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# Overview of Trauma-Informed Interviewing

*Day 3: Wednesday, December 13 | 9:15 am –10:15 am*

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# Disclaimer

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# In this session, we will cover...

- Forensic Healthcare, Neurobiology of Trauma and Trauma-Informed Communications
- Trauma-Informed Victim Engagement
- Trauma-Informed Interviewing for Law Enforcement

# Forensic Healthcare, Neurobiology of Trauma and Trauma-Informed Communications

Kelly Taylor RN, SAMFE-CA, FHE

# Introduction to Neurobiology of Trauma

- Advancements in DNA technology have revolutionized
  - how samples are collected
  - processed in crime laboratories
- Evolution of Special Victim Units and Cold Case Units
  - how law enforcement investigates crime
- Now new scientific advances have the potential to transform:
  - how we interact with those triggered by trauma
  - how we conduct interviews
  - how we communicate with victims, suspects, witness
  - how victims of crime are perceived

# Neurobiology of Trauma

- Study of how trauma affects memory and emotion
- Scientific basis for why people present the way they do
- Behavioral responses:
  - Changes in body language
  - Changes in affect (flat to hysterical)
  - Delays in reporting
  - Memory lapse
  - Fragmented memory

# Demeanor

- Present with a variety of emotions/demeanor
- Varying levels of support
- Self-blame/doubt
- Embarrassment
- Uncertainty involving the legal system
- Fear of retaliation, attacker, medical implications

***FEAR OF NOT BEING  
BELIEVED***



# Neurobiology and Fear

- Many common responses are the result of fear and trauma  
NOT deception
- The way memories are encoded, recalled and reported are commonly misunderstood or misinterpreted

# What Can This Lead To?

Hesitancy to report or seek services

- Lack of medical care, mental health services, support, resources

Mistrust/Fear

- In relationships, support services, the system

Isolation

- Anxiety, depression, negative coping mechanisms, relationships, work

Secondary Victimization

- Self-doubt, self-blame, guilt, shame, anger, lack of trust

# What is Trauma?

- May be perceived as life threatening, in which we are unable to successfully protect/defend ourselves
- Overwhelmed by something beyond one's control
- May occur too soon or is happening too fast to process physically or emotionally

# Types of Trauma

- Acute Trauma- results from a single incident
- Chronic Trauma- repeated and prolonged
- Complex Trauma- exposure to multiple traumatic events (often of an invasive and interpersonal nature) and the long-term effects of exposure

# Trauma

- May lead to:
  - Feelings of worthlessness, shame, guilt
  - Difficulty controlling emotions
  - Difficulty feeling connected to other people
  - Relationship trouble
  - Mistrust
  - Fear driven responses
  - Barriers to communication

Simply put.....

Trauma is a **NORMAL** human response to  
**ABNORMAL** events

# Traumatic Events

- What is traumatic to one person may not be for another
- We all have different levels of comfort in our lives
- The distinction lies in the hard wiring of our brains and the cumulative impact of life experiences
- Frame of Reference

# During Trauma

- Catecholamine's- Fight or Flight- damage to memory, impairs rational thought  
***Increases in Traumatic Event***
- Cortisol- energy available  
***Decreases in Traumatic Event***
- Opioids- prevent pain, blocks physical and emotional pain  
***Increases in Traumatic Event***



# How Trauma Affects the Brain

- Pre-Frontal Cortex
- Cognitive portion of the brain that records the vast majority of information
- May cause a state of overwhelm which can affect encoding of memories

# Pre-Frontal Cortex

If This, Then That –rational Thought  
The rational/logical thing to do is.....

# During Trauma.....

Cannot do “If this, then that”

Cannot even think of the options let alone execute

–Cannot think of how to escape let alone escape

Not permanent-resolves

# During a Traumatic Event

**Detect a threat/Danger Signal**

*(Amygdala takes over & processes emotional memories, potentially causing fragmented memories)*



**Activates the hypothalamus**

*(increases blood pressure, body temperature)*

*Blood and oxygen diverted to muscles*



**Adrenaline Floods the Body**

**Hormonal Flood**

*(memories can be slow and hard to process)*



All systems that aren't critical to survival turn off

Can trigger a complete shut-down:

**Tonic Immobility**

# Tonic Immobility

- Autonomic (uncontrollable) response in extremely fearful situations
- More common in victims who have been assaulted before (childhood, adolescence, or adult)
- May be associated with increased self-blame
- May be associated with decreased likelihood of seeking help
- Can be inaccurately interpreted as consent

# Tonic Immobility

- Increased breathing, eye closure, paralysis
- Frightening to victims (present for event)
- May say “I tried to scream/move/run but couldn’t”

# Dissociation

- In an effort to cope with a threat a victim may not focus on the assault/trauma at all
  - Painting on the wall, water bottle, ceiling fan
- Dissociation can potentially help to corroborate lack of consent
- Often misinterpreted

