Basic Skills for Counselling Children



Facilitator's Manual



Africa Network for Children Orphaned and at Risk

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HOPE *worldwide* and their key implementing partners are available to facilitate this training and other community-based child care skills (contact details below). We also recognize that the immense impact of the HIV pandemic creates an urgent need for communities to scale-up their child support responses and so the training material and resources have been designed to be 'stand-alone' allowing organizations to freely re-apply the training.

In order to provide the best quality training materials, we would appreciate your feedback and any suggested improvements we can make. Please direct all correspondence to the Curriculum Development Team at anchor@hwwafrica.org.

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ANCHOR, the 'African Network for Children Orphaned and at Risk', is a HOPE *worldwide* program designed to strengthen and scale up community-based interventions to provide comprehensive care and to improve the quality of life of orphans and vulnerable children in Africa.

ANCHOR is a partnership of four organizations: HOPE *worldwide*, the Rotarian Fellowship for Fighting AIDS, the Schools of Public Health and Nursing at Emory University, and the Coca Cola Africa Foundation.







Purpose of this Manual

'Basic Skills for Counselling Children' is part of an educational series developed by HOPE *worldwide* Africa to empower volunteers and organizations to provide better and more holistic care to OVC. It is important to note that the skills in this training build upon fundamental principles taught in *'Introduction to Working with Children and Psychosocial Support'* and it is strongly recommended that participants complete that course prior to attending 'Basic Skills for Counselling Children'.

This training was designed to equip volunteers and staff who are working with children, especially those who are orphaned or vulnerable, with the ability to help children cope with the challenges in their lives and develop problem solving skills. The participants will gain an understanding of the process of counselling, basic counselling skills, child development, children's Rights and the support services available to children and their families. Some children face severe problems and cases of emotional distress, which require professional counselling. This training does not teach those skills, but it will empower the participant to recognize their own limitations and to know when and how to refer the child to additional sources of support.

The training is divided into seven parts:

- 1. <u>Section One</u> is an introduction to the workshop.
- Section Two describes the processing of counselling. It details the stages of a counselling relationship from the first meeting, discussing the problem, to helping a child choose a solution; and focuses on the primary goal of building trust with the child.
- 3. <u>Section Three</u> shares tips on how to help the child feel safe and talk about their problems. The participants will learn skills and most importantly become better listeners.
- 4. <u>Section Four</u> provides the participants with an opportunity to practice all that they have learned up to this point. It is a great way to build confidence in their counselling skills and provide and receive feedback in a safe environment.
- 5. <u>Section Five</u> teaches the participants the stages of Child Development. In this section, they will learn how each stage of development affects the child and will learn how to best communicate with children of different ages.
- 6. <u>Section Six</u> covers Children's Rights as outlined by the United Nations. In this section, participants will learn how to help children when their Rights have been violated.
- 7. <u>Section Seven</u> teaches participants the characteristics of a good lay-counsellor. This section will allow the participants to reflect on their own strengths and weaknesses in order to help them develop into excellent lay-counsellors.

The following resources are available to aid the facilitation of this workshop:

<u>Facilitator's Manual</u> – is designed to guide the facilitators in transferring skills to the participants, suggested timing and activities are given by module. Where questions are asked or case studies assigned the facilitator's version gives possible answers. If the facilitators are confident in the topic they may divert from the material. The facilitator should also make adaptations to accommodate country, culture and language specific diversity.

The annex, located at the end of the Facilitator's Manual, contains the various handouts to be used during the training, attendance register, examples of certificates, etc.

<u>Participant's Workbook</u> – provides an opportunity for participants to take notes during the sessions without receiving all the answers. This assists the facilitator in keeping the participants' attention and having them work through the different activities.

<u>Participant's Manual</u> – contains all the material including the 'answers' to the activities that are facilitated and should only be handed out to the participants after a module has been completed (i.e. at the end of the day or the workshop).

<u>Pre- and post-questionnaires</u> – are one method used to determine the effectiveness of the training and identify any areas where participants may not have grasped the concepts. Facilitators should keep these tests on record.

Materials Needed

- > Three flip charts and back-up flip chart paper
- > A 4 paper (can be scrap with one clean side)
- Normal pens and marker pens
- Scissors
- Prestick and Sellotape
- Crayons
- ≻ Ball
- Sweets (or other reward)
- > Appropriate number of copies and material in the annex
- Participants' version of the training manual
- Four cups

TABLE OF CONTENTS

1	I INTRODUCTION		.8
	1.1.	Warm- up Activity: Truth and Lies8	
	1.2.	Introduction and Expectations9	
	1.3.	Housekeeping and Rules10	
	1.4.	Pre-Questionnaire10	
2	WHA	AT IS COUNSELLING?1	11
	2.1.	Children's Problems and the Ways We Can Help11	
	2.2.	What Is Counselling?	
	2.3.	What Counselling Is Not	
3	THE	PROCESS OF COUNSELLING1	16
	3.1.	Overview of the Counselling Process	
	3.2.	Step 1: Joining 17	
	3.3.	Step 2: Exploring to Understand 19	
	3.4.	Step 3: Sharing Possible Solutions	
	3.5.	Step 4: Helping the Child Choose the Best Solution for Them	
	3.6.	Step 5: Continue or Terminate	
	3.7.	Building Self-Esteem in Children	
	3.8.	Tips for Maintaining a Healthy Counselling Relationship	
4	THE	PRACTICES OF COUNSELLING	36
	4.1.	Listening to Understand	
	4.2.	When a Child Needs More Encouragement to Talk 43	
5	PRA	CTICE, PRACTICE, PRACTICE4	49
6	CHI	LD DEVELOPMENT5	52
	6.1.	Developmental Stages of Children 52	
	6.2.	Child Development and Counselling 57	
7	CHI	LDREN'S RIGHTS AND COUNSELLING6	52
	7.1.	Children's Rights 62	
	7.2.	Children's Responsibilities	
	7.3.	Children's Rights and Counselling65	
8	WHA	AT MAKES A GOOD LAY-COUNSELLOR6	<u>5</u> 9
	8.1.	Emotions	

8	.2.	Personality and Character	1
8	.3.	My Values and Beliefs	2
8	.4.	Personal Reflection7	3
9	SUM	IMARY AND REVISION SESSION	74
10	ANN	IEX	76

LIST OF ANNEX

Annex 1:	Daily Emotions Exercises	. 76
Annex 2:	"What is Counselling?" cut outs	. 77
Annex 3:	Sibongile's Story Part 2 hand-outs	. 79
Annex 4:	Practice Scenarios	. 80
Annex 5:	Children's Rights Cut-outs	. 82
Annex 6:	Additional Reading on Child Development (for facilitators use only)	. 84
Annex 7:	Pre and Post Questionnaires	. 89
Annex 8:	Participant Feedback Forms	. 93
Annex 9:	Attendance Register	. 99
Annex 10:	Example of Certificate of Attendance	100

Sessions and Timing

	Day 1	Day 2	Day 3	Day 4
08:30 - 09:00	1. Truth & Lies, Intro & Expectations	Welcome and Emotions Work*	Welcome and Emotions Work*	Welcome and Emotions Work*
09:00 - 09:30	1. Housekeeping & Pre-Questionnaire	3. Helping Child Choose Best Solution for Them	5. Practice	7. Children's Rights & Counselling
09:30 - 10:00	2. Children's Problems & Definition	3. Helping Child Choose Best Solution for Them	5. Practice	7. Children's Rights & Counselling
10:00 – 10:30	2. What is Counselling & What it is Not	3. Continue or Terminate	5. Practice	8. Emotions
10:30 – 11:00	Tea	Tea	Теа	Tea
11:00 – 11:30	3. Overview of Process & Joining	3. Building Healthy Self- Esteem & Maintaining Healthy Relationship	5. Practice	8. Personality & Character
11:30 – 12:00	3. Joining	4. Listening to Understand & Body Language	5. Practice	8. Values & Beliefs
12:00 – 12:30	3. Joining	4. Voice Tone, Don't Change the Subject, Silence & Hmmm	6. Developmental Stages of Children	8. Personal Reflection
12:30 – 13:30	Lunch	Lunch	Lunch	Lunch
13:30 – 14:00	3. Exploring	4. Practice	6. Developmental Stages of Children	9. Summary & Revision
14:00 – 14:30	3. Exploring	4. Open/Close-Ended Questions	6. Developmental Stages of Children	9. Summary & Revision
14:30 – 15:00	3. Exploring	4. Checking Your Understanding & Naming the Feeling	6. Children's Development & Counselling	9. Post-Questionnaire
15:00 – 15:30	3. Sharing Possible Solutions	4. Naming the Feeling & Summarizing	7. Children's Rights	9. Feedback Form
15:30 – 16:00	3. Sharing Possible Solutions	4. Practice	7. Children's Rights & Children's Responsibilities	9. Participant Registration
16:00 – 16:30	3. Sharing Possible Solutions	5. Practice	7. Children's Rights & Counselling	9. Hand-out Certificates & Wrap-Up

* Emotion Work exercises are found in Annex 1

1 INTRODUCTION

Module Outline:

1.1 Warm-up Activity: Truth and Lies (25 minutes)

1.2 Introduction and Expectations (10 minutes)

1.3 Housekeeping and Rules (10 minutes)

1.4 Pre-Questionnaire (25 minutes)

Materials Needed:

- Participant's Workbook (1 copy for each participant)
- Flip Chart
- Markers
- Pens (1 for each participant)
- A4 Paper (1 piece for each participant)

Objectives:

- The aim of this introductory session is to break the ice and allow participants an opportunity to get to know each other and the facilitators.
- Participants express their expectations of the workshop and the facilitator should clarify which expectations are realistic and which are not.
- Housekeeping and rules are discussed and agreed upon.

1.1. Warm- up Activity: Truth and Lies

<u>Introductions</u>: Facilitators introduce themselves to the group. Ask participants to fold a piece of paper into a 'tent' and write their names on it so that the other participants can see.

Truth and Lies:

Facilitator asks each participant to come up with three statements about themselves. Two statements should be true, one statement should be false. Encourage them to include fun and unusual things about themselves (allow them 2 minutes to think because people usually battle to come up with good lies!).

The facilitators should go first to demonstrate the concept – first introduce yourself and say which project you are with and then give your three statements. e.g. "Hi my name is Maria and I am a volunteer at the Kidz Club in Soweto. I am 28 years old, I have a twin sister and I love playing netball." The participants then guess which statement is false.

(1 hour 10 minutes)

This activity should be quite funny and the facilitators should keep things moving quickly, whilst making sure that each participant has a chance to speak or 'be the centre of attention'. This activity should assist shy participants to have a non-threatening opportunity to express themselves.

<u>Debrief</u>: Facilitators then debrief and ask participants what they felt during the exercise and what they have learned from the exercise (e.g. that they were nervous to talk at first, things that they have learned about the others, or that you cannot make assumptions about people based on appearance, etc.)

1.2. Introduction and Expectations

<u>Expectations</u>: Facilitator asks participants to share what they expect to gain from the 4 day workshop on basic counselling skills and writes the answers on flipchart paper.

After the list is complete the facilitator should give feedback to the group of which expectations are realistic for the workshop and which are not. Where possible the facilitator should offer advice on where the participants can look for assistance on the elements that will not be covered in the workshop.

<u>Outline</u>: Facilitators explain to participants that they will spend the next four days exploring their basic skills when counselling children and review the key topics that will be covered:

- <u>What is Counselling</u> Participants will learn to define counselling; what it is and is not.
- <u>The Process of Counselling</u> Participants will learn the steps of the counselling relationship, from building trust to when to refer or terminate the counselling process.
- <u>The Practices of Counselling</u> Participants will learn skills which will help them help the child to share his story.
- <u>Child Development</u> Participants will learn the different stages of mental, emotional and physical growth and how they influence the counselling relationship.
- <u>Children's Rights and Counselling</u> Participants will learn about some of the Rights that exist to protect children and how to react when these Rights are being violated.
- <u>What Makes a Good Lay-Counsellor</u> Participants will learn characteristics which make lay-counsellors great.
- And there will be lots of opportunity to practice!

<u>Intention</u>: Facilitator explains that this training was designed to equip volunteers and staff who are working with children with the ability to help them cope with their lives and develop problem solving skills. The participants will learn skills which will empower them to have a positive influence in the life of a child. This course covers basic counselling and will help the participants to develop listening skills, empathy, patience and a non-judgemental approach to being with children.

<u>Limitations</u>: Some children face severe problems and cases of emotional distress, which require further training and professional counselling. This training does not teach those skills,

but it will empower the participant to recognize his own limitations and to know when and how to refer the child. Because this course lacks professional training, we will refer to the participants as lay-counsellors.



1.3. Housekeeping and Rules

<u>House-keeping</u>: Facilitators clarify the housekeeping items such as tea breaks, lunch times, when sessions start and end, where the bathroom is, etc.

<u>Rules</u>: Facilitators ask participants what the rules of the workshop should be and notes them on a flip chart page (hopefully including cell phones being switched off, being on time, indicating with a hand in the air to ask questions, respect for someone who is speaking by keeping quiet, supportive participation, constructive criticism, etc). Display the page where it can be seen throughout the workshop.

<u>Worksheets and Notes</u>: Participants will have a workbook that they need to use during each day of the training and then they will receive the Participant's Manual at the end of each day or the end of the training.

<u>Attendance policy</u>: Each part of the training is important and each topic or skill builds on previous work done. It is essential that participants attend all training days, and will not receive an attendance certificate otherwise. If possible the facilitators and peers should help participants catch up on the material they have missed.

<u>Energizers</u>: Facilitators ask participants to volunteer to lead energizers when the group could use a little more energy. Pick two participants for each day of the training.

1.4. Pre-Questionnaire

Facilitator hands out a 'pre-questionnaire' to every participant. Reassure them that the purpose of this 'test' is to help us see how we are doing at teaching and not to catch them out in any way. No-one outside of the training team will see their answers. So please don't panic and don't cheat!

If possible please translate the questionnaire into your local language.

(No real time limit)

2 WHAT IS COUNSELLING?

Module Outline:

2.1 Children's Problems and the Ways We Can Help (10 minutes)

2.2 What is Counselling (30 minutes)

2.3 What is it Not (30 minutes)

Materials Needed:

- Flip Chart
- Markers
- Scissors
- Cut-outs from Annex 2 (4 copies, cut up and put in separate cups)
- 4 cups
- Sweets

Learning Outcomes:

- Be able to discuss problems that children face.
- Be able to define counselling.
- Demonstrate an understanding of what counselling is and what it is not.
- Demonstrate an understanding of the purpose of counselling and the desired outcome of the process.

2.1. Children's Problems and the Ways We Can Help

Facilitators start by asking participants where they interact with children and noting the answers on a flip chart.

Possible answers include:

- At home with their own children
- With family members
- At Kidz Clubs
- At church
- At school
- At community activities

(Note: this should develop the understanding that we interact with children every day in many ways, and that any of those children may be battling with a problem or emotion. Later we will make the point that you don't have to be in formal counselling with a child to help children around you).

(1 hour 10 minutes)

Facilitators then ask participants what types of problems children face and note the answers on a flip chart.

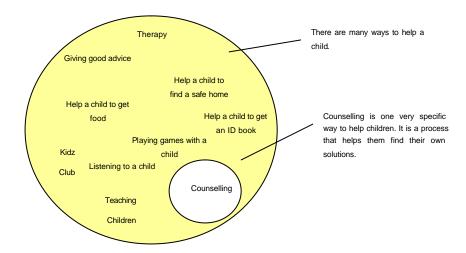
Possible answers include:

- HIV/AIDS
- Death of family members
- Poverty
- Hunger
- Pregnancy
- Education
- Sexual abuse
- Problems with friends/family
- Not attending school
- Needing uniforms/school fees/clothes



- Children's feelings: Facilitator points to some of the 'problems' listed above and asks, 'How might children feel in this situation?' (*Possible Answers*: They may be sad, mad, anxious, embarrassed, afraid, lonely, isolated, betrayed, etc).
- The ways adults help: Then ask participants what things adults can do to help children facing these problems. Facilitator should draw a big circle and write participants' answers inside of the circle. ('Counselling' should be one of many ideas that come out).

Facilitator should then explain that there are many things adults can do to help children, but they are not necessarily counselling. Counselling is a specific process designed to help children deal with specific problems.



2.2. What Is Counselling?

Facilitator should write on a page in flip chart the definition of counselling found below (do in advance):

Definition: Counselling is process which helps children to help themselves, recognise their strengths, and identify the resources available to help them overcome problems and make healthy decisions.

Facilitator then asks participants what they think this means in their own words. (Keep the discussion short, and respectfully correct any misunderstandings of the definition).

- > Explain that the goals of counselling are:
 - a) To help children solve a problem and develop problem solving skills

b) To help children through an emotionally difficult time by building resilience and teaching coping skills

c) To help the child develop skills to live positively with their current situation as it is realistic that some situations may not change soon or ever (e.g. death of a parent, bullies at school, low income, etc.)

2.3. What Counselling Is Not

The facilitator asks for a few examples of what counselling is and is not (only take a few minutes on this because the next game will go into it in more detail).

<u>Counselling is:</u>	Counselling is not:
Someone listening to a child's problems	Fact finding interview
Supportive, positive, trust-based	Lecture
Client - focused	Sharing personal opinions or giving advice
Solution-focused	Judging
Building the child's resilience and coping	Professional therapy
skills	To make the lay-counsellor happy
	A time for lay-counsellor to talk about their personal problems

Possible answers include:

The facilitator dvides participants into 4 groups. Give each group a cup of 'cut-up' sentences (from Annex 2). The facilitator shouts 'go' and the groups need to race against each other to sort the sentences into 'Counselling is:' and 'Counselling is not:' piles.

