

CHAPTER ONE



What You Need to Know Before You Begin Interviews

We advocate a team approach to adoption and foster care placement in which private and public social agencies designate specific social workers, known as screeners, to be responsible for screening adoptive and foster applicants; a second category of social workers, known as child care specialists, to be responsible for supervising children once they have been placed in adoptive or foster homes; and a placement team composed of the screener, the child care specialist, the protection worker who worked with the family before the child came into care, and an adoption or foster home supervisor, to be responsible for matching the child with the caregiver. All have important roles to play in the process, but the screener establishes the pace for everyone else and determines the ultimate disposition of the child.

Our purpose in writing this book is to help facilitate best practice guidelines for adoptive and foster care selection. Our evidence-informed recommendations for raised standards may initially reduce the number of approved adoptive and foster home applicants available for use by public and private agencies, but we are convinced that whatever shrinkage occurs as a result of raised standards will be compensated for by more stable placements with fewer disruptions. When it comes to adoptive and foster care placements, *less is more* if it results in greater stability among caregivers and a better quality of life for children. Far too many adoptive and foster homes fail, resulting in new placements for the child, a cycle that, once begun, sometimes stretches to six, eight, 10, even 20 placements, each taking a destructive emotional toll on the child.

Adoption disruption seems an overly sterile term with which to describe the enormous emotional pain that accompanies adoptive breakdowns. For children who have endured multiple foster home placements prior to adoption, a breakdown of their “forever” family cannot help but be devastating. The percentage of adoption placements that fail is smaller than it is for foster home placements, and the reason for that can be found in the different motivations that define adoptive and foster parents. Those differences will be explained in later chapters.

National statistics on adoption failures owing to inadequate screening are hard to come by, but one in 10 is a reasonable estimate (estimates in Michigan run from 3 percent to 15 percent). Accurate statistics on foster home breakdowns are easier to access. Recent data shows that 34 percent of the children in foster care in Oklahoma have been moved four or more times, with 17 percent subjected to six or more placements (see <http://www.childrensnrights.org>).

Basic math reveals that half of all foster children in that state experience more than four placements. Statistics gathered by the Pennsylvania Department of Public Welfare show that 41 percent of the children in foster care in that state experience two or more foster home placements (Rubin, Alessandrini, Feudtner, & Mandell, 2004). In Illinois, about 40 percent of children in foster care experience three or more relocations (see www.cfrc.illinois.edu/LRpdfs/PlacementStability.LR.pdf)¹ In the lawsuit, *Braam v. State of Washington*, which sought to improve the quality of foster care in that state, it was disclosed that Jessica Braam, for whom the case was named, experienced more than 34 placements after being removed from her parents and placed in foster care at age two (see Roberts, 2005).

The fallout from failed placements extends to every facet of society: Adults who were placed into foster care as children in Oregon and Washington suffer posttraumatic stress disorders twice as often as U.S. war veterans; one-third of former foster children in Oregon and Washington live at or below the poverty line, three times the national poverty rate (see Roberts, 2005).

Although placement failure rates vary from state to state, the emotional damage that results from those failures is consistent across the nation, regardless of geographical location. In 2010, a Tennessee woman made international headlines when she asked her mother to put her seven-year-old adopted son on a plane to his homeland of Russia. With the child was a note that stated that she no longer wanted him because he had emotional problems. It was an uncaring thing to do to a child and will likely have lifelong effects on his ability to form relationships. It was just the latest in a string of adoptions involving Russian children that went horribly wrong. In 2008, a Utah woman was sentenced to 15 years in prison after pleading guilty to killing a Russian infant in her care (Associated Press, April 9, 2010). Two years earlier, a Virginia woman was sentenced to 25 years in prison after being convicted of beating to death her adopted two-year-old Russian daughter. The child was kicked and punched between her eyes, and across her back and stomach. The woman testified that she killed the child because they never bonded (Vargas, 2006). Typically, severe abuse against adopted children is attributed by the adopted parent to behavioral problems exhibited by the child. Sadly, such stories are not all that unusual, because behavioral problems among both foster and adopted children are the rule and not the exception.

1. See Children and Family Research Center, School of Social Work, University of Illinois at Urbana-Champaign at www.cfrc.illinois.edu/LRpdfs/PlacementStability.LR.pdf. Also see Hartnett, M. A. et al., 1999 and D. Webster et al., 2000.

Studies have found:

- More than 80 percent of foster care children have developmental, emotional, or behavioral problems (Kaplan & Sadock, 1995). Forty-four percent of young adults who have been in foster care reported being involved in delinquent activities (Rosenfeld et al., 1997).
- Two to four years after leaving foster care, fewer than half of the foster care alumni had jobs, according to one study, and among women, 60 percent had given birth, with fewer than one in five described as self-supporting. Overall, for both genders, nearly half had been arrested and a quarter had been homeless (see <http://www.aecf.org>).
- Children in foster care who have experienced multiple placements are more likely to incur mental health costs than children in more stable placements, and they are more likely to experience higher medical costs in general (Rubin, Alessandrini, Feudtner, & Mandell, 2004).

