



**CHARTING THE COURSE TOWARDS
PERMANENCY
FOR CHILDREN IN PENNSYLVANIA:
A Knowledge and Skills-Based Curriculum**

**MODULE THREE (3)
USING INTERACTIONAL HELPING SKILLS TO
DEVELOP
CASEWORKER/CLIENT RELATIONSHIPS**

Standard Curriculum

**Developed by:
The Pennsylvania Child Welfare
Training Program**

**University of Pittsburgh,
School of Social Work
Pittsburgh, PA**

August 2007

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Copyright © 2007, The University of Pittsburgh

This material is copyrighted by The University of Pittsburgh. It may be used freely for training and other educational purposes by public child welfare agencies and other not-for-profit child welfare agencies that properly attribute all material use to The University of Pittsburgh. No sale, use for training for fees or any other commercial use of this material in whole or in part is permitted without the express written permission of The Pennsylvania Child Welfare Training Program of the School of Social Work at The University of Pittsburgh. Please contact the Training Program at (717) 795-9048 for further information or permissions.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Agenda for One-Day Workshop on Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Estimated Time	Content	Page
30 minutes	Section I: Introduction	3
1 hour, 30 minutes	Section II: Tuning in to Self	7
1 hour, 30 minutes	Section III: Tuning in to Others	16
1 hour	Section IV: Applying the Skills of Tuning in to Self/Others to Culturally Sensitive Intervention	22
1 hour	Section V: Taking Care of Self	28
30 minutes	Section VI: Self Assessment and Transfer of Learning	34

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section I: Introduction

Estimated Length of Time:

30 minutes

Learning Objectives:

Participants will be able to:

- ✓ recognize the course competencies and learning objectives

Methods of Presentation:

Lecture, individual Activity

Materials Needed:

- ✓ Name tents
- ✓ Colored markers
- ✓ TV/VCR/DVD Player
- ✓ Overhead Projector and Screen
- ✓ **Overhead #1 (Learning Objectives)**
- ✓ **Overhead #2 (Agenda for Module 3)**
- ✓ **Handout #1 (Learning Objectives and Competencies)**
- ✓ **Handout #2 (Agenda for Module 3)**
- ✓ **Handout #3 (It's in Every One of Us)**
- ✓ **Video: It's in Every One of Us**

Outline of Presentation:

- Prepare the training room
- Welcome trainees to Charting the Course for Children in Pennsylvania
- Introduce himself/herself to the group
- Facilitate trainee introductions
- Review the learning objectives for the session using **Overhead #1 (Learning Objectives)** and **Handout #1 (Learning Objectives and Competencies)**

Section I: Introduction

Trainer Note: Prepare a poster for the wall entitled WIIFM (What's In It For Me)?

Trainer Note: Prepare the training room in advance by placing name tents, markers, and handout packets at each table (if using packets). As participants arrive, greet each one. Place the video in the VCR and ensure it is ready to play. If using handouts in packets: pull Handout 6 and 7 from the Handout Packet as the handouts give the answers to activities that the participants will be doing. These handouts should be distributed after the activity is completed.

Step 1: (5 minutes)

Lecture

The trainer starts the training session by covering the following points:

- ✓ Welcome participants to the training
- ✓ Introduce the trainer
- ✓ Complete name tent
- ✓ Remind Participants of the classroom cultural including:
 - Be on time -15 minute rule
 - Training Schedule – 9:00 to 4:00 with Breaks
 - Document your presence –sign-in sheet
 - Provide Constructive and Motivational Feedback
 - Respect
 - Risk taking
 - Practice makes permanent
 - Focus on Learning – No cell phones & only contact office for emergencies

Step 2: (5 minutes)

Individual Activity

If this training is for a cohort group, participants will complete their names tents upon arrival and this step may be deleted. If this training session is not part of a cohort group, guide participants in completing their name tents.

If the cohort group has a new participant entering the training ask 1 person from each table to give the names of each member at their table and state one or two things they learned from the last module.

The trainer instructs participants to write the county in which they work in the top right corner of the name plate. The trainer instructs participants to write their position in the agency in the top left corner.

The trainer asks participants to write the amount of time they have been in their position in the bottom left corner. The trainer asks participants to write the amount of experience they have in child welfare in the bottom right corner.

When the name and four corners are complete, the trainer asks participants to stand their name tent in front of them.

The trainer asks participants to share introductory information from their name plates with the others seated at their table.

Trainer should ask participants to think of one thing that they want to learn about the use of Interactional skills to develop the caseworker/client relationship. Participants should write this thought on the WIIFM poster. At the end of the training, review the WIIFM poster and make sure that all of the concerns and questions have been addressed.

Step 3: (5 minutes)

Lecture

The trainer refers participants to their workshop packets and reviews the competencies, objectives and agenda for the workshop. **Handout #1 (Learning Objectives and Competencies)** and **Overhead #1 (Learning Objectives)**. The trainer describes how the learning objectives will be accomplished by reviewing the **Handout #2 (Agenda for Module 3)** and **Overhead #2 (Agenda for Module 3)**.

Step 4: (15 minutes)

Video

The trainer introduces the video with a statement that it is important for Child Welfare Professionals to understand the cultural context people bring in their interaction with other people. Child welfare workers must work with client families from different cultures; it is therefore important that they understand the contextual framework of culture and develop cultural sensitivity in working with and relating to families. To understand the cultural context and connections between values, beliefs, and behaviors, Child Welfare Professionals must first recognize their own cultural context. During interviews, as Child Welfare Professionals assess the allegation of child abuse and neglect, they should explore the families' cultural context as it affects their perceptions and behavior.

Using **Handout #3 (It's in Every One of Us)** as a guide, ask participants to focus on the people in the video.

- What do you see on their faces?
- What story do their faces tell?
- What do they know about each person's story?
- Which people would they find it difficult to work with? Why?

Play the **Video (It's in Every One of Us)**.

After the video—using **Handout #3 (It's in Every One of Us)** give participants a few minutes to reflect on what they saw and complete the handout.

