

Text

Life Skills Development For Youth From Vulnerable Backgrounds

A Dream A Dream Program

An illustration of a hand holding a pencil, set against a background of horizontal lines. The hand is rendered in a stylized, cartoonish manner with bold outlines and a yellow-to-orange gradient. The pencil is also yellow with a black outline. The background consists of several curved, horizontal lines in shades of pink and red, creating a sense of movement or a stylized landscape. The entire illustration is framed by a white border.

**The  
DREAM  
MENTORING  
Manual**

Dr. David Pearson  
Dr. Fiona Kennedy

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# **The Dream Mentoring Manual**

Life Skills Development For Youth From Vulnerable Backgrounds

**A Dream A Dream Program**

David Pearson and Fiona Kennedy

# foreword

**It is a privilege and an honour** to be called to write the foreword to The Dream Mentoring Manual.

I relate to the subject in a deeply personal way, having experienced mentors in my own life as well as serving as one to many individuals at the workplace and sometimes, outside. The process is a great gift to us all. For when a mentor and a mentee come together, the past meets the future.

The term mentoring is often used as a buzzword, not many people know its genesis. Without that knowledge, its nuance is lost. The term comes from the word Mentor of Greek mythology. Telemachus, a young prince, needed protection as his father Ulysses was going away. Goddess Athena took the form of a being -- half-woman and half-man -- the being bore the name Mentor. There is deep symbolism in this myth.

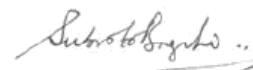
A mentor is a very special person. The mentor is not a parent, but is meant to give all the nurturing attention necessary without the attachment that a biological relationship creates. A mentor is 'half-man', so that the elements of power, protection and discipline are showered; the half-woman is designed for emotive, unconditional care. The most critical aspect of the Greek myth - recognising that the idea is to groom a prince - is probably lost on many of us. A young prince was always considered to be a very valuable person, an individual who would define not just a future for himself but the destiny of the kingdom. Mentoring can only succeed when that level of value is placed on the person to be nurtured. The mentee is a very valuable individual.

The most fascinating thing about mentoring is that it doesn't just benefit the receiver. On countless occasions, I have personally felt grateful for a chance to serve someone; sometimes I have grown, felt more complete than before in touching someone's life. It is a powerful, regenerative tool that has beneficial, often, healing qualities that fill the pitcher that pours the drink.

I cannot thank Dream A Dream enough; they bring the power of mentoring to those whose right to thrive was denied by extraneous forces and everyday has been a struggle. I salute Fiona and David Pearson whose work has now become The Dream Mentoring Manual in your hands today.

Dream A Dream, David and Fiona's work is bound to make an impact on countless people who are set out to make a difference to their beneficiaries who are far removed from them. Like the Dalai Lama once told me, "Your purpose determines your power".

With this body of knowledge that you hold, may your work begin.



**Subroto Bagchi**  
**Vice Chairman & Gardener, MindTree Ltd.**  
**Best selling author**

# about

## Dream A Dream

**Founded in 1999**, Dream A Dream is a registered charitable trust with a vision 'To empower children from vulnerable backgrounds by developing life skills and at the same time sensitising the community through active volunteering leading to a non-discriminatory society where unique differences are appreciated'

Dream A Dream impacts on the lives of thousands of children and young people made vulnerable by their backgrounds in Bangalore, India through an active network of community volunteers. Dream A Dream recognises that education is not preparation for life; education is life itself. It's crucial for young people to be equipped with literacy and numerical skills and life skills. It is these skills and abilities developed in childhood that make us responsible, whole adults. They help people build a meaningful life for themselves and become productive members of society.

In India however, due to widespread poverty<sup>1</sup> children with the misfortune of being born poor are trapped in the cycle of poverty. They do not have access to the learning environment that prepares them for a bright future. Many of these children do not even get an opportunity to attend school, while children already in schools do not receive a complete education and are thus drawn away from academic pursuits. The schooling system for children from vulnerable backgrounds typically focuses on academics (rote curriculum) neglecting along the way, the building of personality and psychosocial skills. The development of the emotional and intellectual maturity required to make difficult life choices are ignored in school, while homes and community environments are unable to compensate for such shortcomings.

<sup>1</sup>Poverty in India is widespread; a third of the global poor now reside in India. The World Bank estimates that 456 million Indians (41.6% of the total Indian population) now live under the global poverty line. In the UN Human Development Index, India is positioned at 132nd place in 2007-08. It is the lowest rank for the country in over 10 years suggesting that on non-pecuniary dimensions such as health, education and access to infrastructure, the poor are badly hit.

## **Dream A Dream solution – Completing Education for vulnerable children by developing life skills**

Dream Life Skills Development Program (Dream Programs) supplement regular schooling. Dream Programs such as sports, creative arts, outdoor experiential camps and mentoring intrinsically lend to an interactive process of teaching and learning. Such a learning environment enables learners to acquire knowledge and to develop attitudes and skills that support the adoption of healthy behaviour. Also by providing the children with a chance to enjoy themselves and socialise, we generate instantaneous motivation to attend our programs for the long haul.

Dream Program curriculums ensure that children use the space to explore interests, gain self awareness, develop self confidence, a healthy self esteem and the ability to make real life choices. These are necessary for success in a dynamic world but are often out reach for vulnerable young people who can be locked into poverty.

UNICEF refers to life skills as ‘a large group of psycho-social and interpersonal skills which can help people make informed decisions, communicate effectively and develop coping and self-management skills that help them lead a healthy and productive life’ The 5 life skills focussed on in Dream Programs are:

1. Interpersonal communication
2. Initiative taking
3. Conflict management
4. Decision making and problem solving
5. Understanding and willingness to follow instructions
6. Our experience is that Dream Programs can provide these essential life skills

## **The Dream Mentoring Program**

As the name suggests, the program is aimed at pairing an adult with a young person from a vulnerable background to help them make the transition from an impoverished life or institutional care system to independence. Research has established that poverty, abuse and neglect in childhood damages development which can be life-long. This damage can be physical, psychological and social. For this reason mentors for vulnerable young people need the special skills that are provided by the Dream Mentoring training. Research has also established that this damage can be minimised or recovered from to prevent a young person from being locked into a lifetime of problems. We at Dream A Dream believe that every child has the right to a successful future regardless of their past or position in society and not be imprisoned for ever by poor childhood experiences. For this to happen, somebody has to unconditionally accept and stand by that young person. This is the role of the mentor.

A mentor makes a commitment from 12 weeks up to 52 or more after undergoing a 7 module training designed by professional clinical psychologists. Through weekly meetings and phone conversations, a mentor helps a young person negotiate some of life’s most difficult challenges by finding solutions within themselves. Successfully run since 2007, the program has been pioneering in helping many young people become empowered making their own decisions in life.

**Vishal Talreja**  
**Executive Director,**  
**Dream A Dream**

# preface

## **PAVI**

Having gone through the mentoring program, I've come to realize and appreciate the importance of such a program. I was initially nervous about the mentoring program, it sounded like an activity where I would be judged and told what to do. However, it was a very pleasant experience and I got a wonderful mentor in Manisha. It was an exhilarating experience and I started sharing my experiences with my friends, colleagues and my family. Though I've moved out of the official program, I still stay in touch with Manisha and we've grown into good friends. She's been very supportive and has always been there for me, I'm proud to say I have a wonderful friend and mentor who I was introduced to through Dream A Dream. When one is young, it is difficult to share one's feelings and thoughts with family or relatives. I've been lucky to have Manisha beside me to talk to and share my thoughts and opinions, she's always encouraging and inspires me to do more and reach farther in life. The whole program is structured and well thought out. My feedback session when graduating out of the mentoring program actually showed me how much I had improved and even today I feel a sense of pride and happiness when I look back at it. Now I am ready to sit on the other side of the fence and become a mentor. I eagerly look forward to making that new special friend and build a relationship with my mentee similar to what I have with Manisha. I want to be change maker in this society and I am going to assist my mentee also to be change maker in this society. Pavi now believes that dreams can come true if we work towards them.

## **MANISHA**

Walking into Ashirwad for my first ever Mentor training session, I wondered how I, this highly imperfect person could ever contribute to making someone else's world a better place to live in. Dave & Fiona however quickly dispelled those thoughts with their interactive and extremely interesting training sessions. The sessions ended with an ice breaker with the Dream A Dream children and that was the beginning of a wonderful relationship which I today cherish. Pavithra or Pavi as she is fondly called looked as anxious as I was but our interaction comforted us and we settled down soon enough. There seemed to be so much to share; she surprised me every other day with her strength and character, and the way she overcame her struggles with grace. More than being a guide, I realized my role was to be her friend, a support, something stable in her life. The most beautiful part about our friendship is that she's now someone I learn from everyday! My greatest learning from Dave and Fiona have certainly been validation and it is now so inbuilt into my natural reactions, that it has without doubt made me even a slightly better person today.

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## introduction and overview

**A mentor is a responsible role and it can be life changing** for an adolescent to be successfully mentored. You will be expected to form an appropriate relationship with your mentee, being available for the time you have agreed. The time commitment will vary according to what you can realistically offer and the needs of your mentee. The commitment can range from a few weeks up to two years. We would guess that you would need to commit to 3 months minimum. Mentoring is not just about giving advice, but also being a role model. There is a need to attend at least some Reflective Practice sessions to both get ideas if you are stuck but also to give ideas to others. It is almost guaranteed that there will be frustrations on the way and a need to persevere. On the other hand previous mentors who have completed this course are now working successfully with their mentees.

The course takes seven sessions of training and discussion to complete. The overall course may take eight sessions depending on whether one session is arranged for you to meet your mentee. At the end of the scheme you will have the skills you need to be a successful mentor. Perhaps at this stage you may be asking why this is such a good idea? We know that the best predictor of a person's future is to look at their past. So if a child comes from a successful family they are much more likely to be successful in their future. On the other hand if a child comes from a very poor past, they are most likely to be poor when they are adults. This also counts for emotion, education, jobs etc. If we look at disadvantaged children they generally have poor backgrounds and poor experiences and so are most likely to have poor futures unless something is done to help them. Generally when a child is locked into poverty there is only one way out and that is for somebody to help them. Even short interventions can have dramatic effects, e.g. your mentee may stay in school and not run away if you as their mentor can stand by them through a difficult time.

One of the most important things a mentee needs is to have somebody to be with them, believe in them who they can trust. It can often be that a child has a problem that is impossible to solve which can leave the mentor feeling useless. It may be that the most important piece of information we have to learn during these sessions is that this is when the mentor takes off – now is the time to stay with your mentee even if you cannot find a solution. This is when trust becomes reality. If this makes little sense for you at the moment, it should make much more sense by the end of the sessions when you will have new skills and start working with your mentee.

This first session is to let you know what is involved in the course and what to expect. This information may help confirm that you want to be a mentor and also hear about other people on the course.

Each session will be split into two parts

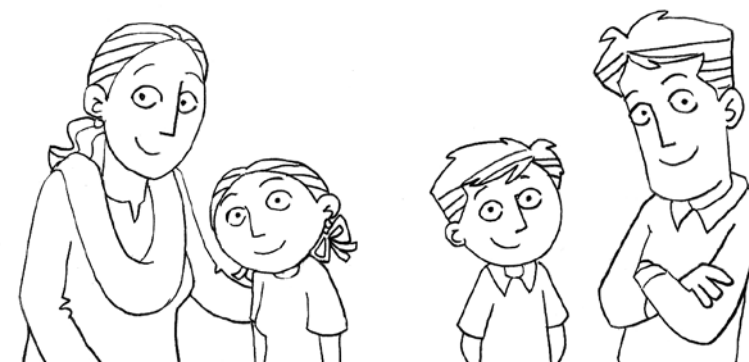
### **Information**

This may be new information for you or maybe not. It will be information about techniques or psychological information about children and adolescents that you can apply when you are acting as a mentor. If you have skills or experience in this area it will be a chance to consolidate and improve skills, blending them with the ones that you may already have.

### **Skills Practice**

Each session will have a practical part when we can practice and problem solve by putting all our heads together and working out what are the blocks that are stopping disadvantaged children from moving forward and how you can remove or get round those blocks. There will be lots of role playing – so don't hold back! New concepts of behaviour technology will be introduced along-side listening skills during these sessions. Perhaps the most important thing to say at this point is that Reflective Practice will also be introduced and this is a time to problem solve together and share but not to criticise.

The course will be delivered in such a way that you will not need any past experience or skills. Many of the examples will be looking at two mentors; Divya and Raj who have two mentees; Manjula and Ravi.



## **SESSION ONE**

### **Information - Overview of the Course**

This first session will not be able to follow the usual pattern as we have to get started. This is a time to think about mentoring for disadvantaged children and what needs to be done during the training sessions together. There will be an overview of the whole course and the levels of commitment and expectations will be discussed.

### **Skills Practice - Commitment**

Again as this is the first skills practice session the format is a little different. This session is mainly thinking about commitment, we will be sharing with each other why you want to be a mentor and what will be involved. For some of you a mentor has been involved in your life at some point which may be influencing your desire now to be a mentor. In later sessions there will be accounts from previous mentors telling you about the ups and downs of their experiences. There's nothing like hearing about real life, but we know there were ups and downs!

## SESSION TWO

### Information - Child Development

Session two will be looking at child development. This is particularly important as early experiences often shape the people we are. For most disadvantaged children, their early experiences will not be the ones we would choose for a child.



Often you do not have to be an expert to recognise that a group of children from a shelter can look different compared to a group of children who attend an expensive International School nearby. The shelter children may look smaller and younger than the group of children of the same age attending the International School. The task during this session is to think about child development and then think about how these factors have impacted on the child or young person that you may be working with. If at this point you are worrying - don't - we will all be working together and finding solutions together.

### Skills Practice - Validation Levels 1 and 2

During this practical session we will continue to look at ways of understanding behaviour, practicing acceptance and validation.

The session is aimed at increasing your listening skills. Paying attention to the person speaking to you makes them feel more valued. That person will know that you are paying attention if you can reflect and clarify what is being said. That person will of course soon be your mentee. As the sessions continue the emphasis will be moving towards skills that help change behaviour – but this needs a firm foundation of validation.

## SESSION THREE

### Information - Mental Health

This session will follow on from the previous one about development and will be about mental health. This generally will not be the same as mental illness. Mental health could be thought of as a description of us all. We all have likes and dislikes, fears and things that worry us. Many of these things may influence the way we are or the way we think. Often it is important to recognise where these things have come from and why they may be stopping us from moving on. Many early experiences can have a dramatic impact on later life, especially if these experiences are bad. We will concentrate on avoiding the use of diagnoses and medication as possible solutions.

### Skills Practice - Validation Levels 3 to 6

This will be the second session looking at validation. Now that we are practiced at listening, there is need to make sure that we understand what is being said in terms of the past, present and being able to respond with a genuine reaction. This reaction will allow your mentee to know that you have understood what has

been said and can continue talking to you with confidence. This means that you will gather all the information that you will need to help your mentee find real, accurate solutions and make good life choices. Later sessions will concentrate on increasing our understanding of behaviour and how it can be changed.

## SESSION FOUR

### Information - Relationships

Relationships and families are an important area for all work with children and adolescents. During adolescence there are nearly always problems with relationships of one sort or another. This of course becomes much more complicated when families are considered who may have very different views to yours. The relationships that your mentees may have with their families are likely to be complex and often challenging for a mentor. We also need to consider what your relationship is with your mentee, you are not a teacher or a parent and it may be different for each mentor. There are also other important areas that you may not have thought of such as sexuality or how to say goodbye successfully. Saying goodbye is often as important or even more important as saying hello. The concept of agreed plans will be introduced and why these are so important.