The winning group is the one who finished soonest AND has the most correct answers (give a reward if possible). Mark the answers using the table below using the

COUNSELLING IS:	Facilitator's Notes:
Establishing relationships with children that are helpful	We want to help, not harm children
Helping children tell their story	It is good for children to speak about their circumstances and feelings
Listening to children with all your attention	It is difficult to speak to or trust someone who does not listen well or is distracted
Giving children correct and appropriate information	We don't want to give children false hope or harmful information
Helping children make informed decisions	It is good for children to understand their options
Helping children to recognise and build on their strengths	Children are facing very difficult situations, it is important that they develop strengths to get through their problems
Helping children develop a positive attitude towards life	It is helpful for people to see the good in life
Having conversations with a purpose	When counselling children, it is important for the conversation to be focused on the issue the child needs help with
Referring when situation requires therapy	Some situations will require professional help because of the severity of the problem or emotional state of the child. It is in the child's best interest to be referred to someone who can adequately help
COUNSELLING IS NOT:	
Judging children	Judging children does not develop trust or allow them to get the help they need
Interrogating children	Many children will become intimidated and stop telling their story
Blaming children	Blaming children produces shame and does not allow them to get the help they need
Making promises you cannot keep	This develops mistrust is children
Making decisions for children	This does not allow the child to learn decision making skills and keeps them dependant on the lay-counsellor
Preaching or lecturing to children	This does not allow children the freedom to make their own decisions
Arguing with children	This does not allow children the freedom to make their own decisions

opportunity to develop further understanding of what counselling is and is not.

Imposing your own beliefs on children	This does not allow children the freedom to make their own decisions
Giving good advice	A child might come to you who is pregnant and you think she should have an abortion because she can't afford to keep the child. However, we do not know how that will affect the child. She could die if someone does it for her and she gets an infection, or might not be able to have children in the future, or could suffer emotionally. What works for you, does not work for everyone
Becoming the child's best friend	This causes unhealthy dependence on the lay- counsellor
Taking child's problem as your own	This causes the lay-counsellor to burn-out and then they are not able to help the child

Key Summary Points

Congratulate participants on their efforts so far and summarize that:

- Counselling is a way to help children find their own solutions to their problems
- Counselling is not the place for adults to impose their beliefs on children
- There are times when it will be necessary for the lay-counsellor to intervene if the child is involved in an illegal, dangerous or potentially harmful behaviour/situation

3 THE PROCESS OF COUNSELLING

(6 hours 10 minutes)

Module Outline:

3.1 Overview of the Process of Counselling (10 minutes)

3.2 Step 1: Joining (1 hour 15 minutes)

3.3 Step 2: Exploring to Understand (1 hour 25 minutes)

3.4 Step 3: Sharing Possible Solutions (1 hour 35 minutes)

3.5 Step 4: Helping the Child Choose the Best Solution For Them (55 minutes)

3.6 Step 5: Continue or Terminate (30 minutes)

3.7 Building Self-Esteem in Children (10 minutes)

3.8 Tips For Maintaining A Healthy Counselling Relationship (10 minutes)

Materials Needed:

- Flip Chart
- Markers
- Case Study from Annex 3 (1 copy of each)

Learning Outcomes:

- Understand the basic process of counselling.
- Be able to explain the purpose of the different counselling stages.
- Demonstrate skill in using the different stages in the counselling process.
- Understand when and how to refer.
- Setting proper boundaries in counselling.

3.1. Overview of the Counselling Process

Facilitators remind participants that counselling is helping a child to help himself, to overcome difficulties and to cope with challenges. The counselling process is designed to:



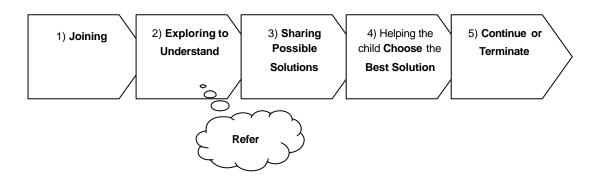
- Create a safe place where the child can tell his story and express his feelings
- Help the child define the problem
- Allow the child the skills to gain more insight into what he feels or is experiencing
- Help the child work through different

options and make choices

- Allow child to express his emotions
- Help child identify how he is feeling

Remember that we may be helping a child formally as a lay-counsellor where we meet them once a week or informally during normal interactions at a Kidz Club, school or in the community.

There are a number of processes that happen during counselling. These processes may happen once or many times before the child has a solution for their problems.



3.2. Step 1: Joining

Facilitators explain that the process of joining covers some practical points but is also the first step in building trust with the child (trust building is an on-going process):

The Practical Process:

- Introduce yourself and ask the child their name and agree which language you will use during counselling.
- Get basic contact details (at this stage you may just want to have a way of contacting the child without asking for a lot more detail which may make the child feel uneasy and trapped).
- Explain that your role as a lay-counsellor is to listen, support, help them identify problems in their lives and come to a solution.
- Explain that if you can't help you will refer them to someone who can. However, you are still willing to be a part of their lives and encourage them to talk to you anytime they wish.
- Explain confidentiality to child. The lay-counsellor will not discuss anything the child tells him with friends or family. However, if the child is in danger or involved in illegal activity the lay-counsellor is obligated to report this to the proper authorities and may request advice from his supervisor.
- Child and lay-counsellor agree on the structure of counselling, that is what time will it start and end, how often in the week.
- Allow the child to ask questions and address their fears.

• In order to remember the child's story, the lay-counsellor can ask the child if he minds the lay-counsellor writing down what is being said.

Trust Building

- It is important to start building trust from the beginning of the counselling relationship and to be consistent about it thereafter.
- Facilitator asks the participants for some ideas on trust building and top-ups from the list below:
 - Make sure the child feels safe and comfortable (do not touch them without asking their permission, allow the child to decide where they would like to sit, leave the door open if they request it).
 - Speak to the child in an age-appropriate way.
 - Be honest with the child about the counselling relationship and what you believe is achievable, be positive but realistic (e.g. if a child is upset because her father left, don't tell her its ok and that her father will come back).
 - Genuinely care about and be interested in the child.
 - Be sensitive to the child's language, religious and cultural beliefs. Show appropriate signs of respect (i.e. in western culture, making eye contact).
 - Respect confidentiality NEVER discuss a case with your own friends and family, etc.



- Don't judge or tell the child what to do.
- Find out general information about the child (e.g. likes, dislikes, hobbies, friends, talents, but BE CAREFUL NOT TO COME ACROSS INTERROGATING!).
- Practice Joining: Facilitator asks the participants to break into 4 groups they will keep these groups for the next few exercises. Have each group read 'Part 1 – Sibongile's Story' (in their workbooks). Allow 5 minutes for the groups to discuss how they would build trust with this child and then they will have 5 minutes to take turns role-playing trust building in the group. Then come back to the larger group and have each group role-play building trust with Sibongile. Allow time for feedback.
- Note to facilitator: Remind participants that joining is important even though they know Sibongile from Kidz Club (they need to explain confidentiality, their role as a laycounsellor, set up counselling times, find more out about Sibongile, etc.).

Part 1 – Sibongile's story

Sibongile is a 12-year-old boy in your Kidz Club. He has been coming to Kidz Club for 6 months and is outgoing and popular. He enjoys playing with his peers and is someone the other children look up to. You have noticed that over the past 3 weeks he sits alone, is easily angered, and doesn't eat any of the snacks.

<u>Debrief</u> back in the larger group – how did it feel to be the lay-counsellor trying to build trust? And when you were Sibongile, did you feel you could trust the lay-counsellor? What were they doing well and what should be done differently?

Facilitators do a role-play demonstrating the correct way to join with Sibongile after debriefing session. Allow time for feedback from participants about what they learned from facilitators' demonstration.

3.3. Step 2: Exploring to Understand

The facilitator explains the following points:

- The <u>purposes</u> of "exploring" are to get a better understanding of the problem by helping the child to tell his story (e.g. to help the child to express his concerns, what worries him and why) and to show empathy and put yourself in the child's shoes. The exploring stage will also never end as the lay-counsellor can always learn more about the child's situation.
- Empathy is a very important skill in exploring and throughout the counselling process! Empathy is defined as the action of understanding, being aware of, being sensitive to, and acknowledging the feelings, thoughts, and experience of another person without having gone through it yourself. It will help the child open up if he understands that the lay-counsellor is trying to understand him. The lay-counsellor should demonstrate empathy by listening attentively to the child, speaking in a gentle voice, considering the child's reactions to the questions he asks and proceeding appropriately. The laycounsellor should be sensitive to what the child is experiencing!
- Some examples of <u>questions</u> that can be asked to help a child express himself include:
 - How are you doing today?
 - Tell me about your family... Who lives in your home? How is it going?
 - How is school? Do you like your teacher? Tell me about it...
 - What is your happiest memory? What do you hope for?
 - Is there anything specific that is troubling you that you would like to talk about?
 - What can I help you with?
- It is very important to have the correct information and to <u>clearly understand</u> what



the child's problems are.

- Don't jump to conclusions about what YOU think the problems are. Don't discard what the child is saying because YOU would not consider that a problem yourself.
- It is very important to <u>understand more about the child's life</u> (home, family, school, friends, etc) so that you can fully understand the context of the problem but also know what resources are available to the child. E.g.:

Family Life:

Who is the child's caregiver? Does the child have siblings? Are other relatives living with the child's family? Are all members of the family healthy? Have any close relatives passed away? What impact do these people have on the child?

Social Life:

Who are the child's friends? Does the child go to school, church or other places in the community where he interacts with people? Have any close friends passed away? What impact do these people have on the child?

- Setting Priorities: If there are many problems or issues raised, it is the CHILD and not the lay-counsellor who should decide what he feels is most important and thus what should be worked on first.
- Give the child time: Do not expect a child to talk about the most sensitive areas of his life during the first session! Give him time to open up to you.

<u>REFER</u>

- It may be that during the exploration phase you learn more about the child's problems and realize that it is beyond your training and ability to help him properly, and some problems need much more help than lay-counselling can offer!
- > The lay-counsellor needs to be aware of:
 - His own limitations and when he is not skilled enough to help the child; never risk the child because you are too proud to say that you are not sure you can help and/or
 - If the **child needs special assistance** of a different kind such as psychological therapy, a medical professional, a special needs educator or a police person
- In situations such as rape, sexual abuse, physical abuse, depression/suicide, etc., you may need to refer the child to get extra help. You may 'hand-over' the case completely, or continue helping him while referring him.
- Referring is not just suggesting to the child that they should ask some else for help. It is a proper process that must be done with care!

1. Who to refer to:

YOU must know what resources are available to help the child – don't send them off to a number of different places where it turns out they cannot get help. Ensure that you as the lay-counsellor are clued up with regards to the local police station, local hospital, the closest nurse, the local social worker, trained counsellor or psychologist, the child's teacher and the Child Protection Unit. Have a referral list or file at your program office, make sure it is always up to date (note, there is a sample referral form in their workbook).

2. Explain to the child:

Always explain to the child why you are referring him and give him detailed information on where to go, when and who to speak to (where possible, make sure that the person is expecting him). In some cases such as rape or attempted suicide you should go with him to ensure that he gets help and is treated properly.

3. Notify the other person/organization:

Give the referral person/organization a referral form that will provide information about the child, the situation and the needs as far as you have observed. (Sample form is in their workbooks). Encourage each organization/site to develop their own forms.

4. Feedback and follow-up:

Allow a way to receive feedback on the child's situation – to be sure that they have followed through on the referral, that he is receiving adequate care. Your responsibility is only over when another person has formally taken over the case.

➢ Group work:

Explain to participants that it is important for any group that works with children to be prepared for the kinds of problems that they may come across. Every project or program needs to agree how they are going to handle various situations – what needs to be done immediately on hearing about the issue? What can you handle and what should you refer? What needs to be reported to the project leader, and/or the police? And the child's guardians? And how will you respect the confidentiality of the child while honouring the laws of your country!?

This is a very difficult area but it is important that every project thinks through these things – even if there are no perfect answers!

Break into four groups and have each group work through one or two of the following scenarios (in their workbooks) answering the questions below by filling in the missing information:

Situation	Immediate Response	Person to Notify	Follow-up
Child Prostitution			
School Fees			

Severe Depression		
Grants		
HIV/AIDS		
Clothing/Blankets		
Food Parcels		
Rape		



- What immediate action must be taken?
- Does the situation need to be referred or can we handle it?
- If referral, who can it be referred to?
- What follow up is required?
- Who needs to be notified?
- Is there an issue of confidentiality?

<u>Debrief</u>: After 20 minutes ask the participants to return to the bigger group – even if they have not finished (the exercise could be endless!). Was this an easy exercise? Is it an important exercise? Why should these things be worked out in advance versus handling it one by one? Why can't each project member decide for themselves what should be done? What would be the value of writing this up into a policy?

Encourage participants to do/complete this exercise with their program teams back home.

Practice Exploring:

Participants break up into the same 4 groups and nominate one person to be Sibongile this round. Each group's Sibongile gets a different version of 'Part 2 – Sibongile's story' and they do not get to share it with the rest of the group. Give the groups 5 minutes to gently explore the problem with their Sibongile (the person playing the role of Sibongile can make-up additional background information as needed). Then come back in the larger group and have each group role-play exploring with Sibongile. (Sibongile's story will be found in Annex 3.)

<u>Note to facilitator</u>: **Group 2 should refer Sibongile because of abuse.** If they do not, use this as a learning time by explaining the need for referral during debriefing session.

<u>Part 2</u>

Sibongile's story: Group 1

Sibongile's mother has passed away. He is having a hard time coping with the loss. He has 4 older siblings and will be provided for, but is scared and embarrassed that people might find out his mother had AIDS.

Sibongile's story: Group 2

Sibongile's uncle has moved into their home. His uncle is an alcoholic, who comes home drunk every night. He beats Sibongile and yells at him, saying that it is his fault they don't have more money. He has threatened to make Sibongile work begging in the streets on week ends to support his addiction.

Sibongile's story: Group 3

Sibongile's school uniforms were stolen from the drying rack outside their home. He is embarrassed to go to school without his uniform as the children laugh at his clothing, but he knows his family cannot afford to buy him another uniform. He considers quitting school.

Sibongile's story: Group 4

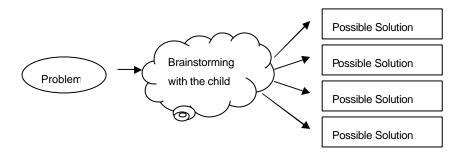
Sibongile feels embarrassed that he isn't growing as fast as his peers. He was once the tallest boy in his class and now he is one of the shortest. The girls don't notice him the way they notice the other boys. He feels awkward as his voice has started cracking and he is starting to notice a body odour. He isn't sure how to handle these changes.

<u>Debrief</u>: Were they surprised about Sibongile's problem – was it different from what they assumed? Was it difficult to ask questions? Do they think they understand the problem well? How many of them landed up giving advice and solutions?!

How did the Sibongiles feel when they were being questioned? Was it easy to share their story? Did they feel interrogated? Reassure participants that we are going to learn some skills soon about how to ask questions and make it easier for the child to share his story.

3.4. Step 3: Sharing Possible Solutions

> Facilitator introduces this next step:



- Remind participants that part of our role is to <u>help the child grow and learn problem</u> <u>solving skills</u>, and we can already start doing this at this stage! As far as possible let the child come up with possible solutions. The lay-counsellor would obviously have to use their judgement here if the situation is severe or at crisis level or if the child is too young, then the counsellor would play a more active problem solving role.
- Remember whilst we want the child's problems to be solved, it is an even bigger success if we can teach the child to solve their own problems – we are not here to be the hero or to get any compliments!

Sharing Possible Solutions

The facilitator explains the following steps:

- First ask the child what possible solutions they can think of that may help with the problem. Acknowledge the ideas given and encourage the child. If there is information they want but don't have, ask them if they know how to find out. If you give the child the possible solutions yourself, make sure that you have explained to them how they could have figured this out by themselves in the future.
- Remember that you should share <u>ALL</u> of the information and options <u>NEUTRALLY</u> whether you think they are a good idea or not we are not making these choices for ourselves!
- > We should <u>only 'intervene' if the child's safety is at risk or a law is broken</u>!
- <u>Be aware of the available resources.</u> As a lay-counsellor, it is very important that you are well informed! The facilitator asks, 'Based on the kinds of problems that children face what kind of information might they need to have to find solutions to their problems?'

Possible answers may include:

Knowledge: Children's and Human Rights, Abuse, HIV, Puberty, Bullying, Grants, Pregnancy, etc.

Resources: Clinics and Hospitals, Police and/or Child Protection Unit, Local Social Workers or Psychologists, Grants, Charity organisations, NGO's and local churches or other community services, Childline, etc.

Child or the family's inner resources: Other family and friends may be able to contribute toward helping the child solve their problem (with physical resources, experience and advice, or emotional support). The family's culture or religion may be a resource or source of strength.

As a lay-counsellor you must have lists of important telephone numbers, contacts and addresses of resources; and also have information leaflets/packs on important topics such as those just suggested.

Group Work:

"My Community's Resources"

Ask participants to form small groups of 4-5 people from the same community and have them turn to a worksheet called "My Community's Resources" located in their workbooks. Groups need to fill in as much information as they know and if there is something that they don't know they should think how they would be able to find it when they return home.

<u>Debrief</u>: Allow about 20 minutes and then ask the groups for feedback – was it easy or hard? Does their community have more resources than they originally thought? What can they do if their community doesn't have a resource that they think they may need?

Participants should complete this exercise at home and keep their list up to date. They will learn how this information is important if you need to refer a child for further help!

Use the following examples to demonstrate the points from above. The facilitator can share the first one and then ask the participants to provide the answers for the second and third examples:

<u>Example 1</u>: A child comes for counselling who has just found out that her boyfriend is HIV+. She has been sleeping with him for a few months now and is worried that she is HIV+ herself.

Sharing possible solutions:

- There is a clinic 2 blocks from here that gives free HIV testing and counselling where she could go for a free test
- Anti-retrovirals can prolong the life of an HIV+ person and delay the onset of AIDS so if she is HIV+ she would be able to access ARVs
- There is a support group that meets here every Monday for people living with HIV where she can receive on-going support if she is HIV+
- There is a free class in the community on making healthy decisions where she can learn how to protect herself in the future regardless of her status
- Using condoms will reduce the likelihood of contracting, passing, and reinfection of HIV so she can use condoms to reduce the risk of HIV infection
- Local NGOs give out free condoms where she can get condoms for free
- There is counselling available for people who have loved ones with HIV so she can talk to other people who have important people in their lives who are living with HIV

Example 2: A child is not going to school because he does not have a school uniform.

