



Multnomah  
County

Department of County Human Services

# **Assertive Engagement 101 Training Packet**



**For more information and resources, please contact**

The AE Facilitation Team: [aeinfo@multco.us](mailto:aeinfo@multco.us)

# Acknowledgment

Black and Indigenous communities, as well as movements for racial equity and social justice, were the first to establish social and cultural frameworks for person-centered work. None of the content in this packet would be possible without this history. As this curriculum continues to expand, it is the hope that it will continue to evolve to fully embody these foundational methodologies and practices.

The initial curriculum for Assertive Engagement at Multnomah County were developed by Seth Lyon, LCSW and Kenan Ginsberg, LSSW from materials by Michael D Clark, MSW, LMSW with Center for Strengths Based Strategies ([buildmotivation.com](http://buildmotivation.com).)

Additional curriculum development by Armin Tolentino and tash shatz, Robin Davis, Helen Vank, and Rhea Graves at Multnomah County. Contributors include community agency staff in the Portland, OR area who expanded the content and framework of the training: Fida Awad, Kristina Goodman, Sahan McKelvey, Clay River, the Assertive Engagement Community of Practice, and many others. Case study examples written by Rhea Graves, Helen Vank, Gabe Wright, Anne Johnson, and Ruba Tamimi.

Activities that cite Motivational Interviewing are from various materials based on frameworks by William R. Miller and Stephen Rollnick's 1991 book (and subsequent additions of) "Motivational Interviewing: Helping People Change." [Miller, W.R, & Rollnick, S. (2013). Motivational interviewing: Helping people change. New York: Guilford press.]

We've done our best to cite all sources, if you notice any citations that are missing or require additional clarification, please email our team at [aeinfo@multco.us](mailto:aeinfo@multco.us).

# **Group Agreements**

## **Put Relationships First**

Work to build community and trust with each other.

## **Keep Focused on Our Common Goal**

Engage fully with the learning of Assertive Engagement to better support our clients and our communities.

## **Make Space, Take Space**

Be aware of power dynamics in our learning space. If your voice is being heard a lot in the space, let someone else share their voice. If you find yourself avoiding engaging fully, think of ways to share your experience and thoughts with us.

## **Create a Space for Multiple Truths & Norms**

Speak your truth, and seek understanding of truths that differ from yours. Remember honorable discourse. We can disagree but do so in an honorable way, founded on mutual respect.

## **Be Kind and Brave**

Work to be intentional with your language about identities you hold and the identities of others. Give yourself and others grace and compassion when possible.

## **Look at the Big Picture**

Individual actions are important, and systems are what are left after all the people in this room leave.

## **Pour from your Own Cup**

Speak on experiences impacting you and identities you hold. Allow people whose experiences might differ from yours to speak for themselves.

## **Look for Learning**

Show what you're learning (not what you already know). **Real is better than perfect.**

## ♥ Human Capabilities ♥

ACCEPTING	COMMITTED	FLEXIBLE	PERSEVERING	STUDIOUS
ACTIVE	COMPETENT	FOCUSED	PERSISTENT	THANKFUL
ADVENTURESOME	CONFIDENT	FORWARD	POWERFUL	THOUGHTFUL
AFFECTIONATE	CONSIDERATE	FREE	HAPPY	QUICK
AFFIRMATIVE	COURAGEOUS	HAPPY	HUMOROUS	TRUSTING
ALERT	CREATIVE	HEALTHY	REASONABLE	TRUST-WORTHY
ALIVE	DECISIVE	HOPEFUL	RECEPTIVE	TRUTHFUL
AMBITIOUS	DEDICATED	IMAGINATIVE	RELAXED	UNDERSTANDING
ANCHORED	DETERMINED	INGENIOUS	RELIABLE	UNIQUE
ASSERTIVE	DIE-HARD	INTELLIGENT	RESOURCEFUL	UNSTOPPABLE
ASSURED	DILIGENT	KNOWLEDGE- ABLE	RESILIENT	VIGOROUS
ATTENTIVE	DOER	LOVING	RESPONSIBLE	VISIONARY
BOLD	EAGER	MATURE	SKILLFUL	WHOLE
BRAVE	EARNEST	OPEN	SOLID	WILLING
BRIGHT	EFFECTIVE	OPTIMISTIC	SPIRITUAL	WINNING
CAPABLE	ENERGETIC	ORDERLY	STABLE	WISE
CAREFUL	EXPERIENCED	ORGANIZED	STEADY	WORTHY
CHEERFUL	FAITHFUL	PATIENT	STRONG	ZEALOUS
CLEVER	FEARLESS	PERCEPTIVE	STRATEGIC	ZESTFUL