### Skills Practice - Positive and Negative Reinforcements

Positive and negative reinforcement will be introduced along with their relationship with anxiety. Target behaviours can be increased by teaching new skills, using positive and negative reinforcement. This will become second nature after these practical sessions.

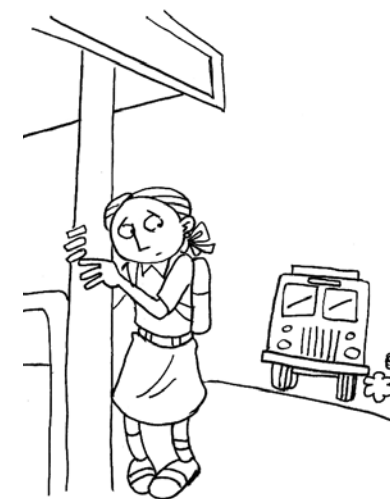
Positive and negative reinforcements only work if we apply them to the correct parts of behaviours – this is why we need to gather the correct information using validation skills.

## SESSION FIVE

### Information - Formulation

Formulation is the key to making things work. It sounds frightening, but it will not be when your new skills are used. Formulation is about looking carefully at the situation and working out what it is that is causing the problem and what needs to happen for your mentee to find a solution. A simple example of this could be that a child will not get on the bus to go to school. By the end of the sessions this example will have been used many times and will be very familiar to you.

In this example the problem is that Manjula will not get on the bus and go to school. We may naturally assume as adults that Manjula has a school problem. As adults we tend to interpret what we have been told by children, but this is not always accurate. Most of us would work quite hard to encourage Manjula to get on the bus. When the situation is looked at carefully you may discover that Manjula is



worried about her mum who is ill at home and she does not want to leave her mum alone. In this case a good solution may be to get a friend to visit mum at school time so she is not alone. This is of course not a real example, but it shows that the obvious choice (maybe work hard and encourage Manjula to get on the bus) may not be the best solution and could even make things worse.

### **Skills Practice - Punishment**

The previous sessions have been concerned with increasing behaviours using positive and negative reinforcements. This session will introduce punishment which decreases the likelihood of behaviours occurring. This is not punishment in the everyday sense of the word. Our behavioural tool-kit will now include communication skills and ways to increase or decrease behaviours as is needed. Added to these skills will be ways in which we can achieve maximum results and how to maintain them.

## **SESSION SIX**

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### **Information - Advanced Formulation**

Our formulation skills will be increased to another level and they will be used in role plays during the session. Role play will give you the opportunity of trying out new skills with the group, it will also be your chance to be a difficult child or adolescent for a short while! Role play is very useful to help build confidence in a very non-threatening way. There will be an opportunity to apply formulations and try solutions in the group before trying them with your mentee. Contracts or agreed plans will also be role played. These are important so that both parties work towards a common goal with a feeling of safety.

### **Skills Practice - Reinforcements, Observing Limits and Emotions**

Just a few more technical terms – this session will be about how to practically increase adaptive behaviours and decreasing maladaptive behaviours. We will also be looking at Reflective Practice. It is important that you are supported by your fellow mentors. This is a way of sharing and improving skills, it is not about knowing the ‘correct’ answers. There will be times when things get difficult or you get stuck. At these times the support of your peers will be most important, even when nobody is confident about the way forward. There will be the opportunity to explore the role of emotions, both our own and our mentee’s. As a part of this process we will be considering our own personal limits so that we can be realistic about what we offer as mentors. Accepting that we all have limits will be a part of your mentee’s life skills development.

## **SESSION SEVEN**

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### **Information - Role Plays**

This final session will be strengthening session six. We will be role playing problems, applying formulations considering solutions, producing a contract or agreed plan and then reflecting with each other how the solutions went. It may be that other solutions could be considered during Reflective Practice, but this does not mean that your chosen solution is wrong!

### **Skills Practice - Role Plays**

This is a very important session – how do you make sure that you can apply all your skills. New behaviours must stay in place and not fade away losing progress. The role plays will give us the opportunity to apply validation leading on to behaviour change in a practical way that takes into account our own personal limits.

## JUST A FEW RULES

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There are not many 'rules' for the course as it will have an informal feel to it.

If you don't understand anything don't be afraid to ask questions – usually if you do not understand something there will be others in the room that feel the same!

All of the information is provided in steps so it is quite important to try and attend all sessions. There will be a manual section for each session with all the key information.

There will be some opportunities to try out your new skills in between sessions, this is your homework. Please do these so you can report back at the next session.

Most importantly we hope the sessions will be a mixture of good fun and work leading to being a successful mentor.

## SKILLS PRACTICE

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As this is the first session the Skills Practice time will be slightly different. It is good to get to know each other and to hear about why it is that interests each other to be a mentor.

In the spaces write down your thoughts.

**1. Do you feel that you had a mentor when you were growing up or maybe even more recently. This may have been a person who helped you see a way forward or may have been an inspiration for you. What was it that made this person important – what made it good for you?**

**2. Why do you want to be a mentor?**

**3. How much time realistically do you think you can commit?**

**4. What kind of strengths do you think you can offer?**

**5. What sort of obstacles do you think you may have and have you got any ideas about how to get round them?**

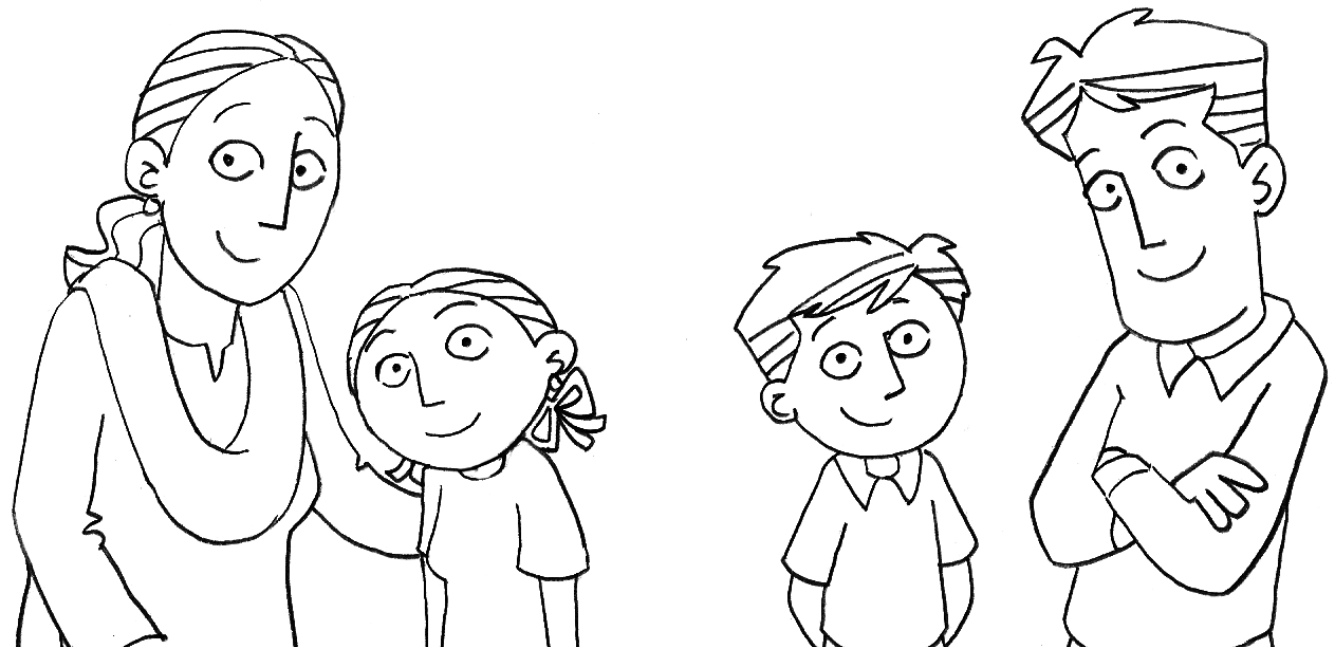
**6. How committed are you at the moment to be a mentor on a scale of 0 (now I've heard more about it I think it's not for me) to 10 (I wish I could start today)**

session 2

# child development

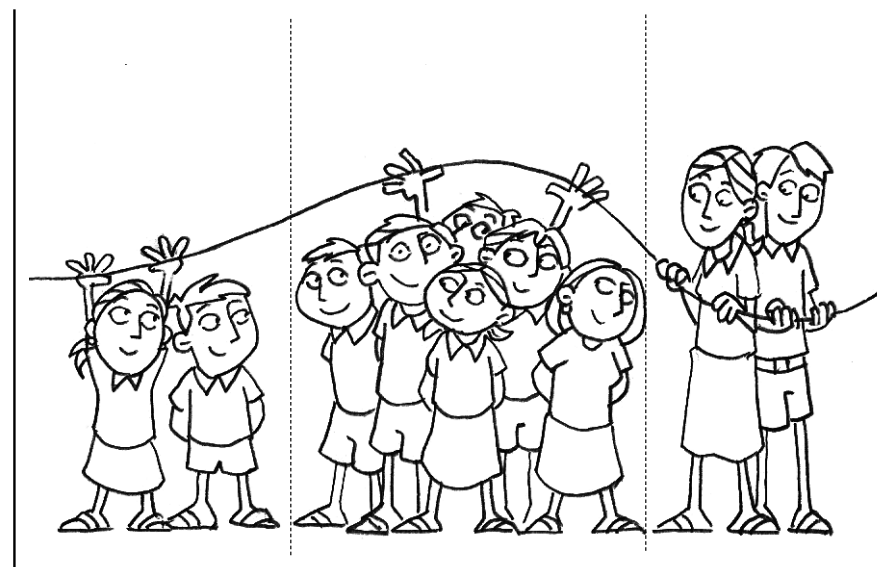
key statements

- 1. If a child fails to thrive for its first few months of life –this damage can still be measured at ten years**
- 2. Within normal limits, every child develops in the same way at the same time**



**If we look at any group of people maybe in a shop, a market or even a long bus queue, there will be a few tall people, a few short people and lots of average height people. This is the same for children. If we go into a class room there will be a few tall children, a few short children and lots of average height children.**

A similar thing happens for most measurements of people. We could measure weight, blood pressure, the size of feet, the size of fingers and so on. All of these measurements would show that there are a few people with big feet, a few with small feet and most with average size feet. This is known as a normal distribution or a bell curve. But if you put a group of children from a shelter or orphanage next to a group of children of the same age from an expensive international school, you do not have to be an expert to see that the two groups seem to look different.



**Normal distribution graph for children's height**



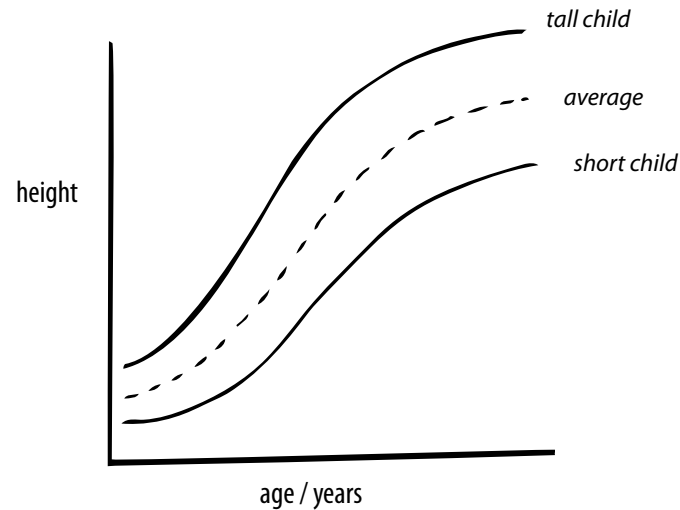
Most of us could tell which group is which even if they were dressed the same. Generally the shelter or orphanage group will appear smaller and often appear to look younger. During this session we will see why this is important and why this may make disadvantaged children special. In turn this will also show us why mentors for disadvantaged children may need some special skills. Before we look at disadvantaged children we need first to look at average child development.

Growth charts are used a lot to check how children are growing especially in children's clinics and hospitals. It is possible to predict how tall a child is going to be when he or she grows up by looking at how long or tall they are when they are very young. Basically unless something happens, nearly all children grow in a set pattern which means this can be plotted on a growth chart at any age. If you look at the chart above, the bottom line shows a short child growing (there will not be many of these) the top line shows a tall child growing up (again there will not be many of these) and the middle line shows most children growing who are average. It is not important whether a child is tall or short but what is important is the pattern of growth. So it is expected that a child's growth would start somewhere on the graph and continue to follow the growth lines until the child is grown up.

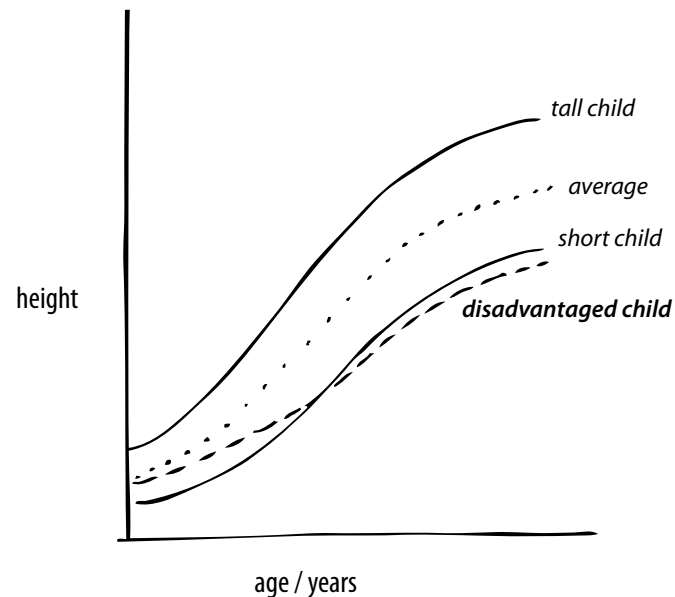
Many disadvantaged children start on a growth line but at some point, slip down the graph and end up being smaller than they should be. This is known as Failure to Thrive. For this reason the groups of children from orphanages or shelters often look smaller than children from other settings like the International School.

**What is meant by failure to thrive?**

Failure to thrive can be measured when a child stops growing as expected. If there is no medical reason, this is known as non-organic failure to thrive. If the reason is due to an illness or malnutrition it is known as organic failure to thrive. The effects on development are the same.