There are those who attribute these problems to factors other than inadequate foster home care. They point to dysfunctional birth parents and attribute foster home breakdowns to genetic considerations or improper nurturing by birth parents. They say that some children are simply born “bad” and cannot be rehabilitated. If they are moved from foster home to foster home, so the argument goes, it is their own fault because they are disruptive.

Beyond a doubt, children who are abused or neglected by their birth parents enter the foster care system at a parenting disadvantage, for they often present destructive behaviors and unacceptable modes of thinking that must be corrected if they are to have a chance of ever living a so-called normal life. Our position is that there are no “hopelessly lost” foster children, only children in need of guidance and inadequately screened adoptive and foster parents, many selected by ill-prepared screeners, few of whom have ever had college-level courses on the subject or adequate in-service training by experts in the field. That should not come as a surprise because there are only a handful of schools of social work in the United States and Canada that offer courses on adoptive and foster parent screening.

Reform of the system frequently has come from the legal profession. Today, when change occurs at the state level in departments of human services, it is often the result of a lawsuit that has forced agencies to confront their failures. It is an issue that the social work profession should seize as a natural outgrowth of its historical mandate for social justice. The first step in doing so is for social work professionals to demand that every social worker who works as a screener be properly trained. There is a direct relationship between the skill of the screener and the number of breakdowns that occur at the caregiver level. The more skilled the screener, the fewer the breakdowns in adoptive and foster homes—and the fewer children who are emotionally scarred by multiple placements.

We all want the best for our nation’s foster and adoptive children. The foundational building blocks are excellent caregivers. That is why departments of human

services are always seeking dedicated, professional caregivers. The purpose of foster care and adoption is to improve the quality of care of children and to reduce unacceptable and illegal behaviors of caregivers. Clearly this means that the selection of a caregiver should be done with the needs of the child in mind. To be good adoptive or foster parents, individuals should be caring, empathetic, compassionate, and able to communicate well with any child who is placed in their home. They should also be responsible and organized. Emotional stability is also very important because they may often be faced with emergencies and other difficult situations. Does this sound demanding? Some of the characteristics necessary to be a good adoptive or foster parent are inborn; others can be developed. As is often the case in life, the difference between desire and reality can be stark, and not every person who wants to be a caregiver is qualified. For most prospective caregivers, if the applicants are motivated, stable, caring people and genuinely interested in helping children in need, they are on their way to becoming good adoptive or foster parents.

As a social worker, you need peers with whom you can share concerns. For this reason it is important to take time to build a solid professional network, such as people from your agency, a group of peers from other agencies, older colleagues, or other professionals. Take the time to identify those colleagues in your state or county foster care or adoption world. Ideally, you can turn to your predecessor for some general guidance, and for specific guidance regarding the caseload you have. Your coworkers and supervisor are also there to give you helpful tips. An experienced office secretary or administrative assistant can be invaluable as well. Take the time to talk with all of these people to find out how you can work together. You also need to make and maintain external contacts. Again, take the time to find out who can be most helpful in assisting you with selecting the right caregiver for the right child. Remember, the caregiver is the linchpin for a successful placement.

Caregiver Selection Can Be a Critical Legal Decision

Foremost in the selection of a foster or adoptive home is that the placement will be effective, safe, and child friendly. This means that everyone involved will be focusing on the particular needs of the child and that the parents caring for the child will have the appropriate training and skills to provide high-quality care that meets all legal requirements of the state. All parties involved in the care of the child should be treated with respect and given the support and information they need to understand and cope with each child's unique circumstances.

If you are a social worker, selecting a caregiver can seem daunting, largely because you are not sure what to expect. It is easy to feel overwhelmed. Elsewhere in this book are suggestions that may help you gain a sense of control over the tasks that you face. To be emphasized at this point is that *the selection of a caregiver is a critical legal decision*.

If you are sued, you may be required to appear at a deposition or go to court. In court, if it is determined that you did not follow the standard of care, you and the

agency may be held liable for monetary damages. This is not said to frighten you, but to alert you to the realities of working in this profession.

The better informed you are, the better able you are to do your job within the legal boundaries that are expected of you. Even if you think you have done everything correctly, somebody else may believe otherwise when something bad happens to a child while in placement. As society becomes increasingly litigious and increasing demands are imposed on child welfare workers, you become a growing target for a lawsuit.

Building a Safe Home Study

By “safe,” we mean a home study that will protect the child, the foster or adoptive parents, the birth parents, the social worker, and the agency. A home study, when properly done, is an in-depth psychosocial analysis of a foster or adoptive applicant’s potential as a parent, complete with a detailed look at a series of interrelated social and emotional variables that have shaped the individual from childhood to the present. The challenge is to look at the past with enough clarity and insight to be able to make informed inferences about the future.

