrative unfolds and minimizes contaminating fragile memories.

"What happened next?" may be the most used question in traditional investigations. But, given the nonchronological recollections that can derive from a trauma situation, this standard question can effectively shut witnesses down; trauma survivors may be trying to fit the round peg of what they actually recall into the square hole of our question. Asking, "What else happened?" or "What else do you remember?" can be more productive when trauma is present.

There is no clear consensus yet on how investigators should navigate the credibility issues entwined in trauma and witness inconsistencies.

Establishing a chronology is an important part of investigations. However, focusing too rigidly on getting a chronology from a trauma survivor can be counterproductive and prevent the fullest possible disclosure. In addition, workplace investigators now usually have electronic data that can pinpoint when things occurred, leaving us less reliant on witness memories to establish timing. Text messages, cell phone logs, emails, Facebook messages, and other social media provide time-stamped data that is often more reliable than witness recollections.

There are other concerns about how we ask questions, concerns that are heightened with potential trauma survivors. In an important finding, Elizabeth Loftus, a psychologist who conducted ex-

tensive research on eyewitness testimony, showed that people will change their responses based on how a question is posed. In 1974, Loftus and her colleague, John Palmer, conducted experiments on the impact of leading questions by asking students to watch films of road accidents and to estimate the cars' rates of speed. Loftus and Palmer used different verbs in their questions, asking if the cars "smashed," "collided," "bumped," "hit," or "contacted." They found that based on which of verbs they used, the students changed the estimated speed of the vehicles.¹⁷ When suggesting that the cars "smashed," the students estimated the cars traveled at 40.8 mph, the fastest rate. However, the verb "contacted" drew an estimated speed of only 31.8 mph from the students, the slowest rate.

It is important to note that the work of Loftus and Palmer was conducted on students who had not suffered any trauma in connection to the researchers' questions. Given what recent brain science tells us about the intersection of trauma and memory, investigators need to take even greater care not to influence traumatized witnesses inappropriately by asking questions that signal a desired response.

When experiencing traumatic events, some witnesses report becoming frozen. According to an article in *Scientific American* entitled, "Sexual Assault May Trigger Involuntary Paralysis," tonic immobility is a "state of involuntary paralysis in which individuals cannot move or . . . even speak."¹⁸ The article cites a new study, published in *Acta Obstetrica et Gynecologica Scandinavica*, of 298 women who went to a rape clinic after an assault. Seventy percent of these women said they "experienced at least 'significant' tonic mobility and 48 percent met the criteria for 'extreme' tonic mobility during the rape."

Although scientists are still researching the frequency of tonic immobility or similar nonresponsive reactions, Strand notes that asking questions that get at why traumatized individuals did not call for help sooner, or why they did not assist others, can retraumatize them, and cause them to shut down. Such questions may also create, or compound, shame for witnesses by focusing on a failure to defend themselves. Instead, by asking people to share what they were thinking during an attack, witnesses may say, "I couldn't move or scream," or "I couldn't understand what was happening at that moment."¹⁹ Those answers help the investigator understand why people responded as they did and will help build a full picture of what happened.

Other questions investigators can ask include:

- What was your thought process during the event?
- How did you react physically? Emotionally?
- What was the most difficult part of the experience for you?
- Is there something about this experience that you can't forget?

Getting at Sensory Information

Trauma-informed questioning can include an area that workplace investigators rarely ask about: information about sensory details. During a traumatic event, the primitive part of the brain records sensory information more effectively than cognitive facts. Asking about these sense memories, like sounds, smells, sights, and touch, can enable a victim to begin remembering and talking about what happened in a manner that provides significantly more information.²⁰

Sense memories can be a key to unlocking other memories. Strand referenced an interview with a police officer who was involved in an unsuccessful attempt to prevent a gun-related suicide. When the police officer was asked if he recalled any particular scent or smell in the moments after the suicide, the officer said in an animated manner that he had smelled honeysuckle. The officer was then able to provide several other details about the incident, presumably because the honeysuckle memory triggered other recollections.²¹

Follow-Up Questions

Once the interviewee has provided his or her account, the investigator can then circle back to ask some follow-up questions for clarification and to try to fill in gaps in the narrative. However, a trauma-informed process requires the investigator to continue to be mindful of how the questions are phrased. The questions should be asked in a nonleading and sensitive manner that does not contaminate the witness's recollections.

Closing the Interview

Endings are as important as beginnings in all interviews, but they can be even more meaningful in a trauma-informed interview. Just talking about traumatic experiences can trigger severe emotional reactions in witnesses, including nightmares or intrusive thoughts. The investigator can play an important role in dealing with this potential fallout.