**Children's growth chart**

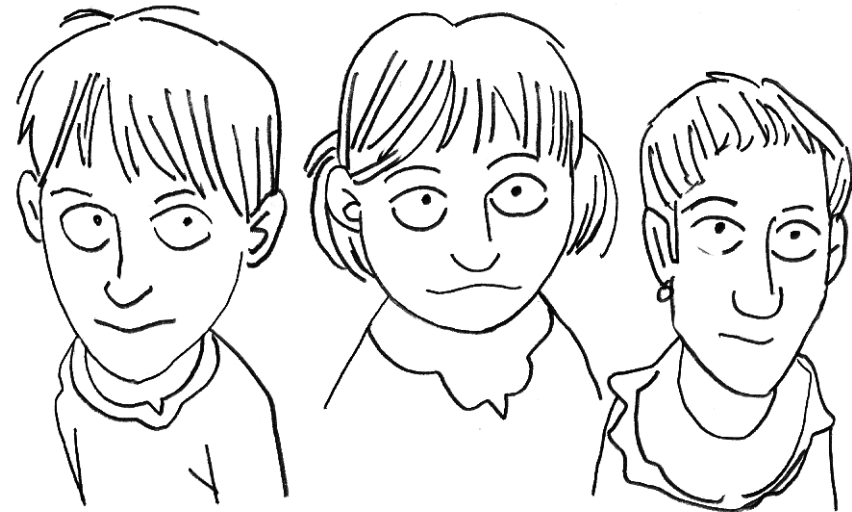


**Children's growth chart for a disadvantaged child**

A child needs appropriate emotional care as well as nutrition to develop. If a child is given sufficient food but has very poor emotional care, that child will not grow. If that period of time is not too great, the child can be fed and/or cared for and it can return to its appropriate size. Failure to thrive can happen at any time during development but is more easily observed the younger the child is.

The reason that this is so important for us today is that when growth stops there is psychological and developmental damage. This damage can be long term and even life-long in serious cases. The damage tends not to repair as quickly or at the same time as growth. Height and weight are the normal measures in pediatric settings eg, clinics or hospitals. For our purposes we will only look at height and not other measures. Growth charts are easy to observe and are accurate indicators of developmental patterns (a child's growth needs to be plotted over a period of time on an appropriate growth chart and not just recorded once).

By now you will be getting a feeling why it is so important that disadvantaged children may not have grown as tall as other children. The key point is that when disadvantaged children stop growing their development also stops. Often these children not only look shorter but also look younger but with some features of maturity, eg facial hair when in adolescence.



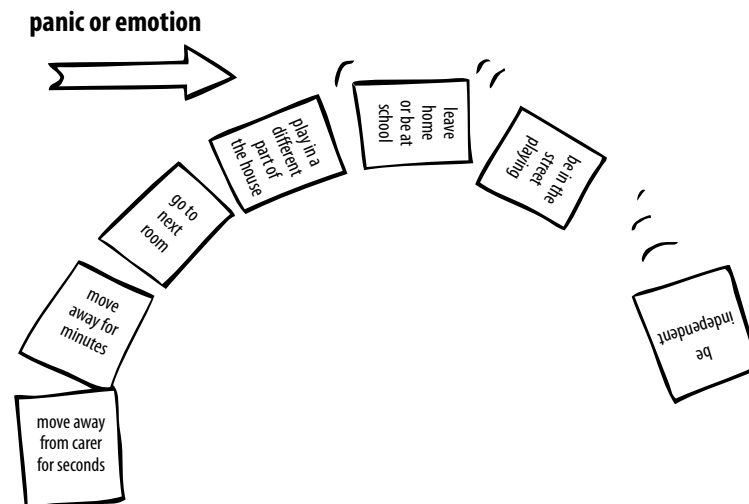
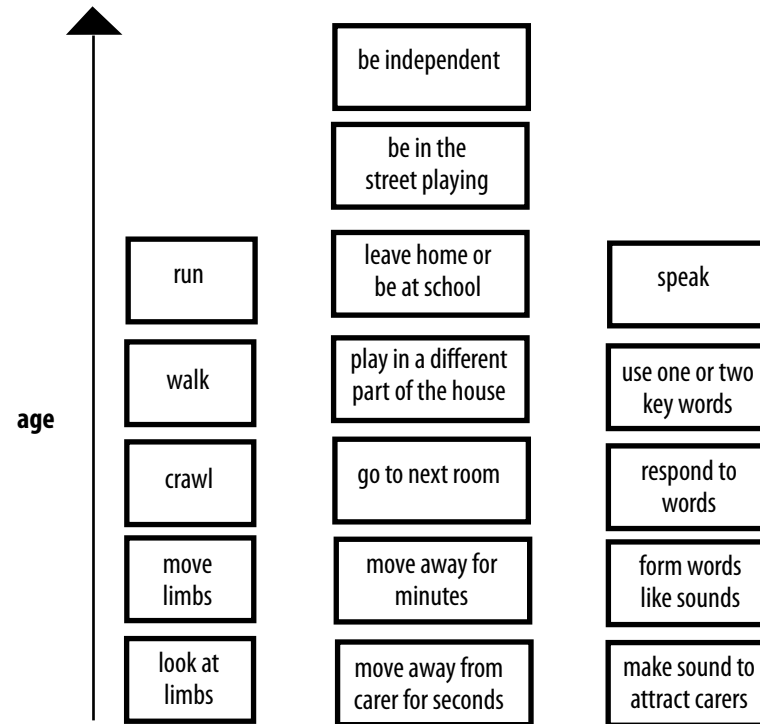
When children develop they do so in the same sequence and at about the same time according to their age. Although the process is not completely understood, it is clear that children are biologically and socially prepared or designed to develop at speed and at specific times in their development. These times are known as 'sensitive periods'. This means that the child cannot complete these developmental tasks at a later time so well. As a baby is born with no skills or behavior, all of these have to be developed a stage at a time in the correct sequence. None of us would expect a six month old baby to jump out of its cradle and run around the room. The baby has to observe its legs; work out where they are; start moving them; start coordinating; crawl, walk and finally run.

This is the same for all tasks including personality, speech, thinking skills, life skills, emotions etc. The way we are comes from our development which for many of the children who are disadvantaged may include many types of poor experiences and abuse. Early experiences may have long term effects due to these developmental issues.

Failure to thrive can produce complex problems as the child may not have achieved developmental tasks (mile stones) when it was biologically ready to do so and is now attempting developmental tasks without the foundations for those tasks being in place. This causes an unstable development often with many problems. This situation is known as confused development or Attachment Disorder.

Attachment Disorder behaviors or problems can come about without any apparent failure to thrive in terms of height. Many Attachment Disorder problems are caused by developmental collapse.

When a disadvantaged child with attachment disorder experiences anxiety or emotions their development collapses to the level at which development was sound – this may be at quite a young age. This can be seen in terms of a building falling down to the level of its strong foundations in an earthquake.



Examples of problems associated with confused development or attachment disorder:

### **Confused Ability**

If development slows and possibly catches up to some extent, any developmental assessment of the child is dependent on when the test was completed. An example may be ability type tests (eg IQ tests). You as a mentor may be told what a mentee's ability is but that could be inaccurate and the mentee may have a greater ability than that recorded on its records. Research has established that when developmental issues are dealt with, children's IQ scores can sometimes significantly shift upwards. This also may be the case when people consider the ability of an adolescent, not just in a testing situation but how that adolescent's abilities may be described etc.

### **Confused Maturity**

Situations that can affect the stability of development can often appear as immature or difficult behaviors. It is impossible to list all of the situations that can act as triggers, but these sessions are designed to help you recognize them when working with your mentee.

Example:

Monday an adolescent is quite able to catch a bus to an event.

Wednesday the same adolescent seems too immature and maybe too difficult to do it.

Response:

*Why are you being difficult? I know you can do it!*

Confused development can cause children to move between developmental stages in an uncontrolled way.



### **Confused Information Processing**

Although this may sound complicated it simply means that children who have confused development may have problems taking in information and using or retaining it. This may appear as a memory or reading and writing problems. This means that instructions may have to be short and simple.

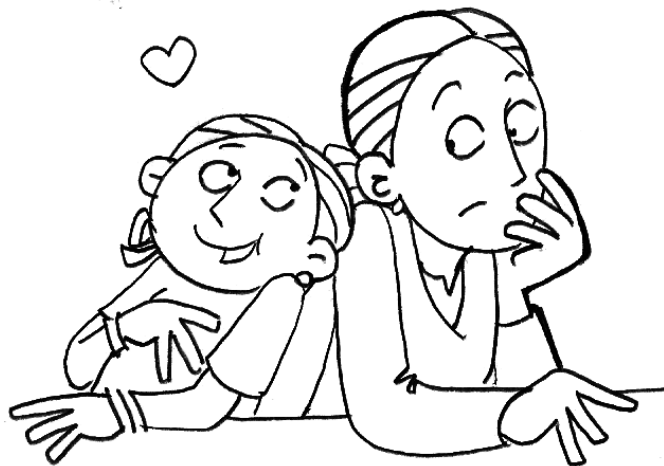
### **Confused Emotions**

A child may appear to attach the wrong emotion to an event or appear to demonstrate an inappropriate emotion. When you expect a child to be happy, they may cry, or perhaps start laughing at a very sad time.

## Confused Relationships

Children may attach to inappropriate people or demonstrate inappropriate relationships. Such examples of this could be relationships that are too intense or crossing acceptable boundaries.

Relationships with other children of a similar age can be difficult, often preferring to form relationships or friendships with adults or much younger children.



## Confused Attachment

At certain ages it can feel as though children love you one day and hate you the next. But even from a very young age, this group of children may not attach to adults for very long, but then very quickly attach to others. This situation can make children vulnerable to abuse.

If you have ever gone into a shelter or similar setting where there are young children you would have probably found that a few children would have come to you and held your hand or touched you. This behaviour is rarely seen when visiting a home of a friend or relative with similar aged children.

Later sessions will look at these behaviors in more detail.

At this point it is important to note that your mentee is very unlikely to have all of these problems, but may have some of them depending on their earlier experiences.



# session 2 *skills practice*

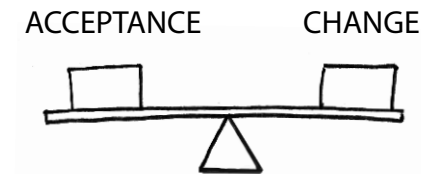
## Validation Levels 1 - 2

### key statement

**Listening carefully and reflecting back only what has been said may not be quite as easy as it sounds**

By now you will be keen to get started and help your mentee change, improve, or move on to a more successful life.

Before you can get started there are some tools that you will need in your behaviour change tool-kit. The first tool is a skill that we will practice during sessions called validation. You may remember from the first session that to find quick solutions to your mentee's problems often means that the wrong solution can be found and the mentee will not be able to gain the skill of finding solutions. So just for the time being in these sessions finding solutions is banned until we move on to behaviour change.



Validation can be thought of as acceptance. We need to accept our mentees as they are before helping them to change or move on. We will see as the sessions go on why this is such an important starting place especially for disadvantaged children.



### Why learn to validate?

Many disadvantaged children have had poor histories that may have included abuse, fear, hunger and many other negative experiences. This nearly always leads to a number of problems that need to be understood.

- Common experiences during the childhood of a disadvantaged young person can include:
- Parents may have neglected them
- They may have been sexually, physically or emotionally abused
- Many experiences that have made them feel worthless

- Been told by adults that they are worthless
- Being told that they have to improve
- Feeling high levels of fear
- Not having enough to eat, experiencing poverty, begging
- Not being able to keep healthy or maybe get the treatment they need
- If a goal is met, another is set immediately

All of these things will invalidate the young person



### Invalidation causes problems such as

- Can't identify own feelings, this can also mean that emotions are not always understood and confused
- Don't notice own feelings
- Feelings can get so big that they become out of control
- Most experiences are felt as negative and something to fear
- Feelings are something that you have to avoid

The invalidation problems often in turn cause consequences such as:

- Chaotic relationships
- Extreme expressions of emotions which are difficult to control
- Not being able to explain inner thoughts and feelings
- Other people jumping to conclusions about the young person's behaviour
- Not being able to trust adults
- Lots of avoidance of many situations



All of these problems will work against behaviour change and being successful. Validation is the first step to dealing with these problems.

Now we will practice validation in pairs, one of you needs to give the other one some information about yourself or your day or work. Have 3 or 4 goes and then swap round

**LEVEL 1 – Listen** (don't worry there are more steps to come, this is just a starting place!)

- Listen carefully to what is being said to you
- Show signs that you are listening - maybe nodding, smiling, wobbling your head making small sounds – this is validating
- Do not use your phone, file your nails, look around the room –this is all invalidating



### **LEVEL 2 – Reflection**

- Reflect back
- Say back what has been said in your own words
- Do not add to it and do not offer any solution, interpretation or judgement

If you get stuck look at these examples for a few hints

*I left home late and just missed the bus on the way to work yesterday, it's the third time this week.*

*Problem solving (not reflection) –you need to leave for work earlier; your time management is poor, you find catching the bus difficult.*

This example offers your solution and is perhaps judgemental.

*Reflection - Oh, you keep missing the bus on work days; you missed the bus 3 times this week.*

This is a good example of reflection, it has not added anything but has let the person know that they have been understood and allows them to continue.



For many disadvantaged children to have a conversation like this will be a new experience. These children have many invalidating experiences but rarely are validated and listened to carefully when they speak to other people especially adults.

We can now share with the rest of the group what you noticed about this task eg, how it felt to be listened to and to speak. You can use the space below to write notes about how it felt.



### **Homework**

During this week try validation on 2 or 3 people at home, work or with friends. See whether this makes any difference to your communications. A previous mentor on the course tried this homework at home and reported back next session 'my mum said to me what's wrong with you? You never normally listen to me!'

# mental health

## key statements

- 1. Mental health is not the same as mental illness**
- 2. Mental illness is quite rare in children**

It is useful to think of mental health in a similar way to which we look at physical health. Many of us will take some exercise or maybe be a little careful not to eat too many fatty foods or biscuits to try and keep ourselves healthy. Mental health is similar in many ways. We are all influenced by mental health issues. We all have likes or dislikes that encourage us to do things or stop us from doing things. Very rarely these issues may get out control or become overwhelming forming a mental illness that needs treatment.

This fairly straightforward way of looking at things may be a little more complex with disadvantaged children due to a range of things. It is known that early experiences can be a powerful part of later psychological problems. We have looked in the previous

session about the effects of developmental confusion on perceptions and behaviour. However, most of these types of problems should not be considered mental illnesses. These psychological problems may need a lot of help to be minimised or stop altogether. It often feels more comfortable for adults if we can give a child's behaviour a label or diagnosis. A mental illness diagnosis is generally not straightforward and usually involves an expert's opinion. It often feels that this will help us to understand a child's behaviour and also be clear that it is the child's problem. But we must be careful that this does not stop us from finding real solutions to help a child or young person move on. At this point it may be difficult to see how giving a child a diagnosis can stop real solutions being found.



### **Arjun's Example**

A ten year old boy called Arjun lives at home with his mother and father. Unfortunately his mum and dad have been arguing for some time and have now decided to get divorced and live separately. This has very much upset Arjun and he is very worried. In fact he cannot think of anything else all day, he is not sleeping well and cannot concentrate on his school work.

Arjun looks anxious at school and has started fidgeting when at his desk and has virtually stopped working. All he can think about is his family and what is going to happen. Arjun's school is a good international school and of course his teachers have noticed his problems. Arjun's teachers ask for a meeting with his parents as he appears hyperactive (not concentrating, fidgeting, not learning too much) and this is a growing problem in the school, affecting school results. It is decided at this meeting that Arjun should be assessed by a clinician, who in turn suggested that Arjun could do better if he had some medication. At this point it could be seen that Arjun has a problem (illness?) that needs medication. So Arjun takes his

pills and his school work improves some. The problem is that Arjun is now taking full responsibility for the problem, it is not his parents or the schools'. Arjun's parents are too involved with their divorce to have enough emotional space to see that they are a part (if not the cause) of the problem. They may be arguing over who Arjun is going to live with when they separate. The school did not want to change how they deal with children in case it looks as though they are causing the problem and other parents may want to change schools for a better one. If the problem is clearly seen as Arjun's illness then none of these adults are responsible, but now they can be seen as helpers which makes them feel much better. Obviously this is a made up example to demonstrate what can happen. We have to consider that for disadvantaged children they may have problems or behaviours that have come about due to neglect or abuse. It is at times like these that it feels much better for adults to firmly see the child as having a problem and not that the adults may be responsible for the problem.

