



### **Elementary Course**

### Volunteers for emotional support at a distance, by phone, mail or chat

# Chapter One

Introduction, type of talks, bases/reference points

In this first chapter the group will introduce itself. After getting introduced, the expectations of the trainees will be asked for and the basic attitude will be explained.

The trainer will introduce the way of working with the telephonic way of helping others and also the way it goes in chatting with the applicants.

The five types of talks will be introduced and the basic principles of the volunteer will be pointed out.

#### Goals:

At the end of the first chapter you will be able to: Greet

the other members of the group by their names.

Point out the basic principles of the elementary course.

Explain the way the course works.

Call out the basic principles of the course relating to telephonic services and the chat. Also able to explain the difference between face to face contacts, talks on the phone and chats.

Differentiate the five sorts of talks.

Call out the actions of attitude you need to perform in a good conversation.

### Schedule

- 1. Welcome
- 2. introducing
- 3. collect the expectations
- 4. the procedure, basic principles
- 5. personal goals





- 6. introduction to telephone supporting calls and chat support
- 7. differences between telephonic support, chat support and face to face contacts.
- 8. five types of conversation
- 9. discuss the assignment with the 'association sun'
- 10. discuss the basic principles
- 11. react on opening sentences
- 12. evaluation.

#### **Enclosure 1.1**

### Goal

Prepare the trainee on operating independent the phone or chat.

### Content

In this elementary course attention goes to:

Getting aware of own values, standards, feelings, ideas, possibilities, and limits concerning the work.

Capability of conversing, listening like listening actively, asking questions, structuring talks.

Sorts of ringers/chatters like frequent callers/chatters, or sexually oriented talks, people whom have psychiatric disabilities, suicidal people or people whom are in crisis situations.

Reporting and referencing.

### **Procedure**

There will be different types of procedures: group-talks, practise talks, working in small groups, exercises in writing. There is also material that will be handed out which come in handy with the themes that are discussed.

This training contents 14 chapters. One or more chapters can be dealt with during a meeting. One chapter takes about three hours. During the first half of the training the trainee will listen and reads two services preferable with two different trained volunteers. During the second half of the training three services will be done under supervision of a trained volunteer by phone or chat. The trainee will do the talking/writing with the applicants.





#### Selection

The elementary training works both ways: the trainee can decide to withdraw from the course when wished for it and also the trainer can decide to strongly recommend the trainee to withdraw. There should be clear development signs for the trainee concerning attitude and listening and performing good conversations and being able to cooperate in a group.

#### **Enclosure 1.2**

#### Reflection

## The learning process

During the elementary process we keep busy with different things. First we expand our individual skills concerning giving real attention to our conversing partner. This are things like listening actively, empathy, summarize, keeping distance, taking the lead, being straight, confrontation, etc etc.

Second we think through certain themes whom get along in the conversations directly or indirectly like vital questions concerning life and the meaning of life. You get to start off by yourself. Your own experiences, your own values, your own meaning.

An important condition for the learning process after all is the development of the group in its whole, a place where you feel at home and comforts you in learning.

### Reflection per chapter

During the training the trainee is free to keep track of the process by writing a logbook. Call it a diary to keep track of the things that are important to you and is read only by you.

It's recommended that you describe the learning process. It is a tool that helps you to reflect and value the training. After a while you can see growth and development, what you have learned and how. It's easier to do when you keep track of the things you have done right after the course. Use some questions like:

How did I participate? Did I feel involved or not? Did I do my best?

Did I learn something concerning the tasks of the volunteer, the groupproces, myself, the others?

Could I speak out freely, did I get enough space to express myself?

Are there issues why being functional in the group was blocked? If yes, are there ways to solve this problem? Do I need help from someone and by whom? Where there issues that made the trainings meaningful?

The goal of the training is still in focus and do I still agree with this goal?

Do I stay or will I go? Think of the consequences of the decision.

Are there things I would like to change about myself, what are the personal goals? What do I have to offer?





#### **Enclosure 1.3**

# A supporting conversation on a distance

Sensoor provides conversations on a distance by phone or internet. The themes in these talks are widely variable and everyone can get in touch 24/7.

