

verbal, nonverbal, and abstract. Major blocks to listening are environmental distraction and premature judgment.

Although it is necessary to make some preliminary judgments, listen with as much objectivity as possible by clarifying meanings and attempting to see the situation from the parent's point of view. Effective interviewers consciously control their reactions and responses and the techniques they use (see [Cultural Considerations](#) box).

Cultural Considerations

Interviewing without Judgment

It is easy to inject one's own attitudes and feelings into an interview. Often nurses' own prejudices and assumptions, which may include racial, religious, and cultural stereotypes, influence their perceptions of a parent's behavior. What the nurse may interpret as a parent's passive hostility or lack of interest may be shyness or an expression of anxiety. For example, in Western cultures, eye contact and directness are signs of paying attention. However, in many non-Western cultures, including that of Native Americans, directness (e.g., looking someone in the eye) is considered rude. Children are taught to avert their gaze and to look down when being addressed by an adult, especially one with authority ([Ball, Dains, Flynn, et al, 2014](#)). Therefore nurses must make judgments about “listening,” as well as verbal interactions, with an appreciation of cultural differences.

Careful listening relies on the use of clues, verbal leads, or signals from the interviewee to move the interview along. Frequent references to an area of concern, repetition of certain key words, or a special emphasis on something or someone serve as cues to the interviewer for the direction of inquiry. Concerns and anxieties are often mentioned in a casual, offhand manner. Even though they are casual, they are important and deserve careful scrutiny to identify problem areas. For example, a parent who is concerned about a child's habit of bedwetting may casually mention that the child's bed was “wet this morning.”