It is impossible to cover all aspects of mental health in this session but it is usually possible to find a way forward with your mentee. At this point it may be important to recognise that you are a mentor and not a mental health professional, so don't be afraid to get help or advice if it's needed.

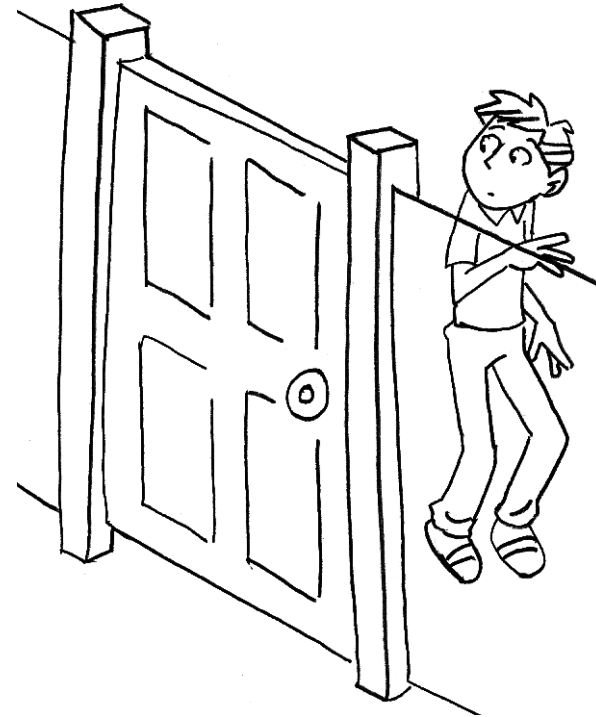


## Conditioning and Anxiety

The majority of mental health problems in children are due to, or have a large component of anxiety in them. An easy way to describe anxiety is to imagine that you have just crossed a busy road and a bus has just screeched to a halt, missing you by only a few centimetres. At this point you will probably feel wobbly legs, sweaty hands and forehead, a sickly feeling and maybe breathlessness. We have all felt these feelings at some time in our lives at moments like this.

Generally anxiety levels in children are higher than those found in adults. Anxiety keeps children safe as they develop. If young children did not have high levels of anxiety they would wander off and get lost or run over. So anxiety can have some very useful parts to it especially around protection. Anxiety that is not controlled and is too high or experienced at the wrong times can be very damaging. What starts a behaviour may not be what keeps it going and this is particularly so with anxiety. Conditioning is often associated with anxiety to cause a wide range of problems.





### **How To Be Anxious When You Walk Through A Door**

This practical session shows how anxiety can condition and what started a problem for our volunteer is not what maintained it or kept it going. Our volunteer was asked to walk through a door – when that happened the volunteer was hit with a stick. This happened about six times. Next, on the seventh attempt of walking through the door, the person with the stick has gone away. We ask the volunteer to walk through the door again. Our volunteer is very anxious and does not want to walk through the door – the volunteer is really scared and anxious. But the problem (person with the stick) has gone away so it is the thought of walking through the door that is causing the high anxiety levels. We could ask our volunteer to try coming through the next door but still his anxiety levels are high

and he is still scared when he tries. It may be that the volunteer has never even seen the new door let alone tried to walk through it. So this means that the anxiety has conditioned and that has moved on to the new situation where there has never been a man with a stick.

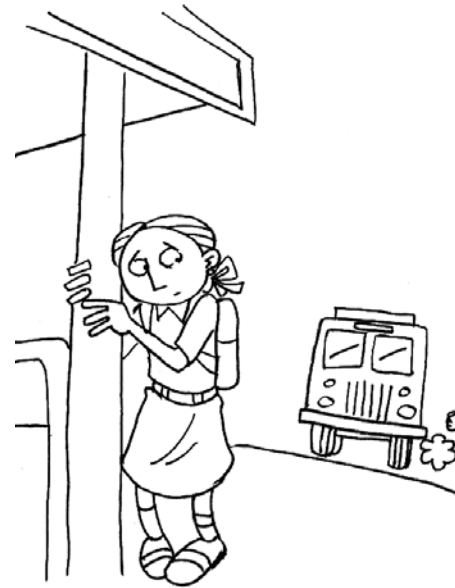
This can happen to children who have been abused or neglected. If you take your mentee to the movies, you could maybe find that your mentee is afraid of the dark. This would make sense if your mentee was abused in the dark over a period of time. She may have conditioned feelings of fear when the lights go out in the cinema as the abuse may have happened when the lights went out previously. To understand this helps you as a mentor to understand what is happening.

Anxiety - this is something that we all experience, but it is important to feel the right amount at the right time. Anxiety warns us of danger and protects us. At certain times in development it is important that anxiety levels are high, eg young children and separation anxiety, but if this continues due to experiences or developmental confusion, it could then be damaging.

During this session we are looking at how anxiety conditions. Conditioning describes a situation where anxiety may be generated in one situation but then transfers to similar situations. The example that we looked at was walking through a door. Walking through doors had not been a problem for our volunteer until somebody the other side of the door hit them with a stick every time they came through the door. After this happened about six times, the thought of walking through the door made them feel very anxious, even though the person hitting them had gone away. This commonly can lead to a problem where our volunteer can be afraid of going through any door.

In the Introduction Session we looked at a simple example of Manjula who would not get on the bus to go to school.

It was found that Manjula did not want to leave her mother as she was worried about her. This caused high levels of anxiety at the bus stop. Due to conditioning Manjula may now feel high levels of anxiety when she tries to get on any bus. The mother's problems may now be resolved, but Manjula's problems may continue and even get stronger. Manjula never had 'a fear of buses' but now has. In the next 3 months this could lead on to:



- I can't see my friends and I am isolated and feeling depressed
- I can't go to school
- I want to stay at home because I feel safe and I'm frightened to go out now
- I feel different to all my friends
- I feel I can never find a job because I can't go out and feel useless

Avoidance is a major problem when there are high levels of anxiety. Anxiety also commonly causes concentration problems perhaps leading to hyperactive or attentive type problems or fears which in turn can also lead to repetitive type problems eg checking or irrational fears or beliefs.

## **Depression**

Rather like anxiety, depression is something that we all experience to some extent at some time. It is again very rare for children to need medication for depression as the problem is usually psychological in nature often involving experiences of loss, feelings of worthlessness, not belonging, being abused, not seeing a way forward etc. Clearly disadvantaged young people will more often fall into these groups. When a person is feeling depressed they will see all things as being bad, they may have sleeping and eating problems or little energy. At this time motivation could be a problem, but later on it may not be, because depressive type feelings can come and go in adolescents.

Simple example: It could be that a young person has no interest in going out and looking at some work experience saying that there is no point and is tired because she has woken up early all week but then did not get out of bed until late. It may be difficult to motivate any thoughts about anything. You may be tempted into thinking that this situation has no way forward. After a few days or weeks the young person may show great interest in the same experience, perhaps causing you as a mentor some confusion!

## **Attachment Disorder/Confused Development**

This covers all the developmental problems that are caused by failure to thrive which we thought about in the last session. Some examples of these problems are:

**Attachment problems** - It is likely that young people will attach to adults (often strangers) too quickly, but also change attachments

just as quickly. It is common for children in shelters to 'attach' very quickly (eg by holding hands or clothes) to any visitor who arrives. You would not expect to see this with an average child in a family who may appear quite shy if a stranger arrives.

**Relationship Problems** - relationships are often formed based on past experiences. If a child has had an abusive history, it is likely that abuse could be a feature of later relationships. When this is combined with attachment problems, vulnerability to abuse is high. It may be safe for a child to attach for a short time to a stranger who visits a shelter, but it may well not be safe for that child to attach to a person at the bus stop who also appeared friendly.

**Emotional Confusion** - past experiences and developmental confusion can produce a situation where a young person seems to experience the wrong emotion at the wrong time e.g. laughs when somebody is hurt.

**Poor Information Processing** – this can be due to developmental confusion but commonly it is due to high anxiety levels.

**Confused Maturity** - You may remember that we looked at confused developments which may be very unstable and appear as strange behaviours that are difficult to understand e.g. a 16 year old acting as a 7 year old when confronted with meeting a prospective employer, but was ok 30 minutes before. Clear and often speedy rejection of people who are getting close or are making progress with the child can be a common problem. In this situation the mentee may need to test out the relationship which means that the mentor will have to be reliable even if it seems that the mentee is showing little interest. This is an area that we will be looking at in the Skills Practice sessions.

## Hyperactivity

For many social and pharmacological reasons hyperactivity is becoming more commonly seen as ADHD. ADHD stands for Attention Deficit Hyperactivity Disorder. The growth of ADHD diagnoses is huge in India and following patterns seen in Europe and the USA. It is unclear whether ADHD is increasing or whether parents and teachers are becoming more aware or even relying more on it to provide a reason for poor behaviour or poor school performance. A diagnosis of ADHD can provide allowances in academic performance (eg increased time allowances in exams), provide medication for symptoms and make it clear that this is the child's problem. Now is a good time to remember the problems that Arjun had earlier in the session when it was established that the problem was his and needed treatment. This mental illness model may look like an attractive way forward but there is an argument that this type of long term use of medication is not safe, it is not providing solutions or an understanding of the child or the child's situation. Taking pills will not help a young person gain the new life skills that are necessary to move on.

Pure hyperactivity is rare, but children or young people who are too active often seem to be unable to concentrate in some situations can be quite common. Often young people who cannot sit down and listen to an adult seem not too hyperactive to play cricket or something they really enjoy! Nearly always there is a solution to help with calming 'hyperactivity'. For disadvantaged young people the solution will often involve the sort of issues that we have talked about today.



There is evidence that diet influences hyperactivity, especially sweets with additives and colourings including fizzy drinks. It is possible for food additives to increase hyperactivity type problems and lower concentration levels. This may cause a situation where your mentee's behaviour can appear poor. This should not be confused with sugar which tends not to cause these types of problems. So a cup of chai with your mentee does not have to be avoided.

At this point the list of mental health problems may seem almost endless, but we will return to this area when we look at formulation. The important thing is to look at the problem with confidence, perhaps discuss it with other mentors in Reflective Practice and share possible solutions. It may not be the task of the mentor to find solutions to problems but rather to stand by your mentee. This often is the solution, but this may take some confidence on the mentor's part. Again more of this will be explored in the skills sessions.

Most of the problems that you may come across with disadvantaged young people will be mainly due to developmental experiences similar to those that we looked at in this session and Session Two. These types of past experiences and present problems can generate high levels of anxiety which in turn can be conditioned to other situations in a way that happened when our volunteer tried to walk through the door and was hit with a stick. Often standing by an adolescent in a difficult situation can be enough to lower the anxiety sufficiently maybe for a work experience interview or to meet somebody etc. This can provide experiences of success rather than failure, which may be a new experience and provides self esteem for future situations. If this is the case then a mentor will be very important and will need confidence rather than clinical skills. You are not a clinician and may not know what to do in a given situation but to hang on in is most important and valuable. Do not feel that you have to know the solution to every problem. Sometimes you may not know the solution or there is no solution and that needs to be shared honestly. If there is no apparent solution, this is not a failure but the start of a new way forward for your mentee.

Now is the time to remember your Skills Practice sessions so far.

### **Example Problem**

Your adolescent mentee is not happy as she lost touch with her family 5 years ago and do not know where they are and this is making her feel depressed. Her shelter staff said that it's not possible to find her family so she must stop thinking about it and move on. – can you (mentor) sort this out please?

Mentor - think about the skills practice so far, don't panic, do not think of providing a solution at this point, you cannot give the family back, you cannot find an instant solution that takes away the pain. Maybe you feel that you know little about depression. What can you do?

First thing to do is LISTEN (it may feel more comfortable to give the obvious solution or change the subject but don't).

Secondly REFLECT make sure your mentee knows that you are understanding what she is saying.

It may be the first time that an adult has spent time with this adolescent really caring about her as a person, accepting her just how she is. To understand and value in this sort of way, can be very powerful when a person is seen as worth caring about, understood and taken seriously even if an immediate solution is not available.

As the sessions continue more skills will be gained to deal with situations like this. Don't forget this is only our starting point.

# session 3 *skills practice*

## Validation Levels 3-6

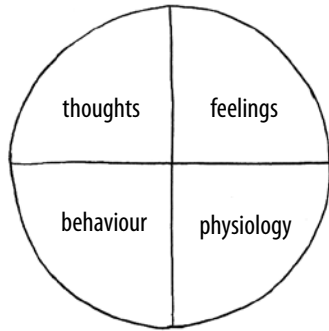
Before getting started we are going to see how you got on with your homework task of trying validation at home or work. Often when a person is validated in an interaction they respond differently, sometimes not in the way in which you may expect! Write in the space below any reactions that you noticed during your homework task:

We now move on to look at four further levels of validation which will give you all the skills that you will need to use validation in any situation. Validation is the first step in a process that will allow behaviour change to help your mentee move on and find solutions to problems and challenges.

### **LEVEL 3 – Guess What Your Mentee Might Have Felt, Thought And Wanted To Do**

This will help both you and your mentee to understand more about your mentee's behaviour. Often with children or young people they are not able to understand their own thoughts or feelings without some help to work them out. This is particularly so if the child or young person has confused development (see sessions 1 and 2). This means that sometimes you will have to make some guesses for your mentee. If the guess is wrong that is not a problem as this in itself helps to work out what the right thought or feeling is. On the other hand, if the guess is right, your mentee can agree with you and this will help you to communicate and validate.

### The Wheel Of Experience



There are four areas which cover Level 3 of validation which are shown in the wheel of experience diagram.

**Thoughts** – I don't want to be here, this is something I want to avoid, I know I can't do this, I'm very good at running, I must go to the market

**Feelings** - anger, guilt, fear shame, joy, happiness, surprise, excitement – there will be more about feelings in later sessions

**Behaviour** - running away, joining in, eating, hiding, going to school, fighting

**Physiology** – anxiety feelings, sweating, feeling sick, fidgeting, fainting



If we return to the bus stop problem (this has been a constant challenge for us!) Manjula is being harassed by a man as she waits for the bus.

**Thoughts** - I don't like this, I want to leave

**Feelings** – I feel scared, I feel panic

**Behaviour** – run away and hide, run home

**Physiology** – anxiety, feeling sweaty, heart beating fast, feeling sickly, wobbly legs

This circle allows us to understand what is contributing to the problems that we may want to try and overcome. It also shows our mentee that we are starting to understand what it feels like to be in their shoes. Our

validation can now use these pieces of information in our conversation which may sound like this:

You must have thought you wanted to leave as soon as you got to the bus stop

That feels as though it was really scary

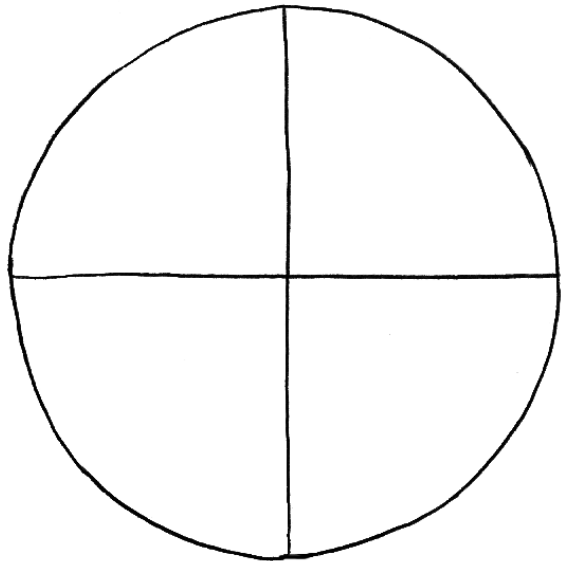
Did you run home to feel safe?