**Reframe these two statements:**

"She's just gaming the system." \_\_\_\_\_

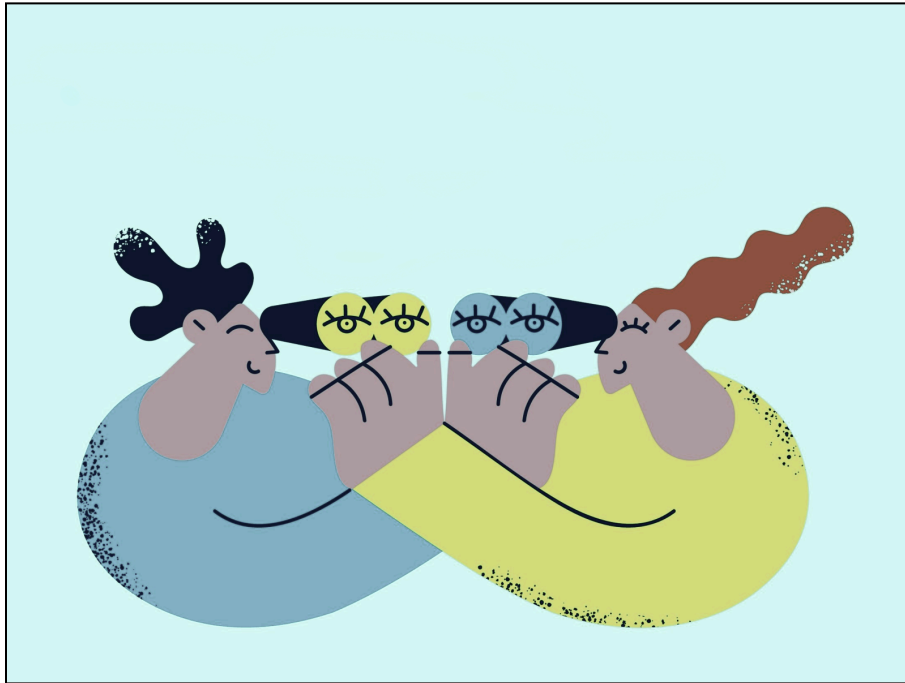
"They are so rude!" \_\_\_\_\_

**Choose 3 strength words for yourself:** \_\_\_\_\_

**Choose 3 strength words for someone who has been challenging to work with:** \_\_\_\_\_

## Empathy

“Understanding someone’s perspective and letting them know you understand.”



### Listening Activity



- ☐ In breakout group pairs, introduce yourself
- ☐ Speaker shares a story **uninterrupted** for 3 minutes
- ☐ Listener listens **without talking** or asking questions
- ☐ After time is up, listener will write down one word **without showing it to the speaker**
- ☐ Switch roles
- ☐ Once each person takes a turn, share your word

## Case Study Activity

### Instructions

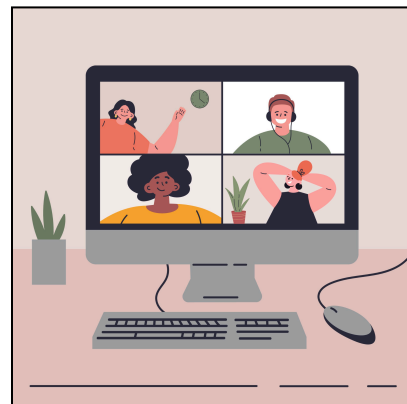
- Decide who will have what role in the group
- Read version 1 of your case study
- Discuss the questions following version 1
- Read version 2 of your case study
- Discuss the questions following version 2
- Recorder takes notes in your section of Mural
- Facilitator makes sure everyone shares