During the closing moments of the interviews, the trauma-informed investigator advises the witnesses that they may have emotional reactions to having participated in the interview and to be prepared for these feelings. Therefore, the interviewer should conclude the questioning by again showing empathy to the witnesses while still using language appropriate to a neutral process. It is always appropriate to thank the witnesses for their cooperation, and to acknowledge that these are difficult subjects to talk about. If the organization has resources for the witnesses, such as an Employee Assistance Program or other counseling, the investigator can make sure the witnesses know about these resources.

One final point is that trauma is contagious. Investigators' contact with trauma stories can impact them in unexpected, negative ways, a phenomenon referred to as "secondary trauma." Secondary trauma is especially problematic when investigators have repeated contact with those who are traumatized, and even limited exposure can bring on secondary trauma. Self-care tech-

niques such as talking with a colleague or therapist, engaging in physical activities like hiking or exercise, and enjoying music or other artistic endeavors are important components of a successful trauma-informed approach to the interview process.

Summary

We are not suggesting workplace investigators throw out their old playbook on how to conduct interviews. In fact, many of our traditional interview approaches are critical to a trauma-informed approach, including building rapport, being transparent about our role, showing empathy, and posing neutral, nonleading questions.

A trauma-informed interview approach supplements these techniques. Asking about sense memories, providing witnesses some modest control over the physical space where the interview takes place, being alert to the signs of trauma, and understanding possible differences in recollection and memory are just a few of these useful tools.

Brain science tells us that memories are fragile and imprecise, yet as investigators we rely on memories to put together a picture of what happened. Understanding trauma is a new area for most investigators, and as science's understanding of trauma and memory increases, the field of investigation needs to evolve as well. This article is not meant to be the final word on how interviews should be conducted; it is meant to increase understanding and serve as a starting point for continued discussion about these important issues.



Keith Rohman, the founder of Public Interest Investigations, Inc., in Los Angeles, is a recognized expert in the investigations field who has more than 30 years of experience conducting investigations, including investigating allegations of torture at the Abu Ghraib prison in Iraq and assisting attorneys representing capital murder defendants. He is the current president of the AWI Board of Directors and an adjunct professor at Loyola Law School, where he teaches Fact Investigation. He can be reached at rohman@piila.com.



Brenda Ingram is the director of clinical services for Peace Over Violence in Los Angeles, a licensed clinical social worker, and an educator in the mental health and education fields. Dr. Ingram frequently lectures on trauma-informed interviewing. She has been a lecturer with the UCLA Social Welfare Department and was a faculty member in the Marriage and Family Therapy Department at Pacific Oaks College, where she developed their specialization for African-American mental health. She can be reached at brenda.ingram4@Verizon.net.



Cathleen Watkins is a senior investigator at Public Interest Investigations, Inc., in Los Angeles. She is a licensed private investigator with more than 20 years of experience conducting investigations in the workplace and in educational settings, including numerous investigations involving

traumatized individuals related to complaints of sexual misconduct on college campuses. She is also the program manager for T9 Mastered, Inc., a training program on how to conduct campus sexual assault investigations. She can be reached at cwatkins@piila.com.

1. Substance Abuse and Mental Health Services Administration, available at <https://www.samhsa.gov/trauma-violence>

2. Laurie A. Pearlman, & Karen W. Saakvitne, Trauma and the Therapist: Countertransference and Vicarious Traumatization in Psychotherapy with Incest Survivors. New York: W.W. Norton, xix. Page 60. (1995)

3. Russell Strand & Lori D. Heitman, *The Forensic Experiential Trauma Interview*, available at <http://www.azcvts.net/wp-content/uploads/FETI-Public-Description-Jan-2017.pdf> (2017)

4. *Id.*

5. J. Douglas Bremner, MD. *Traumatic stress: Effects on the brain*, Dialogues in Clinical Neuroscience, (2006), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3181836/>

6. Jim Hooper, PhD, *Sexual Assault and Neuroscience: Alarmist Claims vs. Facts*, Psychology Today, (2018); available at <https://www.psychologytoday.com/blog/sexual-assault-and-the-brain/201801/sexual-assault-and-neuroscience-alarmist-claims-vs-facts>

7. *Id.*

8. *Id.*

9. *Id.*

10. *Id.*

11. *Id.*

12. Russell Strand & Lori D. Heitman, *The Forensic Experiential Trauma Interview*

13. CACI no. 5003. *Witnesses*, available at <https://www.justia.com/trials-litigation/docs/caci/5000/5003.html>

14. J. Douglas Bremner, MD. *Traumatic stress: Effects on the brain*

15. R. Strand & L. Heitman, *The Forensic Experiential Trauma Interview*. <http://www.azcvts.net/wp-content/uploads/FETI-Public-Description-Jan-2017.pdf> (2017)

16. Workplace investigators also need to be careful about their own personal safety, including making sure they have an exit strategy with potentially volatile interviewees. In those situations, an analysis of competing priorities should be made.