You must have felt all panicky and sweaty

Wow, that really makes me feel scared

If these levels of validation are used it will allow both you and your mentee understand more about the situation and provide a common base to work from.

Even meeting you for the first time could be difficult for your mentee, especially if your mentee was abandoned by his family 5 years ago and now lives in a shelter. You are a successful software engineer working for a multi-national company. Write down what you think your mentee may be thinking at this time. There are no right or expected answers so feel free to write down your ideas the circle below.



#### **LEVEL 4 – Normalise In Terms Of The Past**

To normalise an experience helps to lower anxiety and shows that you, as a listener are understanding what is being said to you. This also starts to help your mentee understand why they feel as they do and maybe why they are doing what they do. An example of level 4 validation may be 'it's not surprising that you lost your temper since you've always done that when someone has hurt you in the past' or 'it's understandable that you ran away when that man shouted at you as that has happened a lot in the past'.

#### **LEVEL 5 – Normalise In Terms Of The Present**

This is similar to normalising in the past but it takes the communication to the next level of what is happening here and now as we talk. The understanding that was starting in the previous level is now in the here and now. Normalising lets your mentee know that they are not the only one who is feeling that way and there is a reason for those feelings. This helps to put those feelings or actions into reality which is able to be changed and is not just impossible or failure.

### **LEVEL 6 – Honest Response**

Wow! Gosh! I'm so pleased, no way, no –really? that's great, I'm sorry, that's brilliant, oh – are all honest responses, they are just what they sound like – your honest response to what you just heard. Honest responses do need to be honest and they let your mentee know that you are human and not just an answering machine. Honest responses help your mentee understand how they fit into the interaction and also the world. They also help to normalise the situation and let each other know that you are both people with feelings.

Here are some examples of validation, write next to each one which level of validation you think is being applied

**You must be feeling hurt or maybe angry?** *Level*\_\_\_\_\_

**It's understandable that you lost your temper since you've always done that when somebody hurts you** *Level*\_\_\_\_\_

**I'm not surprised you couldn't do it. You have so much on your mind at the moment** *Level*\_\_\_\_\_

**So what you're saying is that you are tired out from making so much effort all the time ... is that right?** *Level*\_\_\_\_\_

**Wow that's super** *Level*\_\_\_\_\_

**If that happened to me I would be so afraid** *Level*\_\_\_\_\_

**You must have wanted to just walk out of the door**  
*Level*\_\_\_\_\_

**I'm sorry uncle was so cruel to you** *Level*\_\_\_\_\_

**You've had a bad day you say** *Level*\_\_\_\_\_

**I wonder if you were thinking 'I'm just no good'?** *Level*\_\_\_\_\_

**I find this difficult too** *Level*\_\_\_\_\_

Now that you are able to use six levels of validation the earlier example of the mentee who lost her family can be taken further. Earlier in the session only two levels of validation could be applied. Working in pairs using role play, apply all six levels of validation to the mentee's problem of having lost her family and feeling sad and perhaps depressed. At the end of this task we can share with each other how this validation felt for both the mentee and the mentor.

## session 4

# relationships

## key statements

### **1. There may be no right answers**

### **2. But you still have to help your mentee find them**

### **3. You should consider how to say goodbye before even starting your relationship**

Over the last few sessions we have been considering child development and how disadvantaged children may be different to other children and what makes them special. Patterns of development are very important when considering relationships. Relationships change and have different functions depending on the needs of development. This means that relationships change with age when the child and subsequent young person has different needs at different ages. These needs can be biological, neurological, social or psychological.

If development continues as expected for an average child, at about 9 months the child will be attached to one or two carers or parents who provide comfort and protection. This means that the child will recognise key carers who can be trusted and provide safety. These few adults who are usually family members

or a part of the family system will provide all of the child's needs. Later on during the earlier school years the child will be more a part of the world, usually with a few 'best friends' but still returning to parents or carers, for protection and care. During adolescence the young person will be seeking independence from parents and forming much stronger attachments with their peer group. At times this attachment to peers can be so strong that it can cause conflict with other people and relationships, especially family. Many disadvantaged children will not have had appropriate experiences during their development and so may not have learnt the life skills that they should have done. This is often the case for children who live in institutional care, for example, orphanages or shelters.

We will now think a little more about children becoming young people from about 10 years upwards, the time known as adolescence. During adolescence there are generally rapid physical changes, the most noticeable being growth spurts and puberty. These changes have many similarities to the earlier changes that we looked at during child development. Changes happen in a uniform way even if children have failed to thrive and may appear smaller than other children of a similar age. Growth spurts happen in the same sequence for all children and look something like this:



Trousers that fitted only a few weeks ago at the beginning of the school year are now at half-mast as legs grow



Just after the trousers are sorted out, it's the arm's turn to grow



Finally the trunk grows and the adolescent looks somehow unable to manage this new shape for a while.

You may remember your own adolescence and how so many things got dropped or broken as you got used to your new size and had to re-learn where your arms and legs now ended!

During these changes sexuality develops and friendships or relationships change from predominantly same gender to include more opposite gender relationships. Relationships can appear to be the most important part of an adolescent's life.

The way you dress, act, think, your likes or dislikes often have to conform to the peer group as the break from carers is tested out. Peer relationships can be very intense and appear to be out of proportion to onlookers.

Adolescence can be viewed as a time when the young person is geared up organically and socially for:

**Independence** (towards living and thinking away from family and carers)

**Identity** (having a role in life and working towards goals)

**Self esteem** (working out who you are and how to value yourself)

**Intensity** (relationships are intense and often cannot be sustained causing high emotion)

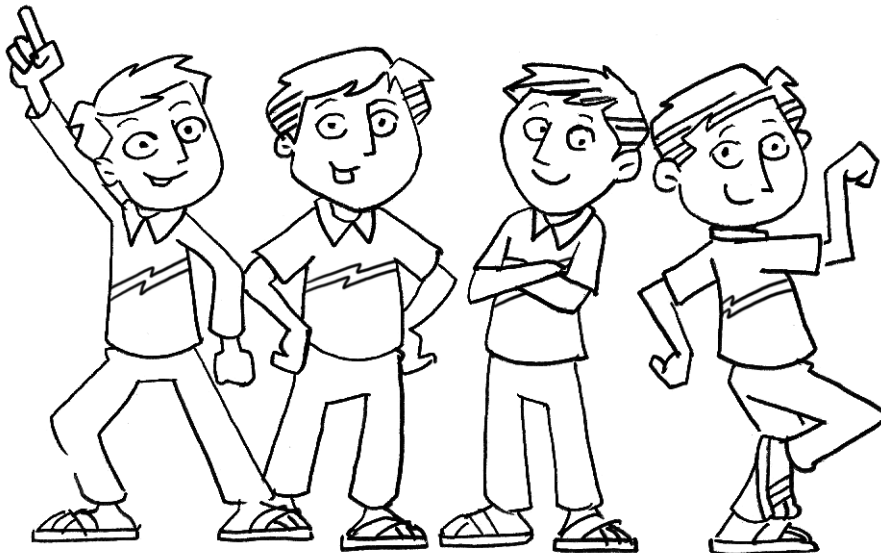
There are a number of mental health issues that can make relationships difficult including substance misuse which can include using substances such as sniffing things like glue or paint, taking drugs or alcohol). There can be high levels of short term or temporary depression, mood changes and general turmoil. Often there is a feeling that adults just don't understand anything! Anxiety levels can be high as adolescents panic that they will be seen as different or somehow abnormal.

It is during this time that you will be forming a most important relationship with this young person who is no longer a child but not yet an adult. You will have to negotiate a relationship which is not a parent, not a teacher and not just a friend – but unconditionally there. At this point we need to consider how disadvantaged children may be different and special.

### **Sensitive Periods and Developmental Confusion**

In previous sessions we thought about how development may happen very quickly due to biological or neurological drives at certain times. During adolescence there are huge changes happening to hormones etc., around puberty. It may be the case that many disadvantaged children are not ready psychologically or developmentally for these changes.

This is also the case for issues around independence or self esteem. Developmental confusion can cause many complications in many situations especially when forming relationships.



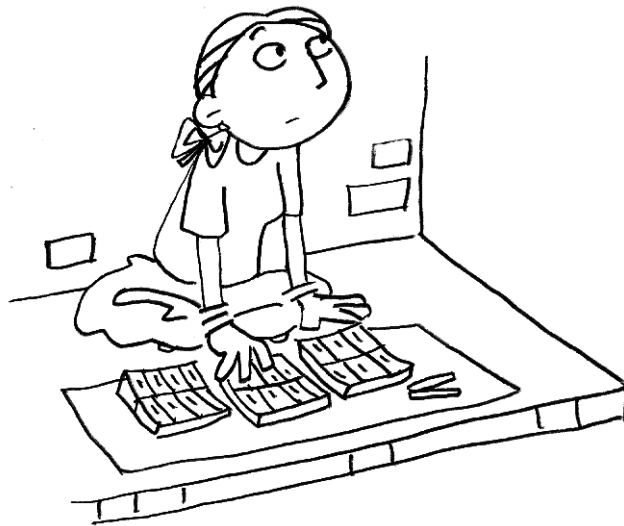
Examples of the type of problems you may find in your relationship with your mentee,

Your mentee may be:

- clingy (perhaps developmental confusion, acting younger)
- rejecting (being too anxious to form attachments - previous losses, peer group pressures)
- too attached (poor past attachment skills, dependent)
- difficult to motivate (poor self esteem, depressed, high anxiety)
- changing abilities (developmental confusion, anxiety)
- falling in love with you (poor attachment skills)
- inconsistent (all of the above!)

The relationship that you form will have to run alongside your mentee's family, carers, friends, the media, employers etc. A successful relationship will have to be non-judgemental, but encouraging different ways of looking at things. Sometimes your thoughts may be in opposition to other people who have relationships with your mentee. Your task is to help your mentee to find a solution that is best for your mentee (this may of course not be the one that you as a mentor really wants).

A simple example may be Manjula's family asking her to leave school and get a job as a street seller, as they need some money. Manjula feels that she should help support her family and feels bad not doing it, her friends are selling soap and pegs near the shopping mall - but you think that Manjula could (and should?) train for a possible career in a call centre.



You could

- advise Manjula she must say no to her family
- tell Manjula that if she doesn't follow advice there's no point in meeting up
- tell Manjula she will never get on in life selling things on the street
- argue with Manjula until she sees sense

Although these responses may feel tempting, they will probably stop the conversation at that point and cause conflict. Manjula needs a little time, space and help to explore possible ways forward. Now is the time to be applying your validation skills.

Example of validation for Manjula:

*"Oh, your family want you to leave school*

*Maybe that's a little scary, such a big step, etc"*

As a mentor you may have to accept that your mentee may not follow your view as the only sensible way forward. But also as a mentor you will need to be there regardless in an unconditional way which could be one of the most powerful life experiences that your mentee can experience at this time.

This session is looking at problems around being a mentor and the relationship you may have with your mentee. This is NOT to suggest that all mentor – mentee relationships will be this problematic and indeed you would be most unlucky if you encountered all of these problems. But as has been mentioned in previous sessions disadvantaged young people have not had the pasts that we would choose for them and this may well cause problems for the present.



### **Previous Mentor's Problems – How To Say Goodbye!**

Previous mentors who completed this course have found that one of the most difficult parts of mentoring is saying goodbye.

When you start to meet with your mentee you need to jointly make an Agreed Plan. This is simply a plan which you have both agreed that will lay out your aims. At first this can be very simple and may just agree that you will meet for 2 or 3 weeks at a given place. It is best if the plan is written on a piece of paper.

For a young person who has been let down all through their life this simple agreed plan may be sufficient. But why is this so important? It makes the mentoring safe to explore without the fear of this being another let down in life – this can dramatically lower anxiety and prevent the need to escape, so that the agreed plan is completed and success is experienced. At the end of the 2 or 3 weeks you may decide to meet for another 3 weeks etc. This will also help you as a mentor if you are not feeling too confident at first.

Not all mentees will need such a simple or short agreed plan and some can be quite precise e.g., I need to leave my shelter in 6 months and I need to work out how to get a job. There are of course endless examples of what an agreed plan can look like. Entering into a relationship with a mentor without boundaries, or with high perceived expectations is very likely to increase that anxiety to a level at which your mentee finds it more comfortable to escape and not see you. This may be the way in which your mentee has had to manage most of their life events previously due to high anxiety levels.

As each agreed plan is completed there is an automatic goodbye, unless you both decide to continue. The possible awkwardness

of saying goodbye is now replaced with the success of completing your plan, which can be celebrated. Saying goodbye is often more of a problem for the mentor, as your mentee may think back and remember that person who gave you inspiration for a crucial 6 months or year of their life.

If you are in doubt, make your agreed plan as simple as possible so that it is very difficult not to succeed – this is the springboard for your mentee to experience success and continuing your mentoring relationship.

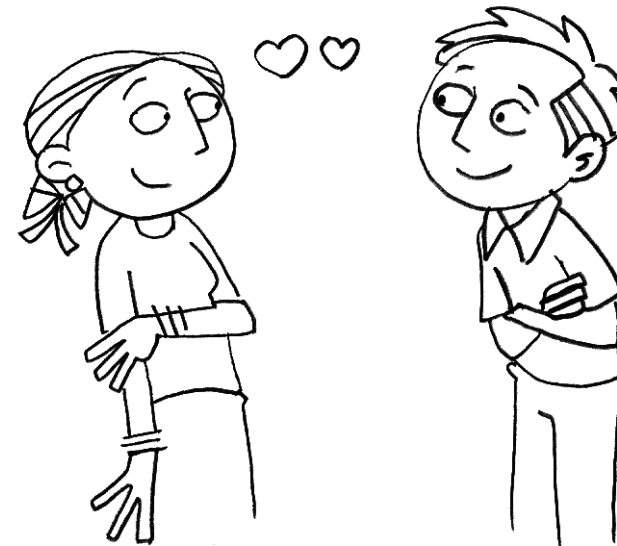


## Sexuality

As a mentor it is likely that your mentee will want to talk about boyfriends/girlfriends. We will all have different views about relationships and sexuality which is our starting place. A number of previous mentors have reported in reflective practice sessions that all their mentee wanted to talk about was their boyfriend/girlfriend at certain times. To trust a mentor with the most important thing in an adolescent's life is demonstrating enormous trust, however frustrating that may be for the mentor!

At this point it is important that you remember (along with your skills, eg, validation, reflection etc) that your task is to help a mentee gain life skills so that they can find solutions not just for you to attempt to provide one, however tempting it may be. As a mentor you will have to make a decision of what you may find acceptable or comfortable should this area come up.