### **Provide a Briefing on your group's case study:**

- Provide a summary of the case study scenario
- Share highlights from the discussion surrounding the case study
- Why is this important in your work?
- Reporter is ready to share back with the large group

### Group Roles

- **Facilitator** - Keeps the group on task and makes sure everyone is heard
- **Recorder** - Keeps notes of the group discussion
- **Reporter** - Shares back to the larger group
- **Timekeeper/Monitor** - Ensures the group completes the task in the time allotted and everyone has a chance to speak



## **Case Study #1**

### **Performance Review: Version 1**

Staff is consistently underperforming, not meeting quotas, and her attendance to meetings is spotty. She seems distracted and disengaged in meetings, and is often upset and very emotional.

Meeting shortcomings: During meetings, she is looking at her phone, texting, speaking with other staff members, and leaving meetings to take phone calls. During one-on-ones, she constantly complains about being overworked and stressed despite not meeting numbers in the past two quarters. Her reports are incomplete and frequently are turned in past deadlines set by our agency, but before deadlines set by funders. Though the advocate works with multiple clients, she has been unable to complete the process of getting clients into permanent housing, resulting in many still open files and incomplete cases.

Goals for improvement: I've discussed with the advocate how to show up for work in a more professional manner, be calmer and less emotional, to be more responsive to emails from other program staff, and to cooperate with our communications and marketing department for the annual fundraiser.

Performance plan goals: Advocate will not have more than three late appearances per quarter. Advocate will turn in reports on time to the manager so they have two weeks to review before submitting to the funder. Advocate will determine in a faster manner if a client is eligible for housing or not, and if not, terminate the case so that she has more successful client interactions and she meets her outcomes, and thus results in successful funding outcomes.

Manager: Brittney Hendricks

Signature: Brittney Hendricks Date: March 28, 2022 [End of Review]

### **Reflection Questions**

1. What did you notice about how the author referred to the staff advocate under review? How would this description of the advocate guide the attitudes of supervisors or managers reading this review?
  2. Where does bias appear in this performance review?
  3. What would it feel like to read this description if it was about you?
  4. Who do you identify with? The staff advocate? The manager?
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### **Case Study #1**

#### **Performance Review: Version 2**

During frequent one-on-ones with Rebecca, we discussed the challenges of building relationships and trust with clients, working with clients through steps of finding housing, then only to find that the client isn't ready to commit to permanent housing. Even though it does not align with funding outcomes, Rebecca has been able to refer clients to other agencies as she discusses the client's goals for their future with them and offers support in ways other than permanent housing.

Rebecca describes often feeling stressed and overworked because she cares about the people she works with, and sees them in pain. This is difficult for Rebecca because she does not have the resources she needs to help her clients meet their specific goals. She often continues working with clients even after establishing they are not eligible for permanent housing programs, which can sometimes lead her to feel she doesn't have time for newer clients. The clientele Rebecca works with are often in crisis. Given

this, she often prioritizes client relationships above report deadlines and data entry. She also often feels the need to reply to texts or phone calls from clients as quickly as possible. Rebecca and I have discussed her feelings of hopelessness and fatigue after not being able to house a client. This vicarious trauma is reported from many staff in the advocate role. She is unable to meet her caseload numbers, but those numbers have recently increased due to staff turnover and a higher amount of clients seeking services.

Performance plan goals: Remind Rebecca about the Employee Assistance Plan counseling services and encourage her to try them. Rebecca will schedule a half a day per week where she is at her desk working on reports and is not expected to respond to clients in the field. Another staff member will be assigned to respond to calls for her during that desk time. Manager will shorten the amount of time needed to review her reports (which are always accurate and complete). Our team is currently working to hire another full-time staff advocate to help equalize our staff's caseloads.