Use the handout as a guide and facilitate a large group discussion. Key points to the discussion: Simply looking at a face, we often formulate an impression of a person. Based on that impression, we form thoughts and judgments. As Child Welfare Professionals, it is critical that you train yourself not to make judgments based on your own experiences and assumptions. You must learn about the people with whom you are working. Ask them to tell you their situation – don't assume you know their situation. Also, it is important to acknowledge that there are races, genders, and ethnicities that you might not understand, but with whom you must interact. Through this recognition, you can maintain objectivity and avoid assessing someone based on your values and beliefs; instead using the behaviors you observe. Always try to see the human side of all people.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section II: Tuning in to Self

Estimated Length of Time:

1 hour 30 minutes

Learning Objectives:

Participants will be able to:

- ✓ Explain the steps of the skill – Tuning in to Self
- ✓ Explain how the skill of “Tuning in to Self” relates to cultural competence in a Child Welfare Professional’s practice
- ✓ Recognize how personal values and beliefs may impact on a Child Welfare Professional’s practice

Methods of Presentation:

Large Group Discussion, Lecture, Video, Script

Materials Needed:

- ✓ Colored markers
- ✓ Flipchart stands
- ✓ Blank flipchart pads
- ✓ TV/VCR/DVD Player
- ✓ Overhead Projector and Screen
- ✓ **Overhead #3 (Tuning in to Self)**
- ✓ **Overhead #4 (Questions – Tuning in to Self)**
- ✓ **Overhead #5 (Tuning in to Self: Applying the Skill to Casework Practice)**
- ✓ **Handout #4 (Tuning in to Self)**
- ✓ **Handout #5 (Tuning in to Self Video Practice)**
- ✓ **Handout #6 (Case Scenario Shaquille)**
- ✓ **Handout #7 (Case scenario Connor)**
- ✓ **Video: Tuning in to Self (good)**
- ✓ **Video: Tuning in to Self (bad)**

Outline of Presentation

- Presenter should ask for volunteers to share the experience of Tuning in to Self
- Presenter should explain how to prepare for a culturally competent encounter with a client
- Presenter should show video clips of successful and unsuccessful applications of Tuning in to Self
- Presenter should also use a case study demonstration and **Handout #4 (Tuning in to Self)**
- Presenter should facilitate 2 case studies using **Handout #6 (Case Scenario for Shaquille)** and **Handout #7 (Case Scenario for Connor)**
- Presenter should facilitate reactions to 4 scenarios using **Overhead #5 (Tuning in to Self: Applying the Skill to Casework Practice)**

Section II: Tuning in to Self

Step 1: (10 minutes)

Large Group Discussion

Remind trainees that their pre-work activity was to *Tuning in to Self* using the 5 step process outlined on their Module 2 Transfer of Learning Handout. Remind participants that in Module 2 they saw the Child Welfare Professional in her car Tuning in to Self.

Ask for volunteers to share what they learned about themselves and what case work activities they discovered are hardest for them to complete?

Inform trainees that they will have the opportunity to see this skill demonstrated and then they will have the opportunity to practice the skill.

Step 2: (10 minutes)

Lecture

Discuss the following with participants: You are much more likely to have successful interactions with clients if you are in touch with your own thoughts and feelings and bias about child abuse and neglect. For example, if you have a strong emotional response (e.g., anger, empathy, or disgust,) to child abuse and neglect situations, you can control it better if you are aware ahead of time. In casework practice, anger can seep into tone of voice; too much empathy can cloud your judgment. As a professional, you will interact with clients more effectively if you know yourself.

Introduce the skill demonstration video in the following way:

This 120-hour CORE curriculum is designed to teach you the skills, as well as the knowledge, that you need for effective Child Welfare casework practice. The way we approach teaching a skill in the classroom involves a series of steps, including explanation, demonstration and discussion, practice, feedback, a discussion of how to use the skill on the job.

Remember the scene with the Child Welfare Professional Claudia Martin, driving to her visit with Mr. Kelly. What did she realize when she Tuned into Self?

You learned that the interactional skill of Tuning in to Self can be used to prepare for an encounter with a client. We are now going to see demonstrations of these encounters.

Refer trainees to **Handout #4 (Tuning in to Self)**. Using **Overhead #3 (Tuning in to Self)** review the content of the handout, demonstrating that each step is part of the total process. Inform trainees they are about to view a visual demonstration of how the skill is applied in child welfare practice.

Step 3: (5 minutes)

Video, Large Group Discussion

Play the **Video: Tuning in to Self (good)**. After the video clip discuss the following:
Trainees can follow along using **Handout #5 (Tuning in to Self Video Practice)**:

1. What skill steps did they observe?
 - “What are the workers emotional, physical and cognitive reactions to this situation or family?”
 - “How will this reaction likely affect the worker’s actions?”
 - “What outcome did the worker want?”
 - “What does the worker need to do with her reaction?”

Inform participants in live situations they will use the following:

- At this time, I feel.....(complete the feeling)

Discuss the following with participants:

- How might case work intervention be affected if the worker doesn’t use the Tuning in to Self skill?
 - ✓ Worker could be defensive
 - ✓ Worker could form pre-conceived notions
 - ✓ Worker might not be objective
 - ✓ Worker might not be professional

Step 4: (10 minutes)

Video, Large Group Discussion

Introduce the next video clip by saying we have demonstrated the skill in the “good” scenario now “Let’s now look at what can happen if this worker doesn’t use the Tuning into Self skill.”

Play the **Video: Tuning in to Self (bad)**. After the video clip ask trainees to identify how the worker behaved differently. Reinforce correct identification of the steps of Tuning in to Self (listed above).

After the video ask participants to individually answer questions 1 through 4 on **Handout #5 (Tuning in to Self Video Practice)**. Lead a large group discussion that includes these points:

- ✓ Worker did not engage the client to work with her
- ✓ Worker allowed her own feelings to interfere with the assessment of the children’s safety and the parent’s ability to care for the children
- ✓ Worker was not objective

To reinforce social work best practice, show Tuning in to Self (good) video again.

Step 5: (10 minutes)
Script

Introduce another demonstration of the skill this time through the use of a case study with girls who are of Somali descent.

Sometimes it is useful to simply ask yourself, “What are my reactions to this situation or family?” Let’s look at an example of “Tuning in to Self.”

The trainer reads the following case example and then processes the questions at the end of the case example.

Case Example:

You are an investigative/assessment worker and have just been assigned the following case. Three Somali Muslim girls, ages 16, 14, and 12, have been reported as having been struck repeatedly on the face by their mother and father. The girls were examined by a physician at the hospital emergency room. The physician also has filed a report, stating that the all of the girls have multiple bruising and contusions on their faces, upper arms, and forearms. Currently, all of the family members are being detained at the police station. The police report says that the family had been traveling through Pennsylvania on the way to Chicago, but has stayed for several days at an inexpensive local motel, apparently because the father is ill and too sick to drive. This morning the parents thought the girls were flirting with some American boys in the parking lot. The hotel manager called the police saying both parents were in the parking lot striking the girls. The police say the father and girls speak English somewhat, but the mother does not. A translator cannot be obtained in time for the upcoming interview.

Soliloquy Response:

Okay, I know that the doctor has medically confirmed these injuries and says that they constitute grounds for abuse. It doesn’t sound to me that there is any reason to think the injuries are accidental, so I don’t think I’ll be trying to determine that.

What I know about Somali Muslim families fills a thimble; probably I have more stereotypes than knowledge. I have never even met a Somali Muslim, and I know only a few Muslims and none of them well. My hunch is that flirting with boys is a major transgression, but I don’t have any real information about this.