You may find that your mentee wants to talk about sexuality. This is often seen as a difficult area for mentors. Essentially we have found that this is an area that is about relationships and not sex education. If it turns out that your mentee really needs sex education then you may feel equipped to deal with this but on the other hand don't feel that it's a failure to get advice. In this scenario it may be the mentor's task to help the mentee work out how to gain the information needed – not necessarily to provide it. At times for adolescents there is nothing more important than their boyfriend or girl friend. It may feel that when your mentee's love life fills the whole session no progress can be made, but this is demonstrating

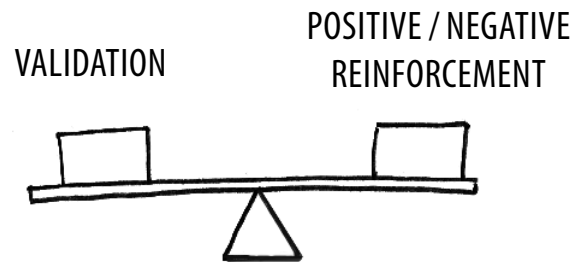


that trust has been formed and your mentee's priorities may not be just the same as yours.

Adolescence is also a time when young people work out how they see themselves and who they are. At this time adolescents often worry about their sexual orientation. This can generate high levels of anxiety which in turn can cause many problems as we have thought about in earlier sessions. Again, it is not a problem not to know the answers and there is not an expectation of providing instant solutions. To have somebody listening and spending time with you, who will not judge is the real way forward.

# session 4 *skills practice*

## Positive and Negative Reinforcement



It is now time to move from acceptance to change.

The main tools to be used are positive and negative reinforcement.

### **Positive reinforcement**

Anything delivered linked to a response which will increase the likelihood of the response happening again.

This may easily be mistaken for a reward, but we only know if something is a positive reinforcement if the behaviour occurs more frequently. Sometimes we may not be aware of a positive reinforcement or it may even appear unpleasant.



Just for a few minutes we can leave people and look at rabbits. The understanding of behaviour was developed using animals and then it moved on to people. This rabbit is in a cage with a lever which delivers food pellets when it is pushed down. The rabbit does not know that the lever gives it food and indeed does not know that we want it to press the lever which is the target behaviour.

If this rabbit moves around in its cage it will sooner or later knock into the lever, which will give a little food pellet. At this point the rabbit does not know that the food arrived due to knocking into the lever. However, the rabbit is now more likely to now run over to the same side of the cage, which in turn makes it more likely to hit the lever. The rabbit will soon be actively pushing the lever and getting food pellets. It is often surprising how quickly animals can learn new tasks like this. This is the foundation of behaviour change.

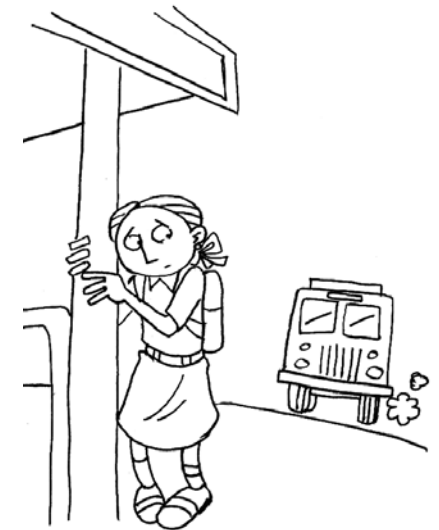
But we are working with people and not rabbits (which would be easier!). With people, especially children the most common positive reinforcement is praise or approval. This is particularly so with disadvantaged children who may have experienced little praise during their lives.

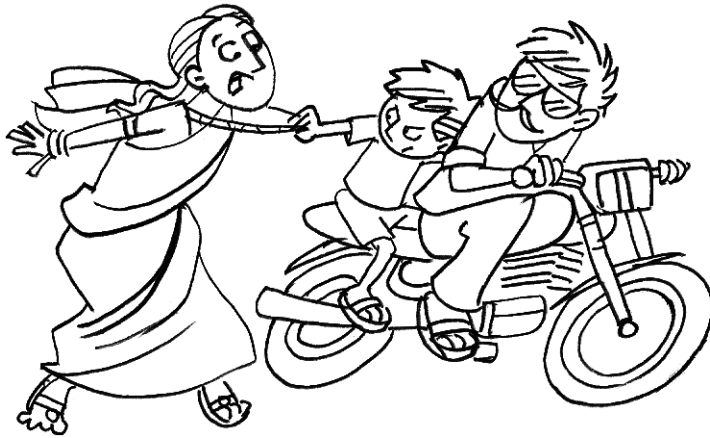
There are three key skills to think about when using reinforcements to increase behaviour.

The first skill is to recognise whether what you are using as reinforcement is really a reinforcement. The rule is that a reinforcement increases the likelihood of a behaviour happening. This is different to a reward which is usually very nice but may not have an impact on behaviour. Most positive reinforcements are pleasant but sometimes a reinforcement can appear to be unpleasant but still increases the target behaviour.

The second key skill is to look at the situation very carefully and work out what the target behaviour (the behaviour you want to increase) actually is. When Manjula would not get on the bus it was easy to reinforce the wrong behaviour making things worse. There will be more of this in future sessions as your skills build up.

The third key skill is to make sure that the reinforcement is as small as possible, preferably naturally occurring e.g. a smile, a nod, an encouraging look.





Ravi has met with Raj, his mentor, and is in trouble. He has told Raj that he is in a gang who are stealing gold chains from women near the local market. The way he is doing this is coming up behind the women on the back of a two wheeler and pulling the chain off their necks and then rushing away down the road. The boys then sell the chains to a dealer and split the money between themselves.

Positive reinforcements may be at work in situations that we may not always expect. In the spaces below think about how to validate what Ravi has told Raj. Don't forget this is not the same as condoning or agreeing with the situation. Write one short statement that Raj could use with Ravi for each level of validation.

Level 1

Level 2

Level 3

Level 4

Level 5

Level 6

Now think about some of the positive reinforcements for Ravi that apply to chain stealing. Before reinforcements can be recognised the behaviour has to be broken down to its smallest parts. Chain stealing describes an overall behaviour that is made up of many parts or many smaller behaviours. There are many different behaviours involved in chain stealing. Some of these behaviours are being a gang member, riding on the two wheeler, snatching the chain, selling the chain, splitting the money and so on. Fill in the spaces on the next page with any positive reinforcements that you can think of for Ravi.

### Positive reinforcements for Ravi

1

2

3

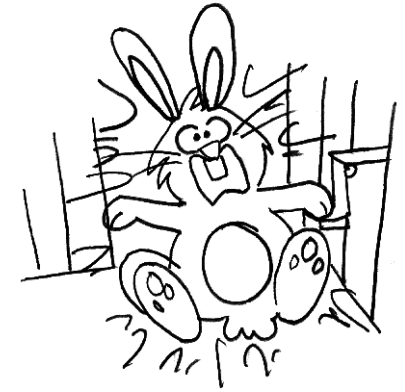
4

### Negative Reinforcement

Negative reinforcement also increases the likelihood of a behaviour happening again, but now the behaviour is reinforced by escape or avoidance. This was the situation when our volunteer in session 2 avoided walking through doors after being hit on the head. This should not be confused with reducing behaviour which will be looked at in later sessions. Often situations are avoided due to high levels of anxiety or fear. It can feel better to run away or hide to avoid a situation that is difficult.

Avoidance can also include things like taking substances (including sniffing glue, paint etc) or alcohol to avoid thinking about difficult situations such as being homeless. Avoiding turning up to see your mentor would also be negative reinforcement.

We now return to the rabbit in the cage. The rabbit is in the same cage but this time the rabbit gets an electric shock. The electric shock stops when the rabbit touches or presses the lever. The reinforcement will now increase the likelihood of the rabbit touching the lever.



This is still reinforcement because the target behaviour (lever pressing) increases. The lever pressing increases to avoid a negative situation. Now think about Ravi and the gold chain snatching. In the spaces below write some of the negative reinforcements that may be involved for Ravi.

1

2

3

4

Children like Ravi who are disadvantaged may have had long histories of negative reinforcements such as pain and fear. This means that these negative reinforcements may be well established, familiar and strong.

Homework task this week is to try out using some validation and positive or negative reinforcements at home or work and be ready to report back next week. Try and choose a target behaviour that you want to increase with a friend or colleague. This may be a simple behaviour like smiling – and report back at the next session.

## session 5

# formulation

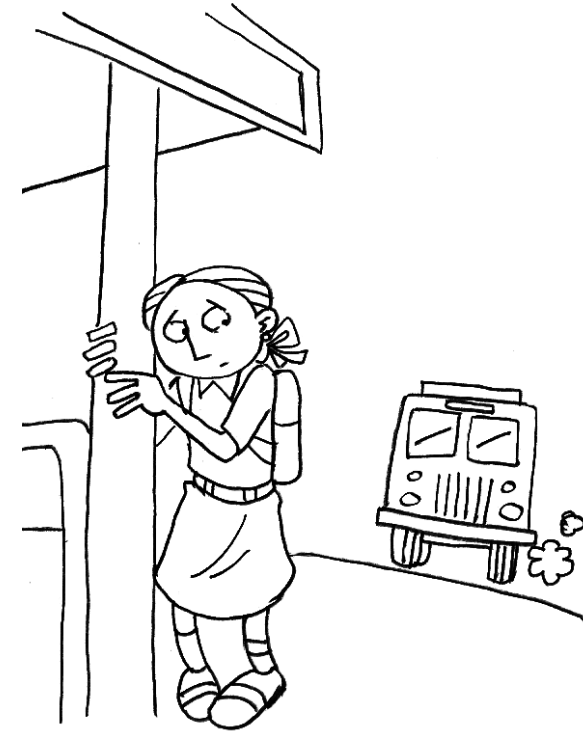
### key statements

- 1. Define the problem**
- 2. Getting it right first time is not essential so don't worry**

Formulation is a way of looking at a behavioural problem and thinking about what has caused the problem, what is maintaining it and what are the possible solutions. There may be a long history to the problem, maybe even longer than the age of the child eg if the child's mother took substances during pregnancy or if there is a genetic component to the child's problem. Formulation is useful when a problem seems stuck or confusing. You do not have to use formulation for all behaviours, eg, if Ravi does not want sugar in his coffee – this does not need formulating!

Formulation is rather like a detective story as more parts of your mentee's behaviour are un-covered. It can be useful to draw a formulation on a piece of paper or white board rather like a flow chart. The first thing to do is to look at the problem and think carefully about the most accurate way of describing it in terms of behaviour. This process is often known as behaviour analysis and helps to define what it is that is really happening and what may be keeping the behaviour going.

We are going to look at the formulation process in 6 steps, using Manjula who still has her problem as she has stopped going to school, she is not getting on the bus.





### **1. Investigate The Problem**

Not going to school is an overall description which could come from a number of sources and does not inform you as to where to target your help, support or advice – look carefully at the problem – what can you see or work out that is happening – maybe you have seen Manjula at school and she seems quite happy there or perhaps school staff members have told you that she is happy at school. School staff may have also told you that Manjula has friends and is good at school work. This would suggest that the problem is not at school but somewhere else. By now you should be able to use your validation skills to gain information which will help you focus on the real problem.

Talk to Manjula, at this point don't be critical but have a conversation (don't forget lots of validation may be necessary) about getting to school and how difficult it may be. You may now find that the focus of the problem is that a man at the bus stop is harassing her and she has become frightened.

If something like this is discovered then the focus of the problem can be recognised. Many adults like carers may look at the situation and assume that the problem is a school problem. You may also have made this assumption if you had not used validation.

### **2. Define The Problem (ABC)**

After investigation, the problem may appear differently; in this case Manjula is being harassed by a man and is unable to manage that situation. This is very different to the original look of the problem which was said to be school problem or a problem of not wanting to go to school. Perhaps the new definition of the problem is that Manjula cannot manage a difficult relationship with a man - NOT that she doesn't want to go to school - which is what you may have been told. If this difficult situation could be overcome then Manjula may happily go to school. With this new information the next thing to think about is what is the actual behaviour that is creating the problem within Manjula, that is stopping her from getting on the bus. Now is a good time to remember your validation exercises (remember; thoughts, feelings, physiology, behaviour - see *Session 3*). This should lead you to define the problem as she does not get on the bus as she feels anxious and scared. This is now your target behaviour, not school, not bus but high anxiety or fear. This may be different to how the problem was initially presented to you. An easy way of applying behaviour analysis is to think of the following three processes around the target behaviour. The behaviour that we are concerned about is that Manjula is feeling anxious and scared and not getting on the bus:

**Antecedent** – what happened just before the target behaviour; the man said ‘do you want to meet me tonight, if not I will get you in the dark’

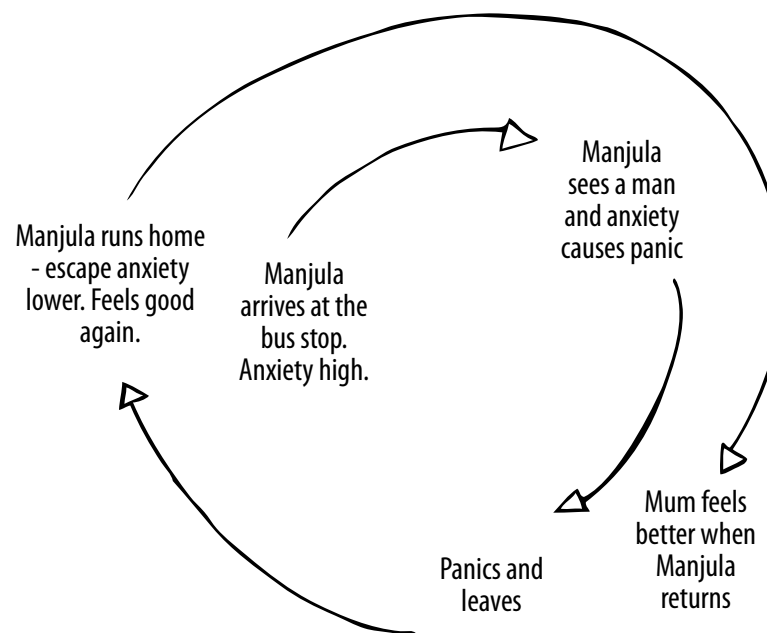
**Behaviour** – feeling anxious and scared, not getting on the bus where the man is

**Consequence** – run home and feel better as anxiety goes down (escaping has made Manjula feel safe)

### 3. Consequences Of The Problem ( Often What Is Maintaining It)

You now have a much more accurate understanding of what is going on and you have worked out what the behaviour is that you need to try and help Manjula change. This is the time to be supportive towards Manjula not critical. She is in a situation that she cannot manage, find out how she is dealing with it – remember all your levels of validation. In this case Manjula may be running home or hiding in the market etc. She may be feeling very anxious and fearful at the bus stop, but by running away her anxiety is lowered (escape or negative reinforcement). There will be more about escape and negative reinforcement in the second part of this session. Often this can be a good time to think whether you need to work out what is maintaining a problem, or what is keeping it going now, as this may be different to what may have started it (remember conditioning and anxiety from session 2, walking through the door).

Manjula may have had a problem with the man last year but he no longer uses that bus stop. Her anxiety may have conditioned (just like walking through the door in session 2) and now every time Manjula goes to the bus stop she feels anxiety which feels like panic with a sickly feel and shaky legs with lots of sweating. These symptoms could be viewed as a mental health problem but rather as we saw with Arjun and his ADHD in session 2 there can be another way of looking at this problem which can produce very real solutions.