Manager: Brittney Hendricks

Signature: Brittney Hendricks Date: March 28, 2022 [End of Review]

### **Reflection Questions**

1. What did you notice about how the author referred to the person under review in both examples?
  2. How did your perception of Rebecca (the advocate) change after reading both performance reviews?
  3. From these two examples, what might be some best practices for writing performance reviews?
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## **Case Study #2**

### **Housing Services Hotline Transcript: Version 1**

**Housing Support Specialist (HSS):** Hello.

**Caller:** Hello, I'm calling because I was evicted yesterday and spent last night in my car and I need a place to stay tonight because I can't do that again.

**HSS:** Can you give me your zip code, ma'am?

**Caller:** Of my old place or where I'm parked? I don't have a zip code right now because I lost my apartment and I need a place to stay

**HSS:** Besides your car?

**Caller:** Yes, I'm in a lot of pain now from trying to sleep in the seat and I didn't feel safe with my kids in the car overnight.

**HSS:** So you have children? Can they stay with their father?

**Caller:** Their other parent passed away last year and I've been on my own since, so that's not an option.

**HSS:** Are you fleeing a domestic violence situation? **Caller:** No, I'm all by myself

**HSS:** Too bad, Gateway Center has some pretty incredible services. Do you have any friends you can stay with? Family?

**Caller:** No, if I did I wouldn't be calling. I need a safe place for tonight, do you know if I can get a hotel voucher or something?

**HSS:** Ma'am we don't give those out over the phone, to get those you have to go to the shelter to see if you meet the eligibility requirements

**Caller:** Can you tell me if I meet the requirements or can I call? I'm low on gas from running the heat last night and I don't know how far I can drive

**HSS:** The requirements are different at every shelter. I can send you to one that takes teens and women, so you should be

good there.

**Caller:** My children are 5, 3, and 1

**HSS:** That's really young to be sleeping in a car. How cold did it get last night? Will you have enough gas to run the heater tonight? Ma'am I have to inform you I am a mandatory reporter.

**Caller:** Can you please just tell me where I can go? I know it's cold, that's why I'm looking for a place to stay.

**HSS:** I have a couple shelters, but I don't know if they would work for kids that young. There's the Rose City Women's shelter, they would know where to send you if they don't take kids. Here's the number 503-555-5555. I can also add your name to the Transitional Housing Queue if you're in Multnomah County.

**Caller:** I am in Multnomah County. My number is 503-888-8888. Will someone call me today? Do you think they can find me a place tonight?

**HSS:** Oh no, that will take weeks. There's a pretty lengthy intake process, but starting now is your best bet. But don't change your number or they won't be able to reach you.

**Caller:** Is there some help to pay my phone bill so it doesn't get turned off?

**HSS:** If you have T Mobile you can apply for help in one of their stores. Not sure about Verizon. Is there anything else I can help

you with today? I can help you enroll in SNAP and OHP if you want. You might want to see a doctor for that back pain.

**Caller:** No thank you, I'll try calling the shelter

[END OF TRANSCRIPT]

### **Reflection Questions**

1. Describe the quality of the information the Housing Support Specialist (HSS) gave.
2. What did the HSS do well? How could they have had a

better interaction?

3. How would you feel if you were speaking with this Housing Support Specialist?

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## **Case Study #2**

### **Housing Services Hotline Transcript: Version 2**

**Housing Support Specialist (HSS):** Hello, what can I help you with?

**Client:** Hello, I'm calling because I was evicted yesterday and spent last night in my car and I need a place to stay tonight because I can't do that again.

**HSS:** That sounds really tough in this weather. Let's see if we can find you a place tonight, but first I would like to get more information about you and your situation so I can see what options we have.