Sharing possible solutions:

- It is illegal for the school to deny a child education because he does not have a uniform so he can talk or write to the school's headmaster and fill out forms to waive uniform requirement
- Some children get teased because they don't have a school uniform so he might need help to learn how to deal with teasing and bullies
- There are NGOs which help children receive uniforms so he can locate an NGO which provides uniforms and go there to find out how to get one

- Often children in the neighbourhood may have an extra so he can ask neighbours/others if they have an extra/old uniform that they are not using
- Low income families may qualify for a Grant so he can apply for a Grant

Example 3: A teenage girl is pregnant and is not sure what to do.

Sharing possible solutions:

- Government provides a Child Support Grant for mothers with very little/no income so she could have baby and raise it herself with help from grants
- You can take a legal action to get financial support from the father so she could ask the father for financial support and take legal action if needed
- The clinic will treat your baby free of charge so the medical costs of having the baby will be relieved by the local clinic
- The local church has a young parents support group where they teach parenting skills and offer other support so she could get support from the local church and a group of girls in the same situation as herself
- There is an NGO who will explain adoption and help you through the process so she could put the baby up for adoption
- Abortion is legal in South Africa and there is a clinic nearby that can safely perform it so she could have a safe abortion

3.5. Step 4: Helping the Child Choose the Best Solution for Them

Facilitator explains the following:

- Not all solutions are good solutions! And a solution that works for one person may not be acceptable to another! It is the role of the ay-counsellor to help the child work through the possible solutions to figure out what is best for THEM.
- > Key things that must be considered for each possible solution are:

Four Key Questions... What are the **pros and cons** of each solution? What are the **consequences** of each solution? How will each solution make the child <u>feel</u>? What impact will each solution have on <u>other people</u>?

Once the child has narrowed down the solution/s they would like to pursue, help to bring them to life by asking action questions such as:

How are you going to make this solution happen? What should the first step be toward solving the problem?

Who could help you to bring about these changes?

What could be a **<u>barrier</u>** (problem) to this solution and how will you deal with the barrier? (The reason for highlighting possible barriers is not to discourage the child, rather to prepare them that the solution



may not be easy or quick, to help them not to give up when the first barrier is encountered.)

> <u>Group Work</u>: Read the following scenario to the group:

Vuyokazi is a 15-year-old girl who comes to you for counselling because she is pregnant. She is scared to tell her family about the pregnancy because her mother told her that if she ever gets pregnant she will kick her out of their home. She does not know where she would live and would have to quit school. Her boyfriend refuses to talk to her and says the baby is not his.

Break the participants into three groups and assign each group one possible solution:

Group 1: "Keeping the baby"

Group 2: "Having a abortion"

<u>Group 3</u> "Putting the baby up for adoption" (***depending on the culture of the group the last scenario may need to be modified to 'Having the baby raised by another family member').

Using the form in workbook, ask each group to imagine that they are now the child who is pregnant and they are thinking through the key questions above. Allow the groups 30 minutes and then have them share their thoughts with the group. Below are some possible answers to guide the facilitator:

Group 1: "Keeping the Baby"	Possible Answers:
What are the <u>pros and cons</u> of this solution?	<u>Pros</u> : Will have a baby, can receive child grant <u>Cons</u> : Will have to move out of house, will have extra expense, will have to quit school unless she can find someone to help her, may have extra stress of raising the baby
What are the <u>consequences</u> of this solution?	Risk of dropping out of school Will be responsible for the child for the next 18 years
How will this solution make the child <u>feel</u> ?	She may love the child and be happy or she may feel trapped
What impact will each solution have on other people?	Her family may have to take responsibility for the child so she can attend school or they may make her leave home and that would strain their relationship
How are you going to make this solution happen? What should the first step be towards solving the problem?	She will need to arrange another place to live and tell her family about her pregnancy
Who could help you to bring about	She can ask a friend or relative for help finding a place

these changes?	to stay
What could be a <u>barrier</u> (problem) to	She doesn't have money or know where she will stay,
this solution and how will you deal with	she will talk to a friend about staying with her and can
the barrier?	apply for a grant

Group 2: "Abortion"	Possible Answers:
What are the <u>pros and cons</u> of this solution?	<u>Pros:</u> Won't have the baby, will not have to tell her mother, will be able to stay at home, will be able to stay in school, won't have expense of baby, won't have responsibility of baby at young age
	<u>Cons:</u> Could have medical side affects, very dangerous if not done professionally, may affect future ability to have children, it might be too late and she needs to consider other options
What are the <u>consequences</u> of this solution?	She will not have the baby, there are risks of side-effects especially if not done by a professional
How will this solution make the child <u>feel</u> ?	She could experience guilt or regret, could experience relief
What impact will each solution have on <u>other people</u> ?	She would be the main person affected
How are you going to make this solution happen? What should the first step be towards solving the problem?	She can find a safe clinic to have the procedure
<u>Who</u> could help you to bring about these changes?	She could ask a friend to go with her
What could be a <u>barrier</u> (problem) to this solution and how will you deal with the barrier?	She might have a hard time emotionally, she needs money for the procedure

Group 3: "Adoption"	Possible Answers:
What are the <u>pros and cons</u> of this solution?	<u>Pros</u> : Will have baby, will know that someone who wants a child will take care of it, possibility of being a part of child's life without having the responsibility, can stay in school

	<u>Cons</u> : Will have to move out of house, may have sadness when she gives baby up
What are the <u>consequences</u> of this solution?	Baby will have a home, she may have to move out of her house
How will this solution make the child <u>feel</u> ?	She may feel relieved that she doesn't have to provide for the child, she may also feel sadness, anger, guilt and doubt
What impact will each solution have on other people?	A family will have a child who wanted one, her mother may feel angry and/or disappointed and kick her out of the house
How are you going to make this solution happen? What should the first step be towards solving the problem?	She can visit an adoption agency
<u>Who</u> could help you to bring about these changes?	She will need to speak to someone who does adoptions
What could be a <u>barrier</u> (problem) to this solution and how will you deal with the barrier?	She may have a hard time finding someone to adopt her child

Have each group feedback on one or two of the questions each (no need to go through all of them!) Remember that the groups do not have to come up with the suggested answers above! It is just important that they have practice at evaluating different solutions.

<u>Debrief</u>: Did this process help you move closer to knowing which solution would be right for you (as the child!) in this situation? Do you think you have a better understanding of all the options and their impact?

Now ask the group if anyone is very strongly against abortions. Ask those who have raised their hands if they would be able to give fair and neutral information to a child who wanted to have an abortion. (It is important that a counsellor is able to give all options within the laws of your country whether you agree with them or not). To make the point more impactful ask the participants what might happen if you influenced the child to make 'your' decision of keeping the baby when they really wanted to have an abortion? Possible answers:

- She has a child that is dependant on her for all of its needs but she has no resources and is forced to steal/prostitute herself
- She had to tell her mother that she's pregnant and she gets kicked her out of the house and she has no where to live

• She must quit school to take care of her baby, she never gets a job and she and the baby live in poverty, etc

Conclude that it is the child that has to live with the consequences of their decision, not you! Remember your role is to help them make the best decision for them!

Two points to note:

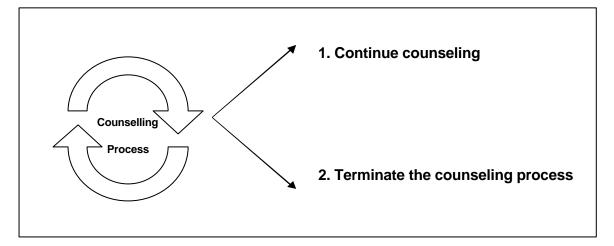
- > If you can't be neutral rather arrange for another counsellor to help the child.
- You don't have to answer all seven questions each and every time it is just a framework to help you whilst learning.

3.6. Step 5: Continue or Terminate

Review what you have covered so far with participants:

- 1. We have learned about meeting a child, explaining what counselling is all about and building a relationship of trust "the joining phase";
- We have learned the importance of understanding more about the problem/situation and having the child set the priorities for which problem to address first – "the exploring phase";
- 3. We have learned about information and resources that can help us and children solve their problems "sharing information and identifying solutions";
- 4. Lastly, how to evaluate various solutions and get started on making them happen "helping the child choose the right solution for them."

Now what? Draw the following diagram on a flip chart to demonstrate the most common next steps:



CONTINUING COUNSELLING

Facilitators talk thorough the following points:

The child may not be able to express everything that is worrying them and work through all the solutions in one session! So you may need to see them a few times! So long as you are making progress that's absolutely fine!

- It may be difficult to bring a session to an end if it has been particularly emotional, but ideally counselling conversation should be less than an hour – so that it is not overly exhausting on the child or lay-counsellor, to give the child time to think through what has been discussed, so that the counsellor has time to attend to other children and to their own needs.
- It is also difficult to get back to that 'deeper' place in the next session after you have not seen the child for a few days. There is a technique called summarizing that we will learn about in the next section that can help us bring one session to a close and regain the same place in the next session.
- Always remember to reassure the child that you are available if something goes wrong before the next session and agree a time and place for the next conversation.

TERMINATE

- The facilitator explains that counselling can be terminated when you and the child feel that the child is ready to move on without further assistance. Remember the purpose of counselling is to help them grow to be able to cope with or solve their own problems – not to breed dependency.
- > The following is important to remember in <u>preparation</u> for terminating counselling:
 - Is the child emotionally ready to end the relationship?
 - How can the family be involved to offer continued support?
 - Help the child consider other coping structures (i.e. an aunt, a friend, a pastor, or a peer group).
 - Always explain to and agree with the child that the counselling will be terminated (or reduced in frequency).
 - Assure the child of continued support when necessary.
- Before terminating it may help to meet with the child less often and wean them from the counselling relationship (i.e. if you met once a week for 3 months, meet once every 2 weeks for a month before termination).

3.7. Building Self-Esteem in Children

So far we have learned how to help children work on the practical problems they are facing, but what about the emotional side? It is important to know that while children have problems that need to be solved, they also have feelings about those problems - and that is normal!

- There are <u>normal processes</u> that children/people need to go through such as bereavement or adapting to change. These are normal steps but a person can be helped through them in support groups or bereavement counselling for example (not taught here).
- > Sometimes a child's emotional reactions may be abnormal showing that they are

not coping with their situation at all. It is then important to recognize the signs and refer them to a trained professional. (Signs may include violence, severe depression, sleeping a lot, not eating, etc).

But most often as a lay-counsellors, our role is to 'be there and listen', providing a safe place for children to express their emotions and play a role in <u>building their</u> <u>self-esteem.</u>

A Child's Self-Esteem:

The facilitator explains that an important aspect of counselling and one of the underlying themes of every session should be the strengthening of the self-esteem of the child. Ask participants to explain self-esteem (*possible answer*: is a term used to describe how much you value yourself as a human being).

Self-esteem is often based on a person's attitude toward one or more of the following:

- Your value as a person
- How you think others see you
- What you perceive to be your purpose in life
- Your place in the world, in your family and in your community
- Your potential for success
- Your strengths and weaknesses
- Your social status and how you relate to others
- Your independence or ability to stand on your own feet
- Your achievements.

Healthy self-esteem is vital for a child to develop and is the first step in teaching a child to respect himself and others. It helps a child feel proud of himself and his achievements. It also gives a child the courage to try new things and the power to believe in himself. Strong self-esteem empowers a child to make healthy choices about his mind and body. He will be less likely to succumb to peer-pressure and make choices which risk his well-being. This will be particularly important for an orphaned child who generally does not have an adult around him to guide his decision-making, thus making him particularly vulnerable to outside pressures (to begin having sex, not attend school, take drugs, etc).

What can you do when a child has a low self-esteem?

Ask the participants for input and top up from the below list:

Appreciation - A child's self-esteem will suffer if he or she is not appreciated. A child will know if an adult or other young person is insincere and will understand if they do not enjoy the child's company. When spending time with a child who has low self-esteem it is vital to honestly enjoy his company, to express your enjoyment and to congratulate or thank the child when he has done something well. Appreciate the child's special skills and his uniqueness.

Encouragement - A child's self-esteem is boosted by words of encouragement. Encouraging decision making will also lead to feelings of confidence and independence for the child. It will help the child to know that the lay-counsellor believes in him.

Praise - Self-esteem comes from what you think about yourself while praise is an external expression by someone else. However, praise can also be a way of encouraging a child to value himself and his unique abilities.

Mutual respect - A child's self-esteem will be strengthened when he is treated with respect and taken seriously, especially when expressing his views. When a child is treated as an intelligent individual with the capacity to understand things and to learn from his mistakes he will understand that he is respected and valued for who he is. As an adult, you want to be treated with respect and a child is no different. A child who is belittled, patronized or put down will suffer a lack of confidence. Mutual respect will foster trust and confidence.

Dealing with failure - If a child fails he must not feel that he is a failure. Remind the child that failure is only a temporary setback on the road to success. Never tell the child he has failed, let you down or cannot succeed. Be encouraging and help the child to believe in his ability to succeed, no matter how long it takes! When a child does not succeed in his endeavour, teach him that he can learn from the situation and encourage him to analyze the situation and understand what he can do better next time.

Attitude - The way a lay-counsellor sees a child will make a big difference in the child's attitude. Although many children are dealing with very difficult situations, it is important that the counselling relationship be a place where the child learns to see his strengths. It is good to emphasize with a child, but it can keep the child from growing if the lay-counsellor pities him and only sees the negative in the child's situation.

(This section of building self-esteem has been adapted from "The Heartbeat Support Group Manual – Sikhula Sonke")

3.8. Tips for Maintaining a Healthy Counselling Relationship

Facilitator explains that it is very easy to develop unhealthy counselling relationships. It is the lay-counsellor's responsibility to maintain professional boundaries with the children they counsel.

- At times the child may become more attached than is appropriate. The child may begin to see the lay-counsellor as a parent, friend or romantic partner. It is imperative that the child understand that the lay-counsellor cares for them, yet also know that the lay-counsellor is not able to fulfil unmet needs.
- The lay-counsellor may develop feelings for the child and become overly involved in the child's well-being.
- The child feels uncomfortable and/or threatened by the lay-counsellor.
- Other members of the community may make accusations against the lay-counsellor.

Ask participants to suggest ways of avoid and/or dealing with these situations. After participants have given their feedback, go over the following points:

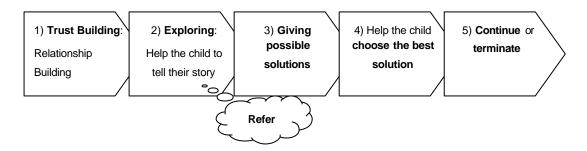
- <u>Have same-sex counselling relationships</u>. Adolescent girls, especially those without a father-figure or girls who have been sexually abused, may gravitate toward male lay-counsellors. It is important to try to help these children talk to female laycounsellors. If they refuse, ask the child if a <u>female lay-counsellor can join the</u> <u>session</u> so that they can build trust. If the child still refuses, be sure to talk to the child in a visible area.
- If possible, meet in a room with windows or leave the door slightly open so that other people can observe your interactions.
- <u>Ask the child</u> what you can do to make them feel comfortable. Would they like to have another person present, let them sit closest to the door, etc?
- <u>Never be alone with a child</u>: Never meet with children in an enclosed area. If possible, meet in a room with windows so that other people can observe your interactions. This is necessary to protect the child from possible abuse and the lay-counsellor from allegations.
- <u>Do not touch a child without their permission</u>: Many children, especially those who have been sexually abused, have a hard time telling an adult not to touch them. It is important for the child to know that the lay-counsellor respects their body and allows them to control whether or not they are touched during a counselling session. If you feel that it is necessary to touch a child ask their permission first (i.e. May I give you a hug?).
- <u>Time & Equality:</u> Many of the children you will counsel have little time alone with adults. It is important that the lay-counsellor spends time with the child during the counselling sessions. However, during Kidz Clubs and while in the community, it is important that the lay-counsellor interacts with all of the children equally and doesn't show favouritism toward the children he is counselling.



Summary

In conclusion, the facilitator should ask the participants:

To name the five stages of the counselling process and summarize what happens in each stage:



> To name situations where referral is necessary

> Why lay-counsellors do not give advice

Key Points

- Trust Building is the most important part of counselling and trust will continue to be either broken or built as you meet with the child.
- It is important that you understand the problem and give the child time to explain the problem as they see it.
- Counselling is about empowering the child to make their own decisions and find their own solutions.
- There will be time when referral is necessary for the child to receive proper help.

4 THE PRACTICES OF COUNSELLING

(4 hours 5 minutes) **Module Outline:** 4.1 Listening to Understand (15 minutes) 4.1.1 Body Language (20 minutes) 4.1.2 Tone of Voice (10 minutes) 4.1.3 Don't Change the Subject (5 minutes) 4.1.4 Allowing Silence and "Hmmm" (10 minutes) Practice (40 minutes) 4.2 When a Child Needs More Encouragement to Talk (10 minutes) 4.2.1 Asking Questions (35 minutes) 4.2.2 Checking your Understanding (10 minutes) 4.2.3 Naming the Feeling (40 minutes) 4.2.4 Summarizing (10 minutes) Practice (40 minutes) Materials Needed: Flip Chart Markers Sweets Learning Outcomes: Be able to explain the different counselling techniques. • Demonstrate the ability to use different counselling techniques and the judgement to

Introduction

The facilitator introduces this section:

In the previous section we have learned about the purpose of counselling and the process of counselling; now we need to learn some skills that will help us to listen and interact well with children during the counselling process.

determine when a specific technique should be used.

First we are going to learn about '<u>listening to understand</u>" and various ways of showing the child that we are listening attentively and not judging them – such as body language, voice tone, not changing the subject and encouraging the child to talk.

And then we are going to look at more <u>active ways of listening</u> such as asking open-ended non-judgemental questions, checking that you understand the child correctly and finally helping the child to name how they are feeling.

4.1. Listening to Understand

The most important skill you can ever master is to listen! It sounds easy doesn't it? Everyone can listen, right? But that is not really true – just because someone can hear does not mean they can listen well! A LAY-COUNSELLOR MUST LISTEN IN ORDER TO UNDERSTAND WHAT THE OTHER PERSON IS SAYING.

