

*Note: This training material is continually being evaluated and updated to reflect current needs and best practices therefore it should be viewed as work in progress.*

*Any person, organization, or institution making use of these materials must acknowledge that they were developed by the Tanzania Institute of Social Work, Jane Addams College of Social Work, and the Midwest AIDS Training and Education Center with support from the US President's Emergency Plan for AIDS Relief (PEPFAR), USAID/Tanzania, and the American International Health Alliance's HIV/AIDS Twinning Center.*

## **Day 9:**

### **Parenting, Supporting Families, and Community Re-entry**

#### **Recap and review of previous day and overview of coming day**

Objectives for the Day (Slide 2)

At the end of this day, Para Social Workers will be able to:

- Demonstrate necessary skills and information for parenting
- Demonstrate different parenting styles and ways to support caregivers and families with Most Vulnerable Children
- Outline different activities as stipulated in the work guide
- Explain how to work with other community resources to advocate for Most Vulnerable Children interventions and services

Learning Activities:

- Presentation
- Brainstorming
- Small group/dyadic activities
- Role Play
- Questions and Answers/Discussion

Trainer Tips:

- Emphasize how parenting styles differ according to culture, family and child characteristics
- This section of the curriculum looks at parenting as a process and develops the notion that parenting can be improved and supported. The focus of this topic is how to parent who have come into the family because of a crisis or a loss. The second focus is how a Para Social Worker can support a newly constituted family
- It is always important to allow learners share what they think is a preferred approach to parenting taking into consideration their context and the best interests of the child
- Allow for as much interactions as possible as this topic is bound to raise a number of culturally held norms and definitions of child-parent relationships

Topic Outline:

### Introduction and section objectives (Slides 2-6)

- a. Growth and development of children is best promoted within a family setting
  - i. providing family settings for Orphans and Vulnerable Children often means that care-giving families must be supported in their new roles
- b. If these families are to be successful, they need information and support in effective parenting strategies, especially in parenting children not born to them
- c. This information applies to parenting all children - those born to the parent as well as children coming into the home after loss of a parent
- d. This information is especially useful in parenting children not born to the caregiver

### Two Dimensions of Parenting: Finding the Right Balance (Slides 7-13)

#### Learner Activities:

- Ask the group how many of them are parents; ask them if they have fostered children or taken in children from other family members or have other vulnerable children living in their families
- Conduct a group discussion of whether they think that parenting one of their own children is different from parenting a child or children who are born of different parent.
- Ask the group for their opinions about how they think that a Para Social Worker might help to support a reconstituted family specifically
- Discuss the scale that shows that parenting is a balance between warmth and control. Be sure to find out whether the participants understand these words in the context of parenting or not. This may require some extended discussion, getting participants to explain this to each other
- Frame the discussion with a large group role play using three people (2 parents and a child) illustrating warm parenting and controlling parenting
- Ask the participants to define the terms and to develop words they are comfortable with that effectively explain the terms. It can be quite successful then to go back through the slides and discuss how their understanding of the slides has changed with a deeper understanding of the terminology

#### Training Tips:

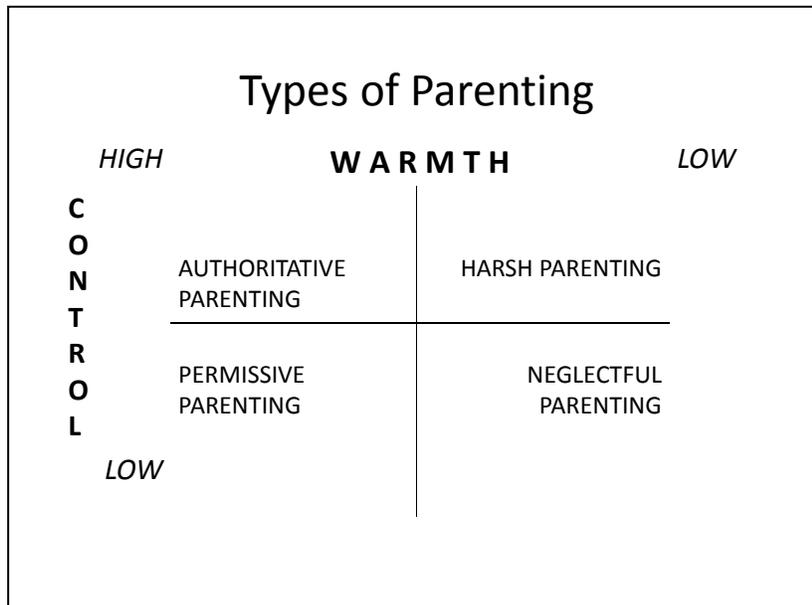
- Current parenting research uses terminology to describe “good and bad” parenting that might not be obvious to the participants, especially given the cultural and language issues which occur in translation between Swahili or English. For example, participants may not understand the terms warmth, control, authoritative, or pro-social behavior. If communication is an issue, then discuss the terminology in depth
- Build on the experience of participants, many of whom are very successful parents
- The context of this discussion is on parenting reconstituted families, so knowing the experience of the group will provide an important frame work to the discussion of parenting
- Remind the group of the issues related to developmental grieving that were the focus of the discussion at the end of Day Six. In short, the slides on parenting

can be contextualized to the experience of the community so that the wisdom and knowledge contained in them is more directly apparent to the participants.