# Stress and Our Brain

- Under stress it is more difficult to think clearly
- Introduction of a threat or fear changes the dynamic
- Primitive/defensive brain
- Immediate survival is focus
  - Things that allow us to survive the threat
  - Things that will help us cope/withstand the threat



# Trauma Victims

- May be hyper-vigilant, on edge, startled by everyday things
- Brain is protecting them/primitive brain
- Self-protection can interfere with
  - Communication
  - Relationships
  - Seeking care/accepting services
  - Evidence collection
  - Reporting
  - Activities of Daily Living
- Self-protection is a normal human response

# Trauma-Informed Communication

- Acknowledge their trauma
- Tell me more about.....
- Avoid why questions
- Give choices when possible
- **Respect their choices**
- What do you need/how can I help
  - In the moment and in the future

# How Do We Respond?

- How we interact with victims of trauma can impact the process
- Secondary Victimization (Exacerbates trauma)
- You may be providing the first safe presence to speak about the trauma
- You may also be the first physical contact since the trauma
- Rapport not gender
- You may be the first impression of assistance
  - Look at this as an opportunity to assist in healing

# Applying the BELIEVE Approach

The BELIEVE approach includes the following core elements:

- Build Rapport
- Eye Contact
- Language (verbal and non-verbal)
- Information (it's only useful if it's shared)
- Empathy (fuels connection between individuals)
- Vulnerability
- Empower

# Tips To Remember

- Be deliberate and sincere with your initial contact
- Make an effort to connect and foster a sense of trust
- Expectation Management
- Encounter may determine if they proceed
- Silence allows gathering of thoughts without feeling pressured or rushed
- Be aware of Triggers
  - Closely linked to the senses
  - Varied and Diverse
  - May be overwhelming/frightening
  - Grounding

# Perspective

- It's important to think about how it feels for people to talk about their experience
- Fear Driven Responses/Self-Protection
- Need to feel accepted and believed to feel safe enough to communicate

# Bringing It All Together

- Wide range of emotion is normal
- Neurological changes can make memory consolidation and recall difficult
- Fragmented Memory
- Tonic Immobility
- Misinterpretation
- Patience
- Resources