For the screener the first goal of a home study is to evaluate the applicant’s potential for sexual, emotional, or physical abuse toward a child. Until that can be determined, everything else involved in the home study process is secondary. Once the screener is satisfied that the applicant is not a risk to a child, the other areas of concern are the individual’s emotional stability, the nature of the individual’s relationship with his or her spouse and family members, and the individual’s attitudes about major parenting issues. Another area of concern is the individual’s relationship with society as a whole (as documented by arrests or treatment for alcohol or drug abuse).

The screener should approach foster or adoptive applicants as if they are a mystery to be solved. Is the applicant the person she or he seems to be? Or is the applicant someone who has been coached about “right” and “wrong” answers?

The home study that we advocate in this book is the optimum level of assessment we consider appropriate for screening foster and adoptive applicants. Admittedly, some agencies hold their screeners to a lower standard, especially when it comes to details of the applicant’s personal relationships. We do not approve of shortcuts in the home study process because we think it puts children at risk. Our hope is that increased scrutiny of the process will elevate professional standards to a level commensurate with the responsibility of the task.

Doing a first-rate home study requires a lot of thought. Unfortunately, issues arise from time to time that make the work more difficult than it should be. Because there is no regulation of adoption or foster homes at the national level, there are no uniform standards for home studies and the requirements vary widely from agency to agency, even within the same state. Screeners who do home studies for public or private agencies that allow applicants to read their home study must constantly second-guess themselves about the information they include in the report for fear of violating privacy rights, or for fear of being sued by an applicant who disagrees with

the assessment. This second-guessing can have a chilling effect on the truthfulness of the report by intimidating a screener into withholding critical information from the home study. Failure presents serious legal consequences, not only for the child and adoptive or foster parents, but also for the social worker.

Being named as a defendant in a lawsuit is not something child welfare workers want to think about. They enter the profession with a sincere desire to help children. Yet there is some risk that comes with being in the profession. This risk should not be minimized. No matter how competent you are, you can still be sued if someone thinks you made a mistake that resulted in harm. Foster parents and the state department of human services explicitly agree that they will uphold certain standards in caring for a child. In legal terminology, these are called “standards of care.” In comparing your behavior against the appropriate standard of care, lawyers and courts view the child welfare standards that were in effect at the time of the alleged incident. Any changes to the standards subsequent to the incident are excluded.

Standard of Care for Foster Parents

Foster parents and the state department of human services explicitly agree that they will uphold certain “standards of care.” For instance, the *South Carolina Handbook for Foster Parents* (2008), notes that the “failure to comply with one or more of these standards of care may result in removal of foster children from the home and revocation of the foster home license.” Should something adverse happen to the child, the failure to follow the standards of care may also lead to a lawsuit. What are some of these standards of care? From the South Carolina handbook, the following are included (see https://dss.sc.gov/content/library/manuals/foster_care_licensing.pdf):

- Each child shall be provided with adequate health and hygiene aids. Space for a child’s possessions shall be provided.
- No child may routinely share a bed or a bedroom with an adult, except for a child under one year of age.
- Children of opposite sex sleeping in the same bed must be limited to siblings under the age of four years. Children of opposite sex sleeping in the same room must be limited to children under the age of four years.
- Children shall sleep within calling distance of an adult member of the family, with no child sleeping in a detached building, unfinished attic or basement, stairway, hall, or room commonly used for other than bedroom purposes.
- Foster parents shall follow instructions and suggestions of providers of medical and health-related services. If receiving medication, a child’s prescription shall be filled on a timely basis and medications will be administered as prescribed, and otherwise be kept secured.
- Foster parents shall obtain emergency medical treatment immediately as need arises, and shall notify South Carolina Department of Social Services (SCDSS) and child placing agency staff, no later than 24 hours after receiving such care.

- Foster parents should contact SCDSS for coordination of any elective or non-emergency surgical procedures as far in advance of the procedures as possible.
- Any injuries sustained by a foster child must be reported as they occur and no later than 24 hours after an incident.
- Foster parents are responsible for notifying SCDSS and child-placing agency staff as soon as possible when a critical incident has occurred such as: (a) death of any child in the home; (b) attempted suicide by the child; (c) child is caught with a weapon or illegal substance; (d) child is charged with a juvenile or adult offense; (e) child is placed on homebound schooling or is suspended or expelled from school; (f) child has left the home without permission and has not returned.
- Religious education shall be in accordance with the expressed wishes of the natural parents, if such wishes are expressed.
- The use of corporal punishment as a form of discipline is prohibited.
- Infants and children shall not be left without competent supervision.
- Foster parents, in conjunction with SCDSS, shall keep a life book/scrapbook on each foster child placed in their home. Children's records and reports shall be kept confidential and shall be returned to SCDSS when a foster child leaves the foster home.
- Firearms and any ammunition shall be kept in a locked storage container except when being legally carried upon the foster parent's person.
- Foster parents must be able to secure/supervise access to swimming pools and maintain adequate supervision during periods of swimming.
- No unrelated lodger or boarder shall be allowed to move into a foster home without the agency's concurrence.