When we are listening to someone talk about a dramatic event or their point of view on something we often find ourselves hearing the other person talk but are we truly listening attentively to understand them? We are actually:

- Thinking about something else
- Thinking about what we are going to say next
- Thinking that the other person is wrong or has misunderstood something
- Thinking about what we would have said or done in that position
- Trying to figure out how best to convince them of our point of view or our understanding

The right approach to 'listening' in a counselling session is to:

- Focus entirely on the other person, the child in the counselling relationship is the most important person in the room
- Aim at accurately understanding what the child is saying.
- Don't assume that you know what they are going to say, how the story ends or how they feel about it
- Understand that your opinions and views do not belong in the counselling room!
- The listener should only speak when they are checking that they understand correctly or asking for clarification.

Demonstration

Two facilitators do a role-play demonstrating the right and wrong approach to listening. Please feel free to make up your own stories to demonstrate the point. One example is below...

The wrong way

1: Carol, I'm so glad you are here! I wanted to tell you what happened to me last night.
2: Me too! I had such an exciting evening – I went out to supper with George! He's so cute, and handsome, and funny... but he still hasn't really broken up with his current girlfriend, so you know... Oh, what did you want to tell me?
1: Well, I was walking home from the taxi rank after work. It was quite dark and their was this group of men who were just hanging out on the side of the road, drinking and playing card games and they started shouting things at me...
2: Ahh, those idiots! Lazy, good for nothings. They just waste their life away with

booze and drugs! Harassing good people like us! They should all be thrown in jail! § You know what I would have done? I would have given them such a mouth full! \langle Then we would have seen who had the last say. Winnie, you know you can't just go through life being such a push over. You need to learn to stand-up for yourself.... (Stop) ns to the audience: What was happening in this skit? Did Carol understand what Winnie wanted to tell her? What was Carol doing?

Questions to the audience:

- •

The right way...

1: Carol, I'm so glad you are here! I wanted to tell you what happened to me last
<pre>2: What happened, Winnie?</pre>
1: Well, I was walking home from the taxi rank after work. It was quite dark and their was this group of men who were just hanging out on the side of the road, drinking and playing card games and they started shouting things at me(Winnie pauses for a while)
2: What were they shouting?
1: They were calling me all sorts of names like (insert local appropriate names for an immigrant). They were accusing me of taking their jobs and stealing food out of their children's mouths! They told me to go home before something bad happened to me and my children!
2: Oh Winnie, it sound's like you were really upset by that! What did you do next?
1: Well, I just hurried past and went to my house.
2: How has this whole thing made you feel?
1: I feel terrible. As if it is not bad enough that I was forced to leave my own country to come to a foreign place to find work. Now everyone here hates me! Don't they understand that my family's survival depends on me making some money?
{ (Stop)
Questions to the audience:
What was happening in this skit?
Did Carol understand what Winnie wanted to tell her?
What was Carol doing?

The facilitator concludes that it is impossible to listen if you are talking! It sounds really obvious, but you need to make a real effort to check yourself and make sure that you are 'listening to understand'. There are a number of other skills that we are going to look at to help us listen attentively starting with body language.

4.1.1. Body Language

Facilitator writes "Body Language" on the flip chart and asks participants what body language is (possible answer: communicating that way you feel using your body – such as the way that you sit or stand, the way they cross their arms, the face that they are making, and where they are looking).

In a counselling situation, the body language of both yourself and the child are important:

- <u>The lay-counsellor</u>: You should be aware of your body language and make sure that you are paying attention to and interest in the child; your facial expressions should not give away your bias or personal opinions about what the child is sharing.
- <u>The child</u>: You can learn more about the child's problems and feelings by listening to the things they are 'not saying'. (i.e. If they are saying that they 'feel better and everything is fine' but they are sitting hunched up and looking very tense you may need to probe further).

Remember that different cultures have different norms of body language – for example ways of showing respect and paying attention (e.g. full eye contact versus looking down, sitting up straight versus lowering yourself in your chair).

Demonstration:

The facilitators demonstrate a number of different 'body language' reactions to something that a teenage girl is sharing.

Choose a participant to play the role of the child and have them deliver the same line without much emotion each time. One of the facilitators plays the role of the lay-counsellor and without saying a word demonstrates different reactions only using body language.

The other facilitator becomes a commentator and starts and stops each skit (which is only about 10 seconds each!) and then asks the audience for comments before starting the next skit.

Skit 1	<u>Girl:</u> And then my boyfriend Thabo asked me to sleep with him		Each round the commentator: say "Stop".
Skit 2	<u>Girl:</u> And then my boyfriend Thabo asked me to sleep with him	Lay-counsellor: On hearing this news the lay-counsellor suddenly sits up (is shocked), big loud breath in, mouth open and eyes big (demonstrating disapproval)	What was the lay- counsellor doing? What was the lay- counsellor communicating
Skit 3	<u>Girl:</u> And then my boyfriend Thabo asked me to sleep with him	Lay-counsellor: Sits up with interest, nods her head vigorously and smiles her approval (she thinks that it is good, and about time that these two	even though she didn't speak? How did her body language express

<u>x</u>		moved things to the next level)	this?
Skit 4	<u>Girl:</u> And then my boyfriend Thabo asked me to sleep with him	<u>Lay-counsellor</u> : She is not listening, looks very anxious and keeps checking her watch and stretching her neck to look out of thee window as if she is waiting from someone to arrive	Ask the "girl" how the lay-counsellor's body language made her feel.
Skit 5	<u>Girl:</u> And then my boyfriend Thabo asked me to sleep with him	<u>Lay-counsellor</u> : She is sitting upright, maintaining eye-contact, listening attentively to what the girl is saying.	
§ <u>Skit 6</u>	Boy: "I don't care. She can leave if she wants."		Then asks:
<u>}</u>	(Sitting up straight, angry, obviously does care a lot)		How do you think
} <u>Skit 7</u>	Boy: "I don't care. My mother didn't mean anything to me feeling?		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	(Sitting back, speaking may begin to cry)		
h	hamman	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	hanna

Facilitator explains that as lay-counsellors we should be very aware that we can communicate many things before we have even said a thing! Ask participants for a summary of good behaviours that will encourage the child to trust you and share what they want to say (make notes on a flip chart):

#### Possible answers:

The Lay-counsellor should:

- Look interested by leaning slightly forward, having hands lying relaxed in lap.
- Be sensitive to the child and observe the child carefully, to see if the child is battling with a difficult issue, for instance speech hesitation, breathing changes or facial behaviour.
- Lower yourself to the child's level at the first meeting. If the child is small rather sit with the child on the floor.
- The lay-counsellor's facial expression should communicate trust, security, genuine care and empathy.



#### The Lay-counsellor should not:

• Look out of the window, at his watch or through paperwork

- Fidget or fold their arms across their chest (negative body posture)
- Yawn, frown, gape or look anxious
- Do not adopt any facial expression that might scare, inhibit or frighten the child

#### 4.1.2. Tone of Voice

Facilitator writes "Tone of Voice" on the flip chart and asks participants what they think it means (<u>possible answers</u>: the way that you say something using volume and attitude can change the meaning behind the same set of words).

It is often not so important what is said, rather how it is being said. Lay-counsellors should:

- Try not to put judgement/opinion into their tone of voice
- Not speak too soft or too loud, too high or too low, too fast or too slow
- Speak gently and clearly (important to making the child feel safe and build trust)

#### Demonstration:

A facilitator demonstrates a couple of sentences with different tones, volume, pace etc

«DON'T DO THAT!!!"	Loud, angry, shout (e.g. screaming at a stubborn teenager)
"Don't do that"	Gentle, soft, calm (teaching a child not to put bugs in their mouth)
} f"Don't do that! ☺"	Laughing and playful (with your boyfriend)
WHAT did you do? " What did YOU do?"	Showing the way the sentence changes depending on the emphasis
} "What did you DO?"	

# 4.1.3. Don't Change the Subject

Facilitator explains the next rule: "Don't change the subject" in other words keep a close track on the story/conversation and don't loose the plot or change directions!

- Concentrate on what the child is telling you about stay with that topic and if you are going to ask a question make sure that it relates to that topic.
- If you have important thoughts or questions on a different topic while the child is talking, write them down and come back to them later.
- Don't make assumptions or draw conclusions about what the child is saying, rather check your understanding openly. E.g. rather than saying "So then you must be really angry with that Peter" ask "It sounds like you are upset with someone".
- Unnecessary observations such as correcting the child could break trust and hinder the flow of the conversation.

- When a child provides a lay-counsellor with a lot of information, the lay-counsellor should ask the child, "What would you like most to talk about?" (Sometimes if appropriate the lay-counsellor could choose in which direction to pursue the conversation).
- If the lay-counsellor feels stuck, don't change the subject! Rather comment on what the child said last.

#### 4.1.4. Allowing Silence and "Hmmm"

Facilitator explains that silence is ok! Give the child some space to think it through and decide if they want to tell you anything more. Small encouragements like nodding your head, saying "mmm" or repeating key words, show the child that you are still concentrating and are listening without guiding the child where to go next – you are creating an encouraging but open space for the child to decide how to proceed.

#### Practice – Rotating Roles

Each round we are going to have a 'talker', a 'listener' and an 'observer'. We will do three rounds to ensure that everyone has a chance to practice their listening skills. Ask participants to fill in an observation sheet found in their workbooks when they are the observer (they should ignore their sheet when they are the listener and talker).

Each round the 'talker' can decide on something they would like to share with the 'listener' (it should be something real, but need not be a serious problem – they could tell the listener about their day for example).

The listener must practice behaviour to show interest in the talker and seek to understand what they are saying. The observer should note:

- the listener and talker's body language throughout the interaction
- the listener's questions, comments, noises, etc (good and bad!)

Facilitators may want to demonstrate a round first before the participants break into their threes as the exercise can be confusing – rather have the participants practicing their skills than trying to figure out what they are supposed to be doing!

After 3-5 minutes, facilitator will call a time out and ask the observer to give feedback to the listener about their performance. The 'talker' can also offer feedback on how they felt during the process. Feedback by participants should be honest and constructive.

Group members should now rotate roles and repeat the process.

During this exercise facilitators should walk around and observe each group. Take note of what they did well and what could use improvement.

When exercise is complete, facilitate a discussion on what they learned. Was it hard to listen? Did you feel listened to when it was your turn to be the talker? Was it hard not to give advice? Did you give advice when you were the talker?

# 4.2. When a Child Needs More Encouragement to Talk

We have just learned how to listen attentively, but sometimes the child may need more encouragement to open up - they may have difficulty expressing themselves or they may be shy to share something that is troubling them. The lay-counsellor should give the child time and space to open up, but may also need to provide some help and encouragement. Be careful NOT to overwhelm the child with questions.

Some of the techniques that encourage the child to talk are:

- Asking questions
- Checking your understanding
- Naming the feeling
- Summarizing

#### 4.2.1. Asking Questions

Facilitator explains that asking questions is an important tool, but just like a knife if you handle it badly questioning could also hurt the child. Asking questions encourages the child to share more information about themselves and their problems but should not:

- Be asked to satisfy your own personal curiosity
- Make the child feel interrogated
- Make the child feel judged

Be careful of questions that are actually judgements or opinions in disguise! (i.e. "Don't you think that was a silly thing to do?" or "Is it really more important to care for your mother than going to school?")

#### There are two types of questions:

- <u>Closed questions</u> restrict the range of possible answers to YES/NO or one word answers, and are used to get very clear and specific answers. Closed questions are not 'bad' questions but be careful of using them when you are trying to get the child to open-up and talk freely. (E.g. Do you have brothers and sisters?, Has this ever happened before?, Are you going to school?)
- **Open questions** cannot usually be answered with one word, and they encourage for the child to give more information or an opinion. (E.g. What does that mean for you?, How do you feel about that?, Can you tell me more about that?)

#### Practice/Game

<u>Part 1</u> - Facilitator asks all the participants to stand-up in front of their chairs. The facilitators call out the below questions one at a time. Participants needs to sit down if the question is closed; stand-up if the question is open and "boo" if the question is really a judgement in disguise.

QUESTION	TYPE
What is your name?	CLOSED
How old are you?	CLOSED
What is your home like?	OPEN
Why is she your favourite teacher?	OPEN
Do you have any siblings?	CLOSED
What is your family like?	OPEN
How did you feel?	OPEN
What does that mean to you?	OPEN
How did you react?	OPEN
Don't you think that was the wrong thing to do?	JUDGEMENT
You seem angry, are you?	CLOSED
Are you upset?	CLOSED
Why do you think she did that?	OPEN
Why do you believe in ancestors?	OPEN
Why are you crying?	OPEN
Is this really such a big problem?	JUDGEMENT
Etc (add more of your own)	

<u>Part 2</u> - OK, now it is the participants' turn. Ask participants to call out questions and have the facilitators stand-up or sit down as per the previous game's rules. The rest of the group should shout out if the facilitators get it wrong!

# 4.2.2. Check your Understanding

Facilitator explains that it is very important for the lay-counsellor to understand what the child is trying to communicate. A tool for checking your understanding is called "paraphrasing" – you listen to something that the child has said and then you tell it back to them using different words so that you and the child can see if you understand it correctly.

Facilitator asks participants why we use different words and not just repeat what the child has said.

<u>Possible answer</u>: if we use the same words we just show that we heard what the child said and not that we understand it! By changing the words misunderstanding can be shown up.

Remember it doesn't have to be a long and complicated summary – just a few words to check your understanding and allow the child to say: "Yes, that's right" or "No, actually what I mean is that .... "

# Example 1:

Child: "So if I go to school then my mom will not be looked after, and she will be disappointed in me, because I am not helping her, and then I will feel so guilty that I will  $\langle$ not be able to concentrate on my school work anyway."

Lay-counsellor: "So, if I understand you well, you feel that which ever way you turn you always seem to loose?"

Child: "Yes, I just can't win"

# Example 2:

Child: "My best friend's mom just died and my friend moved to another town to live with her Granny. I miss playing with her"

Lav-counsellor: "So, I hear that you are feeling lonely since your friend moved?"

Child: "Not really, I have other friends. I just miss her."

# 4.2.3. Naming the Feeling

Children often have difficulty understanding how they are feeling and relating it back to a particular event or action, especially younger children. But understanding how you are feeling and what makes you feel that way is an important part of healing and/or learning to cope with your emotions.

Helping a child to name how they are feeling allows:

- The child to understand how they are feeling (and then slowly link it to an event/action)
- To validate those feelings (showing the child that it is ok to have feelings)

Naming the feeling is feeding back to the child the emotion that you have understood they are feeling from what they have said (i.e. "It sounds to me like you are very angry that your mother has left you." or "So you feel guilty about making that decision?").

The child should be free to correct you if you have not named their feelings correctly - listen carefully to his response - do not be defensive about whether you got it right or not! Naming the feeling in the form of a question ("So, you feel....?" or "From what I understand, you feel...") gives the child more opportunity to correct the lay-counsellor if they have misidentified the child's feelings.

Be careful not to over use this technique - don't assign the child emotions that they have not

suggested. Be careful and sensitive to the timing, it should not be an interruption.

#### Demonstration:

The facilitators demonstrate the first two and then ask for volunteers to 'name the feeling' in the remaining passages.

Passage 1: Maybe it's my fault that my mother died. When she asked me for a glass of water I  $\xi$  refused to go and I said to her she must get up and get it herself. Maybe if I hadn't said  $\xi$ that she wouldn't have died. Possible 'Naming the feeling': So, you feel guilty because you did not get your mother a glass of water before she died? Passage 2: Since my mother died, I have to do everything. I have to fetch water, cook, clean, take care of the younger children, everything! Possible 'Naming the feeling': So, you miss your mother because since she died you have to do everything? From what I understand, you feel resentful that you have to do everything at home? So, it feels unfair to you that you have to do all the housework? Passage 3: My mother does not care about me anymore. My stepfather says and does anything he  $\S$ wants and my mother never says anything. Possible 'Naming the feeling': It sounds to me like you feel abandoned by your mother because she does not defend you from your stepfather. Is this correct? Passage 4: I'm pregnant. My parents don't know. Everyone is going to freak out when they find out. Maybe an abortion is best cause then no one will know. What should I do? Possible 'Naming the feeling': So, you feel afraid because you are pregnant and you think your parents will be angry when they find out? Passage 5: My father is a bully. He's always picking on my mother and us because he knows we can't defend ourselves. Possible 'Naming the feeling':

If I understand you correctly, you feel helpless because you cannot defend yourself and  $\S$ your mother against your father? ······

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Point out to participants that the 'child' passages talk about things and events but not emotions or feelings. 'Naming the feeling' helps the child to see the link between the action/event and how they feel.

Facilitators debrief with participants asking what they learned from this demonstration.

4.2.4. Summarizing

The last skill that we are going to look at in this section is summarizing. Remember we said earlier that summarizing can be used to help you bring one session to an end and also to open the next session a few days later and remind the child where you left off.

In case participants are confused between paraphrasing and summarizing point out the following:

| Paraphrasing: | Summarizing: |
|---|--|
| happens during a conversation you reword only one thought or idea at a time in order to check that you understand | happens only at the beginning or end of a session cover all of the important points that have been discussed or agreed on in order to close a session or to open a session and remind the child where you left off last time |

Example: The lay-counsellor may say "today we discussed your feelings of frustration around caring for your mother. On the one hand you feel guilty about leaving your mother without care. On the other hand you feel resentful that you have to miss school. However you did come up with an option to ask you neighbour, who is home all day to check in on her and get help if necessary. You would like to try out this option and discuss it when we meet next time."

Practice – Rotating Roles

This is a repeat of the previous exercise – practicing the attentive listening skills and now the extra 'encouraging' skills also!

In groups of three, each round will have a 'talker', a 'listener' and an 'observer'. We will do three rounds to ensure that everyone has a chance to practice their skills. Ask each participant to fill in the observation sheet found in their workbook when they are the observer (they should ignore their sheet when they are the listener and talker).

Each round the 'talker' can decide on something they would like to share with the 'listener' (it should be something real, but need not be a serious problem – they could tell the listener about their day for example).

The listener must practice behaviour to show interest in the talker and seek to understand what they are saying. The observer should note:

- the listener and talker's body language through-out the interaction
- the listener's questions, comments, noises, etc (good and bad!)

AND

- the use of open questions
- paraphrasing
- naming feelings
- and if appropriate, summarizing at the end of the role-play

Facilitators may want to demonstrate a round first before the participants break into their threes!