**AND.....**

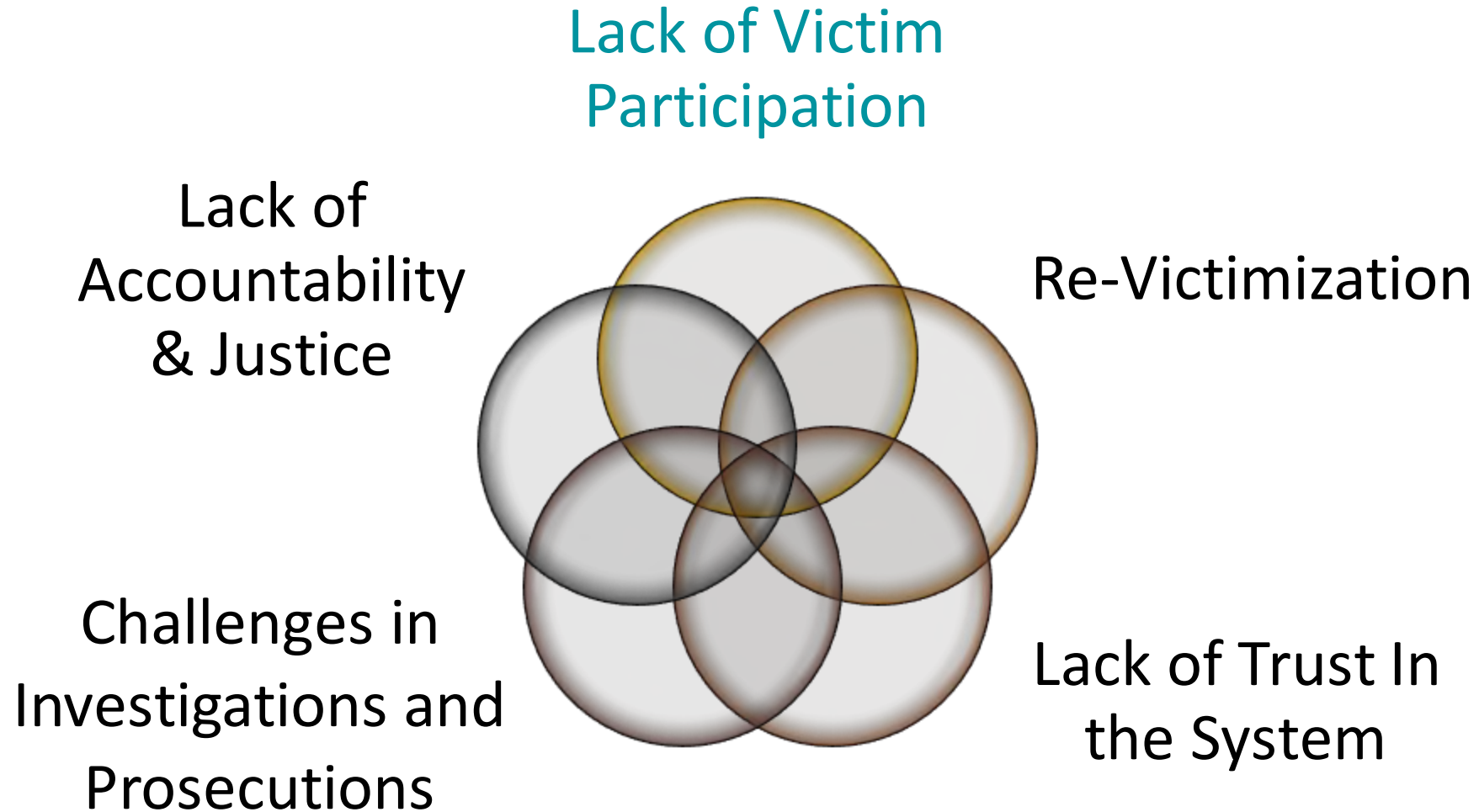
*Spread the Word*



# Trauma-Informed Victim Engagement

Marya Simmons

# Challenges & Barriers



# Why Victims May Not Report



# Most Victims Do Not Report

*“3 to 4 people never tell anyone in authority”*



# Guilt & Shame

“One of the primary reasons women don’t come forward to report sexual harassment or assault is *shame*”