Home Study Interview Model

The interview model required of the home study process is different from those used for family therapy, individual counseling, or crisis intervention interviews. The purpose of a screening interview is to gather information that can be used to determine eligibility, define personality, evaluate parenting potential, and provide insight into an individual's opinions on a variety of issues. That purpose differs significantly from a traditional social work interview, in which the ultimate goal of information gathering is to provide therapeutic services.

Basically, there are four interview models used by social workers and psychologists, all based on the following theories:

- *Cognitive-behavioral*. This interview model is a hybrid, drawing on the common elements of cognitive psychology and behavioral psychology. It focuses on the present to change future behavior, while establishing the interviewer as the "teacher" and the client as the "student."
- *Psychodynamic*. These interview models have their roots in the works of Sigmund Freud and are based on the belief that today's problems can be traced back to childhood experiences, with a focus on personality change.

- *Humanistic*. This interview model is based on the belief that each individual has within himself or herself the resources to solve problems. The role of the interviewer is to form a positive relationship with the client that will allow the client to focus on the present and not the past.
- *Postmodern*. This interview model takes the position that success is dependent on a negotiated interaction between interviewer and respondent. It is largely based on the writings of Michael White and David Epston (1990), coauthors of *Narrative Means to Therapeutic Ends*. The basis of this model is a belief that reality is a social construction that can be affected by stories that highlight the relationship between therapist and respondent. Puppet therapy for children is a familiar example.

All of the above interview models have a place in social work, but none are entirely appropriate for social workers engaged in screening adoptive and foster parents. As Alfred Kadushin and Goldie Kadushin (1997) point out in their book, *The Social Work Interview*, “Social workers try to maximize clients’ participation, to encourage the development of the interview so that it follows the clients’ preferences, to minimize standardization and maximize individuality of content. Social workers have no set interview agenda and attempt to keep their control of the interview to a minimum” (p. 13). The screener’s goals are just the opposite: to control the interview so that the quantity and quality of information obtained from clients can be maximized.

The interview model presented in this book has been developed by the authors specifically for use in screening adoptive and foster home applicants. It borrows from some of the above-mentioned interview models, but it is more similar to the forensic models used by psychologists involved in custody evaluations and the investigative models used by journalists than it is to the type of therapeutic models taught in schools of social work. We have named this style the Dickerson–Allen–Pollack Model (DAP, for short).

DAP Goals:

- To determine applicant motivation
- To evaluate family and significant-other relationships
- To catalogue positive and negative parenting abilities
- To screen for mental health disorders
- To screen for financial stability
- To screen for health issues
- To screen for home safety
- To screen for child abuse potential

Child custody evaluations are forensic instruments that seek to evaluate a parent’s suitability for guardianship of a child or children, usually in the wake of divorce or death. According to the American Psychological Association (APA), the child’s needs and well-being are paramount in the evaluation. “Parents competing for custody, as

well as others, may have legitimate concerns, but the child's best interests must prevail . . . during the course of a child custody evaluation, a psychologist does not accept any of the involved participants in the evaluation as a therapy client. Therapeutic contact with the child or involved participants following a child custody evaluation is undertaken with caution" (APA, 1994, pp. 677–680).

Investigative interviews conducted by journalists are structured in such a way as to maximize both the interviewer's control of the interview and the quantity and quality of the information obtained in the interview. The interviewer arrives at the interview with a list of preformulated questions that have been determined to be critical to the purpose of the interview. The interviewer is not interested in helping the subject solve a particular problem. The entire focus is on obtaining information deemed to be important to the interviewer.

A social worker engaged in a therapeutic interview does not gather health or financial information from a client to determine eligibility for services (the screener does). The social worker conducting a therapeutic interview will not deny services based on the client's motive for seeking services (the screener will). The social worker conducting a therapeutic interview will not deny services if the individuals seeking services have serious marital difficulties; indeed, the social worker will seek to assist with resolution of the difficulties (conversely, the screener's job is not to help applicants with marital problems, but rather to determine whether those problems are too severe to allow them to take children into their home). Unlike a social worker involved in a therapeutic interview, a screener identifies antisocial tendencies in a client, not to counsel, but to evaluate for unacceptable behavior.