I am feeling a bit anxious about this—how am I going to balance my investigation role with a respect for their culture when I don’t exactly know what it is? I will talk to the girls individually first. What if they don’t talk to me—maybe they have been told by their parents to say nothing. I know myself; I start to feel uncomfortable when people won’t talk at all, especially if

they seem so different from me. Also, I guess I will have to use one of the girls as an interpreter when I talk with the mother. Is that better than using the father? I hope the father doesn't get all self-righteous—I know that my stereotype is that this is probably somewhat of a macho culture, and I know it bugs me when I think about fathers being able to hit and even abuse their kids in the name of parental rights. When they get self-righteous about it, it can really annoy me. But, hey, I need to remember that the report said both parents were hitting them.

I know I may feel frustrated about the police involvement, too. Even though I can get annoyed at macho stuff on the part of clients, it REALLY gets to me with cops. I wonder whether they are getting into some kind of macho standoff with this father right now. Last week, I had a case where a cop had "escalated" a macho father, and by the time I got there, the father was so ticked off, I could hardly talk to him. Also, I wonder if the cops are going to have a thing about Muslims after 9/11. I don't; in fact, I feel that it is doubly hard being Muslim in America now, but I wonder if the police might be more against them now.

Another thing that could get to me is if this family is really poor. I just saw some show on TV about these struggling families from Somalia who have settled in Maine, and they are really poor and were politically oppressed in their own country and lost everything they had just to get to America. It really tugged my heartstrings. I mean, no way could they really know, much less assimilate, all our laws and social norms in a short time. Probably they are really scared and confused—maybe in their homeland when the cops pick someone up, it means jail time, at best. So, I also am already feeling sorry for them.

I wonder about these girls—if they were talking or even flirting, I wonder what they are going through, trying to adjust to America, all cooped up for days in that cheapo motel, maybe going through that tough stage of assimilation faced by so many teens from immigrant families. And girls—they probably are bombarded by totally opposite messages from their own culture and from America. I feel sorry for them, and there's a part of me that hopes that this nasty experience means that they will be able to stand up for their rights in their family, because now they are in America, and it's not okay here to hit your children so hard as to leave bruises. Maybe they will be empowered by this, and I think that would be good.

Write these questions on a flipchart

- What insights did the worker have regarding Tuning in to Self?
- How these might affect the worker's interaction with the family?

Lead a large group discussion on participant's responses, using the following to guide the discussion:

- Worker is aware of own lack of knowledge about Somali Muslims and also of own stereotypes—this may help the worker to get into a learning mode with the family rather than an assumption mode.
- Worker recognizes how much the stereotype of macho affects the worker’s values about equality in family life. This may help the worker to not get reactive about this issue.
- The worker has insight into challenges of the family and the girls, in particular due to what is perceived about Somali families in America, about what Muslims face in America, and about what teenage girls face when family and cultural values collide with those in America. This could help her to both be sensitive and to maintain perspective.
- The worker recognizes that the doctor has identified the children’s injuries as non-accidental and said that they constitute abuse under the law. She also recognizes that she must balance her investigative role with respect for their culture while putting aside her own beliefs, values, and attitudes related to the abuse of the three daughters.

This may be a good time for the morning break.

Step 6: (30 minutes)
Large Group Activity

Explain that trainees will now get a chance to practice their own “Tuning into Self” skill, individually, or in their small groups. Also, explain that in order to effectively do their jobs, they need to understand other cultures and be knowledgeable and sensitive to the differences in the client’s culture and their own.

Trainer Note: Make sure Handout 6 and 7 are removed from the Handout Packet so that the participants don’t know which scenario the other tables have.

Display **Overhead # 8 (Culture)**. Read definition of culture. For the purpose of this exercise, culture is defined as: Culture represents the vast structure of behaviors, ideas, attitudes, values, habits, beliefs, customs, language, rituals, ceremonies and practices “peculiar” to a particular group of people, and it provides them with:

- A general design for living; and
- Patterns of interpreting reality.

Discuss the following: Culture determines how we see the world and the way we see the world is reflected in our behavior.

The purpose of this activity is to practice the skill of Tuning in to Self when presented with case material involving child welfare issues.

Trainer should distribute **Handout #6 (Case Scenario for Shaquille)** and **Handout #7 (Case Scenario for Connor)**, equally to the trainees, making sure that all of the trainees at the same table get the same Handout, either 6 or 7. Give the trainees 5

minutes to read the scenario. Encourage trainees to look at **Handout #4 (Tuning in to Self)**, again, and reflect on the questions. Trainer must display **Overhead #6 (Questions-Tuning in to Self)**, while trainees are reading.

Trainer Note: The trainees who received **Handout #7 (Case Scenario for Connor)** will probably be somewhat confused by the answers given by the recipients of **Handout #6 (Case Scenario for Shaquille)**, since they do not know that their handouts are different.

Handout #6: Scenario for Shaquille:

A frantic, thirty-something African American couple arrived at the emergency room with their 11-month-old son, Shaquille. You could smell alcohol on the fathers' breath. Both are well dressed and well groomed. The mother told the doctor that about 1 hour ago, when she "turned her back for a second" to answer the phone, Shaquille had stood up in his high chair and had fallen to the floor.

After she picked him up, he was screaming and had been screaming ever since. She said that she called her husband at his job at Microsoft. He came home immediately, and they brought the child to the hospital. The mother feels that something is wrong but she does not know what.

Shaquille was examined and X-Rayed and was found to have a spiral fracture of his right leg. He also had some minor bruising on both of his arms and his left leg. Knowing that a spiral fracture is often a result of a twisting motion and not a fall, the doctor, head nurse, and social worker met and decided that given the nature of the injury and the bruises, they must call Childline and report this as a suspected child abuse.

Handout #7: Case scenario for Connor:

A laid-back 18-year-old Caucasian woman and her equally laid-back 19-year-old live-in boyfriend arrived at the emergency room with their 11-month-old son, Connor. Both parents were dressed in jeans and old shirts and tennis shoes. The mother told the doctor that about 2 hours ago, when she "turned her back for a second" to light a cigarette, Connor had stood up in his high chair and had fallen to the floor. After she picked him up, he was screaming and had been screaming ever since. She said that she called the father, who had been laid off from at work and was hanging out with some of his friends, and they caught the next bus to bring Connor to the hospital. The mother feels that something is wrong but she does not know what.

Connor was examined and X-Rayed and was found to have a spiral fracture of his right leg. He also had some minor bruising on both of his arms and his left leg. The head nurse had noted in the chart that the father smelled of alcohol when he first came into the emergency room. Knowing that a spiral fracture is often a result of a twisting motion and not a fall, the doctor, head nurse, and

social worker met and decided that given the nature of the injury and the bruises, they must call Childline and report this as a suspected child abuse.

Call the group back together after 5 minutes and ask only the trainees who had **Handout #6 (Case Scenario for Shaquille)**, the questions on **Overhead #4 (Questions – Tuning in to Self)**. Emphasize that if they are going to practice the skill Tuning in to Self they must be honest regarding their learned biases.