**Client:** Sure, I need to get me and my kids out of this situation

**HSS:** Can I ask some demographic questions to determine eligibility?

**Client:** Yes

**HSS:** How old are you and what gender do you identify as?

**Client:** I'm 42 and identify as female

**HSS:** You said you had kids with you, what age are they?

**Client:** 5, 3, and 1

**HSS:** Do you identify as a veteran?

**Client:** My kids' father served, but he passed last year and I haven't been able to get any of his benefits since we weren't married

**HSS:** I'm sorry to hear that.

**Client:** Thank you

**HSS:** Can I ask what race and ethnicity you identify

as?

**Client:** I'm biracial but I identify as Black

**HSS:** Can I ask what you've tried so far to find a place?

**Client:** I tried to reach out to friends, but it's been hard to keep up friendships with everything that's been going on, so no one will let me stay. I've asked everyone I can think of and they have their own stuff going on. I tried calling a couple shelters directly, but they don't take kids. Last night I drove up to one, but it didn't seem like a safe place for kids, so I drove to a nice neighborhood and parked on a quiet street to sleep with my kids, but I'm low on gas from having to run the car for heat and my back is all jacked up. When I got out of the car to stretch this morning one of the people on the street told me to get out of there or she would call the cops. I was able to go to the library for a bit today to warm up and use the bathroom and read with the kids, but they close soon and I don't know what to do. I saw some flyers there with your number and I read something about hotel vouchers, so I'm hoping you can help me find a safe place for me and my kids tonight.

**HSS:** Thank you for sharing your story, it sounds like you are doing what you can to figure this out and I'm hoping I can help. We don't give out vouchers directly, but we do work with partners who might be able to help. One of the organizations we work with is a culturally specific provider who works with people who identify as Black, and they have a shelter in NE Portland and case managers to support beyond immediate shelter needs. Would you be interested in learning more about their services?

**Client:** It would be great to stay with people who look like me and my kids, that would make me feel more comfortable.

**HSS:** Great, the address is 1000 NE 10th Ave. Their front desk is open until 6:00 p.m. Do you have enough gas to get there?

**Client:** I should be able to get there. Thank you so much for your help!

**HSS:** One more thing, I can also provide information to the county veteran's services. You might not be eligible for benefits, but your children might qualify if their father served.

**Client:** Thank you for that, but I really want to get to the shelter before they close.

**HSS:** No problem. You can call back anytime or ask the case manager once you've been assigned one and they can help connect you as well.

[END OF TRANSCRIPT]

### **Reflection Questions**

1. Describe the quality of the information the Housing Support Specialist (HSS) gave.
  2. What was different about this interaction than the one in Version 1?
  3. How would you feel if you were speaking with this Housing Support Specialist?
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### **Case Study #3**

#### **Samir & Family Case Notes Version: 1**

Samir is a 40 year old male immigrant from Syria, with limited English proficiency. The case manager assigned to his case does not know Arabic, and depended on Samir and his family's limited English to determine the information below:

Since arriving in the US with his wife and two children, neither Samir nor his wife have been employed. Samir spends most of his time watching television, and appears to be service-resistant. His daughter, age 5, appears to have significant developmental

disabilities, but the parents have made no attempt to obtain disability supports for their daughter, who spends most of her time watching television along with her father. The child acts out frequently and engages in outbursts that could become violent if left untreated.

The father of the family, Samir, says that he is trying to find work, but there is no documentation or evidence of him doing so. His wife has made no attempt to find work. They have been receiving governmental support as refugees, and have not made efforts to get off of this temporary governmental support.

The recommendation for this family is to require that the parents make efforts to find employment, and to tie any future governmental funding to the parents' documented efforts to seek gainful employment. The daughter's disability should be evaluated, and the parents should be able to demonstrate that they have applied for disability support for their daughter. If not, the daughter may need to be removed from the household to a situation where she has more support and her violent outbursts do not cause harm.

[End of Case File Narrative]

### **Discussion Questions**

1. What do you think about the recommendation made by the case worker?
2. How did you *feel* about the recommendation made by the case worker?
3. Did you notice any judgment coming up for you?
4. Who was centered in this case study?
5. Whose voices were heard, and whose voices were missing?
6. Did you observe any mention of cultural strengths, or any

cultural biases?