These differences exist because it is the role of the social worker conducting a therapeutic interview to assist the client. There is no confusion about the identity of the client; he or she is the person who has approached the social agency for help in solving a problem. The opposite is the case for the screener. Applicants who approach a social agency to request children for adoption or foster care are seeking approval to augment their family. Strictly speaking, they are not the screener's clients. The screener's client, the individual to whom the screener is responsible, is the child who is in need of a family. All decisions made by the screener are defined in terms of his or her advocacy for the child. This is sometimes difficult for social workers to accept. The natural inclination is to want to help the applicants make their dreams come true. Screeners must remember at all times that their job is to find a home for the child, not to find a child for the applicants. Of course, when things work out well the screener looks out for the interests of both the child and the applicants.

Basics of Interview Assessment

Once an adoption or foster home application is received by an agency, it is important that it be delivered to the appropriate screener without delay. A telephone call to the applicants on the day of receipt to set up an appointment is appropriate, even if the screener is unable to arrange time for the interview right away. If the screener waits

FIGURE 1.1

HOME STUDY FORMAT (SHOULD BE 15–25 PAGES IN LENGTH)

INTRODUCTION

An explanation for the applicant's contact with the agency.

INTERVIEWS

Dates and structures of the interviews with the applicants.

FAMILY HISTORY

A detailed history of each applicant's family background and social history, beginning at birth.

EDUCATION

Schools attended, graduation dates, majors or field of study.

EMPLOYMENT HISTORY

Complete work history, with dates and summaries of responsibilities.

MARITAL (OR SIGNIFICANT OTHER) RELATIONSHIPS

A detailed analysis of the applicant's relationships.

EXPERIENCE WITH CHILDREN

An analysis of the applicant's experience with children.

ATTITUDES ABOUT ADOPTION (OR FOSTER PARENTING)

Discussion of applicant's views on adoption and foster parenting.

HEALTH

Discussion of any health problems that could affect ability to care for children.

REFERENCES

Names, address, telephone numbers of the references, along with quotes from each person.

RECOMMENDATIONS

Post-placement recommendations

Statement of acceptability as adoptive or foster parents.

until a few days before the available day to call the applicants, it will get the interview process off to a bad start because it will feed perceptions held by many that social service agencies are more concerned about bureaucratic process than they are in meeting human needs. Successful screeners are acutely aware of the impact that their actions have on applicants, and they use that awareness to enhance the odds for a successful placement for the children in their care.

That same line of thought should be followed when the applicants arrive for their first interview. As Kadushin and Kadushin (1997) point out, for the interviewee the interview begins when he or she first arrives at the agency, not when the interview actually starts: "If clients have waited a long time, interviewers may find it helpful to recognize explicitly at the beginning of the interview clients' annoyance at having been kept waiting, to openly acknowledge that clients might have some strong feelings about this, and invite them to discuss their reactions" (p. 75).

If the screener realizes shortly before a scheduled interview is to begin that he or she will be late because of an emergency (long-running staff meetings are not emergencies), an effort should be made to speak to the applicants so that an explanation can be personally delivered (do not ask the receptionist to notify applicants that you are running late; do it yourself).

Once the interview begins the screener should pay close attention to how the applicants are dressed. Are they in sync with each other? Is one person dressed in a revealing low-cut dress, transparent blouse, or radical T-shirts with a message such as "s**t happens" and the other dressed conservatively? Is one person dressed casually and the other person dressed in business attire? Are they wearing the same colors? Are they wearing opposite colors (as in black and white)?

Interviews should take place in an office with a door that can be closed to ensure privacy. Interviews should not be done behind partitions in a room in which there are other people. If the screener does not have a private office, interviews should be done in a conference room or other private area. If the screener has a comfortable sitting area in his or her office, it should be used instead of a behind-the-desk arrangement. This will make the applicants feel more relaxed and enable the screener to manage the conversation more easily. If your agency allows it, use a tape recorder for the interview, after asking the applicants (on tape) for permission to record the conversation, and keep a notepad nearby so that you can make notes about follow-up questions. If you take notes on paper, do not become so absorbed in your note taking that you are unable to observe body language when questions are asked.

Importance of Eye Contact

Eye contact is critical for social interaction. Inappropriate eye contact, whether it is avoidance or glaring, speaks volumes about an individual's mental state. It demonstrates, for a variety of reasons, a reluctance to establish a temporary rapport with another individual. The reasons for that reluctance may be based on deception, anger, shyness, disapproval, disinterest, or a host of other nonemotion-related factors such as autism.

Appropriate eye contact is one of the key components in a successful social transaction. If you are the speaker, you know that the person that you are engaging in conversation is interested in what you are saying if they return your eye contact without glaring and demonstrate accompanying facial characteristics devoid of anger, frustration, or impatience.

Is lack of eye contact a sign of deception? Not necessarily. Children who are being deceptive are apt to avert their gaze in an effort to avoid eye contact with a parent or teacher. However, as individuals mature they learn how to maintain eye contact while being deceptive. That deception is not revealed by strong eye contact, but by the mock sincerity that usually accompanies it, or by the sudden displays of anger, contempt, or disapproval that flash momentarily about the eyes and the mouth.