- a. *Warmth* refers to verbal and nonverbal behaviors that are emotional in tone
  - The emotional tone a parent communicates to a child may range from warmth to rejection
  - Warm parents are relatively accepting, nurturing, and use frequent positive reinforcement (praise, supportive comments to child)
  
- b. *Control* refers to actions the parent takes to provide guidance, structure, and discipline to the child
  - Teaches frustration tolerance
  - Teaches socially acceptable norms or behavior, such as cooperation with others, avoidance of aggression, and respect for authority
  
- c. *Absence of Appropriate Control* occurs in children who experience harsh control strategies, inconsistent discipline, and/or lack of monitoring; this increases the child's risk for behavior problems, delinquency, drug use, and other high-risk activities

Types of Parenting (Slide 12)





#### Trainer Tip:

- Participants often do not equate “authoritative” parenting and high control with good parenting
- Help the learners to understand that authoritative parenting means parents who take responsibility and who provide appropriate rules standards of positive behavior. An easy substitution is “appropriate” parenting

#### Learning Activity:

- Create and conduct a role play looking at neglectful parenting and then harsh parenting and then permissive parenting
- Discuss the disadvantages of each, which are truly obvious to the audience
- Then role play good parenting and explain labeling as “authoritative/appropriate”
- Discuss and summarize

Research has shown that the parenting style that achieves the best results in terms of outcomes for children is the authoritative style

#### Authoritative parents maintain:

- High levels of warmth in their relationship with their children (affection, acceptance, approval)
- High levels of appropriate control (guidance, structure, monitoring of the child’s behavior)

#### Learning Activities:

- Lecture and discussion
- Small group practice, role play, and discussion

#### Training Tips:

- The bullet points of these slides contain valuable discussion about why and how authoritative parenting is a positive mode of parenting
- For example, slide 19 talks about coercive behavior, which almost always evoke a values-based discussion about if hitting a child is a good strategy to control behavior. It is important to acknowledge that the customs in child-raising in the country may not always reflect all lessons learned early in the training, about the rights of the child, for example. With extremely vulnerable and often traumatized children, the usual methods of child-raising (social norms), which used to be appropriate might no longer be appropriate or applicable
- Quite often somebody will say but “what about the rights of the parents?” or they will say that my father hit me, I am going to (or I do) hit my child. How, when, and why such changes are occurring are at the root of this difficult topic
- Often, this discussion can be re-framed by asking the members of the group how many of their grandparents were farmers and lived in villages. Then, ask the group how many of them are farmers and live in villages. If this proves to be a difficult topic, then focus on another simpler aspect of change. For example, how many of their grandparents had telephones compared to them. The point is that life has changed and even something so culturally rooted as parenting is also changing

- Another current example is to remind the group of the number of orphans and vulnerable children who have been affected by increasing rates of HIV in the past twenty years. If sexual practices have to change in order to save the population from risks that were unknown before, then it is also possible that parenting practices might also change, especially given the undeniable fact that there are many more orphaned children and certainly more vulnerable children than their used to be

#### Authoritative/Appropriate Parenting Practices (Slides 13-20)

- Communication
  - Listening to your child
  - Communicating clearly with your child
- Pro social Involvement
  - Play with your child
  - Engage the child in positive activities with peers
- Clarify instructions and consequences
  - Expected behavior defined clearly
  - Stated in terms of positive behaviors
  - Privilege given or withheld when rule is broken or kept stated with rule
  - Posted in public place in home
  - Consequences: rewards and punishments
    - Privilege must be highly desirable by child
    - Younger the child – the more frequently the desired behavior must be rewarded
    - For youth of all ages, to see that good behavior pays off the desired behavior must be rewarded frequently
    - Privilege must be tied to a specifically stated rule about behavior that is desired
  - Reinforcement: the most basic law of behavior is that people do what works for them. Therefore, rules must be consistently reinforced an unemotional manner, Mutually agreed upon by parents
  - Pinpointing: being clear about desirable and undesirable behaviors, especially those the parent wishes to change
  - Record Keeping: while it is not necessary to keep track of everything, when a particular behavior has been pinpointed to increase or decrease, record keeping can be essential
- Give up highly coercive discipline: (Corporal punishment, Deprivation of food, Confinement
- Parental monitoring – keeping track of your child's whereabouts, activities, behaviors
- Advocacy – interacting with other to assure your child's needs are met and rights are respected

#### Working with families in parenting

- Parenting style
- Risk factors
- Protective factors
- Promoting healthy parenting styles
- Providing support

## Supporting Care Givers (Slides 23-32)

### Learning Activities:

- Interactive Group discussion with examples
- Brainstorming

### Training Tip:

The nine slides in this section are designed to be a quick brainstorm. Community support is a natural activity. What is new here is that the support is being provided by and organized by a Para Social Worker.