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### **Case Study #3**

#### **Samir & Family Case Notes: Version 2**

Samir and his family (consisting of his wife, Yana, a seven-year old son, Gazwan, and a five year old daughter, Nadia) recently arrived in the US from Syria, where they experienced significant trauma and displacement from the war. In conversations with the family, Samir described how the family lost their home, and lived for eight months in a refugee camp in Syria before being approved to come to the US. This has been very difficult on all four members of the family, who never experienced poverty or displacement until they lost their home. Before the war, Samir worked as a physician for ten years. He is hoping to find work in his field in the US, but his medical school and physician licensure are not accepted in the US. He and his wife were well-connected to friends and family before the war, and loved hosting dinners and having friends over for games. Since arriving in the US, they have connected with some other Syrian families, but feel bad about living in poverty and not being able to host dinners for their new friends.

To help make ends meet, his wife, Yana, has considered getting a job. But she has been a stay-at-home mom and lacks job experience. Neither parent speaks much English, and they describe how difficult it has been to adjust to doing things like going to the store or interacting with people who expect them to understand English, and who speak quickly.

The two children are gregarious and friendly, and Gazwan especially has been quick to pick up English. But the war has clearly had an effect on the whole family, and they are still

having trouble feeling safe in this new environment. Both Samir and his wife expressed fear and concern for their friends and family still in Syria.

Their daughter Nadia, who is five, has experienced significant trauma due to the war, and may also have a learning or developmental disability. She shies away from strangers, and seems frightened of interacting with people outside her family. She could benefit from an Arabic-speaking counselor who has experience working with traumatized children, to determine whether her behavior is reflective of a disability, or is a reaction to trauma.

[End of Case File Narrative]

### **Discussion Questions**

1. What do you think about the recommendation made by the case worker?
2. How did you *feel* about the recommendation made by the case worker?
3. Did you notice any judgment coming up for you?
4. Who was centered in this case study?
5. Whose voices were heard, and whose voices were missing?
6. Did you observe any mention of cultural strengths, or any cultural biases?

### **Case Study #4**

#### **Elder Services Report: Version 1**

A neighbor who refused to provide her name decided to file an abuse report about Frank Miller. He is 74, walks with a limp, has trouble hearing and has lived alone for the past 3 years until 6 months ago when 2 homeless people started squatting at his house. The neighbor suspects that he has dementia and that he

doesn't realize they are taking advantage of him. When talking to him, Frank will drift off when talking and stare off into space. Sometimes he will start talking about Brandon in the present tense, but Brandon died several years ago. They were housemates when the neighbor first moved to the neighborhood. Brandon was a nice guy.

Since the homeless people showed up, Frank's house and yard looks much worse. The people will sit on the porch getting drunk, smoking, talking loudly and playing music at high volumes. Now there is a broken down car in the driveway, the yard is full of weeds, and his home is full of junk. It is hard to walk through the place. Frank has a cat and the house stinks of cat urine. He won't even clean the cat box. Frank always looks dirty, and he smells really bad. He used to be so clean.

The neighbor believes the two people who moved in are taking financial advantage of Frank. They now can access his mail which has information about his different financial accounts. The neighbor suspects one of the people took Frank's credit cards because there were charges that Frank didn't recognize. Frank often doesn't have enough money for food and had his electricity turned off several times over the last year because the bill wasn't paid. Clearly, Frank can't take care of himself and needs to be put in a care home.

[END OF REPORT]

### **Reflection Questions**

1. Why might the caller want to remain anonymous?
2. How are the people living with Frank described?
3. What assumptions are made about Frank and his living conditions?