After the first 3-5 minutes, facilitator will call a time out and allow 2 minutes for the observer to give feedback to the listener about their performance. The 'talker' can also offer feedback on how they felt during the process. Feedback by participants should be honest and constructive.

Group members should now rotate roles and repeat the process.

When exercise is complete, facilitate a discussion on what they learned. Was it hard to listen? Did you feel listened to when it was your turn to be the talker? Was it hard not to give advice? Did you give advice when you were the talker?

Summary

Facilitators remind participants that they have learned about the following – asking for key learning on each point:

Listening to Understand

- a. Body language
- b. Voice Tone
- c. Don't change the subject
- d. Silence and "Hmmm"

When a Child Needs More Encouragement to Talk

- a. Open-ended questions
- b. Checking your understanding
- c. Naming the feeling
- d. Summarizing

Key Points:

- The most important skill in counselling is listening
- There are many techniques to use to show the child you are listening and to encourage him to talk
- You may need to help the child identify what they are feeling by repeating what he said using feeling words

5 PRACTICE, PRACTICE, PRACTICE

(10 minutes per participant, includes time for feedback)

Materials Needed:

- Scenarios Annex 4 (cut up and put in cup, 1 copy)
- Scissors and a cup
- Sweets

Learning Outcomes:

• Demonstrate the ability to integrate what they have learned in the counselling process and practice

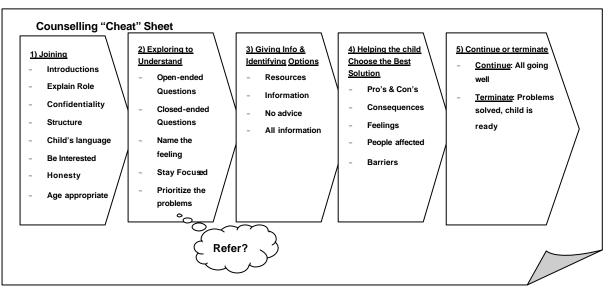
<u>Role-Plays</u>

Facilitators explain that we have learned so many different things! It is quite intimidating to think that we need to try to use all of these skills at the same time while we are counselling! We have learned together that counselling isn't just having a nice chat with a child!

It is true that it is a bit overwhelming in the beginning but practice makes perfect! And we will invest some more time in practice here together – where it is safe! And you should also make sure that you have a chance to practice these skills with your project. It may be a good idea to 'sit-in' on some sessions with an experienced lay-counsellor to observe her a few times. Then ask her to sit in on your first few attempts – so that she can give you feedback on how you are doing.

The purpose of these role-play case studies is to integrate the **COUNSELLING PROCESS & COUNSELLING PRACTICES** with each other.

Ask the participants to review the following summary sheet found in their workbooks and allow them a few minutes to look it over and ask questions:



This session will take at least half a day! Don't rush it – let the participants have time to practice as many of the steps and skills as possible and become more comfortable!

Facilitators should allow each participant to pick a scenario (found in Annex 4) from a container such as a cup or hat. During the role-play they will play the part of the child described on the paper. Next facilitator should pair up the participants. Each participant will have a chance to play the role of the lay-counsellor and each will also be a child within their pairs. The participants will each have an opportunity to role-play for the whole group. When they come forward they should tell the group which part of the counselling process they'll be demonstrating. They should not know anything about the child's situation when they come forward. Facilitator should allow each participant 4-5 minutes for the role-play and 45 minutes for feedback, opening the feedback up for the group. Facilitator should make sure all participants are applauded for their effort and receive a sweet after their role-play.

You are a 7-year-old child whose mother just died of AIDS.

You are a 16-year-old girl who just found out you are pregnant.

You are a 10-year-old child who is being teased at school because you don't have a uniform.

You are a 9-year-old child who only eats once per day.

You are a 6-year-old child who is being beaten at home.

You are a 12-year-old child and have to work and not attend school.

You are an 8-year-old child and your father has just left your mother.

You are a 14-year-old child and you are the head of your household.

You are a 13-year-old child and you need a school uniform and money for fees.

You are an 11-year-old child and you didn't make the soccer team when all your friends did.

You are a 15-year-old girl who has been raped by a stranger.

You are a 17-year-old child and found out you are HIV+.

You are a 7-year-old child and your favourite toy has been stolen.

You are an 8-year-old child and your uncle has moved in and forced you to watch pornography.

You are a 10-year-old child and your relatives have taken all the furniture since your parents died.

You are an 11-year-old child and your teacher calls you bad words and says you are "lazy."

You are a 9-year-old child and your family forgot your birthday.

You are a 6-year-old child and a neighbour your age just died of AIDS.

You are a 12-year-old child and your friends want you to sniff glue with them.

You are a 13-year-old child and you stole money to buy food for your family.

Facilitator debriefs with participants afterward. What are some common 'mistakes' you observed during the role-plays? What did the participants do well? Be sure to acknowledge and thank them for having the courage to practice in front of the entire group. Reassure them that the more they practice the more natural counselling will become.

6 CHILD DEVELOPMENT

Module Outline:

6.1 Developmental Stages of Children (1 hour 30 minutes)

6.2 Child Development and Counselling (40 minutes)

Materials Needed:

- Flip Chart and Markers
- Sweets

Learning Outcomes

- Knowledge about the 8 developmental stages through which an individual develops, with particular insight into the 5 developmental stages of children.
- Knowledge and the skill to recognise the basic milestones children are normally expected to achieve at a certain age.

<u>Note to Facilitator</u> - This section has the potential to be very confusing but it doesn't need to be. The specific ages and multiple facts are not as important as developing an overall understanding that children grow up through different stages and have different needs and abilities at different stages of their lives, different things are important to them. Be careful not to overwhelm participants with facts and rather keep focused on the key learning objectives above. For the facilitator's use only, additional readings on Erikson's life stages have been included in the annex.

6.1. Developmental Stages of Children

The facilitator introduces the theme of child development and asks participants what age children they interact with on a day to day basis? Do children of different ages act differently? How so?



The facilitator explains that:

• From the time that we are born to the time that we die we are growing – physically, emotionally, mentally, spiritually, etc.

(2 hours 10 minutes)

But it is in our childhood that growth happens most quickly and dramatically – in a few short years we go from being a fully-dependant baby, to an exploring toddler, to a questioning child, to a self-conscious teen to a self-confident young adult!

• It takes place from birth up to 18 years for ng even further).

- children (and adults keep growing even further).
- Successful completion of each stage helps the child to develop into a mature,

responsible member of the society who can contribute to that society positively.

- It is important in working with or counselling children to understand something about child development because:
 - Children have different needs at different stages.
 - We talk to and interact differently with children of different ages.
 - If something hurts a child at a particular stage (such as abuse or the death of their parents) it may negatively affect their development.

For all of these reasons it is important for us to learn about and understand the developmental stages of children.

> Facilitator explains to participants:

- That Erik Erikson was a psychologist who designed a model where the growth process of an individual can be divided into eight stages that follow one another; we will use some of his principals but will not learn the stages in depth.
- That the years are a guideline for normal development, children will develop at their own pace... but may fall behind because of trauma or not having their needs met.
- Just like the foundation of a house is essential to the structural stability of the first floor, which in turn must be structurally strong to support second story, so in the same way difficulties in adolescence can be the result of a weak foundation in early childhood.
- Encourage participants not to be overwhelmed, that what we are about to talk about are the same things that they went through when they we growing up, what our brothers and sisters and children go through... it is what we live every day.
- Facilitators now explain the following stages, and participants can follow along in their workbooks:

Stages of Child Development

1. Trust or No Trust (0-2 Years)

The most important thing for the child is being held and fed by the caregiver.

• <u>The healthy child</u>: The child, well - handled, nurtured, and loved, develops trust and security and expects good things. The infant will develop a sense of trust only if the parent or caregiver is responsive and consistent with the basic needs being meet. The need for care and food must be met regularly.



• <u>The unhealthy child</u>: Badly handled, he becomes insecure and mistrustful. Babies who are not securely attached to their mothers are less cooperative and more aggressive in their interactions. As they grow older, they become less competent and sympathetic with peers.

2. Independence or Shame (2-4 Years)

The most important thing for the child is learning to do things by himself.

• <u>The healthy child</u>: According to Erikson, selfcontrol and self-confidence begin to develop at this stage. Children can do more on their own. They also begin to feed and dress themselves. This is how the toddler strives for independence. The child must take more responsibility for his or her own feeding, toileting, and dressing. Parents must be reassuring yet avoid overprotection.



• <u>The unhealthy child</u>: If a parent is not positive in reinforcements, the child will feel shameful and will learn to doubt his or her abilities. Erikson believes that children who experience too much doubt at this stage will lack confidence in their abilities

3. Initiative or Guilt (4-6 years)

The most important thing for the child is to learn independence though play.

- <u>The healthy child</u>: (1) to imagine, broadening his skills through active play of all sorts, including fantasy (2) to get along with others (3) to lead as well as to follow. Playing and hero worshipping are an important form of initiative for children. Children in this stage are eager for responsibility. It is essential for adults to confirm that the child's initiative is accepted no matter how small it may be.
- <u>The unhealthy child</u>: If the child is not given a chance to be responsible and do things on their own, a sense of guilt may develop. The child may come to believe that what they want to do is always wrong. Made powerless by guilt, he is: (1) fearful (2) hangs on the

outsides of groups (3) continues to depend totally on adults and (4) is restricted both in the development of play skills and in imagination.

4. Success or Failing (6-12 Years)

The most important thing for the child is succeeding at school and forming friendships.

• <u>The healthy child</u>: Learns to master the more formal skills of life: (1) relating with peers according to rules (2) moving from free play to play that may be structured by rules and may demand formal teamwork, such as football and (3) mastering social studies, reading, maths. Homework is important, and

the need for self-discipline increases. The child is trusting, independent, full of initiative and learns to succeed. The child's relationship with peers in school and the neighbourhood become more and more important. <u>The unhealthy child</u>: However, the mistrusting child will doubt the future. The shame and guilt-filled child will experience defeat and inferiority.

5. Identity or Confusion about Self (12-18 years)

The most important thing for the teenager is to establish peer relationships and a sense of personal identity.

The healthy adolescent: The healthy development of earlier stages can now serve as a foundation for the search for an identity; remember the house with the many stories. The healthy adolescent will establish their own identities and see themselves as separate from their parents. During successful early adolescence, the teenager acquires self-certainty as opposed to self-consciousness and self-doubt. The young person experiments with different positive roles. He actually anticipates achievement, and achieves, rather than being "paralyzed" by feelings of inferiority. In later adolescence, clear sexual identity - manhood or womanhood - is established. The adolescent seeks leadership (someone to inspire him), and gradually develops a set of ideals that are socially desirable.



• <u>The unhealthy adolescent</u>: If the adolescent cannot make decisions and choices, (especially about work, sexual orientation, and life in general), they may have a hard time deciding "who they are." The young person experiments with different roles and might adopt a "negative identity" (such as delinquency). The young person easily becomes "paralyzed" by feelings of inferiority, which might lead to actual failure.

<u>Special note:</u> The adolescent, learns how to answer the question of "Who am I?" But even the best-adjusted adolescents experience some identity confusion: most boys and probably most girls experiment with minor delinquency, rebellion, self-doubts, etc.

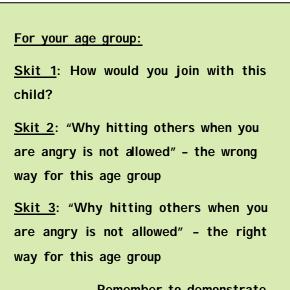
6. Intimacy or Isolation (Love) (Young Adult)

- <u>The healthy young adult</u>: For the first time, can experience true intimacy the sort of intimacy that makes possible good marriage or a genuine and enduring friendship.
- <u>The unhealthy young adult</u>: Failure to develop intimacy can lead to promiscuity (getting too close too quick and not sustaining it), or exclusion (rejecting relationships and those who have them)

≻ <u>Role-Play</u>

Facilitator explains that because we will mostly be working with children between the ages 3 and 18 yrs we will now focus in on those stages.

Facilitators ask the participants to break up into three groups, encouraging them to form groups with new people that they have not worked with before, and gives each group a 'stage'



Remember to demonstrate the behaviour of the child AND the counselor!! of 3-6yrs, 6-12yrs or 12-18yrs and the appropriate page in their workbooks.

The facilitator asks each group to prepare the following three <u>"One Minute" skits</u>:

Prepare a flip-chart with key instructions:

1 – Decide how you would join with this age child? (What questions would you ask them? How would you introduce yourself and/or explain the counselling process? etc... Remember to take their age into account)

2 & 3 - Develop quick skits where an adult is explaining to a child "Why hitting others when you are angry is not allowed!" One role play should show how it should be done taking into account the child's development stage; and the second should show how it

should not be done for that developmental stage.

Reminder to participants: Make sure that your three role plays demonstrates how the adult AND the child would behave in this situation.

After 15 – 20 minutes, facilitators ask the groups to come back and share their 'performances' with the group. Be careful to start with the youngest stage and then move upward. Ask participants who are not yet performing to forget their own 'up-coming' shows and concentrate on the current show.

After each group has shared, remember to give applause for the effort and compliment the group on elements well done. It should be evident to participants that one acts differently towards children depending on the age they are, one also explains things differently to children based on their ages. Facilitator can use the following check list to ensure that lay-counsellors understand the importance of the various developmental stages:

Working with 3 - 6 year olds

- Emphasis is on the sense of belonging.
- Volunteer should lower herself to the level of the child and explain that hitting is wrong and you may hurt the other person.
- Lay-counsellors' explanations should be simple.
- And the concept of not hitting should be taught with gentleness, remember the child may not know at this young age that it is wrong.
- If the child (maybe at the age of 5) does realise that hitting is wrong, the focus should be on doing unto other as you would have them do unto you.
- Remember this is the play age and the child will imitate the adult if the adult has the child's trust and worship.
- Be a good example, as the child is seeking heroes to imitate.

Working with 6-12 year olds

- During this stage the child seeks competence in social skills and industry, scholastic performance.
- The adult should emphasise on the fact that a good friend does not hit others.
- Tell the child that he can ask the adult if he should need help with a situation.
- The adult should aim at earning the child's trust, because hitting at this age, if not correctly handled can result in later aggressive behaviour.
- The adult should also place a lot of trust in the child that she is able to change the bad behaviour and be a good friend to others.
- The child's confidence should be encouraged that she can change.

Working with 12-18 years

- During this age, the child's sense of belonging to a certain peer group is very important and yet at the same time they are beginning to establish their individual identity.
- The adult should investigate why the hitting occurred.
- The adult should be careful not to judge, blame or condemn the child as bad.
- Adolescence is a fragile time period and adults should help the child to figure out who they want to be, what their future plans are and what they want to achieve.
- The action of hitting should be then placed into context helping the teenager to see that hitting is not in line with what he or she wants to achieve and who he /she wants to be.

6.2. Child Development and Counselling

We now understand a bit more about the different age groups and how to interact with them. Let's look at a case study together to help demonstrate how a child may develop when some of their needs are not being met.

Case Studies Facilitator reads the following case study (participants can follow along in their workbooks):

A Case study: Kialu's life story

Kialu was born when her mother was only 16 years old and unmarried. These were difficult times for the whole family. Kialu's mother dropped out of school and went to find work, leaving Kialu with her grandmother. Kialu's grandmother was not happy with the situation, since she still had her own school going children to look after. The grandmother was also working part time and so she could not always look after the new born child and Kialu had to go to other caregivers. Those caregivers changed often because Kialu was fretful as a baby, she cried a lot and was difficult to feed.

During Kialu's first two years she was often scolded and treated with impatience by the various caregivers and she became even more irritable and anxious. She also became clingy, frightened to explore the world and uncertain of her relationships.

At the age of 5 her mother got married and they moved to a home of their own, where Kialu could settle into a stable environment for the first time.

When Kialu started school at the age of six, she was still very anxious and unsure of herself. However she was fortunate enough to have very understanding, caring and creative teachers throughout her primary schooling.

Gradually Kialu started coming out of her shell. Although initially she suffered from a low self esteem, she showed intelligence and gained confidence as she proved to be competent in skills like writing and reading.

Kialu struggled to make friends, because she was quite shy and withdrawn, however because she was a good athlete many children wanted Kialu on their sporting teams. Slowly but surely she started forming a few temporary friendships.

Although Kialu entered secondary school with more self confidence she also had some setbacks. Kialu continued to do well in her school work especially maths and science and she received encouragements and support from her teachers, but her peer relationships were not easy. Kialu formed few lasting friendships and appeared unable to stay with one peer group or another.

When Kialu was 16 years old she became involved with an anti-social group that liked wild parties, drinking and criminal activities like smoking marijuana. Kialu's mother was very angry and unforgiving towards her daughter and Kialu's scholastic performance dropped because of the pressurised time at home.

Kialu became more and more with drawn, sullen and unhappy.

After reading the Case Study, share the following questions with all of the participants before asking them to break into groups

<u>GROUP 1</u>

- What was the most negative influence in Kialu's development?
- At what age did this happen?
- Why is the age an important factor?

GROUP 2

- What would you consider as the most positive influences on Kialu's development/growth?
- At what age did she receive these positive influences?
- How did these happenings influence her in a positive manner? (What happened to her?)

<u>GROUP 3</u>

- As a counsellor what aspects of her development will you take into consideration? Why?
- What will your aim be with counselling Kialu?

<u>GROUP 4</u>

- What do you think will happen in Kialu's next phase of development?
- Do you think that Kialu has a hopeful future?
- On what does it depend?

Facilitator asks participants to break into 4 groups and asks each group to answer one of the sets of questions - also in their workbooks. (Be careful! All the groups' questions appear in the workbook so make sure each group is clear that they only need to answer their set of questions)

Allow the group 15-20 minutes and then ask them to return to the bigger forum. Ask each group to feedback in order of the questions. *Facilitators can use the following possible answers as a guideline to facilitating the feedback session:*

<u>GROUP 1</u>

~

What was the most negative influence in Kialu's development?

- ✓ Unplanned pregnancy mother probably unhappy, anxious etc.
- ✓ Born out of wedlock cultural implications
- ✓ Inconsistency in care giving moved from one carer to another

At what age did this happen?

✓ 0 – 2 years

Why is the age an important factor?