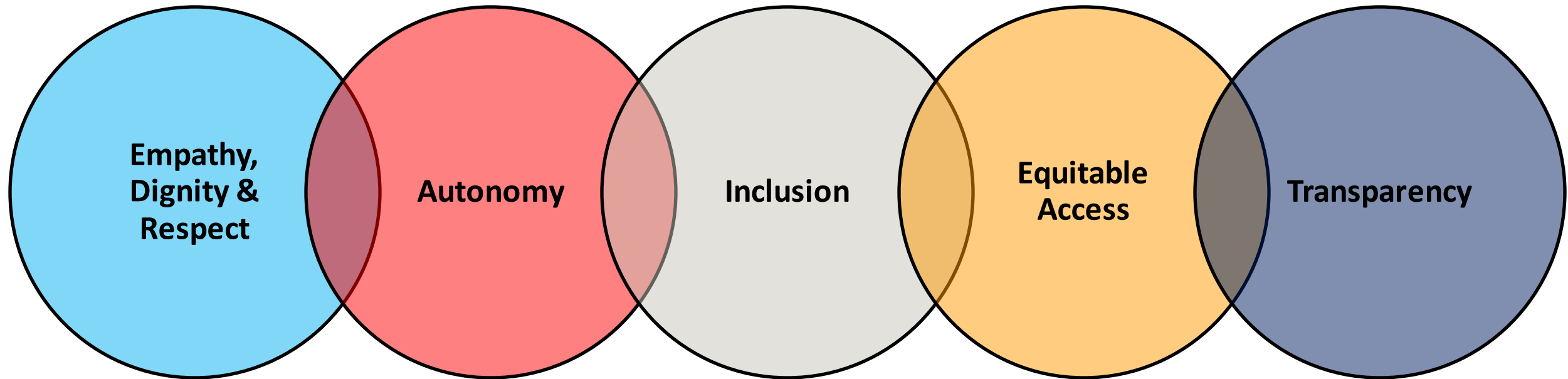




## What Can Influence Participation For Victims?



# Trauma-Informed Approach



# Notifications





# Best-Practice Approaches for Notification



# Initial Contact

Make Introductions and Explain Individual Roles



Explain the Purpose of the SAKI Initiative



Allow Victims to Process & Make Informed Decisions



# Rapport Building

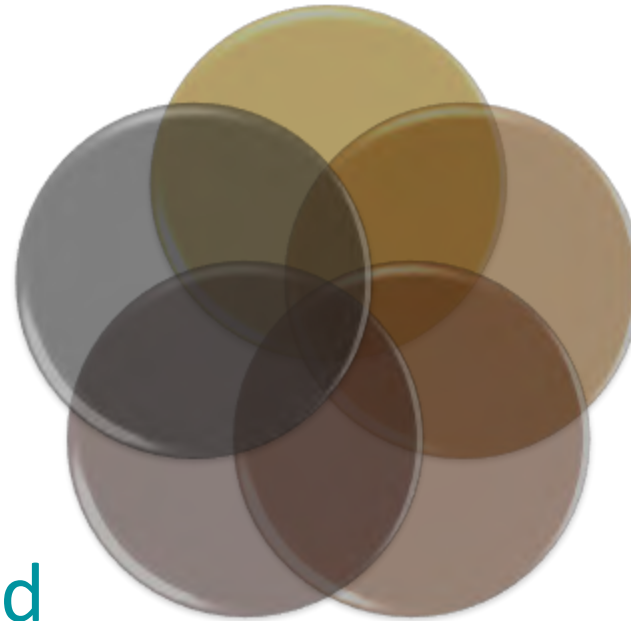
Get to know the  
victim

Gauge victim's  
comfort level

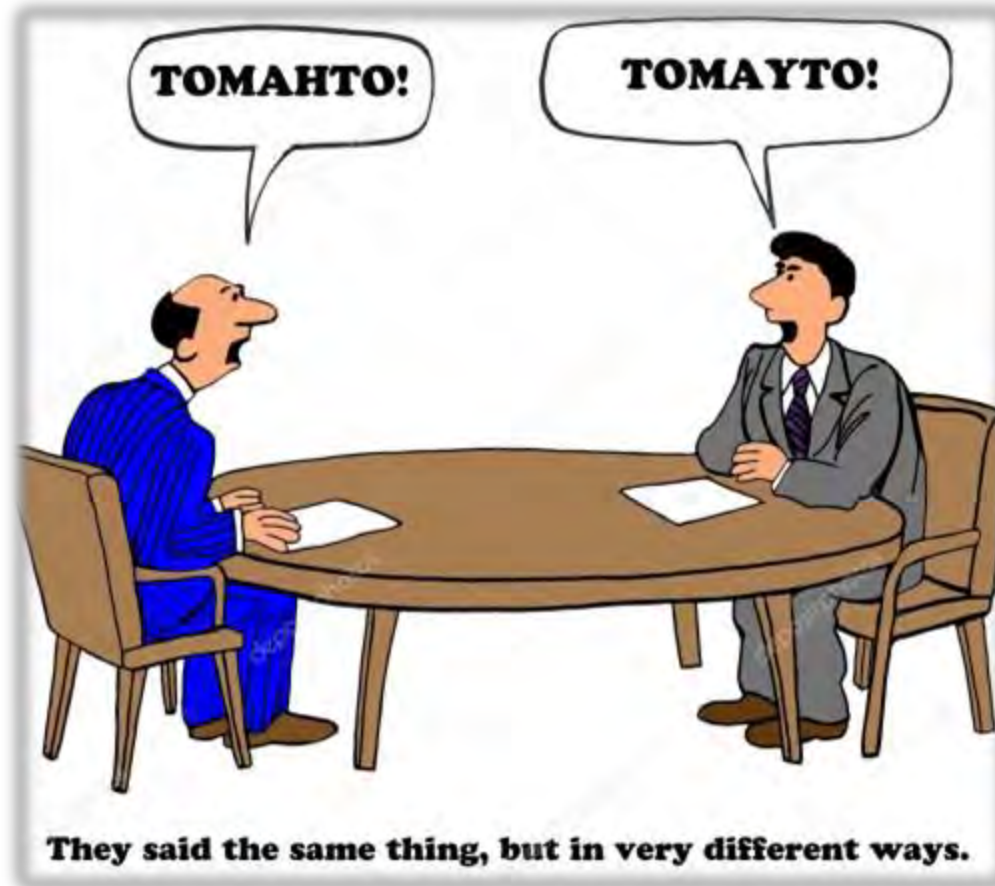
Offer  
accommodation

Open-minded

Apologize  
(Empathy)