### **Case Study #4:**

## **Elder Services Report: Version 2**

A neighbor, who wants to remain anonymous, reached out to share their concern about Frank Miller. Frank is 74 years old. He has lived in the neighborhood for a long-time. In the past, Frank was very friendly with his neighbors but after his partner Bradon passed away 3 years ago, he became socially withdrawn. He still says hello when he sees them, but no longer accepts party invitations. Frank and Brandon used to frequently invite neighbors and friends over for big parties at their house. Their house was always so clean and organized. There were beautiful flowers in the front yard and several raised garden beds in the backyard. The garden was full of delicious vegetables that were regularly featured at the summer dinner parties. Frank took great pride in his home. It was so important to him for it to be a warm and welcoming place, particularly since he grew up in a home where his parents mistreated him when they found out he was gay. They kicked him out of the house soon after.

Frank appears to have lost his love of tending to his home since Brandon died. Frank was in the car too and has had a bad limp since the accident. His leg was badly broken and there were concerns if he would be able to walk again. He also developed memory issues from the head injury when his head slammed the back of the car's headrest. There are times when he has trouble concentrating and gets distracted easily. Frank has found some workarounds. He always keeps a notepad and pen when he needs to write down very important information, and he will silently repeat information over and over to himself.

Due to the accident, Frank's back has some permanent injuries that makes it very difficult for him to bend down. He lets his cat

Bradley out of the house to relieve herself but because of Frank's physical issues, he can't always let Bradley out before she uses her emergency litter box. It is very hard for Frank to clean the box which he does on the rare days it is a bit easier for him to bend. Most days, Frank's physical ailments make it near impossible for him to keep his home clean, do yardwork or even bathe. He feels embarrassed and ashamed that he can't fully take care of himself or his home.

About a year ago, Brandon's nephew wrote him a beautiful letter letting him know he was trans and that when his parents found out they kicked him out. Frank wrote back letting Tommy know that Brandon had passed. They started corresponding and when Frank found out Tommy and his boyfriend Raven were homeless, he invited them to stay with him. Tommy has severe depression and anxiety since his family ceased to communicate with him. He is not allowed to see or communicate with his younger siblings. The depression makes it very hard for Tommy to help clean up around the house. Frank likes having Tommy and Raven around because now there are more people in his home, but it is also difficult. Neither have jobs and both seem to really struggle finding their place in the world. They know Frank has difficulty hearing, so they talk louder and will turn up the music so he can hear it better. They all have a great love of music. Frank has noticed charges to his credit cards that he doesn't think he made. Because Frank has some memory issues, he doesn't feel confident. He does wonder if Tommy or Raven made the charges, but he doesn't want them to get in trouble. Frank is afraid of Tommy leaving and refuses to consider reporting it to his credit card company or the police. Tommy is Frank's connection to Brandon. They have similar features and mannerisms that help Frank feel like Brandon is still near. Sometimes he accidentally

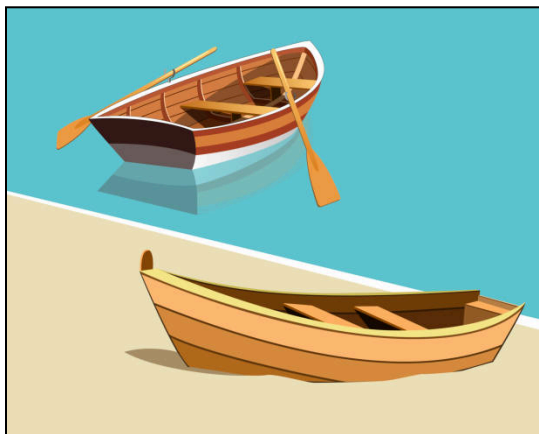
calls Tommy by Brandon's name. He feels bad when it happens, but Tommy usually says "He was my favorite uncle." Frank does need more help and is open to having a caregiver but doesn't want to go to a nursing home. He wants to remain in his home and believes that with enough supportive care, he can stay where he feels most comfortable.