If development is affected at a certain age, it will influence later development as well. The age can guide us as to how development may be affected later and what may be done to reduce the effects of the negative experiences.

<u>GROUP 2</u>

What would you consider as the most positive influences on Kialu's development/growth?

- ✓ Her mother got married and she settled into a stable environment
- \checkmark Caring, understanding and creative teachers in primary school

At what age did she receive these positive influences?

✓ 5 & 6 years

How did these happenings influence her in a positive manner? (What happened to her?)

- ✓ She became more confident and coming out of her shell
- ✓ She started making friends

<u>GROUP 3</u>

As a counsellor what aspects of her development will you take into consideration? Why?

 \checkmark Her experiences as a baby – these shaped who she became later

What will your aim be with counselling Kialu?

- Helping her understand her experiences and feelings
- ✓ Support her to decide what she wants to do for herself

<u>GROUP 4</u>

What do you think will happen in Kialu's next phase of development?

✓ Open- it is in Kialu hands to choose!

Do you think that Kialu has a hopeful future?

✓ Yes

On what does it depend?

- ✓ Support from caring adult(s), whether a counsellor, her parents, a teacher
- \checkmark What she decides to do for herself

After the groups have all presented their discussions, the facilitator reads the conclusion of the case study.

Conclusion of the Kialu's Story:

In the time that Kialu became severely depressed, her school teacher referred to a good student counsellor at the school. The counsellor helped Kialu over various sessions to make healthy decisions about her life that lead to Kialu eventually leaving the group. After that Kialu was helped by the counsellor to set some career goals for herself, which she seemed capable of achieving. Now in her final year of school Kialu is actively working towards her goals. Her academic work has improved and she has formed some healthy and encouraging friendships with girls with similar interests. Her relationship with her parents is still fragile but with small steps Kialu is working towards a better relationship with both her parents. Although her developmental path is unknown from now on, it is nonetheless hopeful in many aspects.

Conclusion

Facilitators conclude the session by reminding participants that we have learned about key developmental stages in child development and that when we get back home we may be faced with counselling situations with children of varying age groups. Until it becomes second nature to us it may be a good idea to consult the development stages before we begin a session with a child.

Key Points:

- Children develop in different stages and these stages influence what is important to them
- It is important to speak to children in a way appropriate for their developmental stage

7 CHILDREN'S RIGHTS AND COUNSELLING

Module Outline:

5.1 Children's Rights (45 minutes)

5.2 Children's Responsibilities (15 minutes)

5.3 Children's Rights and Counselling (1 hour 20 minutes)

Materials Needed:

- Flip Chart and Markers
- Children's Rights Annex 5 cut up and put in a cup (1 copy)
- Scissors and a cup
- Sweets

Learning Outcomes:

- Awareness that children have Rights and responsibilities.
- Knowledge that a child's Rghts are important and that they are needed for the child's protection and welfare.
- An understanding of how children's Rights and responsibilities are relevant to the counselling environment.

7.1. Children's Rights

The facilitator hosts an open discussion on Children's Rights using the following questions and suggested answers. To note, not all adults believe that children should have Rights and many get angry that children are abusing their Rights, but it is very important that lay-counsellors recognise that ALL children, regardless of their behaviour, have Rights and that they must be respected.

➢ What are Rights?

<u>Possible Answers</u>: Something the government guarantees a person for a basic quality of life, a law to protect a person.

> Why do children need to have Rights?

<u>Possible Answers</u>: Children's Rights have been formalised to ensure that children are given what they need to grow up as healthy



(2 hours 20 minutes)

individuals. Children need special protection because they are among the most vulnerable members of society. We need common guidelines about how children should and should not be treated to ensure that they are safe (and that each person isn't deciding for themselves what is OK for children!).

In the following situations do the children still have Rights - A 14-year-old who rapes a 3year-old? A 12-year-old who is hitting his classmates? A 16-year-old who steals a car?

<u>Possible Answers</u>: YES!!! Children have Rights even if they behave badly or abuse other people's Rights. That doesn't mean that they will not face the consequences of their actions – but even if a child is punished or imprisoned they still have their Rights and need to be protected.

> What is the difference between a "Right" and doing what you think is right for a child?

<u>Possible Answers</u>: A Right is something in the law – it is printed in black and white in the Africa Declaration on Children's Rights and the constitution of your country. There are many more things that we, as parents, carers and lay-counsellors, believe are in the best interest of the child – but they may or may not be a law. (For example: you might think it is best if a child spends at least 20 minutes a day talking with her mother, but the law does not protect this as a Right).

Facilitator explains that we will now look at the specific Children's Rights as outlined in the United Nations Convention of the Rights of a Child (which are also printed in the participant's workbooks) – take a few minutes for the participants to read the list.

A child is considered someone less than 18 years of age.

- The Right to life
- The Right to a name
- The Right to a nationality
- The Right to prevention of kidnapping
- The Right to protection of sexual exploitation
- The Right to protection of a child without a family
- The Right to protection from work that threatens a child's health, education or development
- The Right to protection from abuse and neglect
- The Right to health and medical care
- The Right to an education
- The Right to protection from torture
- The Right to special care for children who are disabled
- The Right to access to appropriate information
- The Right to a standard of living adequate for full development
- The Right to freedom of expression
- Protection to Refugee children
- The Right to protection from all forms of maltreatment by caregivers
- The Right to enjoy ones own culture
- Protection from economic exploitation
- Protection from drugs
- The Right to leave any country or enter one's own for the maintenance of the childparent relationship

- The Right to protection from slander
- Freedom of thought, conscience and religion
- The Right to play
- The Right to an obligation to give treatment to child victims
- The Right to assurance that no child under 15years will be recruited into armed forces
- The Right to assurance that adoption shall only be carried out in the best interests of the child
- The Right to freedom of association
- The Right to administration of justice that promotes the child's sense of dignity and worth
- The Right to encouragement of the mass media to disseminate information of social and cultural benefit to children
- The Right to assurance that the state shall provide assistance to parents in childraising

> <u>Activity</u>

<u>Preparation</u>: The facilitators should print out Annex 5 and cut out each Right, fold it up and put it in a cup (or other container).

Go around the group and have each participant pick one Right out of the container. Give them all a minute or two to think about why that Right is important – suggest that they write down a point or two so that they can relax and listen to the other until it is their turn. Each participant should take a turn to read out their Right and explain why they think it is important.

Facilitator demonstrates the following example:

<u>*Right*</u>: The Right to a nationality.

<u>Why it is important</u>: So a child can have an identity, so the child can enrol in school, so the child can receive grants, etc. It is also important to have citizenship as an adult in order to get a job, go to university, vote, travel, etc.

Ask for any additional comments from the audience (but be careful to keep the pace going - don't let this exercise take longer than 30 min). Be sure to add to or correct what they said so that the group has a good understanding.

7.2. Children's Responsibilities

Facilitator explains to the participants that although children have Rights and that nothing can take away these Rights, it is important to teach and expect responsible behaviour from the children themselves:

- So that they appreciate their own Rights
- So that they behave responsibly and respect other people's Rights as children and later in life, as adults

Facilitator explains that Children's Responsibilities correlate with Children's Rights. For

example if a child has the Right to practice his religion, he has the responsibility to allow other people to practice theirs.

Activity - Racing Quiz

Facilitator then asks the participants to form groups of three, and ask each group to complete the worksheet on Children's Rights and Responsibilities in their workbooks, explaining that the left hand column has a list of Children's Rights and the Right hand column has a list of corresponding responsibilities, but that the order has been mixed up. Their task is to draw lines linking the Right to the Responsibility.

Try to get the groups competing with each other – where the fastest group with the most correct answers gets a prize. *Help the groups mark their worksheets using the correct version below.*

| <u>Column A:</u> | <u>Column B:</u> |
|--|--|
| <u>Children have the Right to:</u> | Children are responsible to: |
| The Right to life | Not endanger the life of other people |
| The Right to an education | Not take away someone else's Right to an education |
| The Right to prevention of kidnapping | Not kidnap someone |
| The Right to protection from sexual exploitation | Not sexually exploit someone |
| The Right to health and medical care | Allow other people medical care |
| The Right to enjoy one's own culture | Allow other people to enjoy their culture |
| Protection from drugs | Not give someone else drugs |
| The Right to freedom of expression | Allow other people to express themselves |
| The Right to protection from torture | Not torture other people |
| The Right to protection from abuse and neglect | Not abuse or neglect those in your care |

7.3. Children's Rights and Counselling

Facilitator asks participants why it is important for them to be aware of Children's Rights in the context of being a lay-counsellor.

Possible answers:

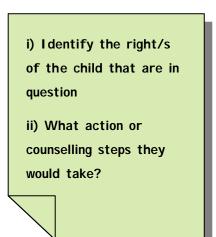
- So that they can intervene in the correct manner when a child's Rights have been abused.
- To help children to know their Rights, so that children can make informed decisions about situations in their lives.
- To coach children on Rights so that they don't abuse anyone else's Rights and develop responsible behaviours.
- Lay-counsellors should be aware of their own conduct and behaviour toward the

child, so that they will not do or say anything that violates a child's Rights.

Case Studies on Rights

Break participants into five groups and give each group one of the following scenarios (found in their workbooks). Give the groups 15 minutes to consider their scenario and the two questions and prepare to report back to the group. It is important that the facilitator consider each group's feedback and check the following:

- Did the group correctly recognise the specific Right present in the situation?
- Is the child's best interest most important in the way the situation is handled?
- Is the lay-counsellor making informed decisions with regards to the child's situation?



- Is the lay-counsellor speaking to their supervisor and/or making use of the resources like the Child Protection Unit, the Police and the local social worker?
- Is the child safe in the way that the lay-counsellor has handled the situation?

The following framework may help the facilitator to give feedback:

| <u>Scenarios</u> | Possible Solution |
|--|---|
| Scenario 1
Simpiwe is 13-years-old. She lives with her
grandmother who is 78-years-old and very
frail; she cannot work anymore. Simpiwe
also has an older brother and two younger
sisters. Simpiwe's uncle is 33 and recently
moved in with them to provide for them
financially. He is a taxi driver, but often
comes home drunk and then he beats
Simpiwe and her sisters. Simpiwe's older
brother is scared of his uncle and does not
protect his sister. Simpiwe has been missing
a lot of school and her grades are dropping.
Simpiwe has been missing Kidz Club a lot
lately. What do you, as the lay-counsellor,
advise? | The Right to protection from abuse and neglect The Right to protection from all forms of maltreatment by caregivers 1. The lay-counsellor should take into account the child's best interest. 2. The lay-counsellor should explain to Simpiwe that she has the Right to be protected from abuse. 3. The lay-counsellor they might listen to her story, show empathy (using counselling skills) and let her know that they have to report to their Supervisor, who may report to Child Protection Unit or Social Worker. |
| Scenario 2
Mr. Ndluvo is the principal of Tshwane High
School, he has been a teacher for more than
20 years, but he has a terrible temper and
can get quite aggressive when he is angry.
One Tuesday Thabo enters the classroom
where you meet him for counselling after | The Right to protection from abuse and neglect Action must be taken to protect Thabo and other children. Due to the sensitivity of the situation you may choose to talk to your Supervisor, who may talk to Guidance Teacher or someone at the school. |

| school. When you ask Thabo to sit down so
that you can talk, he burst out in tears,
saying he cannot sit down. After careful and
gentle prompting from the lay-counsellor, as
to why Thabo cannot sit, it becomes clear
that he was talking while the principal was
talking during the school opening the
previous day, and was sharply rebuked and
severely beaten by the principal because of
his misbehaviour. What is your responsibility
as a lay-counsellor? | |
|--|---|
| Scenario 4
One day Sudakhaar comes to your Kidz
Club. You sing songs and say prayers and
at the end of the day give the children a
bologna sandwich. Sudakhaar sits off in the
corner and will not accept the sandwich.
You notice he goes off behind the building a
couple of times during the Saturday Kidz
Club. One of the mamas yells at Sudakhaar
and tells him he must sing and stay in the
building. She believes very deeply in her
Christian faith, but you want to have the Kidz
Club open to Muslim children. What do you
do? | Freedom of thought, conscience and religion First and foremost volunteers should be tolerant of diverse religions and cultural differences. The volunteers and children in the Kidz Club will benefit from workshops on cultural diversity or cultural days, where all can learn from each other. It is very important to know that children have the Right to practice their religion. The child in this scenario is Muslim and it is expected from him to pray at certain set times of the day. Instead of discouraging the child by labelling him as a trouble maker, the volunteers together with the lay-counsellor should come up with creative ways to accommodate the child, so that the child is free to practice his religion. |
| Scenario 5
Thandeka is 13 years old, her mother died
when she was still young. She lives with her
grandmother who is old and sickly and her 3
other siblings. Because Thandeka is the
eldest, she is expected by her grandmother
to provide an income for the family of five, to
provide a cooked meal for the family and to
clean the house. Thandeka's dad is seldom
at home and Thandeka does not know the
mother/s of her thee siblings. Thandeka
works in the local shop most days of the
week. Thandeka tries to go to school once a
week, but she misses a lot of work and feels
discouraged to continue to go to school and
then feeling like a fool because she does not
know what is going on in class. She now
rather stays at home, but she misses going
to school and playing with her friends. The
Guidance Teacher asked the lay-counsellor
to investigate the situation. | The Right to protection from work that threatens a child's health, education or development The Right to an education 1. The lay-counsellor should consult with the social workers in order to investigate the possibility of grants. 2. Non-governmental organisations, charity organisations and churches should be approached for the financial support of this family so that Thandeka can go to school. 3. A meeting between the teacher, the grandmother and the father and the lay-counsellor should be arranged to address the schooling and the plans for Thandeka's future, and her career options. |

<u>Debrief</u> on what participants have learned from this exercise. One of the elements that may come out of the debriefing is a concern about what to do if a child's Rights have

been abused? The facilitator may make the following points:

- Whilst each of the Children's Rights is important, some violations of Children's Rights are more serious and require a stronger and more urgent response than others. For example, rape or starvation requires a more urgent response than a child who is battling to get an id book or is being dragged to church every Sunday against their will.
- Each organization working with children should have a team workshop where they work through children's Rights and decide for each Right what action/s they will take and with what sense of urgency. The actions may range from working with the child's family, to referrals to calling in a social worker or the police! Some situations will need to be dealt with immediately and others can be addressed over a number of weeks.
- Each organization should also think through how to make sure they are not breaking any of their children's Rights – do they have systems in place that protect children from being hit or abused by project staff? Such as a child protection policy, a way for children to report abuse by project staff and lay-counsellors, a declaration of behaviour signed by staff and lay-counsellors.

Summary:

The facilitator asks why Children's Rights are important in the counselling environment.

Possible Answers:

- So that the lay-counsellor can intervene in the correct manner when a child's Rights have been abused.
- To help children to know their Rights, so that children can make informed decisions about situations in their lives.
- To coach children on Rights so that they don't abuse anyone else's Rights and develop responsible behaviours.
- Lay-counsellors should be aware of their own conduct and behaviour toward the child, so that they will not do or say anything that violates a child's Rights.

Key Points:

- *Lay*-counsellors need to be able to intervene in the correct manner when a child's Rights have been abused
- Children can never lose their Rights
- Lay-counsellors should be aware of their own conduct and behaviour toward the child, so that they will not do or say anything that violates a child's Rights.

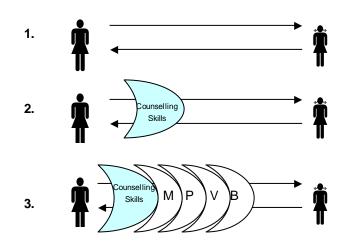
8 WHAT MAKES A GOOD LAY-COUNSELLOR

(1 hour 40 minutes) Module Outline: Introduction 8.1 Emotions (30 minutes) 8.2 Personality and Character (30 minutes) 8.3 My Values and Beliefs (25 minutes) 8.4 Personal Reflection (15 minutes) **Materials Needed:** Flip Chart and markers • Paper, sellotape and pens Learning Outcomes: Ability to identify their own emotions and understand their potential impact on a counselling situation. Understand more about their own character and be able to identify which traits will be a strength and weakness in a counselling situation.

• Understand more about their own beliefs and values and be able to identify which will be a strength and weakness in a counselling situation.

Introduction (5 min)

Facilitator explains that now we all have a basket of counselling skills that are improving by the day! But are counselling skills the only thing that makes a good lay-counsellor? We, as individuals, bring ourselves into the counselling room – our personalities, our characters, our values and beliefs and our attitudes! The facilitator draws the following diagram on the flip chart to demonstrate the point.



<u>Comment</u>; An adult and a child in a counselling relationship.

<u>Comment</u>: Counseling Skills help the adult to build a trusting relationship with the child.

<u>Comment</u>: But the counselor also brings their moods, personality, values and beliefs into the room, which can be helpful or hurtful. In order for us to develop as good lay-counsellors we need to i) develop self-awareness and ii) work on building good behaviours.

8.1. Emotions

Facilitator explains that we may be lay-counsellors but we are also people who are in relationships of our own, have family and friends of our own, workloads and various stresses and pressures! Using the following diagrams (in the participant's workbook) ask participants to circle how they are feeling now, and how were they feeling last night.



Source: Unknown

Facilitator asks the following questions:

Is everyone feeling happy today? Did you feel the same way yesterday as you do today? Does everyone experience only one emotion at a time? Why is an awareness of our emotions important especially during counselling?

Possible Answers:

We need to be aware of our emotions so that we can be more careful about our behaviour otherwise we might react in hurtful ways towards others.

You cannot always control how you feel, but you can ALWAYS choose how you act!

We need to be cautious not to project our feelings on the children that we counsel.

We cannot help children to identify what they feel, if we cannot identify what we as laycounsellor are feeling.

Is it ok to have a bad day or to be grumpy?

Possible Answers:

Yes, we are only human and we all will have a bad day. But it is not OK to behave badly and use your emotions as an excuse. People use various ways to cope with emotions, but it is crucial that you do not take it out on other people, especially the children that you will be counselling.

How do you cope with a bad day?

Possible Answers:

Some people pray, others go to a quiet place and have some time out, others exercise, etc.

But if you cannot have time out, it is still important that you validate what you feel and decide to make some time in the day when you can deal with those emotions.