When trainer has exhausted the questions with **Handout #6 (Case Scenario for Shaquille)** recipients, he/she should ask if others care to comment or respond.

Process the questions on **Overhead #4 (Questions – Tuning in to Self)** with trainees who had **Handout #7 (Case Scenario for Connor)**.

Ask the Group:

1. What differences and similarities were there between the two group's reactions concerning Connor and Shaquille's situations?
2. Might the immaturity of Connor's parents affect the Child Welfare Professional's decision making?
3. Might the socioeconomic status of the two families' affect the Child Welfare Professional's decision making?
4. Did the hospital staff show any biases?

Trainer Note: The trainer should be prepared to address issues that may arise concerning bias and prejudice implied in the scenarios presented. Bias is defined as an inclination or preference that interferes with impartial judgment. Prejudice is defined as a bias for or against something without sufficient basis. The trainer should emphasize that neither personal biases nor prejudices can ever interfere with the Child Welfare Professional's decision-making process when working with families. The Child Welfare Professional must tune into themselves to recognize their possible biases and prejudices and not allow them to interfere with their work.

Conclude by stating that this exercise was about how a misunderstanding of someone's culture and lifestyle may skew how we relate to them, form unfair opinions of them, and incorrectly assess their situations and needs.

Step 7: (20 minutes)
Large Group Discussion

Trainer Note: For this exercise, the trainer may choose to put 2 signs at opposite sides of the room. One should read "agree" and the other "disagree" or "OK" and "Not OK". By doing this, the participants will get a chance to get up and move around.

Trainer should read the following scenarios one at a time and facilitate a group discussion after each scenario. Trainer must allow 5 minutes for each scenario. The purpose of the exercise is to show that people have many diverse values, beliefs, and

perspectives. Some trainees will think that the following are OK, others will not think they are OK. Trainer must not add any information and present the scenarios as written.

Questions to trainees: Do you believe that this practice is OK? Why or why not:

1. Smacking a 2 year old on the behind with a wooden spoon
2. Leaving a 9 year old home alone after school from 3:00 until 7:00
3. Breast feeding a 3 year old
4. An 8 year old child that still sleeps with his/her parents

Using **Overhead #5 (Tuning in to Self: Applying the Skill to Casework Practice)** facilitate a large group discussion asking trainees about their ideas for using this skill on the job.

- How have you already found yourself tuning in to your own feelings and thoughts about families?
- What have you thought about how your values related to child abuse differ from others?
- What do you think is most beneficial in your own growth as a professional to focus on?
- Do you sometimes tune in to yourself by discussing these issues with others?
- What might you now do on the job to tune into yourself?
- Is “Tuning in to Self” supported by your agency?

Inform trainees this skill will be referred to throughout the training process. Trainees are expected to use the skill prior to beginning any activity in the training room and far more importantly prior to providing casework intervention.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section III: Tuning in to Others

Estimated Length of Time:

1 hour 30 minutes

Learning Objectives:

Participants will be able to:

- ✓ Explain the steps of the skill – Tuning in to Others
- ✓ Explain how the skill of “Tuning in to Others” relates to cultural competence in a Child Welfare Professional’s practice

Methods of Presentation:

Lecture, Large Group Discussion, Video, Individual Activity

Materials Needed:

- ✓ TV/VCR/DVD
- ✓ Overhead projector and Screen
- ✓ **Overhead #6 (Tuning in to Others)**
- ✓ **Handout #8 (Tuning in to Others)**
- ✓ **Handout #9 (Tuning in to Other Roles)**
- ✓ **Video: Tuning-in to Others (good)**
- ✓ **Video: Tuning-in to Others (bad)**

Outline of Presentation:

- Presenter should explain the skill of Tuning in to Others using **Overhead #6 (Tuning in to Others)**
- Presenter should facilitate a brain storming activity, then explain the skill components using **Handout #8 (Tune in to Others)** and **Overhead #6 (Tuning in to Others)**
- Presenter should show video clips **Tuning in to Others (both good and bad examples)** and use **Handout #8 (Tune in to Others)**
- Presenter should facilitate small group activity by assigning scenarios using **Handout #9 (Tuning in to Others Roles)**

Section III: Tuning in to Others

Trainer Note: Ask participants “who did the TOL assignment from Module 2 of practicing the skill of Tuning in to Self?” Under what circumstances did you use it? How did it work for you?

Step 1: (5 minutes)

Lecture

Explain to trainees that Tuning in to Others is the second foundation level skill that child welfare Child Welfare Professionals must know, be able to demonstrate, and apply to their child welfare practice. Tuning in to Others will allow the Child Welfare Professional to understand the family’s culture and use this knowledge in developing a culturally sensitive casework approach. The skill is necessary in order for Child Welfare Professionals to understand the family’s cultural beliefs, values, and attitudes concerning the child abuse and neglect report received by the CYS agency. In addition, Child Welfare Professionals must explore the family’s emotional response of fear and anger regarding the report. By effectively Tuning in to Others, the Child Welfare Professional can build a better protective partnership with the client family.

Using **Overhead #6 (Tuning in to Others)** introduce the skill, “Tuning in to Others.”

Definition of “Tuning in to Others” – the worker’s effort to get in touch with actual and potential feelings and concerns that the client may bring to the helping encounter.

Explain to trainees that they will learn how to use the skill in their practice with families and communities. Taking this opportunity, remind trainees that the process of explain, demonstrate, practice, feedback and transfer will be used.

Tell trainees it is important that they use this skill when interacting with families. Advise that it’s also to be used when they interact with professionals, either from within or outside the agency. The skill is important because effective intervention demands that they start by understanding another’s perspective. From this position of understanding, the worker can begin building a positive collaborative relationship.

It is the combination of building positive relationships with colleagues, community representatives, other service providers, and families that will help the worker assess child safety and develop effective service plans.

Step 2: (10 minutes)

Large Group Discussion, Lecture

Ask the group to brainstorm what they might learn about clients when attempting to Tune in to Others, and how that might help the casework process. Examples could include:

- How they feel about your presence.
- How they feel about what has happened to the child: methods of disciplining a child, parent-child relationships, husband-wife relationship roles.
- What they might want to accomplish.
- What they most fear.
- What is their ethnic background, religious beliefs, sexual orientation.

Explain that ALL of these help the worker to be successful in relating to the client, gaining the client's "ear," his trust, and his cooperation.

Refer trainees to **Handout #8 (Tuning in to Others)**. Using **Overhead #6 (Tuning in to Others)**, and **Handout #8 (Tuning in to Others)**, review the definition of Tuning in to Others, and explain how the steps on the handout are part of the total interview process and casework relationship. Inform trainees they are going to see a visual demonstration of how the skill is applied in child welfare practice.