*“It’s Not What You Say,  
It’s How You Say It”*



# It's Okay To Apologize

For their past experience

For their pain and grief

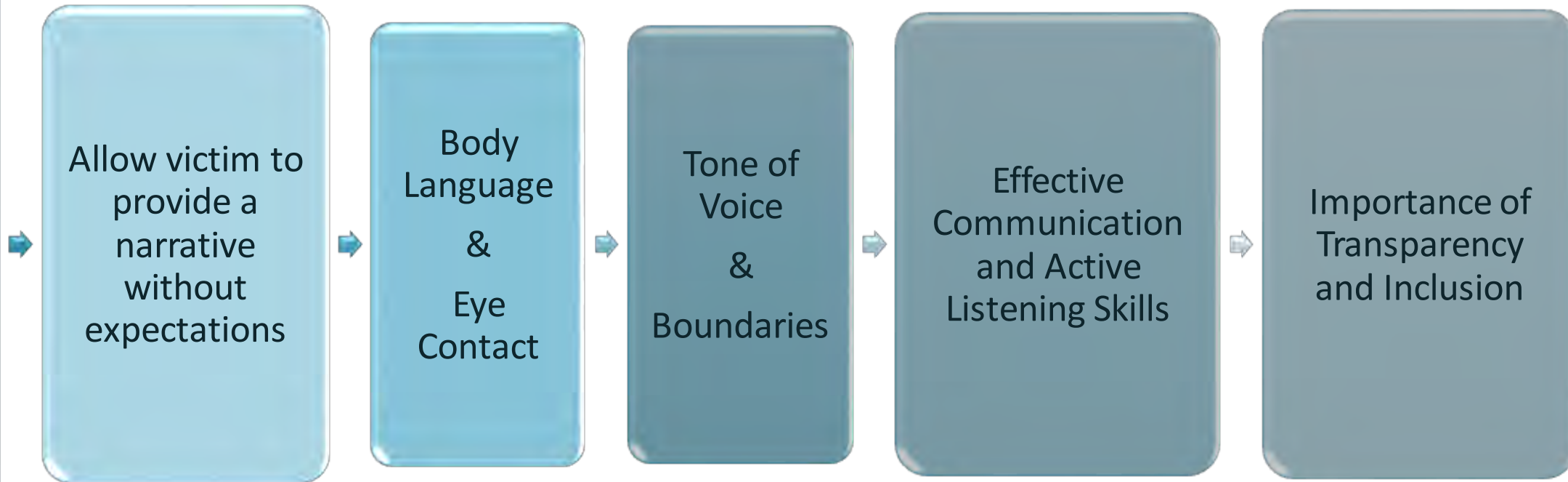
For the system



# Interview Techniques

## Questioning:

- Open-Ended
- Narrative - Style





Justice  
Looks  
Different for  
Everyone

# “Outward Adjustment Phase”

Characterized by individual  
appearing to resume “normal” life

*“Moving on / Moving forward”*





# The Reorganization Phase

- Begins to sort through emotions, memories, experiences that were blocked out
- Testing out and learning new coping mechanisms to try to re-establish a sense of security and normality



# Follow-up



# Have a Game Plan







**Life Continues**



# Trauma-Informed Interviewing for Law Enforcement

Captain Jordan Satinsky

# Objectives

- Recognize the signs and symptoms of trauma
- Conduct thoughtful and effective victim interviews
- Identify key considerations when conducting these types of interviews
- The importance of working as a team



“

*“Can you tell me what happened?”*

# Historical Interviewing

Why am I here?

Did you say no?

Did you fight back?



# Disclosure

- It is often a process, not a single event
- Victims may disclose more over time
- Do not force victims to fill in details
- Most importantly: Let Your Victim Talk
- Privacy and police reports/investigations

# BEFORE THE COMPREHENSIVE INTERVIEW

Things to Consider

# Preparation

- Report review
- Review the statements
  - victim, witnesses, defendant, nurses, etc.
- Talk to the responding officer (if possible)
- Review evidence, photos, medical records, etc.
- Listen to 911 calls and review body worn cameras
- Review defendant's and victim's criminal history
- Talk to your team
  - Victim notification
  - Interview location
  - Executing the victim interview

# WHERE SHOULD THE INTERVIEW OCCUR?

What Best Fits Your Victim vs What You Have Available

Here?



Or Here?



# WHO SHOULD BE IN THE ROOM FOR THE INTERVIEW?

What Best Fits Your Victim vs What You Have Available

Best practice

Victim

Detective

Victim advocate

# THE IMPORTANCE OF THE VICTIM ADVOCATE



# Law Enforcement and Victim Advocates

What Victim Advocates Bring to  
the Table:

- Training and Certification
- Crisis Intervention
- Safety Planning
- Maintaining Communication  
(check-in, case updates, etc.)

**Benefit: To enhance support**



# Victim Advocates

- Safety Planning:
  - Identify and develop a plan
- Case Management
  - Mental Health
  - Drug & Alcohol Dependency
  - Housing/Utilities/Childcare
  - Employment
- Maintaining communication (check-in, case updates, etc.)



# THE TRAUMA-INFORMED INTERVIEW

## Stage One: The Initial Interview

# Initial Interview

- Rapport building
- Identify needed services
- Provide information about your role and the process
- Get contact information
- General facts of the case
- Identify witnesses and evidentiary leads
- Address safety concerns; talk about witness intimidation
- Allow victim to ask questions