Ask each person to complete the <u>"Emotions" section in their workbooks</u>. Reassure participants that this is a personal worksheet for them – no one else will see it. Allow 5 minutes.

8.2. Personality and Character

> <u>Activity</u>:

Ask participants to fill out the section in their workbook called 'how I see myself" writing down key words that they think describe their own personality or character. Encourage them to write both the good and 'bad' things. When they are finished they should fold up the paper and put it in their pocket or book.

Then tape a blank page to each participant's back. All participants should then mingle around and write personality or character traits that they have observed about the other participants on their backs. Each person should come up with at least one comment for every other participant. (Facilitators should also add comments on people backs.

\*\*\* Make sure that even the shy and quiet ones have something written on their back; and make sure that even 'negative' comments are given in a respectful and loving way.

Now ask participants to return to their places and read the paper from their back. Are they surprised by any of the comments? How do they compare to their own list? Why do they think others see them differently to how they see themselves? Are we how we perceive ourselves or are we really how others perceive us?

Based on everything we now know about counselling children, what characteristics or personality traits do you think will help create a trusting and helping relationship?

Possible answers: Caring, patience, empathy

> What characteristics do you think will hinder a counselling relationship?

Possible answers: Impatience, judging, stern, etc

Is it possible to grow or develop characteristics that are more positive for the counselling relationship?

<u>Possible answers:</u> Yes, if we can first build our awareness and then choose our behaviour we will start to change our characteristics – "we are what we do, not what we think"

Workbook: And ask each person to fill in the section on "how other people see me" and "characteristic that I would like to work on" in their worksheets. Allow 5 minutes.

8.3. My Values and Beliefs

<u>Exercise</u>: Make two signs "True" and "False" and stick them up on the walls on either side of an open space. Have all the participants stand in the middle of this area. Explain that you are going to read out a series of statements and they must quickly move to the true or false side of the room. Allow one or two comments from each side as to why they believe a statement is true or false (take note of people's body language, tone, choice of words, etc. for the feedback and debriefing session).

To note, the purpose of this activities is to demonstrate to participants that they all have strong values and beliefs, that they will not always have the same beliefs and that, importantly – when we believe in something strongly it is very difficult to stay neutral. In order to make this exercise work well it is necessary to let the participants get a little hot headed! If the questions below are not controversial enough you should change them.

- 1. Children should be raised by Christian principles and be taken to church on Sundays.
- 2. Women who are HIV+ should be discouraged from having children.
- 3. A 16-yr-old boy who has sex with his 15-year-old girlfriend should be sent to jail.
- 4. The government should provide housing for anyone who is poor.
- 5. HIV+ children should be allowed to play contact sports, like boxing and soccer, with other children.
- 6. We should give money to beggars and street children.
- 7. If a person is HIV+ and has unprotected sex with out revealing their status to their partner, they should be charged with attempted murder.
- 8. All rapes should be reported to the police.
- 9. Children should always obey their parents.

<u>Debrief</u>: Now have everyone return to the middle position. Lead a discussion:

- Who is feeling emotional? Did it make you angry to see people standing on the other side and listening to their arguments?
- Did you see any body language, tone of voice, etc. that let you know exactly what the other thought? What did your body language communicate?
- Did all participants have the same beliefs and values? Are you certain your beliefs are correct? Do you believe other's beliefs are wrong?
- "Now imagine that I am the child who has just built up the courage to tell you that I am sleeping with my boyfriend, that I am begging on the streets, that I don't believe in god, that I am pregnant and HIV+...".
- How will imposing your beliefs on a child affect their decision making? Are you certain that if a child acts according to your beliefs that things will go well? Are you certain your beliefs are best for the child?
- Will you be able to counsel a child with different beliefs? What will you do or say if a child makes a decision contrary to your belief system?

The point is that we need to be guided by the law, children's Rights and common sense. The rest of our biases should be left at the door of the counselling room! Facilitator should end this discussion emphasizing that lay-counsellors do not give children advice because **the child needs to learn how to make decisions and form his own beliefs.** It is also for the protection of the lay-counsellor as he can advise a child to do something which has bad results.

Workbook: And ask each person to fill in the section on "My Beliefs and Values" in their worksheets. Allow 5 minutes.

8.4. Personal Reflection

Facilitators remind participants that we have covered some ground on emotions, personality and beliefs. Now ask the participants to complete their private reflection worksheet.

Conclusion

Just like children can develop and grow so can adults! The more aware we become of who we are and how we feel the better we will be able to decide who we want to be and how we choose to behave. Encourage participants to continue their self discovery and always strive to improve as people, and as counsellors.

Key Points:

- It is important to know yourself so that you can help other people
- It is normal and ok to have emotions, but it is not ok to take them out on other people
- Keep in mind your strengths and weaknesses when you counsel children

9 SUMMARY AND REVISION SESSION

The facilitator explains that the workshop is coming to an end and reviews what we have covered by asking the following questions:

> What is counselling?

<u>Possible Answers</u>: Counselling is a way for adults to help children identify their emotions and come up with solutions for their problems.

> What is it not?

<u>Possible Answers</u>: Counselling is not judging, advising, getting to close to the child, etc.

> What are the different processes of counselling?

<u>Possible Answers</u>: Joining, exploring to understand, helping the child to have information and identify possible solutions, evaluate the solutions, choosing and planning, referring if necessary.

What counselling skills have we learned?

<u>Possible Answers</u>: Listening, asking questions, checking our understanding, summarizing, etc.

> Why is child development important in counselling?

<u>Possible Answers</u>: To talk to children in a way that is age-appropriate, understand where a child comes from, understand what is important to a child during particular stages, etc.

> Why are children's Rights important in counselling?

<u>Possible Answers</u>: So that the lay-counsellor can protect the child when his Rights are violated, so the lay-counsellor doesn't violate the child's Rights.

> What are the different elements of a person that can affect their ability as a counsellor?

<u>Possible Answers</u>: Emotion, personality, values and beliefs.

| The 7 BE- ATTITUDES | SKILLS |
|--|--|
| Be self confident - one should not doubt oneself when counselling | Be observant , learn how to "read" body language of the child |
| Be flexible: One must accept the client's views (respect children) | Listen carefully (attentive listening) |
| Be open with facts | Listen actively: Probing, exploring and questioning |
| Be empathetic: Feel with the child (Do not feel sorry for the child) | Empathic responding : Summarizing and Paraphrasing |

> The facilitator shares some final advice:

| Be approachable to the child, lower yourself to the level of the child | Reflective listening and understanding |
|---|--|
| Be trustworthy, honest and assure confidentiality | Repetition with the purpose of understanding what the child is saying |
| Be genuinely interested in the child's life | Resourceful : Knowing when to find what extra resources where and how |

Final closure

- Complete post-training questionnaire (25 minutes)
- Complete feedback forms (40 minutes)
- Participant Registration Form (30 minutes)
- Hand out certificates (10 minutes)
- Remember to thank participants for their time and concentration
- Wish them luck in their on-going efforts and mention on-going support mechanisms that may be available to you
- Take care of any final house-keeping

10 ANNEX

Annex 1: Daily Emotions Exercises

<u>Note to Facilitator</u>: It is very important for participants to 'get in touch' with their own emotions; as well as realize that children do have feelings and it is healthy and normal for them to express them. The following exercises were designed to help participants become more comfortable with acknowledging and expressing their feelings. These exercises are best done at the start of each day of class.

<u>Draw a picture of how you feel</u>: Facilitator will give each participant a piece of A4 paper and puts a box of crayons on the table for a group of participants to share. Ask each participant to choose a color which describes their feelings and to draw a picture symbolizing the way that they feel using that color. (They can draw themselves or any object which describes how they feel.) Give the participants 10 minutes and then ask the participants to share their drawings with the class while the facilitator writes their feelings on a page of the flip chart.

<u>Emotions Catch</u>: Facilitator asks the participants to form a circle in the room (preferably away from the tables where they sit during the training). Facilitator explains that they will throw the ball to each other and when they catch the ball they must describe in 10 seconds or less whatever emotions they are feeling. Facilitator should encourage the participants to express as many feeling as they wish and afterward have a discussion about how both children and adults may feel many emotions at once.

<u>Building Story</u>: Facilitator starts a story by introducing a character and saying one sentence about them. For example, "There was a young girl named Prudence. She lives in Soweto with her mother." Then going around in the group each participant adds a sentence to the story but must include the character's feelings about whatever they add. For example, "One day Prudence was bit by a spider in her room and she felt sad." Go around the room until the story is finished.

Annex 2: "What is Counselling?" cut outs

Instructions: Print the following out at least three times, cut out the separate sentences and keep each batch together in a set

| Establishing relationships with children that are helpful |
|---|
| Helping children tell their story |
| Listening to children with all your attention |
| Giving children correct and appropriate information |
| Helping children make
informed decisions |
| Helping children to |

recognise and build on their strengths

Judging children

Helping children develop a positive attitude towards life

Having conversations with a purpose

Interrogating children

Blaming children

Making promises you cannot keep

Making decisions for children

Preaching or lecturing to children

Arguing with children

Imposing your own beliefs on children

Giving advice

Annex 3: Sibongile's Story Part 2 hand-outs

Part 2 – Sibongile's story: Group 1

Sibongile's mother has passed away. He is having a hard time coping with the loss. He has 4 older siblings and will be provided for, but is scared and embarrassed that people might find out his mother had AIDS.

Part 2 – Sibongile's story: Group 2

Sibongile's uncle has moved into their home. His uncle is an alcoholic, who comes home drunk every night. He beats Sibongile and yells at him, saying that it is his fault they don't have more money. He has threatened to make Sibongile work begging in the streets on weekends to support his addiction.

Part 2 – Sibongile's story: Group 3

Sibongile's school uniforms were stolen from the drying rack outside their home. He is embarrassed to go to school without his uniform as the children laugh at his clothing, but he knows his family cannot afford to buy him another uniform. He considers quitting school.

Part 2 – Sibongile's story: Group 4

Sibongile feels embarrassed that he isn't growing as fast as his peers. He was once the tallest boy in his class and now he is one of the shortest. The girls don't notice him the way they notice the other boys. He feels awkward as his voice has started cracking and he is starting to notice a body odour. He isn't sure how to handle these changes. Annex 4: Practice Scenarios

Print one version, cut out different scenarios and fold up the pieces.

You are a 7-year-old child whose mother just died of AIDS.

You are a 16-year-old girl who just found out you are pregnant.

You are a 10-year-old child who is being teased at school because you don't have a uniform.

You are a 9-year-old child who only eats once per day.

You are a 6-year-old child who is being beaten at home.

You are a 12-year-old child and have to work and not attend school.

You are an 8-year-old child and your father has just left your mother.

You are a 14-year-old child and you are the head of your household.

You are a 13-year-old child and you need a school uniform and money for fees.

You are an 11-year-old child and you didn't make the soccer team when all your friends did. You are a 15-year-old girl who has been raped by a stranger.

You are a 17-year-old child and found out you are HIV+.

You are a 7-year-old child and your favourite toy has been stolen.

You are an 8-year-old child and your uncle has moved in and forced you to watch pornography.

You are a 10-year-old child and your relatives have taken all the furniture since your parents died.

You are an 11-year-old child and your teacher calls you bad words and says you are "lazy."

You are a 9-year-old child and your family forgot your birthday.

You are a 6-year-old child and a neighbour your age just died of AIDS.

You are a 12-year-old child and your friends want you to sniff glue with them.

You are a 13-year-old child and you stole money to buy food for your family.

Annex 5: Children's Rights Cut-outs

Instructions: Print one copy and cut out each Right separately, Fold them up and put them in a bottle, box or any container. (Note: you will need prestick for this game)

The Right to life

The Right to a name

The Right to a nationality

The Right to prevention of kidnapping

The Right to protection of sexual exploitation

The Right to protection of a child without a family

The Right to protection from work that threatens a child's health, education or development

The Right to protection from abuse and neglect

The Right to health and medical care

The Right to an education

The Right to protection from torture

The Right to special care for children who are disabled

The Right to access to appropriate information

The Right to a standard of living adequate for full development

The Right to freedom of expression

Protection from drugs

Protection to Refugee children

The Right to protection from all forms of maltreatment by caregivers

The Right to enjoy ones own culture

Protection from economic exploitation

The Right to leave any country or enter one's own for the maintenance of the child-parent relationship

The Right to protection from slander

Freedom of thought, conscience and religion

The Right to play

The Right to an obligation to give treatment to child victims

The Right to assurance that no child under 15 years will be recruited into armed forces

The Right to assurance that adoption shall only be carried out in the best interests of the child

The Right to freedom of association

The Right to administration of justice that promotes the child's sense of dignity and worth

The Right to encouragement of the mass media to disseminate information of social and cultural benefit to children

The Right to assurance that the state shall provide assistance to parents in child-raising

Annex 6: Additional Reading on Child Development (for facilitators use only)

Reading 1:

(Source: REPSSI REFA training)

| Approximate Age 2 to 3 years | | |
|---|--|--|
| What children do | What children need | Important PSS needs |
| -Enjoy learning new skills -Learn language rapidly -Gain control of hands and fingers Are easily frustrated -Act more independent, but are sill dependent -Act out familiar scenes | -In addition to the above,
provide opportunities to: -make choices -engage in dramatic play -Sing favourite songs -Work simple puzzles | In addition to the above -model behaviour that communicates confidence
and optimism -give praise for achievement of tasks such as
toilet training, calming self, talking or making
something -encourage the child to try things and do things
with minimal adult help. - prepare the child for unpleasant or adverse
situations (gradually if possible) by talking about
them, reading books, play acting, etc. -change and modify the mix of freedom and
safety, explanations and discipline as the child's
reactions suggest. |
| Approximate Age 3 to 5 years
What children do | What children need | Important PSS needs |
| -Have a longer attention span -Act silly, boisterous -Talk a lot, ask many
questions -want real adult things -weep art projects -Test physical skills and
courage caution -Reveal feeling in dramatic
play -Like to play with friends, do
not like to lose -share and turns sometimes | In addition to the above:
-Opportunities to develop fine
motor skills
-Encouragement of language
through talking, reading,
singing
-Activities which will develop a
positive sense of mastery
-Opportunities to learn
cooperation
-Experimentation with pre-
writing and pre-reading skills
-Hands on exploration for
learning through action
-opportunities for taking
responsibility and making
choices. | -Child learns about initiative and is busy, busy, busy -begins to understand symbols and asks endless questions -find's it difficult to separate fantasy from reality -Have a longer attention span -Act silly, boisterous -Talk a lot, ask many questions -Want real adult things -Keep art objects -Test physical strength and courage with, caution -Reveal feelings in a dramatic way -Like to play with friends and do not like to lose share and take turns sometimes. |
| | | |
| Approximate Age 6 to 8 years | | |

| -Grow curious about people and
how the world works
-show an increasing interest in | In addition to the above,
-support in acquiring additional
motor, language, thinking skills | In addition to the above,
-provide unconditional love
-express love verbally |
|--|---|---|
| numbers, letters, reading and writing | -Additional opportunity to develop independence | -Encourage a sense of the child's ability to achieve even against difficult situations |
| -Become more and more
interested in final products | -Opportunities for a wide variety of skills | -model flexibility when responding to an adverse situation e.g. seek help instead of |
| -gain more confidence in
physical skills
-use words to express feelings | -Support for further development
of language through talking,
reading and singing | continuing alone in a very difficult situation,
show empathy instead of continuing with
anger or fear, share feelings with a friend |
| and to cope | -Activities which will further | instead of continuing to suffer alone. |
| -like grown up activities
-Become more outgoing, play | develop a positive sense of mastery | Model resilience behaviours when facing
such challenges such as interpersonal
problems or conflict. |
| cooperatively | -opportunities to learn
cooperation, helping and team
work | -
-model courage, confidence, optimism, and
self-esteem |
| | -Hands on manipulation of
objects to support learning | |
| | -Opportunities for taking
responsibility and making
choices | |
| | -Support in the development of
self control and persistenc e in
completing tasks | |
| | -Motivation and reinforcement for academic achievement | |
| | -opportunities to practice
questioning and observing | |
| | -Opportunities to music, accomplish art, dance | |
| | -Attend basic education | |

Approximate Age 9 to 11 years

| What children do | What children need | Important PSS needs |
|---|--|---|
| -child learns about industry and
is actively engaged in
mastering life-skills particularly
in school work -desires to be successful and
have a positive self image as an
achiever -close friends and acceptance
by peers becomes important -sensitive to his/her limitations
or abilities -sensitive to comments that | Clarification on basic rules and expectations opportunities for the child to practice dealing with problems and adversities through exposure to manageable adversities -autonomy with balanced availability rather than imposition | -encourage the child to accept responsibility
for the consequences of his or her behaviour - encourage open communication and
negotiation -help to foster confidence in the child so that
he is confident about his/her abilities to solve
problems -role models become very important and
significant for the child -skills in relating with others -help the child to realize and invest in trusting
relationships and tap on them when there is |

| express inability usually | | need. |
|-------------------------------------|------------------------------------|---|
| resulting in insecurity, self doubt | | need. |
| • | | |
| etc | | |
| | | |
| Approximate Age 12 to 18 years | | |
| What children do | What children need | Important PSS needs |
| -Rapid spurt of growth | -Keep open communication | - create opportunities for self expressions |
| -The child strives to develop self | channels | -allow the child to participate in important |
| identity and sameness with | -Encourage the child to speak | family and community processes such as |
| peers | out their mind | funerals, rituals, festivals etc |
| peers | | |
| -they can reason and explain | -Set boundaries in consultations | -provide information honestly and help the |
| their feelings but are generally | with the child | child to consider options before coming up |
| very emotional | -Give the child the opportunity to | with decisions |
| -Is preoccupied with | express feelings such as anger, | -share about your own childhood experiences |
| appearance, beliefs and values | sadness, guilt | related to what you have learnt about life and |
| appearance, beners and values | Sauriess, guit | growing up and could be important for the |
| -Begins to notice peers of the | -refer the child where necessary | child |
| opposite sex | for counselling e.g. social | Child |
| -normally they do not want to do | worker, teacher, volunteer lay- | -allow for mistakes and help the child to learn |
| as they are told | counsellor, health worker | from them and other life experiences |
| as they are told | | -encourage participation in recreational |
| -want to be independent | | activities and social clubs |
| although still dependent | | activities and social clubs |
| If a shild doop not successfully | | -give honest feedback about friends and let |
| -If a child does not successfully | | the child make the final decision |
| negotiate this stage there is | | be firm about right and urang and received |
| confusion around identity, | | -be firm about right and wrong and negotiate |
| religion, and sexuality | | time out/punishment |
| | | -allow the child to dream, set goals, about |
| | | their future and provide the necessary |
| | | support. |
| | | |

READING 2:

Source: http://en.wikipedia.org/wiki/Erikson

- 1 Infancy (Birth-12 Months)
- 2 Younger Years (1-2 Years)
- <u>3 Early Childhood (3-5 Years)</u>
- <u>4 Middle Childhood (6 years-Puberty)</u>
- <u>5 Adolescence (12-18 Years)</u>
- <u>6 Early Adulthood (20s to early 40s)</u>
- <u>7 Middle Adulthood (Early 40s-60 Years)</u>
- <u>8 Later Adulthood (60 years-and up)</u>

Infancy (Birth-12 Months)

- Psychosocial Crisis: Trust vs. Mistrust
- Main question asked: "Is my world predictable and supportive?"
- Central Task: Receiving care

- Positive Outcome: Trust in people and the environment
- Ego Quality: Hope
- Definition: Enduring belief that one can attain one's deep and essential wishes
- Developmental Task: Social attachment; Maturation of sensory, perceptual, and motor functions; Primitive causality.