Step 3: (15 minutes)
Video, Individual Activity

Explain that the skill *Tuning in to Others* is going to be demonstrated by observing a worker and an adult client during an intake investigation. Later in Module 9: Community Partnerships, trainees will see the skill *Tuning in to Others* applied to their work with others in the community.

Play the **Video: Tuning in to Others (good)**.

After the video clip, ask participants to complete page three of **Handout # 8 (Tuning in to Others)**. Allow participants 5-7 minutes to individually answer the following questions. Tell them the script is available for their review on page 2 of the handout.

1. Did the Child Welfare Professional use "focused listening" to answer these questions:
 1. *"What are this person's possible emotional, physical, and cognitive reactions to this situation?"*
 - a. *"What are the non-verbal behaviors I see that help me to know this?"*
 - b. *"What is the person saying that helps me to know this?"*
2. Did the Child Welfare Professional demonstrate, *"How can I let the client know that I understand her feelings?"*
3. Did the Child Welfare Professional demonstrate, *"How can I check to make sure that I understand her feelings correctly?"*
4. *Did the Child Welfare Professional implement steps 2 and 3 and observe/analyze the other persons response?*
5. How did using the skill *Tuning in to Others* begin the processes of engagement and building a positive relationship?
6. How might casework intervention be affected if the worker didn't use the *Tuning in to Others* skill?

After the participants have individually completed their answers – make sure all participants get enough time to complete this task; Lead a large group discussion asking different participants to report their answers. To maximize time only get one or two responses to each question. It is important to guide the discussions and provide the correct answer since this is the first time the participants are identifying the skill.

Step 4: (15 minutes)
Video, Individual Activity

Introduce the next video clip by saying, “Let’s now look at what can happen if this worker doesn’t use the Tuning into Others skill.”

Play the **Video: Tuning in to Others (bad)**.

After the video clip ask trainees to individually answer the following questions on **Handout #8 (Tuning in to Others)**, page 5, allowing them 5-7 minutes. They can use page 4 of the handout to review the script content.

1. Did the Child Welfare Professional use “Focused Listening” to answer these questions:
 1. *“What are this person’s possible emotional, physical, and cognitive reactions to this situation?”*
 - a. *“What are the non-verbal behaviors I see that help me to know this?”*
 - b. *“What is the person saying that helps me to know this?”*
 2. Did the Child Welfare Professional demonstrate, *“How can I let the client know that I understand her feelings?”*
 3. Did the Child Welfare Professional demonstrate, *“How can I check to make sure that I understand her feelings correctly?”*
 4. *Did the Child Welfare Professional implement steps 2 and 3 and observe/analyze the other persons response?*
 5. How did not using the skill *Tuning in to Others* impede the processes of engagement and building a positive relationship?
 6. How was the casework intervention affected by the worker not using the Tuning in to Others skills?

To complete this step show the good video clip one more time so the participants can again see the correct way to perform the skill.

Step 5: (25 minutes)
Small Group Activity

Using **Handout #9 (Tuning in to Others Roles)**, instruct participants that they are going to practice the skill Tuning in to Others.

Trainer Note: there are eight scenarios on **Handout #9 (Tuning in to Others Roles)**. Depending on the number of trainees in the room, the trainer may assign one scenario to each person or select a few scenarios and assign them to small groups. The following steps are on page two of **Handout #9 (Tuning in to Others Roles)**.

The steps in the activity are as follows:

1. All participants read the assigned scenario.
2. Ask participants to use the skill of Tuning in to Others and individually identify how the client (other) would feel in this situation by answering the following questions:
 - a. How would “others” feel if they were in this position? (Tuning in to Others)
List at least 2 emotions.
 - b. What might make them feel this way (Tuning in to Others)?
 - c. What behavior might they display that may tell you how they feel?
3. One person from each table reads the scenario aloud adding emotion and body language to their response. Example: hit their fist on the table and declare, “I can’t believe someone turned me in to CYS”!

After the reader finishes his/her statement, instruct the other participants at the table (observers) to spend a minute writing the answers to these questions.

- a. What was the client/referral source feeling (Tuning in to Others)?
- b. What behaviors did you observe that provided insight to what the client may be feeling (Tuning in to Others)? Tone of voice, Body Language etc.
- c. How was what the client expressed (Tuning in to Others), different than what you may have felt, (Tuning in to Self)?
- d. Based on your responses, what would you say to the client?
4. The reader tells the group what (s)he feels and why? Note: Remind the group this response may be different from what they expected.
5. Observers share their responses with the reader and discuss similarities and differences.

Step 6: (15 minutes)

Large Group Discussion

The trainer leads a large group discussion asking for each table to share their experience.

- a. How accurate were they when they Tuned in to Others?
- b. What would have helped them to be more accurate?
- c. How were their feelings different then others?
- d. Why do they think they had different responses than the other people at their table?
- e. How do they think using the skill of Tuning in to Self/Others is important to relationship building and the casework process?

To close the activity the trainer re-states the definition of Tuning in to Others – the worker’s effort to get in touch with the potential feelings and concerns that the client

may bring to the helping encounter. Add that not everyone will be 100% accurate in their responses, as we cannot be mind readers. If you are not completely accurate when you are Tuning in to Others this will become clear by the client's response and the process will begin again.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section IV: Applying the Skills of Tuning in to Self/Others to Culturally Sensitive Intervention

Estimated Length of Time:

1 hour

Learning Objectives:

Participants will be able to:

- ✓ Recognize how making assumptions about clients and stereotyping clients will impact on the Child Welfare Professional's ability to complete an accurate assessment of the family and determine what interventions, if any, are necessary to insure the safety, permanency and well-being of the children

Methods of Presentation:

Lecture, Individual Activity, Small Group Activity, Large Group Discussion, Large Group Activity

Materials Needed:

- ✓ Flipchart stand
- ✓ Blank flipchart pad
- ✓ Overhead Projector and Screen
- ✓ **Overhead #7 (Stereotypes)**
- ✓ **Overhead #8 (Culture)**
- ✓ **Handout #10 (Who Do You Think I Am?)**

Outline of Presentation:

- Presenter should relate the skills of Tuning in to Self/Others to culturally sensitive interventions
- Presenter should facilitate the awareness activity
- Presenter should define stereotype and culture using **Overhead #7 (Stereotypes)** and **Overhead #8 (Culture)**
- Presenter should facilitate the Effects of Stereotyping exercise

Section IV: Applying the Skills of Tuning in to Self/Others to Culturally Sensitive Intervention

Step 1: (5 minutes)

Lecture

Explain to trainees that they are going to use the skills of Tuning in to Self and Others as they think about how their cultural backgrounds may be similar and/or different than others. By identifying and recognizing the similarities and differences they can provide culturally sensitive interventions.

Explain that this exercise addresses culture's impact on the provision of child welfare services. Throughout the training, trainees will be reminded to strive for cultural sensitivity and awareness.