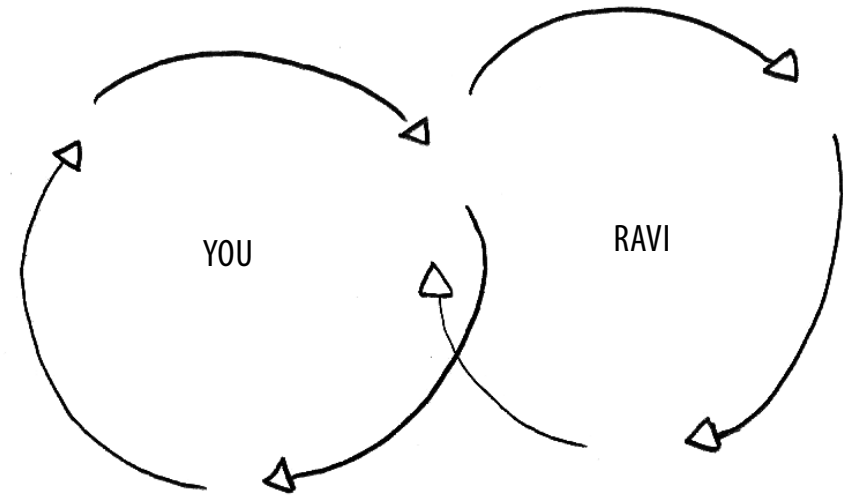
If you need to think more widely about a problem like this, don't forget you may need to draw it on a piece of paper or a white board. It often helps to share some ideas with other mentors perhaps at Reflective Practice sessions.

### 4. Think About History

This can be important (or may have little to contribute), for Manjula, there is a history. She has a history of failing to thrive, she looks younger than she is and has problems with relationships. You may know that she forms attachments just a little too fast and is thought to be vulnerable for her age (Session 2, Child Development). This may be contributing to the problem as she looks vulnerable and immature which could also be apparent in her interactions. Abusers do not generally target big strong, confident children when there are smaller less confident children available.

This also means that Manjula is more at risk as well being less skilled to deal with such situations.

If you take Ravi to the movies and as the lights go out he runs out and will not come back in. This is quite an annoying situation, the movies are not cheap, it's a special occasion – what's going on? This is the sort of situation that thinking about history could help give a solution. Have a go at filling in the following formulation with a possible understanding of what is happening. It may be interesting to also complete a mini formulation of your feelings – as they may also have to be dealt with! On the following diagram fill in what you might find in a formulation for Ravi and also how you may be feeling. If you can, try and add some reinforcements on the diagram. There are no expected or right answers as we are all different.



As with most of this course there are no right answers. This is an example of how history can be a major part of the problem you are dealing with now. You found out from shelter staff that Ravi had been sexually abused for a number years by a carer after bed time. You can now understand that this may have caused huge levels of fear and panic in some situations. Now when lights go out due to conditioning those awful feelings come back even though the abusive carer has gone. With a knowledge of this history and a simple application of formulation, movie trips may be a way off yet and other activities will be more successful.

## 5. Action Plan

Decide what to do. It is generally best to work out this decision together with your mentee as you are hoping that your mentee will gain skills that can be used later on in life and believe that she has the ability to make life decisions. Possible solutions for Manjula's problem may be role playing being assertive and complaining to the man maybe in front of other passengers, or being able to say to the man that the police will be informed, Manjula arranging to have a friend with her at the stop, changing bus stops etc. This process is about finding a way forward gaining skills and not just solving the problem for Manjula. This is a time to observe your own limits. You may think of an action plan that is not realistic, e.g. being at the bus stop with her. But can you do that every school day for a period of time? Most of us have our own lives to live which have to be built into mentoring, which in turn increases the development of realistic life skills and expectations for our mentees.

## 6. Review

Was your behaviour analysis or your investigation accurate and did your action plan work? If the answer to either of these is no, this is not a problem but time to try together to find another solution. Your first solution may not have worked as Manjula was too anxious to confront the man so your second solution may be to find another bus route to school. This new way forward may not have been found if the first action plan had not been tried, so in a way it was essential. You now know that over the next few months you need to work with Manjula to become more assertive

or to lower her anxiety, there is a need to grow in confidence and become less vulnerable. This may involve thinking about ways to lower and/or control her anxiety which you could try during your sessions.

If a problem is not simple get a piece of paper and start writing down anything that you may think could be a part of the problem, it may be that these things are not contributing and so can be ignored as the process continues. Making a flow chart can be very useful as it gives you a chance to think about potentially a lot of information and share it with other mentors. Often we have to consider the feelings, emotions or behaviours of other people who may be impacting on the situation. In session 1 and 2 we looked at Manjula who was worried about her mother. This means that her mother may need a place on the flow chart as she may have feelings and emotions that could be more important than Manjula's. When Ravi ran out of the movies it was also time to look at our own feelings as they were probably a part of the problem:

Raj - I arrange a special treat

Raj - I am now annoyed

Ravi – Everything I try fails, now Raj is angry

All of these feelings need to be recognised as they will have an impact on the outcome.

**Examples Of Things That Could Be Included In A Formulation:**

It may be that you can get some or all of this information. Often it is not possible to get this sort of information and it would not be expected that you would need all of the information in these examples.

**History** – have there always been similar problems, eg, very poor concentration, is there a known syndrome or illness, have there been multiple moves, is there abuse in the past, poor family history etc. This information may come from a variety of sources eg, school, shelter staff, files, talking to your mentee etc.

**How the young mentee appears** – are there signs of failure to thrive, flinching when approached, signs of anxiety in some situations, difficulty in relating to people, generally high anxiety levels, does your mentee seem to have problems in some situations, maybe looks depressed etc.

**What other people think** – don't worry about asking people who know your mentee for more information. Such information can be useful, when you knew that there was a fear of the dark in the shelter dormitory this told you a lot as to why your trip to the movies went wrong. You may find that other people's views of a problem may not be accurate and so can be a part of the problem (remember the child will not get on the bus – the child must have a school problem). Don't forget Reflective Practice when you can meet up with other mentors and get ideas. This does not mean that you have to follow those ideas, but sometimes two heads are better than one.

**Definition** – try and be as precise as possible to get started. Using an ABC approach can be useful to look at the situation or behaviour which can change the definition of the problem. This does not mean that you have to stick to this target behaviour or problem, but rather it gives you a starting place to understand the issue which allows you to move on to other things.

**Consequences** – the consequences of a situation may be what is now keeping it going. What is maintaining the problem may not be the same as what started it (remember the way that anxiety conditioned when our volunteer walked through the door in session 3). This can be difficult to work out at times, but most commonly (but not exclusively) with children it is connected to or avoiding anxiety. Draw on a flow chart the reinforcements of all the people involved that may be at work if necessary.



Don't forget the key statements of this session. If the formulation does not feel right, consider the information that you have gathered or thought about and make another more accurate formulation, if need be think about the previous steps again and gradually get more accurate.

If you are stuck use validation, validation, validation – this is NOT doing nothing. Sometimes there is no solution to life problems, but for somebody to think that I am important enough to really listen and try to understand how that feels after years of being ignored can be a life changing experience.

Don't forget to use your Reflective Practice Session and explore ideas with your fellow mentors and share successes and frustrations. Sometimes to hear that I am not the only mentor who gets stuck can be a welcome thing to hear.

Have you ever seen a small child at a supermarket checkout queue where the supermarket cleverly puts their sweets for sale?

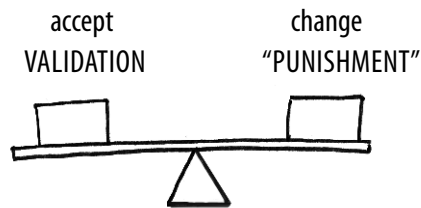
The supermarket knows that after shopping with a young child mum is worn out and at her most vulnerable. In the Skills Practice section we will look at this example more closely and see who are the winners and losers of this 'sweet battle'.

The 'sweet battle' is very interesting as there are a number of interactions and a number of people involved. This means that there may be positive and negative reinforcements almost working in harmony to produce a powerful behaviour. It could be thought that the toddler is a small part player in this situation. But in the Practice Session it can be seen that this small toddler is in fact a most powerful person despite his small size. The power is in the reinforcements regardless of who is able to use them.

# session 5 *skills practice*

## punishment

In the last session we looked at how to increase chosen behaviours, this has to be matched against the behaviours that we may want to decrease. Our tool box can now get bigger to include positive & negative reinforcement and punishment.



As you understand more of the building blocks of behaviour you will be able to look at a situation and work out what is happening in behavioural terms and in turn work out how to move forward.

Both positive and negative reinforcement will increase the likelihood that a behaviour will occur again.

It is important to note that negative reinforcement also increases behaviour; that is escape or avoidance. This is often confused with punishment.

Punishment is different; punishment is anything linked to a response which decreases the likelihood of the response occurring again. This is not necessarily the same as the everyday use of the word punishment. Punishment may even not appear unpleasant, but it will decrease the likelihood of a response happening.



The rabbit is back in his box with the lever. This time as you can see when the rabbit touches the lever something very unpleasant is going to happen! The likelihood of the lever touching behaviour occurring is getting less.

So in a nutshell, positive and negative reinforcement increases the likelihood of a response occurring and punishment decreases the likelihood of a response occurring.

A situation may contain positive and negative reinforcement as well as punishment, especially if more than one person is involved.



To return to the 'sweet battle', this mother of a young child has been shopping at the supermarket. At the checkout the supermarket have a small counter of attractive sweets. Mum is tired and her child really wants some sweets, he is going to scream and scream until he gets some sweets. Mum is determined that he is not having those unhealthy sugary sweets. At this point mum is embarrassed, the check-out lady is angry and the rest of the queue are staring.



After only one minute of screaming mum gives up and hands over a packet of sweets as she has just about had enough. Umm nice yummy sweets – good result!

What do you think is the most likely thing this young child is likely to do when he is taken next week to the supermarket?

Write down in this space what you think has happened in terms of reinforcement and punishment. Don't forget that there may be many interactions involving many people.

1 positive reinforcement

2 negative reinforcement

3 punishment

Write next to these examples whether they are positive reinforcement, negative reinforcement or punishment.

1. Smiling when your mentee turns up on time
2. Your mentee agrees to go stealing with friends so that he doesn't feel bad
3. Giving your puppy a biscuit when he begs
4. Smacking your puppy to stop him from sniffing peoples bottoms
5. Saying 'good girl' when baby uses the potty
6. Your mentee drops out of the programme because she is ashamed of something she has done
7. Smiling and making a fuss when baby says 'dadda'
8. Looking disappointed when your mentee uses bad language
9. Your mentee gets money after stealing a gold chain
10. Nodding when your mentee is talking to you

# advanced formulation

## key statement

### Things are not always how they look

During the last session we looked at formulation, during this session we will go on to look at some more examples of formulation to make sure you feel more confident in this area.

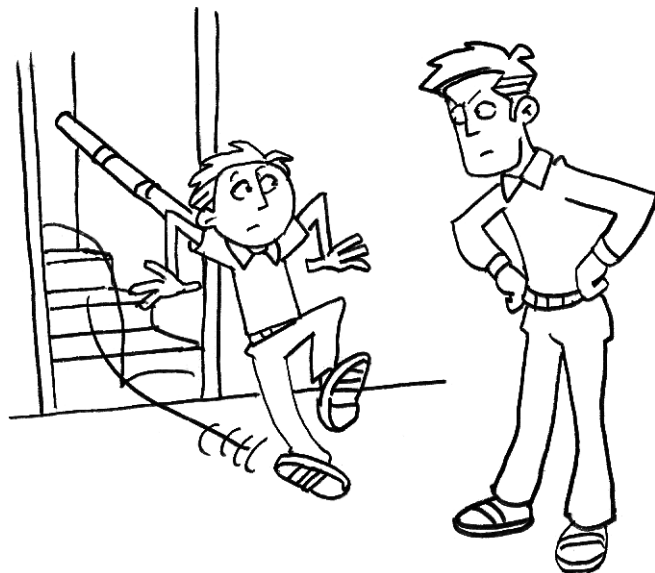
Here is a situation that may need formulating as Raj is finding it difficult to understand. Raj is a successful software engineer who works for the Acme Software Company. Raj has arranged for Ravi to get a job at the software offices. This was not easy as Ravi's family had other ideas. The family wanted Ravi to go to the market in the mornings to collect boxes and cardboard. This could then be sold for a few rupees to buy food. Ravi's job at the software company is to be the chai boy, getting drinks for the engineers. Things are going well Ravi decided to take the job, he was at work at 8am and is ready to go.

It's 8.20am and the first drinks order is taken. Ravi has to go up 4 lots of stairs and go into the kitchen to make the drinks. The order is 5 chai all with sugar, 6 coffees, 2 without sugar. Ravi takes the order from the software guys who are all really busy working on their computers. Ravi starts going up the stairs but stops half way up and runs out of the building. Raj does not know whether to be annoyed or just confused. Outside the building Raj asks Ravi what the problem is. Ravi was quite angry and said that he had to get up early – he had no breakfast – the stairs were steep and he doesn't want to be a chai boy anyway!!!!

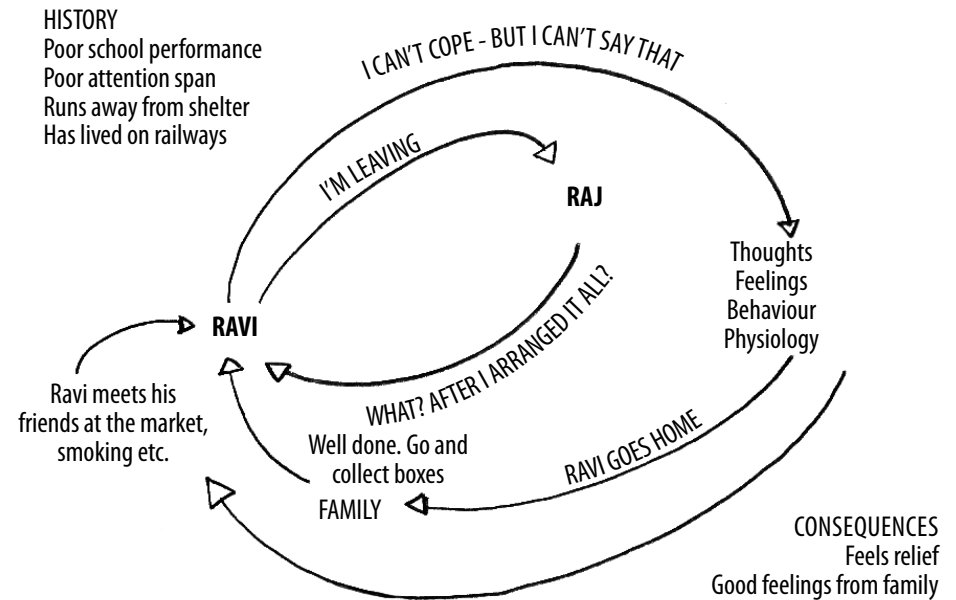
This is a real example that a previous mentor brought to Reflective Practice as he felt stuck and rather confused.

Raj's formulation gives us the opportunity to try and work out why Ravi's new job went wrong so quickly. This has also had an impact on Raj who took a chance on Ravi as he had to convince his boss that taking Ravi on was a really good idea. Raj needs to start validating to calm the situation and to gather information to formulate, make sense of the situation and form an action plan.