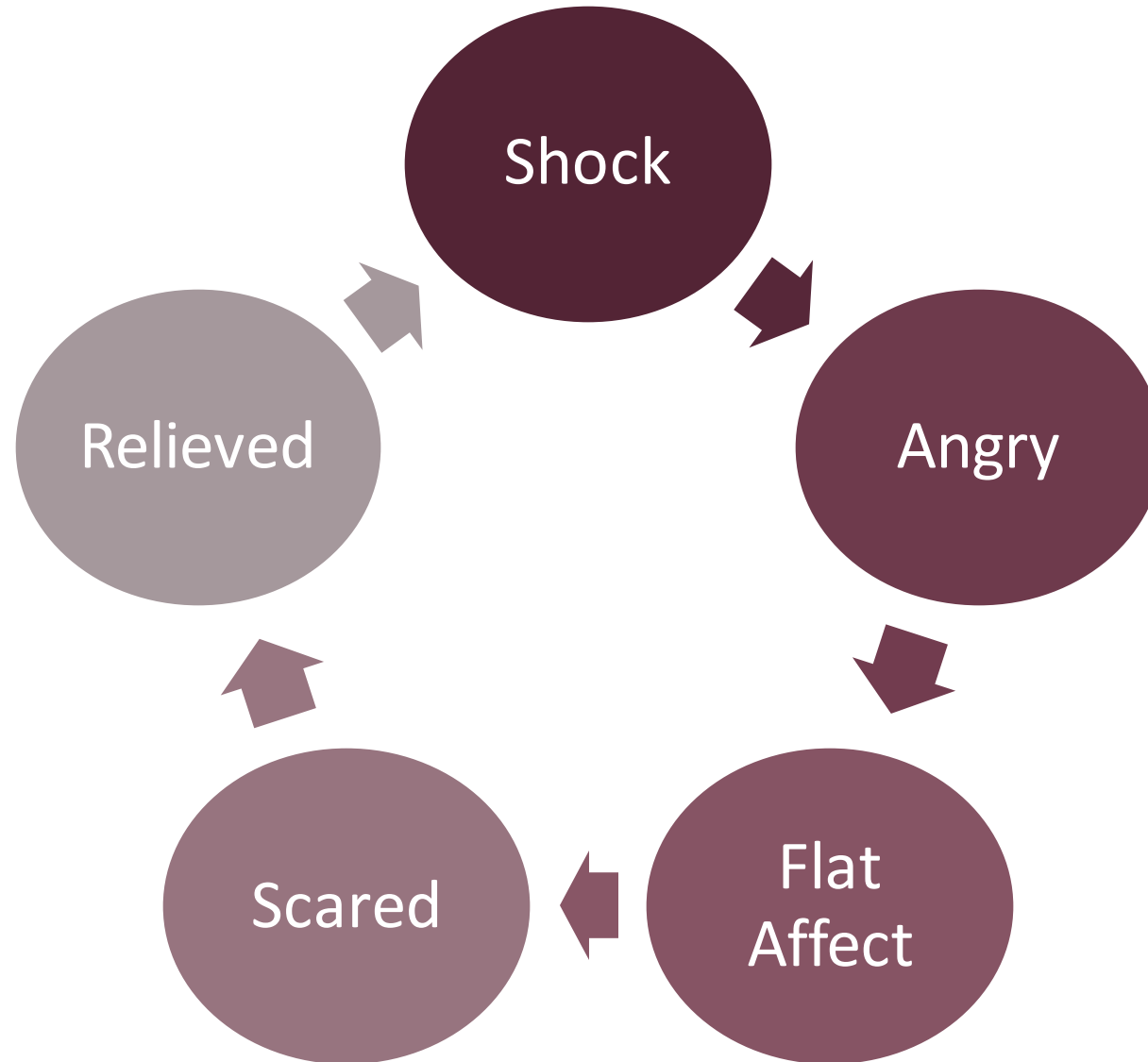
# THE TRAUMA-INFORMED INTERVIEW

## Stage Two: The Comprehensive Interview

# Comprehensive Interview

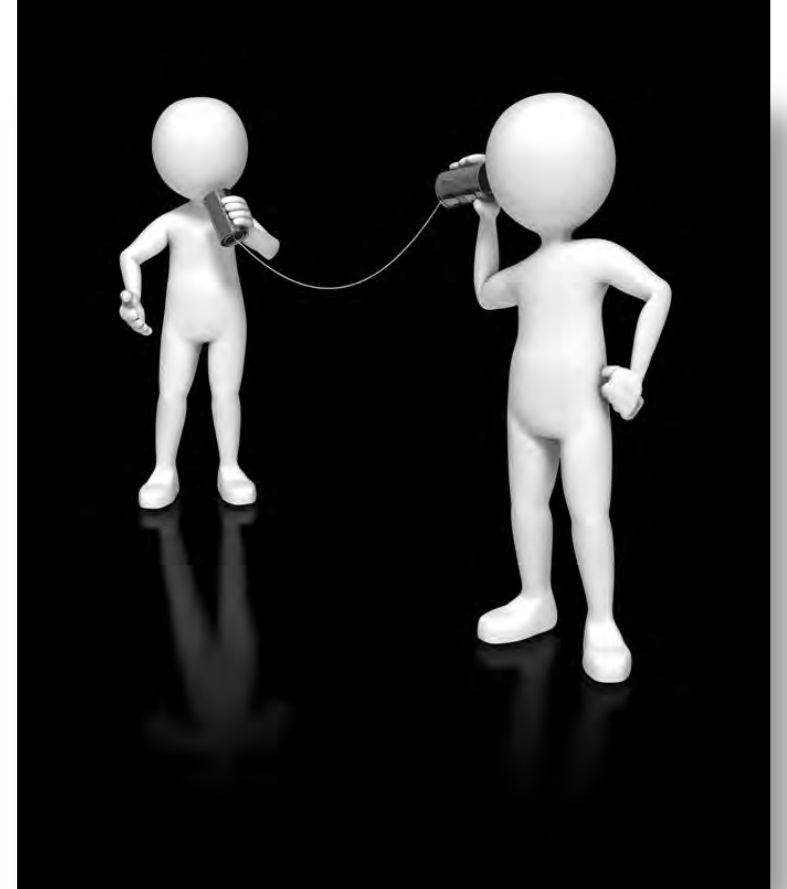
- More in-depth than the initial interview
- Meant to gather information about the:
  - The victim
  - The incident
  - Other evidence that may assist in this investigation
- Victims guide the interview