- a. The Caregiving Future Challenge - caregivers often:
  - Focus on the care receiver to the exclusion of their own needs
  - Have unresolved grief and loss issues
  - Are motivated by their spirituality to sustain caregiving
  - Provide care in complex family situations
- b. Caregivers are affected by:
  - Their own health (including HIV status)
  - The care situation
  - The needs and losses of the care receivers
  - Grief and mourning related to their families, friends and clients
- c. Caregiver responses
  - Fulfilling the role of caregiver
  - New meaning in life
  - Stress and feeling overwhelmed
  - Depression
  - Anger/ Resentment
  - Health changes due to care demands
- d. Coping
  - Dealing with and overcoming stress, family problems and difficulties
  - Coping may vary by culture, spirituality/religion, community and family background
- e. Ways to Support Caregivers:
  - Listening and problem solving
  - Use of local government leaders
  - Education, Information and Training Courses and Workshops
  - Support Groups, Family or Community Meetings
  - Recognition
  - Help provide resources for children and families (food, housing, medical, etc.)
- f. How can a Para Social Worker Support HIV Positive Families (Slide 33)

### Training Tip:

The role is new, but the process of support: organizing various members and elements of the community to help somebody in need, helping the people with the problems to communicate those needs, helping them to work through it own their own, helping to establish equilibrium, is not new.

The two new aspects of supporting the care giver(s) are the role of the Para Social Worker, a person who is a professional helper, and the context of HIV as the framework of need. This slide brings both aspect of the process together.

What our Para Social Workers are being asked to do is to provide support for orphans and vulnerable children and their families in the context of the HIV epidemic, which brings with it isolation, fear and stigma. So, along with the personal support, comes a requirement for community support, education, and activism.

This is the epitome of the notion that what one can't do alone a group (the Power of 10) may do together. The families who are helped by Para Social Workers also need help from their own communities and the role of the Para Social Worker is to find a bridge, or build a bridge over what might be a very deep gap.

### **Small Group Skills Building Workshop: Supporting OVCs and their Families** (optional based on time available)

#### Learning Activity:

- Group appoints a recorder
- Group conducts a discussion of parenting issues for their own group case
- Divide group into sub-groups to develop or adapt service plan to incorporate issues about parenting and supporting the caregiver
- Group discusses what they have learned
- If there is time brief reports are provided in a RECAP session

#### Community Re-Entry (Slides 36-42)

#### Learning Activity:

- Conduct a group discussion (break into the small groups with the Trainers and Facilitators serving as Moderators)
- Address the questions in the slides which the small groups should answer as specifically as possible
- Report back to the larger group, with the results being summarized on flip chart paper or by computer

#### Trainer Tip:

This kind of feedback is designed to help answer the questions the community has that center around “what next?” Now that I am a Para Social Worker, how do I go about organizing and completing my work? These slides ask the community to come back with further questions and with some of the answers.

## Community entry

- Meeting with village leaders and debrief on Para Social Workers' roles and responsibilities
  - Supervision
  - Tools
  - Networking and advocacy
- a. Remaining motivated
  - b. Other sources of supervision
  - c. Work Guide (Slides 40-42)

## Training Tips:

- These slides provide a more structured answer to the “What Next” Question. The Para Social Work Curriculum and Training is not a cookbook or a roadmap, but it is a structured and recognized process which is founded upon principles of social work and community engagement.
- Slide 40 reiterates the social work process, specific to vulnerable children and their families. Slides 41 and 42 create a community context for the process, focusing on both the community level (MVCC), the village level, the social work supervision support system, as well as the context of national and international law. These slides basically work backwards, very briefly reiterating content from Day 9 to Day 1.

## Learning Activity:

- Each individual reviews these slides and selects specific activities (either from the list or their own ideas) that they plan to adapt as they return to the community.
- This work guide should be written individually
- If there is time participants may share what they plan to do

## Work Guide

- Outreach and update/identify Most Vulnerable Children in collaboration with Most Vulnerable Children Committee members
- Engage Most Vulnerable Children, families and service providers
- Assess strengths and needs and provide support
- Develop and maintain a service plan
- Network with other social partners at community level and refer Most Vulnerable Children to other resources
- Deliver basic social welfare services to Most Vulnerable Children, including psychosocial care and support to Most Vulnerable Children affected and infected by HIV/AIDS
- Including case management and case conference
- Identify resources: Produce a list of resources
- Collect and document information/data regarding Most Vulnerable Children and to share with the local leadership

- Actively participate in Most Vulnerable Children Committee activities/meetings
- Engage in raising community awareness on child rights, law of the child, child development policy and other related policies
- To mobilize their community at different levels, and to start and manage their own community Most Vulnerable Children funds and other resources
- Attend supervision sessions and maintain regular contact with supervisor and village authorities
- Work within the existing village government system

**Post- Assessment (Slide 35)**

**Feedback on the training**

**Closing Ceremony**