No one asks for help for nothing. Almost everyone needs to overcome some embarrassment to do so. Asking for help through a remote conversation is easily accessible and virtually without waiting time. You don't have to get out of your home, you get in touch on your own time whenever it suits you, you stay anonymous and whatever you discuss it is confidential. It can be just one call or you can have more. Only when you decide to have them. Also the power of breaking off the call is in your hands. Whenever you think you want to end the conversation you can.

Discussing themes that are not that common in your own social network because there is some kind of taboo on it, or you need to share something you don't want te get reminded of the next time, makes having a conversation with Sensoor on a distance and anonymous from great value.

When the talk with Sensoor results in a positive and insightful look on things, it could mean it's the first step in making a change. Step one can result in other steps to get to a more satisfying situation.

But...it takes some speaking- and computer skills in being able to express yourself clearly.

And...as a volunteer you miss some body language like you sense in face to face contact. Chatting and phone calls makes you miss out on that. You see no facial signs, no gestures, and in case of the chat you miss the tone of voice and the breathing-rhythm of the person.

So you will have to work with less signals to get an image of the person and its problem. There is a risk of misinterpreting. It means you need to ask out more. Ask more questions and make sure you keep on monitoring whether your interpretation is the right one.

In these kinds of conversations there is special relationship between distance and intimacy. Getting closer to someone is easier on a distance. The person that starts the conversation feels secured and safe and so very personal matters can be discussed. The volunteer is someone they can't see or touch and is also anonymous. Embarrassment and guilt feelings are less common. This position of safety can provide the volunteer to ask very personal questions. You get to the point more easily.

As a volunteer you only have your voice and your ears and your eyes and your words. These instruments you need to invite the other to tell the story, make them feel comfortable, calm them down, structure the conversation, express the feelings by words or make them express themselves. The other way around you need the instruments to hear or read the other person well and make sure you know the meaning of it is clear.

These kind of supporting calls on a distance also have their downsides. Besides the above written missing signals of body-language for instance, there is also the opportunity to easily disconnect and is insufficient whenever the actual presence of a rescuer is needed, because





a life is in danger or there is a dangerous situation.

Finally the aspect of a call on a distance is also that a person can use the support in a different way than they tell you. Sometimes it is a way for a person to tell fantasy-stories or experience some kind of tension. It is not a question whether the stories are true but you need to know how to react on not authentic stories as a volunteer.

#### **Enclosure 1.4**

Profile of competence of thew volunteers

Overview of competences

- 1. Attitude
- Show empathy and express it
- Stability
- Being able to handle another ones standards and values
- Show respect
- Handle distance and proximity
- Authenticity and assertiveness
- 2. Conversation skills
- Listen actively and keep asking questions
- Structuring
- Keep the lead
- Confronting
- Guard the boundaries
- Get comfortable with silence
- 3. Being able to work in the context of the organization
- Telephone, chat and e-mail
- Teamwork





### **DEALING WITH CRISIS**

A crisis is an emotional reaction to what a person considers to be unavoidable, new and dangerous and at the same time unsolvable. The only thing relevant is how the person experiences the situation, not relevant is how the situation objectively is.

### There are two types of crises:

- Developmental: predictable but seriously critical experience during the normal process of growing up and living a life in which huge psychological, physical and environmental changes take place, like adolescence, menopause, retirement
- Accidental: unpredictable but critical experience due to a certain life---event like a divorce, death, discharge, removal.

### The development of a crisis is as follows:

- 1. **Crisis enhancing event**: something happens which triggers the crisis. The tension increases.
- 2. **Assessment**: the person assesses the situation and tries to get back in balance in a way that is common to him or her.
- 3. Resources for help and ways to cope with things:
  - a. which resources are available: capability to see new problems and feelings and to deal with them
  - b. which resources are externally available: people to fall back on
- 4. **Crisis**: when someone assesses the situation as extremely threatening, does not have the conviction it can be solved on short notice and the usual methods of solving problems fail.

