

## **Procedures for upset sample members (at risk)**

### Objectives

Observe interviewees for any at-risk behaviors.

Administer protocol if at-risk behaviors are shown.

### Overview of Protocol

All respondents will receive a flyer, at the end of the interview, containing hot line and center numbers for counseling services.

NORC will train staff to observe respondents for potential at-risk behaviors that may occur during the interview, including such responses as crying, agitation, or profuse sweating (see detailed protocol).

NORC will train staff in appropriate responses for dealing with the behaviors identified above, to include:

- Interrupting the interview
- Offering to stop the interview
- Providing a list of numbers to call to seek assistance

If a respondent verbally tells the interviewer that he/she has intentions or plans to commit suicide or self-injury; or that he/she intends or plans to kill or seriously injure another with a weapon or other lethal method, NORC staff will follow established protocols.

Specifications  
Assistance Flyer, example

## **ILLINOIS Resources & Referrals**

### **For counseling or crisis services contact:**

#### **YWCA Metro Chicago**

Locations throughout Chicago, IL  
24-hour hotline: 1-888-293-2080

#### **Lutheran Social Services of Illinois**

Locations throughout IL  
Call between 8:30am-4:30pm on the business phone number:  
1-847-635-6764

#### **Community Counseling Centers of Chicago**

Locations throughout Chicago, IL  
To schedule an appointment or for more information, call:  
1-773-769-0205

#### **Rape, Abuse and Incest National Network (RAINN)**

24-hour national hotline: 1-800-656-HOPE  
Website: [www.rainn.org](http://www.rainn.org)

### **For more information about the survey contact:**

#### **James Carr**

NORC  
Survey of Crime Victimization  
55 East Monroe St.  
Chicago, IL 60603  
1-312-759-5088



#### **Michael Rand**

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## Detailed At-Risk Protocol

### **At Risk Procedures: Detail**

Although unlikely, you may encounter respondents who are a danger to themselves or others, or become distraught during the interview. In this section, you will find information about how to handle these types of situations. Even though it is highly unlikely that these situations will occur during the field period, you should be prepared to handle them just in case they do arise.

#### **Reacting to and Managing General Distress**

The Survey of Crime Victimization asks the respondents to recall any incidents of victimization over the past year, which could be difficult for some individuals to discuss. For example, a respondent may be overcome with emotion, or become so agitated or distracted that he or she is temporarily unable to continue with the interview.

There is usually a progression of verbal and nonverbal cues indicating that a respondent is becoming upset. As you conduct the interview, observe the respondents for cues that suggest distress (e.g., lump in the throat, shaking, and sudden agitation). If necessary, you may acknowledge the respondent's feelings in a brief, matter-of-fact manner. For example, if the respondent becomes agitated, you can say something like, "Are you okay?" or "Is this becoming difficult for you?" If you observe a respondent struggling to maintain composure, or if he or she begins to cry, acknowledge the distress by saying something like, "Would you like to take a short break?" and allow the respondent time to regain composure. Usually the respondent will be able to continue after a break. When you feel that the time is right, you can gently say, "would you like to continue the interview now?" If the respondent is too agitated or upset to continue after 5-10 minutes, break-off the interview, and provide the crisis center numbers from the flyer.

If a respondent becomes distressed, remember that you *must not* respond in an evaluative way and *must not* attempt to help. After listening respectfully and non-evaluatively, you should attempt to resume the interview. One of the hardest things to do when a respondent becomes distressed is to avoid taking on the role of a Good Samaritan or a counselor. Regardless of your educational background, your function in this study is that of a professional interviewer. **Never** adopt the role of a counselor or an advocate. You could unintentionally cause great harm by trying to help. In addition, some individuals can be manipulative and lead well-intentioned, sympathetic interviewers in very undesirable directions.

**Never** engage in conversation with the respondent about the events, behaviors, or emotions asked about in the interview. Stick to the interview text, the approved probes, and the other approved responses to provocations and requests for information provided in this manual. It is useful to discuss the weather and other non-controversial topics briefly before and after the interview, but strictly avoid any type of serious conversation.

#### **Reacting to Severe Distress**

Asking respondents personal questions about their experiences may trigger upsetting emotions and feelings on the part of a respondent. If the respondent becomes severely upset or emotional, you should do the following:

- Provide the respondent with a copy of the flyer, which contains mental health service numbers.
- Explain the services offered by the hotlines, including counseling and referrals.

If the respondent indicates that he or she has thoughts, plans, or attempts at suicide or causing harm to others, take the following actions:

- Maintain your composure and professionalism. Do not respond or react in an evaluative way, do not ask questions, and do not give advice.
- Complete the interview as long as the respondent is able and willing to do so.
- Provide the flyer at the close.
- Write down what the respondent said as closely as possible.
- Call your FM and describe the scenario

If a respondent becomes violent and you feel personally in danger, stop the interview immediately.

### **Services and Resources Flyer to All Respondents**

At the end of the interview, each respondent will be given a flyer listing the telephone numbers of available local crisis centers from which they can seek assistance. This information should be given to all respondents, even those who do not exhibit emotional distress or do not request specific information during the interview.

### **Distributing Services and Resources Flyer to Respondents Not At-Risk for Immediate Danger or Harm, But Who Exhibit Emotional Distress During an Interview and/or Ask Questions About Mental Health or Substance Use**

Asking respondents personal questions about their experiences may trigger upsetting emotions and feelings on the part of a respondent and the respondent may want information or advice regarding their own or a family member's mental health or substance use. Also, respondents may perceive you as a mental health professional or expert on the topic and ask you questions about their own or another person's mental health or substance use. In this case, you should do the following:

To respondents, say: "I'm not a mental health counselor so I cannot give any opinions. Later, I will give you a list of telephone numbers that you could use to get information."

### **Distributing Services and Resources Information Flyer to Respondents Not At-Risk for Immediate Danger of Harm and Who Do Not Exhibit Emotional Distress During an Interview or Do Not Ask Questions About Mental Health or Substance Use**

At the end of the interview, say the following:

"Along with the informed consent sheet, please take this list of telephone numbers that you can use to get information or seek assistance about some of the topics in today's interview."