The key to using eye contact as an interview tool is to understand its relative importance. Eye avoidance, followed by critical or argumentative words spoken by the interviewee, angry expressions, unexplained sweating, or sudden panic attacks may be indicative of deception.

Dr. Stephen Porter, a psychology professor at Dalhousie University, conducted research that concluded that smirking or eye blinking accompanied by a sad face often were reflective of deception (see ScienceDaily.com, 2008).

He also determined that some emotions were more difficult to fake than others. For example, happiness was found to be easier to fake than disgust or fear.

Listening to Body Language

Body language and clothing choices are important vehicles for nonverbal behavior. Clothing is one way for people to use body language to express their innermost feelings, and you should never be dismissive about the clothing that applicants wear to an interview, because it often says something important about the individual. Always ask yourself what image or message you think they are trying to get across to you.

If you are interviewing a couple, are both partners able to maintain strong eye contact with you? Do they communicate with each other in approving or disapproving ways while the other person is speaking? Do they sit with their arms folded, showing resistance to your questions? Do their eyelids flutter, indicating possible deceit when you ask them direct questions? Does either partner seem defensive or reluctant to be there? Does either partner interrupt you when you are speaking (an attempt at dominance), or do they interrupt each other when they think their partner is faltering (see ScienceDaily.com, 2008)?

If interviewees seem anxious during the first interview, that would not be unusual. They know they are being tested, but they don't know exactly how. Their voices may be pitched slightly higher than normal. Their words may sound breathy at times. Put yourself in their position and try to be understanding. Be supportive and maintain a friendly, matter-of-fact demeanor, but at the same time be alert to anxious mannerisms that are paired with negative body language such as shrugs or eye avoidance,

any signals that could indicate negative or deceptive thinking. Look for signs of dominance—head inclined forward, with chin dropped, tightened eyelids, and raised outer brow—and signs of contempt directed toward the partner: rolled eyes, dimpled cheek with crooked smile, along with sarcasm and insults, even if delivered behind a mask of forced laughter (see ScienceDaily.com, 2008).

Take note of the frequency with which applicants nod and shake their heads so that you will be aware of whether they are in agreement with you on important issues, especially as they relate to policy. Richard Petty, an Ohio State University psychology professor, conducted research in which he found that head nodding and shaking not only influences other people, but it self-validates the person displaying the head movements (Petty, 2003). Sometimes interviewers nod their head out of habit when they are listening to something that doesn't particularly interest them and they don't want to spend time discussing it; in those instances, nods are seen as a way to move on to something more interesting. If you have that habit, break it; your nods are communicating unspoken approval to the applicant on subjects about which you may not wish to be offering approval.

Be aware of the influence that emotions can have on physical characteristics. Anger experienced over a long period of time can sculpt the face with telltale signs about the eyes and lower forehead that give the individual a "hard," combative look even if the individual is smiling at the time. It is very difficult for a person to control facial expressions because human anatomy has been wired in such a way that facial muscles react to a stimulus twice as fast as the brain can process it. In other words, humans react faster than they can think about reacting to a particular stimulus. As a screener, that gives you the advantage, but only if you are clever enough to understand the signals (Petty, 2003).

While doing research on how emotions affect the face, Paul Ekman and Wallace Friesen (1975), both psychology professors at the University of California, determined that facial muscles are capable of producing 43 movements that can create 10,000 different facial expressions. Some expressions, they concluded, can be seen as "microexpressions" that are displayed in less than a fifth of a second. Ekman and Friesen discovered the existence of microexpressions while studying films of a depressed woman seeking a weekend pass from a mental hospital. The first time they viewed the film, the woman appeared stable. It was not until they switched to slow motion and studied her face that they caught flashes of the despair she attempted to conceal: The corners of her mouth were pulled down and the insides of her eyebrows arched up, fleeting expressions that were camouflaged by a broad smile. Fortunately, the doctors at the mental hospital turned down her request for a pass—a good thing because it later turned out that she planned to leave the hospital so that she could commit suicide. Ekman and Friesen characterize facial expressions that are revealed in quick bursts as emotional leakage that betray a person's true feelings.

The coauthor of this book, James L. Dickerson, became aware quite some time ago of the type of emotional "leakage" described by Ekman and Friesen (1975) when he observed it among female children and adults who have been sexually abused. He first

FIGURE 1.2

Alice and Josh were a study in contrasts. Alice wore a pastel pantsuit with frilly cuffs and a white blouse that was set off with an antique necklace; Josh wore jeans and a black T-shirt that broadcast the message "Life Sucks!" The screener let the T-shirt message slide until the individual interviews, at which point he made inquiries about it.

Alice apologized and made it clear that she did not approve of Josh's attire.

"I don't know why he does things like that," she said. "He knew better than that."