#### Persons in a crisis often have the following reactions:

- confused
- tensed
- scared
- panicking
- irrational
- helpless
- desperate
- paralysed
- drawn back

## Persons in a crisis have a need for:

- quietness
- unburdening
- concrete questions
- structure
- someone you can trust
- professional help and reception





## Suggestion:

Look back to 'a crisis conversation' as described in enclosure 5.1

As a helper at a distance it is of crucial importance that you are able to arrange professional help or to direct someone to professional help.

#### Advice:

- Mention the crisis: pay attention to the incidents or events that caused the crisis and describe the feelings of your conversation partner
- Try to assess the situation: stay in the moment; focus on the immediate and most urgent problem
  - Ask what triggered the crisis! What is the most recent threat, challenge or loss? What's new in the life of someone, what made him or loose his balance.
  - Ask how the other experiences the whole situation
  - Ask who is involved in the crisis: the partner, the family? Can support be offered by others? Who can be asked?
  - Ask for the condition (mental/rational/physical) of your caller. Are there any short-circuits in his thoughts, feelings, behaviour? Is he or she a danger to him- or herself? Is there a real basis for the threat that is felt?
  - Ask for the skills: how did he try to solve the problem? Did he experience something like this before and how did he handle the situation then?
- Stimulate the other to express his thoughts
- Help him rationally to get a grip on the crisis
- Enforce his self confidence
- Help looking for alternative solutions and possibilities
- Be calm, do not panick yourself, stay clear and offer the other structure and safety
- React as follows to those who are distressed:
  - distract them
  - calm them down with reassuring words and by talking tranquil
  - try to find ways that relax somebody (a glass of water, shower)
  - list all the things that happened so that someone gets it straight

Be aware that you take good care for yourself. Talk about the conversation with a colleague if possible. Realise yourself that you cannot solve everything.





#### **GETTING MORE CONTROL IN A CRISIS CONVERSATION**

The 5-phases conversation is aimed to align as much as possible with the caller. By using the 5 phases you further examine the wish of the caller and you adjust to his/her expectations. Therefore you get control of the process and to a lesser extent you can get control of the content. That makes it possible for the caller to draw his own conclusions. However, in some crisis-situations it is very important to take the driver's seat, e.g. when your partner has a very serious problem and help is urgently needed.

Examples of crisis-conversations whereby being in control can be of utmost importance:

- a woman is abused by her husband which she is excusing. She is afraid of her husband and she is loyal to him. Therefore she does not take action to stop the violence. Getting in the driver's seat for you as a TES-volunteer can be important to enable the woman to take action that stops the violence.
- a man of 39 years of age contacts the TES. He feels very depressed. He is struggling with his feelings for a 10 year old girl. The man is ashamed of himself and feels he is responsible: he must solve this problem himself. A steering role from the TES can be important to make sure the man is going to look for help for his problem.

A more controlling role means also that you try to motivate your partner to arrange help. E.g. by expressing your opinion, your worries or by setting a norm. An example of the latter is: "It is not normal that you get beaten".

Domestic violence is a very serious problem and it occurs in one of five families. Domestic violence is forbidden by law. By mentioning the norm 'violence is not normal' you condemn the behaviour (so not the person). You are not supposed to say: 'I disguise your husband, he is bad and I do not understand what you still see in him'.

Example of expressing your worries: 'I am worried about the fact that you stay in bed whole day, feeling down. I think you need help with that'.

Ask after expressing a norm or a worry, a reaction of your partner.

By controlling in a way as described above, equality stays in balance; you control respectfully without patronizing the other.





Normally your partner is in control of the goal of the conversation. You in return consider whether you are able to, want to or are allowed to fulfil the other's expectations. However, in situations in which a more steering role is needed, you may set the goal as well. In stead of asking for the goal, you can suggest:

Instead of: You say:

'What would you like mostly?' 'I think you need help with this..'

'How can I help you?' 'Let's discuss who can help you with this'.

When your partner agrees with this you can proceed to phase 4. If he is not, continue asking, e.g.:

' How do you look upon this?'

or

Confront your partner. E.g.:

- 'You do not see the hitting and kicking as a problem, but do you realise it is a criminal offence?'
- 'You say you don't want help, but do you realise that this doesn't just pass by?'
- 'You don't see any reason to do something about it, yet you do contact me now, don't you..?'

# