Module #5: Improving CHW-Client Relationship
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Health Care & Housing Are Human Rights
**Introduction**

The purpose of this module is to discuss ways to strengthen the CHW-client relationship.

We will discuss barriers to care and different strategies for addressing these barriers.

In the next module we will discuss maintaining a challenging case load and reaching out in difficult situations.
Goals and Objectives

Identify barriers to care and ways to overcome them

Discuss ways to improve the CHW-client relationship

Develop strategies to strengthen interpersonal skills
Barriers to Care?
Examples?

- Transportation
- Mobility
- Knowledge of resources
- Fear, anxiety, or mistrust
- Severe mental illness
- Addiction
- What else?
Prior Experience

- What are some negative experiences that our clients may have had prior to meeting you?
  - Violence
  - Abuse
  - Discrimination
  - Addiction
  - Incarceration
Prior Experience

- What are some negative experiences that our clients may have had with helping professionals prior to meeting you?
  - Judgment
  - Discrimination
  - Violation of trust or confidentiality
  - Disrespect
What about you?
Adult Learning & Popular Education
Why is Popular Education important?

“The connections between health and social justice are increasingly apparent, whether in the form of relative income equity, equitable work place conditions, or racial/ethnic equity.”

Wiggins, Health Promotion International: 2011
What is Popular Education?

Fundamental belief #1

The current distribution of power and resources is unjust

Fundamental belief #2

Change is possible!

Wiggins, Health Promotion International: 2011
**Principles of Popular Education**

1. **The current distribution is unjust and change is possible.**
2. **Create an atmosphere of trust.**
3. **We all know a great deal, let's start there.**
4. **Life experience matters just as much as formal education.**

Principles of Popular Education

1. Action to Reflection to Action
2. Knowledge comes from interactions between people
3. Active participants in their own learning process
4. Inclusive!

Principles of Popular Education

9. Democratic decision making
10. Shared life experience
11. Our heads, our hearts, and our bodies
12. The arts are important tools

Wiggins, Health Promotion International: 2011
Principles of Popular Education

#13
Critical thinking is not enough!

#14
Action to change the world

Wiggins, Health Promotion International: 2011
Now what?

i'z don't cares

i'z pays atenshun

i'z confused

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Barriers

Popular Education

Interpersonal Skills
Developing your interpersonal skills

Tell me. Maybe I'm help.
Active Listening

How do you know when someone is listening to you?
Body Language: Eye Contact, Open
Respond: Verbal Cues, Ask good questions
Clarify: Repeat Back, Paraphrase
Most Importantly!
Respect Privacy

What are subjects that could be sensitive to our clients?

- Immigration
- Substance use or abuse
- Sexuality
- Traumatic experiences
- Family issues
- Legal issues
Skills that promote Popular Education

- You **treat them as an adult**. You have the expectation that they can make their own decisions and carry out their own plans.

- You **offer help**, if your client wants it.

- You **care about your client**, and you let them know it.
Skills that promote Popular Education

- **Follow through!** When you promise to do something, you do it.

- **You are not afraid of the system**, and you help your client access what they need.

- **You teach them what you know** so they can become an advocate for themselves and others.
What type of relationship should you have with your client?
Parent/Child

- **How to spot it:**
  - “If the rules are not followed, there are consequences”

- **Problems:**
  - CHW underestimate clients' ability to problem solve and take initiative
  - If CHW exerts some type of parental power, there will most likely will be RESISTANCE

- **Assumptions:**
  - Client cannot function as responsible adults
  - Client make poor choices due to lack of knowledge/skills
  - Its best of the CHW does everything because the client is helpless
Teacher/Student

How to spot it:
- CHW mandates certain services
- CHW tells client how they should feel or how they must act

Problems
- CHW overlooks the knowledge of the clients and misses out on opportunities to learn
- CHW may impose their own beliefs onto clients without hearing the experiences of clients
- Services are uniformly applied without acknowledging the complexity and uniqueness of each client's experience
- Disempowering!

Assumptions:
- Client make poor choices due to a lack of knowledge
- CHW has all the knowledge, client has none
Drill Sergeant / Recruit Dyad

- **How to Spot it:**
  - Rigid rules, lack of flexibility

- **Problems:**
  - Efforts become focused on having client follow our way, rather than supporting them on their OWN goals
  - Clients might feel like they have to lie to us

- **Assumptions:**
  - Our way is the best way!
ONE WAY

MY WAY

OR THE HIGHWAY
Employer/Employee

**How to spot it:**
- Playing investigator role when determining who comes your case load
- Discriminating against physical or mental disabilities

**Problems:**
- Creates a dynamic where accountability is not mutual.
- Opportunities for meaningful advocacy and support is lost.

**Assumptions:**
- Clients are seen as subordinate to CHWs and HCH staff
- The CHW is the boss of the client
What’s the last one?

dunt wurry

ill save u
Rescuer/Victim

- How to Spot it:
  - CHW feels like it is their fault if the client makes choices that the CHW does not agree with.
  - Over-involvement: CHW doesn’t allow client to do things by themselves (i.e. make phone calls)

- Problems:
  - Creates false idea of “real victim”
  - CHW expects clients to be grateful
  - Breeds self doubt and lack of confidence amongst clients

- Assumptions
  - Confidentiality: we know what’s safest and the best for you
  - Clients should not demonstrate independence or competence
  - Clients don’t have any resources
  - CHWs are saints and clients are permanently damaged
What we want to strive for:

Team Member / Team Member!

- Shared Learning
- Mutual Accountability and Respect
- Minimizing Power Imbalance
Shared Learning

- **Key Elements**
  - CHWs see themselves as learners
  - Environment where everyone can admit their ignorance without shame
  - Focus is on learning from situations, rather than controlling them
  - Highlights the fact that clients have something to teach CHWs about health care, resources, problems in the system or our programs

- **Examples**
  - Inclusion: Clients involved in their own health care goals
  - Ways for clients to voice their opinions without being seen as complaining
  - Advocating on case by case basis

- **Questions to Evaluate our Work**
  - “Is this client focused?”
  - “What can I learn in this moment?”
Mutual Accountability and Respect

Key Elements
- Accountability goes two ways; both parties have expectations
- Relations are formed on the foundation of honesty and respect

Examples
- CHW and clients alike are expected to be on time for meetings
- Both sides are expected to follow through with activities
- CHWs holding one another accountable to help maintain environment of mutual respect and dignity

Questions to Evaluate our Work
- How do we show one another and clients respect?
- Do HCH staff show a different respect for each other than they show clients?
Minimizing Power Differentials

- **Key Elements**
  - Awareness by staff of the inherent power differentials and the goal to minimize the impact of those differentials
  - Fear of being “kicked out” is not constantly hanging over clients

- **Questions to Evaluate our Work**
  - Is this imitating power and control?
  - Have I included the client’s thoughts in this decision?
This is what we strive for
Questions?

Concerns?

Thoughts or Feelings?

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We are here to help!

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Happy Thanksgiving!