17. Saul McLeod, *Loftus & Palmer*, Simply Psychology (2014), available at: <https://www.simplypsychology.org/loftus-palmer.html>

18. F. Russo, *Sexual Assault May Trigger Involuntary Paralysis*. Scientific American, (2017).

19. Russell Strand & Lori D. Heitman, *The Forensic Experiential Trauma Interview*

20. *Id.*

21. *Id.*



2018 AWI Annual Conference October 11–13, 2018

Hyatt Regency San Francisco Airport

*Visit www.awi.org
for more details.*



Being Trauma-Informed in the Time of COVID

May 20, 2020

By Keith Rohman

Trauma comes in all shapes and sizes, and as investigators we see it all. Whether it is someone reporting a sexual assault in a [Title IX investigation](#), a mitigation witness in a death penalty case, or the survivor of an auto accident, investigators regularly encounter the impact of trauma. Some people we interview have suffered trauma unrelated to our investigation, such as loss of a loved one or childhood abuse.

Interviewing people who have experienced trauma is never easy. With COVID-19 and the need for [video interviews](#), it is harder than ever. Investigators need to find new approaches to conducting trauma-informed interviews, so we can get people's accounts as completely and accurately as possible.

The hurdles are obvious. The first, of course, is the trauma of living through COVID-19. Everyone's life has been dramatically disrupted. Some have experienced the loss of a family member or live in fear for the vulnerable people they are close to. Many college students have lost their independence and are back home. Hopefully, those are supportive and loving environments; sadly, they are sometimes toxic and even dangerous.

Talking about intimate personal matters to an investigator is often hard, but many witnesses find it even more difficult when the conversation is through an anonymous camera lens. This can be especially true when privacy is at a premium in many homes. At the same time, those accused of misconduct are dealing with heightened fears about the investigation. The possibility of losing your job or being expelled from school is highly stressful in the best of times; these are not the best of times.

Fortunately, there are approaches you can take to effectively conduct trauma-informed interviews remotely. The first step is for investigators to acknowledge the hurdles and how the

loss of in-person contact affects the investigative process. Then, you can move toward techniques and strategies to mitigate this with a trauma-informed approach for video interviews that incorporates transparency, support, and rapport-building.

When starting the interview, spend more time discussing the circumstances and situation around the witness. Talk about the challenges of doing this interview on a video platform and not in person. Ask whether they are in a safe place to talk. Do they have enough privacy? If the witness has concerns about privacy, try to problem-solve with them. Maybe they can talk to you in a car or garage or backyard. A campus Title IX hearing officer told me about students testifying at video hearings from inside a bathroom or a closet. In any event, your offer to help problem-solve can build rapport by demonstrating that you are thinking about their situation.

Set up a process at the beginning for how the witness can contact you by text or phone if they have difficulties with the connection or if their privacy is interrupted. On your own side, as PII has discussed in an earlier blog on [conducting remote interviews](#), make sure your background looks professional, without personal photos or artwork that might distract the witness.

Our voices and our faces are the only tools we have on video conferences, so make sure the technology works to your advantage. Too many investigators are conducting video calls without the right lighting. Poor lighting makes you appear fuzzy. If your lighting is less than ideal, consider getting a “selfie” light or other type of webcam light. They are inexpensive and very effective. Run a test call with a colleague to make sure all of these pieces are working.

Timing matters as well. Trauma-informed video interviews should be short, ideally not more than an hour. Google “Zoom fatigue” if you want to better understand why. This means investigators need to decide ahead of time what information is critical. We sometimes think we need every detail; being trauma-informed means accepting that may not happen.

Finally, use the tools you already have for showing empathy and caring. Use a warm tone of voice. Being calm and centered can calm the witness. Slow the pace of your comments and questions a bit. Closely watch how the witness is doing, and if they look stressed, suggest a short break. Even if they say they want to keep going, tell them you need a quick break and take a second to stand up and stretch. It can lighten the mood a bit.

And do not forget your own self-care. Being trauma-informed means you know that trauma is contagious, and in these days, we are all living with a heightened level of stress.

There is *much* more to say about this subject, and PII’s [Title IX training affiliate, T9 Mastered](#), will be hosting a webinar on this subject. Send us an email at piila@piila.com or join T9 Mastered’s [mail list](#) to be notified of this event, which will feature myself and trauma expert Dr. Brenda Ingram.

[Keith Rohman](#) is the president of Public Interest Investigations, Inc. He has been a licensed private investigator for more than 35 years. He has extensive experience conducting trauma-informed interviews on cases ranging from death penalty matters to campus sexual assault allegations. Dr. Brenda Ingram provided invaluable assistance in preparing this post.