Say, "All of us have concepts about ourselves as well as expectations of how we would like to be perceived by others. This exercise will enable us to experience the perceptions of others. In doing so we can begin to understand how clients may view us and our attempt to provide assessment and intervention services."

Step 2: (30 minutes)

Individual Activity, Small Group Activity, Large Group Discussion

Break out the trainees into small groups of two, three, or four each. Distribute **Handout #10 (Who Do You Think I Am?)**.

Tell the trainees to place the name of each of the other persons in their group on the lines for "Their Name." State that "All of us have concepts about ourselves as well as expectations of how we would like to be perceived by others. This activity will enable us to experience the perceptions of others."

Tell trainees to work individually as they answer the questions for each person in their group. Inform trainees that they cannot seek any assistance; they must answer the questions based on their own knowledge. Identify that you recognize that some of the questions are sensitive and may be difficult for them to answer. Ask them to take a risk and do their best to make assumptions about their colleagues. Reinforce that this is a safe learning environment and the purpose of the activity is to acknowledge that we make assumptions based on what we see and the limited knowledge we have about someone.

Ask trainees what it means that their colleagues are making assumptions about them.

Ask what it means if someone makes the wrong assumption?

Lead into the group's feelings about someone assuming things about them, that this is a learning environment, etc.

When trainees have completed their sheets, ask them to take turns sharing their responses in their small groups.

Tell them to explain why they made the assumptions they did. For example, the first person would identify another member of his/her group, let's say, Nancy, and read off the responses about Nancy. Then, everyone else would follow suit. Nancy would then share the correct responses for herself. Continue the process until everyone has been able to share his/her responses.

After each small group has completed the exercise, bring all trainees back together and ask them to share their feelings, thoughts, or responses to the exercise.

Ask the group:

- “What was the most difficult assumption(s) to make?” Why?
- “Is there any danger to making a wrong assumption, if so what?”
- “Was anyone surprised by someone’s answer, if so what answer and why?”
- “What was the easiest assumption(s) to make?” Why?
- What are some of the assumptions we make about people accused of child abuse/neglect (List participant’s answers on a flipchart). Some examples are:
 1. They live in a bad neighborhood: they probably did it
 2. They seem like nice people: they probably didn’t do it
 3. They are of a different racial/religious group than me: they probably did it
 4. The alleged perpetrator is gay or lesbian: they probably sexually abused the child
 5. The parent is gay or lesbian: they cannot properly parent a “normal” child, especially one of the opposite sex
 6. Parents with developmental disabilities/ mental retardation are incapable of being good parents
 7. Parents who are physically challenged, i.e. confined to a wheel chair, visually or hearing impaired cannot “keep up” with a small child; ergo the child is not safe
- What are some of the assumptions we make about parents who have a history of child abuse/neglect? (Continue the list on the flipchart)
 1. They did it before, they probably will do it again
 2. They are of a racial group that believes in corporal punishment
 3. They are bad people
 4. They have D&A problems
 5. They have mental health issues
 6. They are violent people

After the list is complete, ask trainees what negative impact these assumptions may have in their interventions with families. Add these statements if they are not identified by trainees:

- Inaccurate assessment of child safety
- Failure to ask enough questions, leading to lack of information to make an accurate assessment

- Falsely assuming a child is unsafe by separating him/her from his/her family. This violates the legal mandate that children are best maintained in their homes. Violating the CFSR Outcome Child and Family Well-Being: Families have enhanced capacity to provide for their children's needs.
- Assuming a client is from one culture or belief system when they are from another culture or belief system and consequently not connecting them to appropriate services.

The trainer ends the exercise by stating how assumptions are made about other people without first seeking the accurate information. We are sometimes tempted to make assumptions about clients and must train ourselves not to assume. And we must recognize that clients will make assumptions about us. The important thing is never to make decisions about child safety based on erroneous assumptions. It is critical that we learn the facts by asking questions and gathering collateral information.

Step 3: (5 minutes)

Lecture

Remind trainees that in the previous activity, they were stereotyping each other.

Inform trainees that stereotyping individuals and families has a negative impact on casework intervention. Using **Overhead #7 (Stereotype)**, define stereotype as: A conventional, formulaic, and oversimplified conception, opinion, or image; One that is regarded as embodying or conforming to a set image or type.

Using **Overhead #8 (Culture)**, reintroduce trainees to the definition of culture:

- Culture represents the vast structure of behaviors, ideas, attitudes, values, habits, beliefs, customs, language, rituals, ceremonies and practices “peculiar” to a particular group of people, and it provides them with: 1) a general design for living and 2) patterns for interpreting reality. Culture determines how we see the world and the way we see the world is reflected in our behavior.

Any group that has its own culture also has had stereotypes attached to their group.

Like assumptions, stereotypes have a negative effect on a Child Welfare Professional’s ability to accurately assess and provide interventions to families and children. Throughout this training, trainees will be asked to recognize stereotypes that impact their assessment and recommended casework interventions.

Tell the group that they will be participating in an activity that will help them identify the impact of stereotyping on child welfare intervention

Step 4: (20 minutes)
Large Group Activity

Trainer Note: Prior to this activity, the trainer must prepare 6 large post-its with the following labels:

- I am the perpetrator of physical abuse – be angry with me
- I am a therapist – I know the answer
- I am an HIV positive drug and alcohol abuser – ignore me
- I am a Judge – defer to me
- I am a person with mental limitations – talk loud and slow to me
- I am a victim of domestic violence – be sympathetic
- Leave 1 tag blank

(Suggestion: use a Burger King Crown and affix a large index card to the crown and have the participants wear the crowns with the label.)

To begin the activity, place 7 chairs in a circle in the middle of the room. Ask for 7 volunteers. Explain to the trainees that everyone will have a role in this exercise. Ask the 7 volunteers to sit in the semi-circle.

Once the trainees are seated, the instructor places a nametag on the forehead of each person instructing trainees to NOT look at their own tag. Explain that no one has to place a tag on his/her head if he/she chooses not to do it.)

Give the trainees a topic to discuss — for example; is it OK to use physical discipline with children — and instruct them to respond to each other as indicated on their tags.

Ask all other trainees to be observers and be prepared to report on what they saw.

Allow the conversation to take place for about 5 – 10 minutes. Stop the conversation.

Before the trainees look at their own tags, ask them, one by one, how they felt during the conversation. Capture the comments on a flipchart.

Ask the observers about the dynamics they saw (did anyone seem to withdraw or give up trying? Did anyone get angry? Did anyone rebel against his/her label?)

Ask trainees to look at their own tags. Ask them what they think now that they know how they were labeled (stereotyped).

Close the exercise by connecting this experience to how family members might feel and respond when confronted with stereotypes. Make the following points:

- Although it may not be openly acknowledged, people get labeled
- Labeling often happens very quickly
- Often labels are given in response to a person's age, gender, race, sexual orientation, class, language skills, or physical/mental impairments.