Although he did not apologize, Josh readily admitted that he did know better. He explained that a friend had asked him to help move his mother into a nursing home that day and it took longer than he expected and it left him no time to go home and change clothes.

Josh grinned and said, "I guess you see all kinds, don't you?"

The screener acknowledged the truth of that and had decided to overlook the fashion error when the second shoe dropped with a thud.

"To tell you the truth," Josh added, "I'm not sure I would have changed, even if I had time. Alice gets too uptight about how I dress sometimes." Josh winked at the screener. "I think the T-shirt taught her a valuable lesson, don't you?"

DISCUSSION

- (1) What was Josh's real message?
- (2) What does Alice's apology tell you about their marriage?
- (3) How do you interpret Josh's statement, "I guess you see all kinds, don't you?"
- (4) Why do you think that Josh's comment about the "valuable lesson" learned by Alice should raise questions about their suitability as adoptive or foster parents?

noticed it in women who had confided in him about their abuse as children. The leakage manifests itself in the form of a distinct smile, fragile in appearance and marked by minute tugs at each corner of the mouth, not unlike the smile of movie icon Marilyn Monroe, and intense, searching eye contact that falls just short of a stare. Once, while the author was working as a consultant for a group of psychologists, he passed through the waiting room while it was filled with young girls that ranged in age from five to eight. As he walked past, one girl in particular caught his attention with the telltale smile and stare. After he entered the inner office he asked the receptionist why the girls were there.

"They're being tested," the receptionist answered.

"For possible abuse?"

"No."

"One of those girls has been abused."

"Why do you say that?"

"I just know."

"What girl?"

"The one in the blue sweater."

The receptionist pulled the girl's file and quickly read through it. Suddenly, she gasped. "You're right," she said. "She was sexually abused."²

Emotional leakage is always at work on the human face, affecting the way individuals look, if only for a fraction of a second. There is no scientific basis for the author's observations about the relationship between sexual abuse and facial expressions, but there is an intuitive basis for that conclusion that has been influenced by many years of observation.

A screener should react to intuitive insights during an interview with follow-up questions, even if he or she does not exactly understand why the questions are necessary. Future research may well prove intuition to be a reaction to the microexpressions discovered by Ekman and Friesen (1975), intellectual calculations that occur too rapidly for the human brain to register as anything other than a vague feeling. Sometimes intuition is a screener's best friend. A screener should never base a decision about application approval based solely on intuition, but it can be a useful tool when used as a "tie-breaker" in cases in which the positives and negatives seem evenly balanced.

Understanding the Ethics of Screening Interviews

The interview process is fraught with ethical minefields. That's because nothing is ever simple—or safe—when it comes to dealing with powerful human emotions. A good way to walk through that minefield is with the knowledge and expectation that anything that is observed, spoken, or written is subject to potential review by a judge in a court of law. Psychologists who conduct child custody evaluations do so with the understanding that they are subject to questioning under oath by a judge or by attorneys hired by the participants in the evaluation.

2. See Dickerson and Allen 2007, p. 82 (Reprinted with permission of publisher).

So it is with an investigative journalist. Everything gathered in an interview and written in a published story is subject to legal scrutiny for possible libel, defamation, or invasion of privacy. Journalists must always be prepared to testify in court about what they have written, although they have constitutional protections that are not extended to social workers.

Social workers should never write anything in a report that they cannot prove. If you write something that is your opinion, clearly label it as opinion, and never express any opinions that could damage the reputations or careers of individuals who have come to you for children.

Privacy and Confidentiality

In the course of adoptive and foster parent interviews, information invariably will come to light that must be protected by the screener. Examples, include details of sexual experiences, marital infidelities, family secrets of various kinds, confidences revealed by an applicant that have not been disclosed to the applicant's partner, and myriad other confessions that sometimes defy comprehension.

Your agency should have a confidentiality policy in effect to address such concerns. If there is no policy in effect, it is helpful to remember that your first concern is for the welfare of any child placed with the applicants. Your second concern should be for the individual that provided information of a confidential nature to you. Screeners have confidential sources just as investigative journalists have confidential sources. You have an obligation to protect those sources. There are exceptions, of course. In its *Code of Ethics*, the National Association of Social Workers (NASW, 2008) recommends that social workers protect the confidentiality of all information obtained during the home study process: "The general expectation that social workers will keep information confidential does not apply when disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client or other identifiable person. In all instances, social workers should disclose the least amount of confidential information necessary to achieve the desired purpose; only information that is directly relevant to the purpose for which the disclosure is made should be revealed" (p. 10).

At the start of the interview it is important that you explain to the applicants that although you will maintain confidentiality regarding their comments, you will put those comments into a home study that will be read by your supervisor and others at the agency, and possibly opened by court order. This process is known as *informed consent*, a legal term that means that the applicants understand that the information that they provide to you will be shared with other professionals at the agency. Incorporating informed consent wording into the application itself is recommended to avoid any misunderstandings at a later date.