Younger Years (1-2 Years)

- Psychosocial Crisis: Autonomy vs. Shame & doubt
- Main question asked: "Can I do it by myself? Or will I always need assistance" This question becomes important with the child and toilet training and how the parents react to the child's newfound independence
- Central Task: Imitation
- Positive Outcome: Pride in self; Assertion of will in the face of danger
- Ego Quality: Will
- Definition: Determination to exercise free choice and self-control
- Developmental Task: Locomotion; Fantasy play; Language development; Self-control

Early Childhood (3-5 Years)

- Psychosocial Crisis: Initiative vs. Guilt
- Main question asked: "Am I good or am I bad?"
- Central Task: Identification
- Positive Outcome: Able to initiate activities and enjoy learning
- Ego Quality: Purpose
- Definition: Courage to imagine and pursue valued goals
- Developmental Task: Sex-role identification; Early moral development; Self-esteem; Group play; Egocentrism

Middle Childhood (6 years-Puberty)

- Psychosocial Crisis: Industry vs. Inferiority
- Main question asked: "Am I successful at what I do or am I worthless?" How a child does at school becomes important in development
- Central Task: Education
- Positive Outcome: Acquire skills for and develop competence in work; Enjoy achievement
- Ego Quality: Competence
- Definition: Free exercise of skill and intelligence in completion of tasks
- Developmental Task: Friendship; Skill learning; Self-evaluation; Team play things.

Adolescence (12-18 Years)

- Psychosocial Crisis: Identity vs. Role Confusion
- Main question asked: "Who am I? Where am I going in life?" An identity crisis generally happens at this stage because of the changes in an individual. Those changes are physical and cognitive
- Central Task: Peer group
- Positive Outcome: A strong group identity; Ready to plan for the future
- Ego Quality: Loyalty
- Definition: Ability to freely pledge and sustain loyalty to others
- Developmental Task: Physical maturation; Emotional development; Membership in peer group; Sexual relationships

Early Adulthood (20s to early 40s)

- Psychosocial Crisis: Intimacy vs. Isolation
- Central Task: Caregiving
- Positive Outcome: Form close relationships and share with others
- Ego Quality: Love
- Definition: Capacity for mutuality that transcends childhood dependency
- Developmental Task: Stable relationships; Child rearing; Work etc.

Middle Adulthood (Early 40s-60 Years)

- Psychosocial Crisis: Generativity vs. Stagnation
- Main question asked "Will I produce something of value with my life?"
- Central Task: Creativity
- Positive Outcome: Nurturing children or helping the next generation in other ways
- Ego Quality: Care
- Definition: Commitment to and concern for family and community
- Developmental Task: Nurture close relationships; Management of career and household; Parenting

Later Adulthood (60 years and up)

- Psychosocial Crisis: Ego integrity vs. despair
- Central Task: Introspection
- Positive Outcome: A sense of fulfillment about life; A sense of unity with self and others
- Ego Quality: Wisdom
- Definition: Detached yet active concern with life in the face of death
- Developmental Task: Promote intellectual vigor; Redirect energy to new roles and activities; Develop a point of view about death

Annex 7: Pre- and Post Questionnaires

Basic Skills for Counselling Children – Pre-Questionnaire

| Name: | Trainer's Name: |
|---------------|-----------------|
| Organization: | Date: |

1. Mark true or false for each statement about counseling:

| True 🛛 False 🗆 | Counselling is something done by professionals only |
|----------------|---|
| True 🗆 False 🗆 | Counselling is a way adults help children help themselves |
| True 🗆 False 🗆 | Counselling is a time for the counsellor to share his problems |
| True 🛛 False 🗆 | Counselling is a time to give advice |
| True 🗆 False 🗆 | Counselling is an opportunity to gently tell the child what to do |

- 3. If a child is sharing a problem that you don't think is very serious, you should:
 - □ Explain to them why it is not so serious
 - □ Stop the counselling, it is not a valuable way to spend your time
 - □ Listen carefully and do your best to help the child
- 4. You should be able to solve all of a child's problems.
 - True □ False □

5. Mark true or false for each statement:

You should refer a child to another counsellor or a professional if...

| True 🗆 False 🗆 | you really don't like the child and can't empathize |
|----------------|---|
| True 🛛 False 🗆 | - the child is in danger and/or being is abused |
| True 🗆 False 🗆 | - you feel that you can help the child deal with their problems |
| True 🗆 False 🗆 | - you think the child needs help that you cannot give |
| True 🛛 False 🗆 | - the child is making progress |
| True 🛛 False 🗆 | - you think that you cannot be neutral on the child's issue |
| | |

- A child can lose his Rights if he commits a crime. True □ False □
- 7. How do you think this child is feeling?



- 8. If a child has just told you that she wants to have an abortion you should:
- 9. You should talk to an 8-year-old and a 14-year-old the same way because they are both children. True □ False □ 10. Building trust is the first and most important step in counselling. True □ False □ 11. Fill-in the 3 missing steps of counselling. 1)\_ 4) Helping the 5) **Continue** 0 child choose the **Terminate** (Including trust 2) 3)\_ best solution for building) them. Depending on the situation you may need to refer the child
 - 12. If a child wants to tell you something and asks you to promise not to tell anyone no matter what, what should you say? (Tick the correct one)
 - □ What you tell me will be treated as confidential unless it is something that puts your safety at risk or if I feel I am stuck I may need to talk to my supervisor
 - $\hfill\square$ What you tell me will be absolutely confidential and I will never speak to anyone about it without your permission
 - $\hfill\square$ Unfortunately I need to tell your mother everything you say because you are a child
 - 13. Which of the following are good counselling practices?
 - True D False D You should speak in the language the child is comfortable with
 - True 🗆 False 🗆 You should listen without judging
 - True D False D You should set boundaries with the child up front
 - True 🛛 False 🗆 You should use your own beliefs to give guidance to the child
 - True
 False
 You should give good advice
 - True 🗆 False 🗆 You should let a session go on for hours if the child is still talking
 - True \Box False \Box You should consider the child's problem your own
 - True False You should say anything to give the child hope even if it is not true

Basic Skills for Counselling Children – Post-Questionnaire

| Name: | Trainer's Name: |
|---------------|-----------------|
| Organization: | Date: |

1. Mark true or false for each statement about counseling:

- True False Counselling is something done by professionals only
- True False Counselling is a way adults help children help themselves
- True D False D Counselling is a time for the counsellor to share his problems
- True □ False □ Counselling is a time to give advice
- True False Counselling is an opportunity to gently tell the child what to do
- 3. If a child is sharing a problem that you don't think is very serious, you should:
 - □ Explain to them why it is not so serious
 - □ Stop the counselling, it is not a valuable way to spend your time
 - □ Listen carefully and do your best to help the child
- You should be able to solve all of a child's problems. True □ False □

5. Mark true or false for each statement:

You should refer a child to another counsellor or a professional if...

| True 🛛 False 🗆 | - you really don't like the child and can't empathize |
|----------------|---|
| True 🛛 False 🗆 | - the child is in danger and/or being is abused |
| True 🛛 False 🗆 | - you feel that you can help the child deal with their problems |
| True 🛛 False 🗆 | - you think the child needs help that you cannot give |
| True 🛛 False 🗆 | - the child is making progress |
| True 🛛 False 🗆 | - you think that you cannot be neutral on the child's issue |
| | |

- A child can lose his Rights if he commits a crime.
 True □ False □
- 7. How do you think this child is feeling?



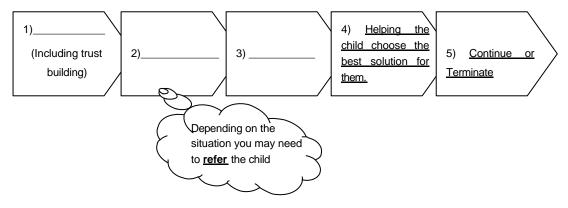
8. If a child has just told you that she wants to have an abortion you should:

\*\* assuming abortion is legal in your country

9. You should talk to an 8-year-old and a 14-year-old the same way because they are both children.

True 🗆 False 🗆

- 10. Building trust is the first and most important step in counselling. True □ False □
- 11. Fill-in the 3 missing steps of counselling.



12. If a child wants to tell you something and asks you to promise not to tell anyone no matter what, what should you say? (Tick the correct one)

□ What you tell me will be treated as confidential unless it is something that puts your safety at risk or if I feel I am stuck I may need to talk to my supervisor

 $\hfill\square$ What you tell me will be absolutely confidential and I will never speak to anyone about it without your permission

□ Unfortunately I need to tell your mother everything you say because you are a child

- 14. Which of the following are good counselling practices?
 - True D False D You should speak in the language the child is comfortable with

True \Box False \Box You should listen without judging

- True D False D You should set boundaries with the child up front
- True D False D You should use your own beliefs to give guidance to the child
- True D False D You should give good advice
- True D False D You should let a session go on for hours if the child is still talking
- True 🗆 False 🗆 You should consider the child's problem your own

True D False D You should say anything to give the child hope even if it is not true

Basic Skills for Counselling Children – Model Answer

- 1. Mark true or false for each statement about counseling:
 - False Counselling is something done by professionals only
 - True Counselling is a way adults help children help themselves
 - False Counselling is a time for the counsellor to share his problems
 - False Counselling is a time to give advice
 - False Counselling is an opportunity to gently tell the child what to do
- 2. When you are counselling a child, you should speak to your family and friends about the child's problems if you need help figuring out how to help.

False

- 3. If a child is sharing a problem that you don't think is very serious, you should: Listen carefully and do your best to help the child
- Do should be able to solve all of a child's problems.
 False
- 5. Mark true or false for each statement:

You should refer a child to another counsellor or a professional if...

- True you really don't like the child and can't empathize
 True the child is in danger and/or is being abused (and you can carry on helping them as well)
 False you feel that you can help the child deal with their problems
 True you think the child needs help that you cannot give
 False the child is making progress
 True you think that you cannot be neutral on the child's issue
- 6. A child can lose his Rights if he commits a crime.

False

7. How do you think this child is feeling?



There is no correct answer – just look for the participants ability to reflect emotions

8. If a child has just told you that she wants to have an abortion you should:

Don't judge, Listen to understand Give relevant information and help the child understand the options Help the child make the decision that is best for them

\*\*\* this assumes that abortion is legal in this country

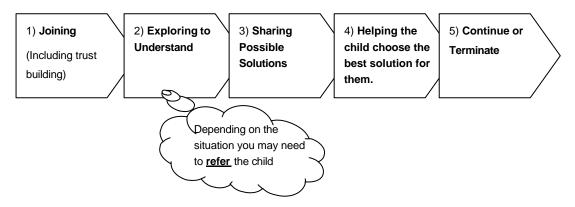
9. You should talk to an 8-year-old and a 14-year-old the same way because they are both children.

False

10. Building trust is the first and most important step in counselling.

True

11. Fill-in the 3 missing steps of counselling.



12. If a child wants to tell you something and asks you to promise not to tell anyone no matter what, what should you say? (Tick the correct one)

What you tell me will be treated as confidential unless it is something that puts your safety at risk or if I feel I am stuck I may need to talk to my supervisor

- 15. Which of the following are good counselling practices?
 - True You should speak in the language the child is comfortable with
 - True You should listen without judging
 - True You should set boundaries with the child up front
 - False You should use your own beliefs to give guidance to the child
 - True You should give good advice (you should not give advice!)
 - False You should let a session go on for hours if the child is still talking
 - True You should consider the child's problem your own
 - False You should say anything to give the child hope even if it is not true

Basic Skills for Counselling Children

Participant Feedback

Date: \_\_\_\_\_

| WHAT IS COUNSELLING? | ⊗⊗
No | 8 | ٢ | ٢ | ©©
Yes |
|---|----------|-------------------------------------|---|---|-----------|
| I have a good understand of what counselling is and is not | 1 | 2 | 3 | 4 | 5 |
| I understand what kinds of situations may cause a child to need counselling | 1 | 2 | 3 | 4 | 5 |
| I understand what the purpose of counselling is | 1 | 2 | 3 | 4 | 5 |
| Questions that I still have about this section are:
General comments on this section: | | | | | |
| THE PROCESS OF COUNSELLING | 88 | $\overline{\mbox{\scriptsize (s)}}$ | ٢ | ٢ | 00 |
| I understand the general process of counselling | 1 | 2 | 3 | 4 | 5 |
| I understand what it means to 'join' with a client and how to do it for different age groups | | 2 | 3 | 4 | 5 |
| I understand why we need to understand more about a child's situation | 1 | 2 | 3 | 4 | 5 |
| I understand how to help a child find their own solutions to their problems | 1 | 2 | 3 | 4 | 5 |
| I feel comfortable that I know when to refer a child to further help | 1 | 2 | 3 | 4 | 5 |
| I feel comfortable that I know when to terminate a counselling process | 1 | 2 | 3 | 4 | 5 |
| I feel comfortable that I know how to close a normal counselling session
(when you will still see the child next week) | 1 | 2 | 3 | 4 | 5 |

Questions that I still have about this section are:

General comments on this section:

| THE PRACTICES OF COUNSELLING (P2) | 88 | 3 | | ٢ | 00 | | | | | |
|---|----|---|---|---|----|--|--|--|--|--|
| I understand the purpose of listening | 1 | 2 | 3 | 4 | 5 | | | | | |
| I understand how body language, facial expression, eye contact and vocal qualities can communicate my attitude even if I am not saying anything | | 2 | 3 | 4 | 5 | | | | | |
| I feel confident that I can ask open and close ended questions | | | 3 | 4 | 5 | | | | | |
| I know how to paraphrase and to summarize | 1 | 2 | 3 | 4 | 5 | | | | | |
| I know how to reflect a child's feeling | 1 | 2 | 3 | 4 | 5 | | | | | |
| Questions that I still have about this section are: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| General comments on this section: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| PRACTICE, PRACTICE | 88 | 8 | | ٢ | 00 | | | | | |
| Having extra case studies to practice on was useful | 1 | 2 | 3 | 4 | 5 | | | | | |
| General comments on this section: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| CHILD DEVELOPMENT | 88 | \odot | | \odot | 00 |
|--|----|---------|---------|---------|----|
| I understand the different stages of development that people go through, and that their different needs and behaviours at each stage | 1 | 2 | 3 | 4 | 5 |
| I understand how these stages may effect a counselling case | 1 | 2 | 3 | 4 | 5 |
| I understand how to adapt my behaviour based on the stage of the child | 1 | 2 | 3 | 4 | 5 |
| Questions that I still have about this section are: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| General comments on this section: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| CHILDREN'S RIGHTS AND COUNSELLING | 88 | 8 | | 0 | 00 |
| | | | | 1 | |
| I understand why Children's Rights are necessary | 1 | 2 | 3 | 4 | 5 |
| I have a good understanding of what Children's Rights are | 1 | 2 | 3 | 4 | 5 |
| I have a good understanding of what children's responsibilities are | 1 | 2 | 3 | 4 | 5 |
| I feel confident that I will be able to identify Children's Rights issues in a counselling situation | 1 | 2 | 3 | 4 | 5 |
| Questions that I still have about this section are: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| General comments on this section: | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

| THE PERSON: WHAT MAKES A GOOD LAY-COUNSELLOR? | 88 | $\overline{\mbox{\scriptsize (s)}}$ | ٢ | \odot | 00 | | | | |
|---|---------|-------------------------------------|--------|---------|---------|--|--|--|--|
| I understand more about my emotions and how they have the potential to impact on the people around me | 1 | 2 | 3 | 4 | 5 | | | | |
| I understand more about my character and how other people perceive me | 1 | 2 | 3 | 4 | 5 | | | | |
| I know what personality traits I would need to develop in order to be a good lay-counsellor | 1 | 2 | 3 | 4 | 5 | | | | |
| I understand more about my value and beliefs | 1 | 2 | 3 | 4 | 5 | | | | |
| I know why it is important to be unbiased when counselling a child | 1 | 2 | 3 | 4 | 5 | | | | |
| Questions that I still have about this section are: | | | | | | | | | |
| General comments on this section: | | | | | | | | | |
| | | | | | | | | | |
| GENERALLY | 88 | 8 | ÷ | © | 00 | | | | |
| GENERALLY
The course was enjoyable | මම
1 | ළ
2 | ≅
3 | ©
4 | ©©
5 | | | | |
| | | | | | | | | | |
| The course was enjoyable | 1 | 2 | 3 | 4 | 5 | | | | |
| The course was enjoyable
I have learned a lot about basic counselling skills | 1 | 2
2 | 3
3 | 4 | 5
5 | | | | |

Annex 9: Attendance Register

Training: Basic Skills for Counselling Children

Trainers:

Place:

Participants should sign each day they attend

| | <u>Name</u> | Insert date | Insert date | Insert date | Insert date |
|----|-------------|-------------|-------------|-------------|-------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
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Annex 10: Example of Certificate of Attendance