- Family members will respond to labels in similar way as trainees did during the exercise (anger, withdrawing, rebelling, etc.)
- The primary way to prevent stereotyping is to learn more about an individual so we can begin to understand their life experience.

The trainer must remind trainees that by using stereotypes and ignoring or minimizing a client's culture, they may not get the accurate, detailed, important information they need to do a good assessment of a child's safety and prepare a plan that is appropriate for the family.

Also, remind participants that the law provides the foundation for the guidelines for caretaker behaviors.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section V: Taking Care of Self

Estimated Length of Time:

1 hour

Learning Objectives:

Participants will be able to:

- ✓ Recognize personal behaviors which may not be productive in managing stress in the workplace

Methods of Presentation:

Lecture, Individual Activity, Large Group Discussion, Guided Imagery

Materials Needed:

- ✓ Colored markers
- ✓ Flipchart stands
- ✓ Blank flipchart pads
- ✓ **Handout #11 (Stress: Take Action for a Happier, Healthier Life)**
- ✓ **Handout #12 (Personal Assessment Exercise)**

Outline of Presentation:

- Presenter should facilitate discussion of stress reduction using **Handout #11 (Stress: Take Action for a Happier, Healthier Life)**
- Presenter should facilitate personal assessments using **Handout #12 (Personal Assessment Exercise)**
- Presenter should discuss healthy lifestyle habits
- Presenter should facilitate identification of stressful situations
- Presenter should lead stress reduction skills practice
- Presenters should encourage lifestyle changes in participants

Section V: Taking Care of Self

Step 1: (10 minutes)

Lecture

Introduce this section as follows:

In your selection of a career in Child Welfare, you will encounter a good deal of stress. This section focuses on the importance of understanding and dealing with the workplace stress with the use of a “Tuning in to Self” technique. It also discusses positive ways to address stress conditions to become effective Child Welfare Professionals.

Explain that stress is not to be confused with Burnout: exhaustion of physical or emotional strength or motivation usually as a result of prolonged stress or frustration.

Stress: a physical, chemical, or emotional factor that causes bodily or mental tension and may be a factor in disease causation: a state resulting from a stress; *especially*: one of bodily or mental tension resulting from factors that tend to alter an existent equilibrium.

Refer trainees to **Handout #11 (Stress: Take Action for a Happier, Healthier Life)** and have them read the brief article on page 2 and answer the questions on page 1. Allow about 5 minutes for participants to read the materials then discuss the following: **Handout #11 (Stress: Take Action for a Happier, Healthier Life)** emphasizes steps we all can take to achieve a healthier life style. Managing the detrimental effects of stress is a key ingredient in maintaining good health. By having chosen to work in the field of child welfare, you made the decision to safeguard the safety and well-being of a highly vulnerable population. Although the fruits of your efforts can be incredibly rewarding, your day-to-day responsibilities can also be fraught with many stressors. How well you minister to yourselves correlates with how well you manage the job-related stress.

Trainer should ask trainees to identify some different types of stressful conditions Child Welfare Professionals are confronted with on the job. List on flipchart, some examples are:

- Dealing with angry, rude, and violent families
- Going into dangerous communities
- Anger and depression resulting from seeing physical evidence of child abuse and neglect
- Unexpected changes in the case situation
- Heavy caseloads
- Insufficient agency/supervisory support

Step 2: (20 minutes)
Individual Activity, Large Group Discussion

Refer trainees to **Handout #12 (Personal Assessment Exercise)**, and ask them to:

- Answer the questions by using the scale at the top of the page, ranging from 1- “Almost Never” to 4- “Almost Always.”
- Put an * beside any answer that is connected to their work at CYS.
- Identify one negative habit that impacts on their work at CYS.
- Upon completion of the exercise, ask everyone to review their responses, then to answer the questions at the bottom of the handout.
- Ask trainees what measures they are taking to improve/maintain their health?
- Ask trainees to list any activities/behaviors they might practice to improve their health.

Then ask participants to reflect on their answers with the following:

- a. What do you think about your behaviors?
- b. What behaviors would you like to increase/decrease?
- c. What do you need to do to change the behavior?

Trainer Note: As time allows, go around the room and ask individual trainees to identify one healthy habit that they have identified and one habit that they could change.

Step 3: (10 minutes)
Lecture, Large Group Discussion

Take a few minutes to emphasize the importance of proper rest, nutrition, and exercise by soliciting suggestions from trainees. Ask, “Who feels they get sufficient rest?” Assuming that some will raise their hands, ask how they manage to rest/relax. If no one responds, state “Powernaps, getting enough sleep, resting, are all critical elements to “keep your battery charged.” Ask, “Would anyone care to show some measure you take which helps you to relax/rest?” Relaxing in a warm shower or bath or listening to some soothing bedtime music may help to make you drowsy. Bedtime reading can help you fall asleep, as well.

Next, ask for suggestions from those who believe they maintain healthy diets. Ask them for examples of personal exercise programs. Trainer must reinforce healthy lifestyles by mentioning, “Eating well balanced meals (portion sizes should depend on the energy needs for the next few hours) with a minimum of sugar and processed foods is a good start. It is also a good idea to limit your use of table salt. Do you eat to live, or live to eat?”

Activity, too, has important health benefits. Being active for 30 or more minutes most days of the week can help with weight loss and maintaining the weight loss. It can also improve your mood, control blood pressure, and lower the risk of both cancer and type II-diabetes.

It also helps to build healthy bones, muscles, and joints. It is advisable to walk whenever the opportunity presents itself- limit your use of elevators and escalators, climbing stairs instead. Take a detour around your office building on your way to the bathroom. Deliver messages in person rather than by phone. You might even use filled juice cans or water bottles as weights to do arm curls whenever the opportunity presents itself.

Ask whether any of the trainees can offer additional healthy life-style suggestions.

Step 4: (5 minutes)

Lecture

Trainer States: “You can get really stressed in the middle of the day when:

- You’ve been on the job for just two months and you’ve been directed to represent the agency at a multi-disciplinary team meeting where there will be a multitude of credentialed professionals.
- You have a stack of paperwork on your desk, you’re really “behind the curve,” and you’ve been told to drop everything to handle an intake.
- You labored painstakingly to find just the right placement for a child with a complicated history of mental illness. However, despite the foster family’s past track record, the placement didn’t work.
- You just received a phone call that your 13-year-old female client has run from her foster family.

Trainer Note: As time allows, ask trainees to “Tuning in to Self” and identify some stressful scenarios they might have encountered which were not mentioned.

Inform trainees that there is a technique they can use right in the work place. They can achieve deep muscle relaxation quickly by simultaneously tensing, then relaxing whole muscle groups.