When Raj had calmed down and used lots of validation, some new information came to light concerning the earlier events. The following diagram is Raj's formulation which shows that Ravi panicked and just could not cope. Raj also realised that Ravi has a history of poor school performance. It was interesting for Raj to consider that Ravi has a history of running away and so this is a great skill that he has (but not really one that we want!). When you look at Raj's formulation, try and think of possible reinforcements that may be in use.



**Ravi starts work - but not for long**



As you can see from the formulation the situation is quite complex with many potential parts to it. Raj now needs to think of an action plan. As the situation is quite complex Raj has to decide where to start and which part of the formulation to impact on first. Work in pairs and in the space below write down an Action Plan that Raj may try. Don't forget there are no right or correct answers and we may find that there are as many answers as there are participants.

**Raj's Action Plan**

### Manjula Tells Divya A Secret

Manjula has some very exciting news. Manjula has a boy-friend who is a little older than her. Together Manjula and her boy-friend have hatched a plan. They are madly in love and have decided at midnight next Tuesday that they are going to elope, get on her boy-friend's bike and go to the coast to start a new life. This is a bit of a surprise for Divya as only last week Manjula was telling her that the plan is to start at college to train as a secretary. Divya also knows that Manjula's parents do not like her boy-friend too much and would not support the elopement.

In small groups think about a possible formulation and action plan for Manjula's potential adventure. On your formulation add reinforcements and decide on the Action Plan. As there is little information in this example feel free to make some up if you need to.



#### Formulation

#### Action Plan

# session 6 *skills practice*

## reinforcements, observing limits and emotions

Just to recap briefly from the last two sessions; positive and negative reinforcements work towards increasing behaviours and punishment works towards decreasing behaviours. Reinforcements have to be realistic and usually able to be used many times.

### Hints And Tips When Using Reinforcements

For these examples the term reinforcement is used but the same is true for punishment:

- \* Reinforcements should be close to behaviours in terms of time. It is generally little use reinforcing a behaviour the next day when you have time. As a general rule the closer the reinforcement to the behaviour the more powerful or effective it is.
- \* Check that a reinforcement is in fact a reinforcement (not just looking like one).
- \* Make reinforcements as natural as possible for the situation.
- \* Keep reinforcements as small as possible. If Raj gives Ravi a biscuit every time he gives eye contact, this system would probably break down after 10 biscuits! This is of course a silly example but it does demonstrate the problem.



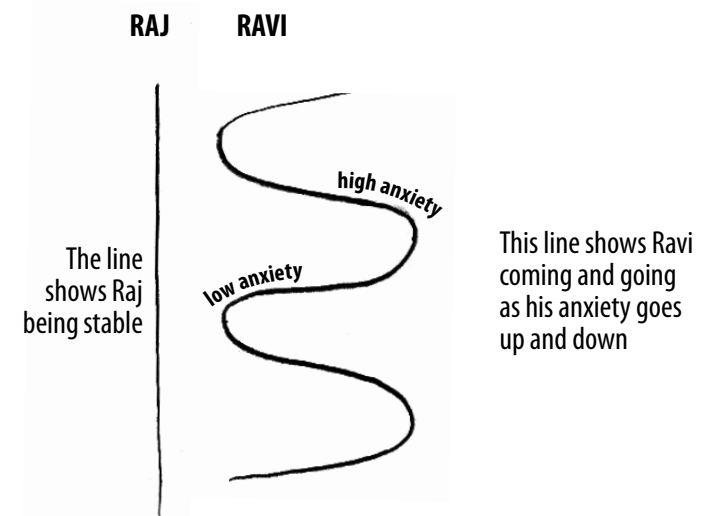
- \* Gradually make reinforcements smaller as you go along. They will be just as effective, so maybe a big smile at first and then getting smaller as time goes on.
- \* Moving on from making reinforcements smaller – intermittent reinforcement makes behaviours stronger and more resilient. This means that reinforcement may be given every 2 or three times after reinforcements have got smaller. When behaviours are established they can often maintain themselves. For Ravi his increase in eye contact when talking to Raj makes the conversation more rewarding for him and will not need reinforcing constantly as time goes on. It may feel surprising that intermittent reinforcement helps maintain progress.
- \* Break down behaviours to small parts before applying a reinforcement (more of this later when we learn how to boil an egg).

### Observing Limits

For almost all disadvantaged children having a mentor will be a new experience. In fact for most disadvantaged children it will be a new experience for an adult to talk and genuinely take an interest in them without being aggressive or abusive etc. Often adults have made offers or seemed to take an interest but have not been genuine and have not done what they said they would.

This new experience for a mentee may be quite scary and anxious, which is something we may not realise. This means that it is especially important for you as a mentor to do what you have agreed to do. So at this point we have to make sure that you do not over promise and under deliver! We cannot all offer the same things in terms of time, skills or commitment. Before agreeing a plan with your mentee you will need to think carefully about your own personal limits. In the space below write down what you think you can realistically offer in terms of time, skills, places to meet, how mobile you can be, your own strengths, interests and anything else you think you could offer without over promising. What you offer to your mentee can always be increased later on if you find that things change.







As a mentor you need to understand that for all of the reasons that we have considered during the sessions that a mentee may find it difficult to commit and be consistent. This can be a challenge for you as your mentee may come and go. This situation can be illustrated by the following diagram.





As Ravi experiences more sessions with positive reinforcement and consistency from Raj he is able to meet up without high anxiety levels and feeling the need to escape.

## Recognising Feelings And Emotions

Feelings and emotions usually happen for a reason. This area was looked at in earlier sessions when we looked at validation and the wheel of experience. In the following section the functions of feelings are looked at.

	Feelings	What It's For	What It Makes You Want To Do
	ANGER	Achieving goals/ getting needs met / protecting rights	Attack
	GUILT	Repairing relationships, righting wrongs	Say sorry, get punished
	FEAR	Protection from harm	Run away
	SHAME	Preserve social relationships / rules	Hide
	JOY	Built-in positive reinforcement, reward for achieving goals / getting needs met	Laugh / jump about/ do it again
	DISGUST	Preserve health/ protect from disease	Avoid / Be sick

	<b>Feelings</b>	<b>What It's For</b>	<b>What It Makes You Want To Do</b>
	SADNESS	Getting back what's lost	Cry, look for what is lost
	EXCITEMENT	Improve performance	Perform
	SURPRISE	Refocus attention	Find out what's new
	INTEREST	Acquire important information	Learn things
	LOVE	Relationship glue	Be with loved one

Recognising the function of these feelings or emotions will be very useful when you are with your mentee. This is also the case when formulating a problem or situation as these functions often help us understand why behaviours are happening.

### **Teaching New Skills Or How To Boil An Egg**

Earlier in this session we said that behaviours must be broken down into small parts or steps before applying a reinforcement. To demonstrate this we are together going to work out how to teach our mentee to boil an egg. To start this process off we need to break down the whole task into smaller parts. This is how it went when Divya tried to do this with Manjula

*\* So where do we start – pick up the egg?*

*\* Oh no that's not right – what's an egg?*

*\* Where are the eggs stored?*

*\* Ummm let's start again – go to the cupboard over there and open the door , what does an egg look like before it's cooked....*

In the space below write down where you think this should start with the small parts of behaviour needed to boil that egg and then moving on.

1

2

3

4

5

6

7

8

Well done, whoever thought boiling an egg was so complicated.

## session 7

# role plays



This final session will be mainly using role plays to practice and increase skills. As we are going to use small groups for the role plays these will be similar to mini Reflective Practice groups. Reflective Practice is a time for you to join with other mentors and think about your practice as a mentor. A Reflective Practice group should be a time to share but not to criticise. As you may remember from sessions about formulation, getting it right first time is not always possible. Sometimes getting it wrong is just a part of a process working towards getting it right. The more we stop, think about practice and share with each other, the better our practice becomes.

It may be that you are stuck and looking for ideas as to how to proceed with a problem. On the other hand you may be in a position to give ideas and support. Working with disadvantaged children can often be emotional for us. It is important to recognise this and be ready to support each other during Reflective Practice groups. The issues being dealt with can be upsetting or difficult especially if you are finding it difficult to find a way forward. As adults it can be surprising how working with children or young people can awaken memories and feelings from our own pasts. During these times the support found from people who are facing similar feelings becomes very important.

## Role Plays

During these role plays you will be in a small group. One of you needs to be the mentee (Ravi or Manjula) and one of you the mentor (Divya or Raj). If your role play is the wrong gender feel free to change it or just role play the opposite gender. There is not a lot of information in the examples so again feel free to make up any information needed to make the example work. The other people in the group are the observers. When the task is completed the observers become a Reflective Practice group. During this time the observers can say what they noticed during the role play and how it felt. Ravi or Manjula can share how it felt to meet with Raj or Divya. Raj or Divya can share with the Reflective Practice group what they noticed about the session. The observers may have some ideas for Raj or Divya but don't forget – no criticising. Have a go at these role plays and don't worry if you get stuck or if it feels that it's going wrong. If you think you may want to spend a little time role playing a difficult teenager – volunteer quickly.

### ROLE PLAY 1

Ravi gets excited.

Ravi is about to meet his new mentor, a software engineer who works for a multi-national company. This has really excited Ravi as he wants to pass his exams and be a lawyer – or maybe now he knows about Raj – a software engineer. Ravi is so excited he is convinced with a mentor he is going to be fantastically successful within a few weeks. Wow this feels good, good and good!!!! As you may have guessed there is a bit of a problem. Ravi's teacher has told Raj that Ravi has not been in school very long and cannot read and write, his maths work is also poor.

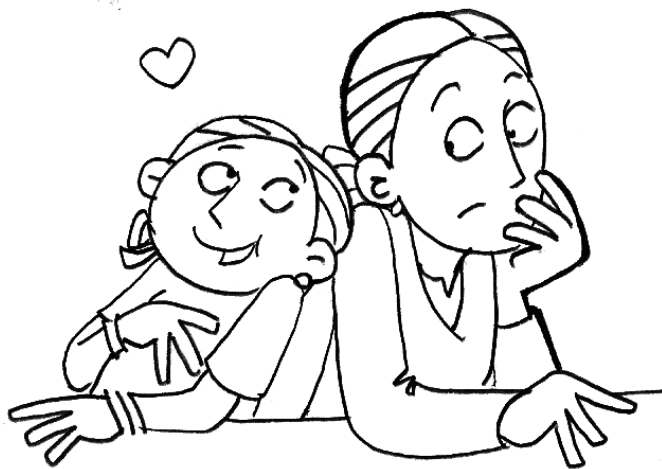
Raj's task is to meet Ravi (who is very excited and ready for immediate success) and make an agreed plan that is realistic. Raj may need all his validation and reinforcement skills to manage what could be a tricky situation. When this task is completed Raj needs to take this session to Reflective Practice. The Reflective Practice members are the observers.



## ROLE PLAY 2

Life now has a meaning for Manjula – she has a mentor called Divya. Divya is nice, Divya is attractive, Divya really cares about me, in fact Divya is the most beautiful person in the world. Manjula has decided that she would like to meet Divya every day after work and ring her at breakfast and lunch time. Manjula thinks about Divya most of the day and her friend says that she has a crush on Divya. Manjula is not sure what a crush is but she is going to ask Divya if she can move into her apartment with her and they could live together.

Divya now meets with Manjula but she has no idea how Manjula feels. When this meeting is finished the observers can discuss how it was for everyone. This could be very similar to a Reflective Practice group.



## ROLE PLAY 3

Ravi feels low. He describes this as feeling depressed, not wanting to get up in the mornings, losing energy and feeling that everything he does is a failure. Ravi lives in a shelter where he is unhappy. Before Ravi lived in the shelter he worked on a construction site with his family but the police turned up and he was under age to work.



Ravi's family stayed on the construction site which is 20 kilometres away. Ravi has turned up to meet Raj – but really what is the point? This is obviously a difficult session for Raj, he may need some help from the observers during Reflective Practice.

#### ROLE PLAY 4

It's Wednesday evening which is meeting night. Divya and Manjula have had some really good sessions. Divya feels that Manjula has moved from a timid girl to a much more confident young woman with a good looking future. Divya has enjoyed the sessions and feels excited that progress has been so good. In fact, Divya is surprised what a positive effect these sessions have had on herself. Just as Divya is about to leave the office she gets a phone call from Manjula. Manjula cannot be at the session as she has some news. Manjula has had to move away to another town to help in her uncle's shop and will be there for at least a year.



Manjula wanted to let Divya know so that she would not worry and to say goodbye. This feels to Divya that all her work has been wasted and it is a bad move for Manjula. This upsets Divya more than she expects and she feels like crying. When the role play is completed, Divya is going to need her friends at the Reflective Practice group. It may be that the Reflective Practice group can see this rather more positively than Divya.

#### ROLE PLAY 5

Ravi has had some good sessions with Raj, he has been able to improve his English and is thinking about what to do when he leaves school in about 18 months. Ravi's family live in a slum, it has no running water and not too much food to eat. Ravi's father is a rubbish collector and his mother is a maid. Ravi has two brothers who live at home. It's been a good session but towards the end of the session Ravi tells Raj that his parents want to ask him for money. Ravi says that they need 4000 rupees to pay bills.



Raj has to think quite quickly and does not want to lose the progress that they have made or jeopardise future sessions. The observers who will be the Reflective Practice group need to bear in mind that there may be various different views concerning this session. Raj also needs to bear in mind that the decision of how to move forward is his even if he does not agree with the group. On the other hand the Reflective Practice group may have some good ideas to think about.

## ROLE PLAY 6

Manjula meets with Divya, they have been meeting for about 5 months every week or so. Manjula lives in a shelter run by Sisters, but has a family who live in a slum. Divya feels that the mentoring has not been that successful. Manjula talks about her friends and pop stars mainly. Manjula enjoys going out for a coffee and chatting with Divya. Today's session started as usual and they have been chatting for about half an hour. At this point Manjula says in a fairly matter of fact way that her father was murdered last week and that her mother has been accused of doing it. Manjula went on to say that she went home yesterday and snatched her small brother as she felt he may be in danger and took him back to the shelter.

Manjula told the Sisters and her friends about what had happened and they seemed to take little notice. At this point Divya is feeling shocked that such a thing could happen and be reported in such a matter of fact way. In a way this is not a role play as it was a situation that one of the



previous mentors brought to Reflective Practice. The observers may have quite a task here as the Reflective Practice group. Think about why Manjula seemed to get so little attention at the shelter, what support may Divya need, and perhaps an action plan.

All of these role plays are based on real accounts from previous mentors. None of them were easy or simple. Hopefully they will help to build up your confidence to be a successful mentor.

***Congratulations on completing the Dream Mentoring Course and good luck for your future mentoring.***





**Dr David Pearson** is a Consultant Clinical Psychologist who has worked in the UK National Health Service. He specialised in child and paediatric clinical psychology, managing and providing a wide range of clinical services. Dr Pearson has maintained research interests covering child hyperactivity, hallucinations, developmental issues and the behavioural effects of food additives. As a parent, Dr. Pearson has found inspiration in his own family and children.



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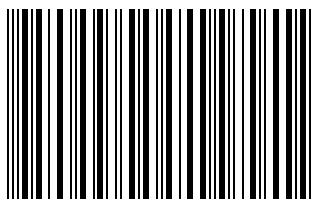


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