# Emotional Rollercoaster



# Body Language

- Eye contact
- Posture
- Hands
- In the present?
  - ARE YOU IN THE PRESENT?
- Gauge level of understanding
- Does the victim understand what is being said?





# Support and Compassion

- Know when to give space
- Silence is okay
- Apologizing is okay
- Transparency



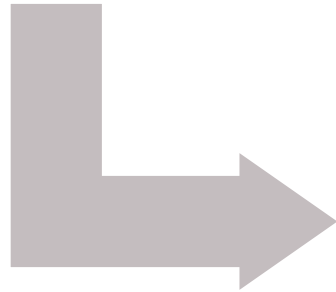
# Different Approach

- Usual practice in other cases is to establish a timeline and key facts
- Encourage victims to describe the assault in their own words
- Do not interrupt
- Do not antagonize or zero in on discrepancies
- Do not force victims to prematurely try to piece together fragmented memories
- Do not interrogate

# Process Approach

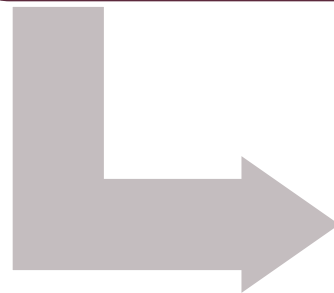
Process

- Not a single event
- Multiple interviews



Details

- May take time
- Do not force



Neurobiology  
of trauma

- Consider the impact
- Do not exacerbate

# Victim-Centered Interview

- Adapt to meet the needs of the victim
- Let victim know that you are part of a team that is here to offer support
- Meet the victim's physical needs before any interview (e.g., food, clothing, sleep)

# Victim-Centered Cont.

- Mirror language used by the victim
- Recognize how societal myths and stereotypes affect everyone, even victim
- Avoid language that could be perceived as judgmental
  - Why did you?
  - Why didn't you?
- Ask open ended questions
  - What are you able to tell us?

# Rapport Building

- Engage on relevant topics
- Gather background information
- Ask about family or topics that they care about
- Avoid re-victimization
- Put victim at ease/ allow some measure of control of interview
- Share commitment to victim-centered service

# Move to a more details

- Timing and victim's needs should be considered
- Schedule with advocate
- Let victim know that this conversation will be longer
- Allow victim to take breaks
- Follow up on initial interview topics, including services and safety plan

# Recollection of information

## **Remember**

Information may not come in any order from the victim.

Do not interrogate perceived inconsistencies.