[END OF REPORT]

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### **Reflection Questions**

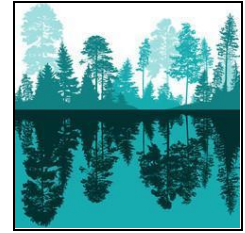
1. How does the first description compare with the second one?
  2. What value does added context bring to understanding Frank's experience?
  3. Does your perspective on Frank's ability to stay in his home and thrive change based on description #2 and if so, why?
- 



**Remember to use your OARS!**

**O**pen Ended Questions  
**A**ffirmations  
**R**eflections  
**S**ummaries

## Reflections Practice



- Partner 1:
  - Talk about a word you chose to describe yourself from the Human Capabilities chart earlier and why you chose that word
- Partner 2:
  - Offer reflections, using the **words, meaning, or emotions** you hear from your partner
  - Don't ask follow up questions or give opinions
  - Mirror back what you're hearing

After three minutes of Partner 1 talking and Partner 2 reflecting, switch roles. If there is extra time, feel free to ask follow up questions!

## Holding Ambivalence Practice

- Partner 1:
  - Identify a decision you're thinking about (example: plans for the weekend)
- Partner 2:
  - Offer a reflection, using the words, meaning, or emotions you hear from your partner
  - Use open-ended questions sparsely
  - Catch yourself if you try to fix things or sway them one way or the other
  - Reflect the ambivalence using "on one hand... and on the other hand"

After three minutes of Partner 1 talking and Partner 2 holding their ambivalence, switch roles. If there is extra time, feel free to ask follow up questions!

## Putting it all together!

<u><b>Client</b></u>	<u><b>Advocate</b></u>	<u><b>Observers (2)</b></u>
<ul style="list-style-type: none"> <li>• Discuss something that's going on.</li> <li>• Stay in character!</li> </ul>	<ul style="list-style-type: none"> <li>• Listen!</li> <li>• Try different <b>O</b>pen ended questions</li> <li>• Offer <b>A</b>ffirmations</li> <li>• Use <b>R</b>eflections</li> <li>• <b>S</b>ummarize</li> <li>• Hold <b>A</b>mbivalence</li> </ul>	<ul style="list-style-type: none"> <li>• Keep time (5 min)</li> <li>• Record what Question Types the advocate used</li> <li>• Record which questions really opened up the conversation</li> <li>• Act as a lifeline if listener needs help</li> </ul>

## Putting it all together practice

- Breakout groups of 4
- Designate an advocate, client, and 2 observers
- The advocate and client roleplay a scenario from the next page or one from your work
- The remainder of the group observes and notes which OARS skills were used during the roleplay
- Do about 5 minutes per roleplay session
- Observers share their feedback
- Switch up roles and reset timer
- Everyone takes a turn in each role

## **Roleplay Scenario Prompts**

- o "My landlord just has something against me. My neighbors make noise and bother me but I am always the one getting notices and warnings."
- o "My kids commented on the number of beer bottles on the coffee table this morning again."
- o "I don't know if I am ready to go to job interviews yet."
- o "I know I missed our last appointment but I really do want housing."
- o "I don't like that medicine, it keeps making me sick."
- o "My DHS worker has it in for me."
- o "The school keeps calling to complain that my kids are not behaving in school."
- o "My manager keeps writing me up for being late, but I don't have a car and have to take 2 buses to get to work."
- o "Our head of HR made a microaggression comment to me and got defensive when I said something about it to them. I am in my 50s and they are in their 30s. They called me out by name in a staff meeting to reach out if I needed extra help figuring out how to install our new payroll app on my phone. I told them afterwards privately that it was ageist to single me out in front of others and that I know how to install an app on my phone. They said they always get more questions from older staff and they were just trying to be helpful."



Community care is a system of care designed to uplift entire communities

**It is "People committed to leveraging their privilege to be there for one another in various ways."** ~Nakita Valerio

Community care is a relational approach centering mutual aid and reciprocity.

**Collective Care can look different for different peoples:**

- Restorative/Transformative Practices/Healing Circles
- Reviving or renewing cultural spiritual practices
- Mutual Aid networks
- Hope is the foundation of both self and collective care

"Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare."  
- Audre Lorde

**What policies and practices could your work implement to support a culture of community care?**