

# D·PREP ESTABLISHING RAPPORT

When discussing the assessment with the person being assessed, “creating proper conditions and setting a proper interview climate when speaking with the subject may increase the likelihood of the interviewee being more willing to share personal insight and useful information. Keywords for the approach in the “threat assessment interview” are objective and neutral, but nevertheless friendly, understanding, and nonjudgmental and subtly supportive approach. In order to find a deeper level of understanding of the person and to be able to “see the world through her eyes,” the interviewer will have to be sufficiently attentive.(Van der Meer & Diekhuis, 2014, p. 61)

This personal connection and attention are necessary at the very outset of the assessment. Failure to create the proper conditions and interview climate will result in increased defensiveness and decreased information being shared.

Assessing a student’s potential for violence requires first rapport and, eventually, a safe trust-based relationship between the clinician and the student. The relationship communicates a level of concern and caring that allows the student to begin to develop a degree of trust, which is essential when trying to determine what is going on inside the head of the student. Developing trust increases the likelihood that the student will then share the information needed to understand the potential for violence. Without trust, staff and student are locked into opposing sides, each masking and attempting to protect a personal agenda.

This is certainly a challenge when working with individuals who are frustrated, scared, angry, and feeling disenfranchised with the process. Establishing a good rapport requires finding the sweet spot between too hot and too cold. “Too hot” in this context is a clinician who downplays the seriousness of the assessment, who seeks to make a friend rather than work with the person being assessed, and who addresses the individual’s expression of concern with glib, superficial redirection and assurance. The “too cold” scenario is one in which the serious nature of the assessment is emphasized to such an extent that the individual responds defensively and fearfully, which leads to a potentially hostile and adversarial process.

Most assessments are mutually beneficial for the student and the evaluator. The evaluator attempts to understand an individual’s potential for acting out violently and has to balance both the needs of the individual and the needs of the community. Eells and Miller (2011) described it this way: “The decisions that staff make are difficult on many levels, and always involve balancing the needs of the individual student with the interest and safety of the community at large” (p. 9).

In education settings, the needs of the individual are often related to enrollment in school or achieving some level of academic success in the classroom, determining a career path for future employment, and developing social relationships with those around him or her. Most individuals being assessed would agree that these are the things they would like to achieve as well. The community needs are equally important: the ability of all students to take part in a safe and supportive learning environment and to achieve academic success in a community free of fear, disruptions, and threats to safety. In the event that the individual is not able to remain part of the community, this conversation will be easier to have and understand with a student who feels that the evaluator is trying to find a mutually beneficial outcome.



- **Be Genuine.** Rapport is easier to obtain when the other person sees you as genuine in your comments and interactions with them. While they may not like what you are saying or asking, if it is done with an approach of respect and truthfulness, most people will respect this and respond accordingly.
- **Smile.** This is a universal gesture of goodwill regardless of culture, nationality, or religion. Research indicates that individuals who receive a smile from another feel accepted and not judged.
- **Listen carefully.** Most people do not listen to each other in an open and patient manner. If the interviewer is attentive, is nonjudgmental, and shows interest in other people, a very positive emotional dynamic will be put in place, even if the interviewee is very distrustful and hates what the interviewer represents (e.g., the administration).
- **Mirror the interviewee.** This refers to mimicking the interviewee's body language and words, which takes attention and practice. If it is done too obviously, it will be noticed and rapport will not arise. It may mean sitting the same way, making similar gestures, using some of the same words, even using similar emotional tones of voice.
- **Avoid blunders.** Be aware of cultural differences and things that might offend the interviewee. Displaying a cold and unfriendly demeanor can be considered an insult. Conveying impatience, such as glancing at one's watch or tapping one's fingers on the table, can be considered an insult. Certain gestures may be an insult in some cultures.
- **Ask open ended questions.** An open question provides many avenues to an answer. Closed questions have limited answers possible and tend to limit conversation and can have a negative impact on rapport building.
- **Find hooks, beware of barbs.** Hooks bring us closer together (common interests, similar backgrounds). Barbs drive us apart, raising defensiveness.
- **Lower defensiveness.** Addressing defensiveness is essential to establishing rapport and to developing ways to increase the likelihood of the individual being assessed sharing details and information with the clinician. Being willing to empathetically listen to the person being assessed helps them begin to trust and be willing to share.
- **Find commonality.** Identify a characteristic that is shared between the interviewer and interviewee and point that out. It could be marriage, a child, a common geographical area visited, a certain amount of education, or interest in a certain sport. Avoid sharing anything that would do potential harm to the individual being assessed. This tenet is central in both assessment and treatment. Only share information that is resolved for the clinician. A recent divorce, the death of a loved one, or a recent disciplinary action by a work supervisor are all examples of material that should not be shared in a clinical context given the emotional volatility of the information. Finally, avoid sharing information that steps beyond the boundaries of professional practice. This would include sexual information, inappropriate jokes, or overly personal information.