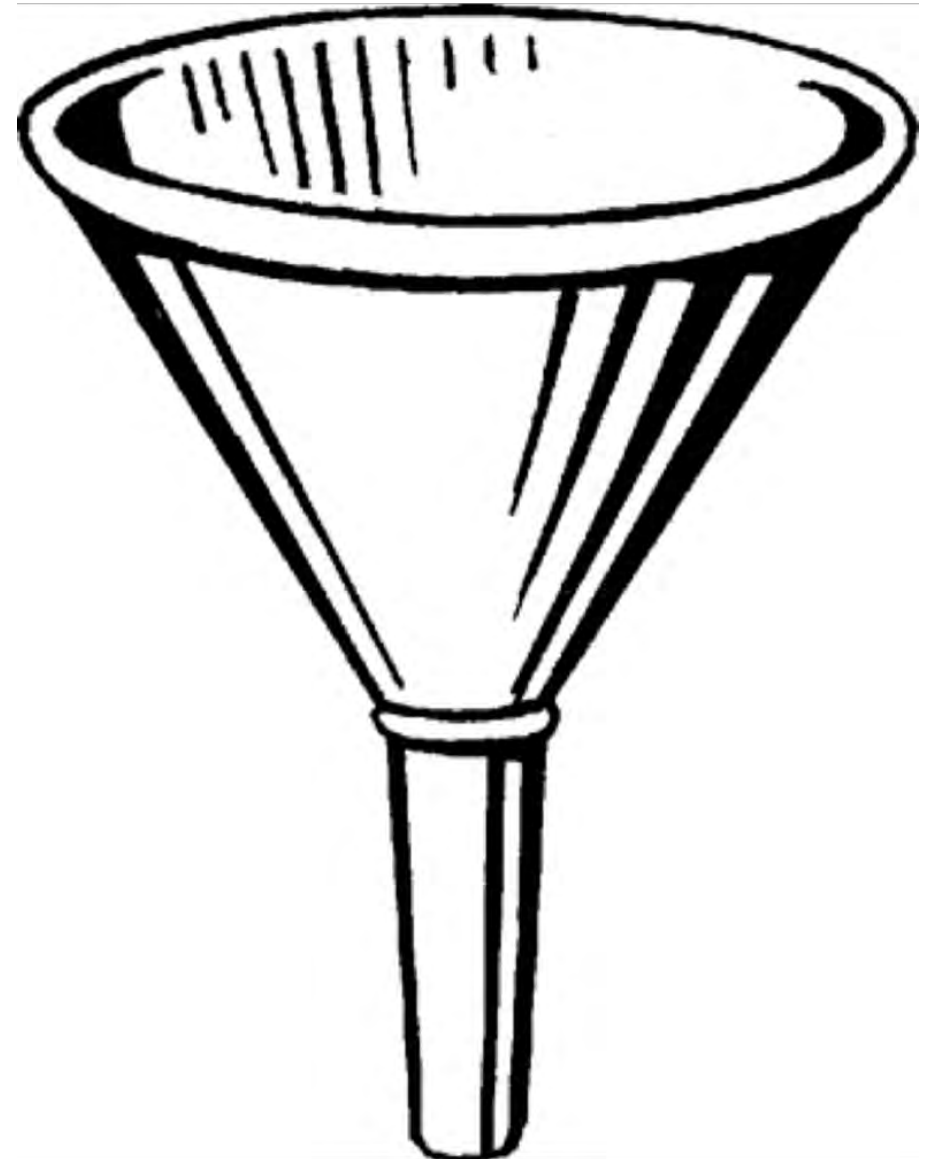
# Open Questions

Invites victim to provide as much information as possible

- What was the party like?
- What are you able to tell me about what happened once you were alone?
- How did the night start?
- Can you tell me more about that?

# Funnel Approach

- Open questions
- Follow up
- Closed
- Leading
- Summary



# Closed Questions

Narrow and seek a one or two-word answer

- When you left your house, was it dark outside?
- Did you pay for the drinks?
- Do you remember anyone taking photos at the party?

# Avoid Accusations

Why didn't you . . . ?

Why did you . . . ?

What are you able to tell me about . . . ?

Do you remember . . . ?

# Follow-up Questions

Used to clarify a response to an open question

- When you say that he gave you a funny look, can you describe that a little more?
- You said that there was a “tussle” – what do you mean by that?

**Be careful not to interrupt the flow of the victim’s experience**

# Leading Questions

Suggests an answer in the question and are used to confirm facts that logically flow from the victim's responses

- You drank the shot he bought you?
- Your friend was not there at that point?

***Use when appropriate***

# Trauma and Disclosure

- Avoid chronological questions
- Allow victim an opportunity to describe experience
- Ask for sensory, emotional, and physiological information
- Ask follow up questions to clarify language

# Breaking up the Monotony

Redirect the conversation

Remember special events and dates

Don't have the same conversation

Follow up on conversations in a timely manner



# THE TRAUMA-INFORMED INTERVIEW

Stage Three: Review, Corroborate, and Ensure Open  
Communication

# Interview Review

Review the facts and the victim's responses

Ask victim to elaborate on questions you may have

Understand that they may not be able to answer those question

# THE TRAUMA INFORMED INTERVIEW

Summary

# Recreate the Reality

When he held his hand to my throat, I could feel it on the other side. I thought I would die. I was sick before it went.

*These questions may trigger traumatic memories.*

# Recreate the Reality

## Sensory Details

Sight

Hearing

Touch

Taste

Smell

## Emotional Response

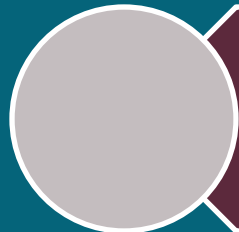
How did  
you feel?

## Physiological Effects

How did  
that affect  
you?




Investigator Training



Collaboration with Local Rape Crisis Center



Constructive Criticism



Willing to Adapt to a New Generation of Advocacy

# The Truth

- Honesty is key
- Reassure victim that s/he will not be judged
- Recreates the reality of the crime
- Make victim comfortable; be respectful
- Want unflattering details
- Knowledge = power
- Prosecutor might keep “bad” information out
- Lies are often “face saving” and always relevant and admissible

# Benefits

- Victims able to provide detail in her/ his own words
- Elicits sensory details
- Helps prosecutors and investigators identify corroborating evidence





# Open Discussion Questions?

# Contact Information



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