Many states grant some segments of the population *privileged communication*. Included are lawyers, physicians, journalists, and clergy. Privileged communication means that protected groups cannot be compelled by the courts to share information obtained during confidential interviews with clients, except under unusual

circumstances that recognize that “protective privilege ends where public peril begins.”³ In practical terms, this means that any promises made by a social worker to observe strict confidentiality may be subject to revision if it becomes clear that failure to disclose the information could result in harm to a child or some other person.

One area where confidentiality often is breached is with home studies. When an agency makes home studies available to applicants, it addresses the right of individuals to have access to records compiled about them by a social agency, but it also raises serious questions about confidentiality. For example, if one partner discloses during an individual interview that she is unhappy with her husband’s sexual performance but has learned to live with it—and that information is dutifully reported in the home study by the screener—its disclosure to the husband could damage the couple’s relationship. The wife’s expectation that her comments will be kept in confidence is in conflict with her husband’s expectation that anything written about him in the home study will be made available to him as part of the agency’s responsibility for full disclosure. The same dilemma often is faced with references. It is customary for an agency to state in its letter to a reference that the information provided will be kept in strict confidence. However, it is essential that the information be included in the home study. Does an applicant have the right to override the agency’s pledge to a reference? Does a spouse have the right to override confidentiality granted by a screener to the other spouse? Obviously, that is not the case, but it occurs with alarming frequency because screeners are not always consulted when information is released. If confidential information is not redacted from home studies before they are released, it puts the screener and the agency at legal risk. Breach of confidentiality is a violation of the social worker’s code of ethics: “When providing clients with access to their records, social workers should take steps to protect the confidentiality of other individuals identified or discussed in such records” (NASW, 2008, p. 10).

This puts the screener in an awkward position. Sometimes, information of the sort that would be given only with an understanding of confidentiality plays a crucial role in the acceptance or rejection of an applicants’ application. Other times it does not affect the final decision but offers insight into the type of child that would be appropriate for the applicants. If the screener does not include the information in the home study, for fear of breaching confidentiality, is he or she living up to obligations to protect any child placed in the home?

Perhaps the best way to navigate through potential problems would be for the screener to discuss controversial information with his or her supervisor prior to including it in the home study. That way the matter can be fully discussed before it becomes a potential problem, thus providing the agency with a proactive strategy for including or rejecting the information in the actual home study. Under no circumstance should a social worker be asked to complete a home study if the social

3. See National Association of Social Workers, 2008. See also *Tarasoff v. Board of Regents of the University of California* (529 P. 2d 553, 1974).

worker does not have a clear understanding of how to handle controversial information obtained from the applicants.

Sexual Relationships with Clients

Under no circumstances should a social worker have a sexual relationship with a client or member of a client's family. Legal considerations aside, such activity may be harmful to the client and may make it difficult for the social worker and client to maintain a professional relationship. Suffice it to say that such activity is a violation of the social worker's *Code of Ethics* and could result in a malpractice lawsuit against the social worker and the agency.

Likewise, it is a violation of the social worker's *Code of Ethics* to have a sexual relationship with a former client or to take on a client with whom the social worker had a prior sexual relationship (NASW, 2008). If a former spouse or sexual partner of the screener applies for adoptive or foster children at the agency where a screener works, the screener should notify the supervisor that he or she cannot take the case because of a conflict of interest.

Client Touching

Studies have reported that social workers engage in client touching more often than psychologists (Willison & Masson, 1986). Because physical contact with clients—hugging, caressing, and so forth—is so open to misinterpretation, it should be avoided in most instances. Just because a social worker's intentions in making such gestures are completely harmless does not mean that the gestures will be perceived by the client in such a manner.

Unexpected and unwanted physical gestures sometimes can be perceived by the recipient as sexual harassment. It matters little how you meant your gestures to be perceived if the recipient has a different perception. It is their perception that matters most. It may be useful to remember that some individuals grow into adulthood without a history of experiencing affection expressed through physical gestures. Such an individual could find an unsolicited hug an invasion of their privacy, at the very least, and quite possibly a distressing emotional experience.

Even so, Kadushin and Kadushin (1997) advocated that social workers not rule out touching in situations in which the client might perceive it to be expected, especially when a failure to touch might be regarded as “unnatural.” If touching is done by social workers during interview situations, they recommend the following guidelines:

The interviewer has to be clear that the situation warrants touching, that the nature of the touch is appropriate, that its intent is nonerotic, and that it doesn't impose a greater degree of intimacy on the interviewee than the interviewee wants and can cope with. The gesture must be a response to genuine feeling and serve the needs of the interviewee. The interviewer has to decide whether a touch that is theoretically correct in terms of the needs of the interview is also ethically incorrect.