Step 5: (10 minutes)

Individual Activity, Guided Imagery

Trainer Note: For the purposes of this exercise, the trainer may choose to use their own relaxation tape or guided imagery scenario. Be careful not to go beyond the time limit assigned.

Begin by asking trainees to stand, and then take several deep breaths, very slowly, holding them in for a few seconds, and then slowly exhaling. Coach them through the breathing by calmly saying, “Breathe in deeply, slowly, and hold the air – one-two-three-four-five. Now, slowly exhale-feel the tension escape your body.” Do this three times. Ask trainees to sit and get as comfortable as possible. Mention that we cannot feel warmth and well-being and at the same time experience psychological stress. This exercise is designed to allow the contrasting sensations of tension and relaxation. Trainees will be able to practice this exercise at home or even in their offices.

Ask trainees to curl both fists, tightening biceps and forearms - in the manner of a body-builder's pose. Hold the tension for five seconds, and then relax. Repeat this 2 or 3 times, tensing for about 5 seconds then relaxing for about 25 seconds each time.

Next, ask trainees to wrinkle up their foreheads. At the same time, ask them to press their heads back as far back as possible, rolling their heads, clockwise, in a complete circle. Ask them to reverse, counter-clockwise. Next, ask them to wrinkle up the muscles of their face by frowning, eyes squinted, lips pursed, tongue pressing the roof of the mouth, and shoulders hunched. Tense for 5 seconds, and then relax for 25 seconds. Repeat the tension/relaxation cycles 2 or 3 times.

Ask trainees to arch back while taking a deep breath into the chest. Hold for 5 seconds. Relax for 25 seconds. Curl toes, simultaneously, tightening calves, thighs, and buttocks. Hold for 5 seconds, and then relax for 25 seconds. Repeat this exercise 2 or 3 times.

Trainees should be experiencing a degree of relaxation. Quietly explain that in addition to muscle relaxation, when they have time, they may want to use guided imagery.

Say, "Now it's time for a little escape vacation. You can do this during a break at work or at home. Take a few exaggerated breaths and get as comfortable as you are able. Close your eyes."

Trainer should slowly read one of the following guided imageries:

- *Vacation 1:*
 - *Picture yourself in a forest. The light is bright in places and mottled in others. You feel safe and comfortable, taking a long pleasant walk. The air around you is cool and refreshing. You enjoy the bright spots of sunshine on the ground where the sun has filtered down through the leaves. You are walking barefoot. The leaves and moss feel soft and cool on you feet. You hear the sounds of birds and the soft rustle of the wind through the trees. The sounds make you happy and comfortable. As you walk, your muscles feel more and more loose, heavy, and relaxed. The forests carpet of leaves and moss feels so comfortable that you want to lie down and close your eyes to rest. Now you see a small stream making a soft, bubbly noise and next to the stream is a patch of tall, soft grass, lit and warmed by sunlight. It's a lovely place to rest and you sink down to your knees and roll gently over onto the soft, warm grass. You hear the bubbling stream, the bird's song, and the gentle wind. You are so deeply relaxed that every part of your body, from you toes to the top of your head, is loose and heavy.*
- *Or Vacation 2:*
 - *Picture yourself alone in a beach house with a view of the sea. The first rays of sun, light up the wall of your bedroom as you sink deeper into the warm, soft bed. You take a deep breath and notice how relaxed your muscles are.*

Outside you hear the sounds of seagulls and the rhythmic crashing of the waves. The waves roll in and out, in and out. Each wave makes you more and more deeply relaxed. In and out, in and out; drowsy, heavy, and calm. You can feel the cool salt air coming through the open window and you roll over to see the sand, the waves, and the blue sky. You take deep breaths of air and the relaxation deepens with each breath. You feel safe and yet very free, unhurried, aware that the day ahead is full of possibilities.

Step 6: (5 minutes)

Small Group Discussion

Ask trainees to discuss at their tables the ways in which they can take better care of themselves. Inform them that you would like each trainee to share one action he/she will take to take better care of themselves. Develop a list on the flipchart stand.

Module 3: Using Interactional Helping Skills to Develop Caseworker/Client Relationships

Section VI: Self-Assessment and Transfer of Learning

Estimated Length of Time:

30 minutes

Learning Objectives:

Participants will be able to:

- ✓ Complete a self assessment and a plan for the successful transfer of learning to the workplace.

Methods of Presentation:

Lecture, Individual Activity, Large Group Discussion

Materials Needed:

- ✓ Trainer evaluation forms
- ✓ **Handout #13 (Self-Assessment for Module 3)**
- ✓ **Handout #14 (Transfer of Learning for Module 3)**

Outline of Presentation:

- Presenter facilitates trainer self-assessments and transfer of learning plans
- Participants complete evaluations

Section VI: Self-Assessment and Transfer of Learning

Trainer Note: Review the WIIFM poster and be sure that all of the questions and concerns have been addressed.

Trainer Note: This is a critical section and will need the entire 30 minutes assigned.

Step 1: (5 minutes)

Lecture

The trainer advises the group that they have reached the stage of the training that requires a transfer of learning plan to implement upon return to their agencies. The plan is their key to transferring what they learned to their work behavior.

Using **Handout #13 (Self-Assessment for Module 3)** the trainer reviews the objectives of the training day. Note these are the same as the self-assessment knowledge and skill categories.

Step 2: (10 minutes)

Individual Activity

The trainer refers trainees again to **Handout #13 (Self-Assessment for Module 3)** instructing trainees to complete the Self Assessment Transfer of Learning Plan. Inform the trainees that it is important that they accurately assess their ability. It is not expected at this stage of training to have mastered all the areas of training. It is through their recognition of a need to continue to grow that they take the steps necessary to do so. For each item, trainees list who, will do what, by when. Trainees should not feel limited by the prescribed numbers and should list additional items if they choose.

The trainer then asks trainees to individually complete their plans.

As they are completing the plan, the trainer will review the completed sheets with each trainee assisting them in identifying their next steps.

Step 3: (5 minutes)

Large Group Discussion

When trainees have completed their plans, the trainer concludes the activity by asking several volunteers to each share an action they will take to transfer their learning.

Step 4: (5 minutes)

Individual Activity

Using **Handout #14 (Transfer of Learning Activities for Module 3)**, remind trainees of their next day of training and their required pre-training responsibilities.

Step 5: (5 minutes)
Closing

Ask trainees to complete the Training Program evaluation, encouraging them to include written comments in addition to the feedback scores. Tell them that the comments are usually the most useful information for us in improving the curriculum and presentation.

Bibliography

Girdano, D.A., Everly, G.S., Dusek, D.E. (1996). *Controlling stress and tension*.
Needham Heights, Mass: Allyn & Bacon.

O'Brian, T. (2/14/02). *Stress: Take action for a happier, healthier life*. *Scranton Times*.

Shulman, L. (1999). *The skills of helping individuals, families, groups and communities*.
Itasca, IL: Peacock Publisher, Inc.