

## **16 Tips for supporting a parent who has a learning challenge**

### ***How to have successful In-Home visits***

1. The Support Worker's goals for early visits are:
  - i) To establish a sense of safety and trust
    - Build rapport
    - Set parameters of the relationship – convey a sense that you are on their side, but that the children's needs come first
    - Explain the limits of confidentiality, i.e. to whom do you “report”
    - Validate the parent's feelings and experiences
  - ii) To assess the immediate needs of the parent and family
    - Why are you here? Why now? How does the parent feel about your presence in their home?
    - How does the parent like to learn things?
    - What or who are their supports and resources?
  - iii) Begin the process of establishing goals and a contract with the parent
    - This includes letting them know what expectations Child and Family Services and/or you have
2. Show respect:
  - Speak with respect. Despite any limitations people with disabilities may have, they also have the right to be treated in line with their age and as a parent. Respect their life experiences.
  - Treat the parent as the primary caregiver
  - Direct other professionals to speak directly to the parent. Do not answer for parents.
  - Respect the parent's privacy, e.g., speak in private about your concerns, model for parents how to protect their child's privacy, don't speak to other people indiscriminately about the family
  - If you need to have someone else know information to support a parent, ask that parent who they are most comfortable with knowing their business
3. Minimize distractions
  - Turn off phones and radios
  - Close doors
  - Limit the number of people in each conversation
  - Some things need to be taught without children present

4. Stop and think before you speak:
  - Use clear language and avoid acronyms
  - Plan the order in which you expect to share information
  - Plan the amount of information you will share at any one time
  - Monitor the speed of your speech
  
5. Clarify language
  - It's important to clarify intent if a parent uses language out of context; confirm your understanding of what they are intending to say
  - Once you learn what language a parent uses for a concept, pair it with a more commonly recognized or appropriate word as you feel necessary. For example, pairing slang with medical language or pairing a word a parent uses inappropriately with the correct word.
  
6. Ask questions that, when answered, reflect the parent's understanding of information shared
  - For example, "I've told you a lot of things already. What do you remember about all of that?" versus "Do you have any questions about that?"
  
7. Use open- and closed- questions with intention
  - Try to ask only one question at a time
  - Use short, open-ended questions/invitations when looking for content. Start with very open-ended questions and become more focused as needed. For example, "So tell me about yourself." Wait for an answer. If the client seems to need more direction, "Tell me how you spend your days." Or, "Who do you turn to in your life when you need help?"
  - Use short, closed-questions for accurate and concrete information. "Some of our parents don't read very well. Are you able to read?" Wait for an answer. "Are you comfortable reading?" Wait for an answer. "Would you like me to simply tell you things rather than having to read?"
  
8. Wait for answers to your questions
  - Wait for the parent to process information and formulate their own questions
  
9. Be aware that many people with developmental disabilities tend to answer questions the way they think you'd like them to be answered – trying to please. Parents may try and anticipate your values about parenting or what they believe Child and Family Services would want. They also tend to acquiesce – thinking it's best to answer "yes".
  
10. It's okay to check with a client to see if she is understanding you
  - For example, "Karen, sometimes I don't explain things in the best way. It would help me know that I've been clear if you could tell me what you understand so far."

11. Use repetition with respect

- Be careful. Repetition can easily begin to sound condescending.
- Say the same thing in different ways
- Try, “Oh, did I remind you about...?”

12. Having some routine to your visits may help some people

- Having a short check-in allows clients to share information that is at the forefront of their thoughts. Having some “air time” for this may help them focus on the rest of your time together.
- A quick review may be helpful (see above)
- A reminder of the boundaries may be necessary, e.g., purpose of your time together, confidentiality and exceptions to that confidentiality
- At the end of the visit, you can briefly recap new information covered and state clearly any preparation the parent needs to attend to before your next visit.

13. Review information from previous visits as a matter of routine

- Review helps clients retain information and it can help ground a person for the session at hand

14. Ask the parent how they like to keep track of important information

- For example, does she keep a calendar of appointments?
- Would it be helpful for you to provide a summary of visits in a journal or book?
- Does the client want you to let anyone else know about the information covered, e.g. her partner, others who support her in her role as a parent?

15. Seek to make things clear – this often means making them concrete and visual

- Supplementing your words with an illustration or visual cue can help parents understand and remember information
- Asking a parent what will help them remember can be productive. You may offer to audio or video record information.
- Sequencing can be difficult for some of parents. Using “cartoon moments”, i.e., putting representations of an event on pieces of paper and then having the client put the papers in order can help you understand the story they wish to convey or as a way of helping them understand some instruction.

16. Touch clients with discretion and awareness

- Many people with disabilities have been sexually abused. Touch can be misinterpreted.
- Some people consider their wheelchairs an extension of themselves, so touching their chairs may be a personal intrusion. Always ask before you begin pushing someone in their chair. Don't assume people in manual chairs want to be pushed.
- Put yourself at a parent's level during conversations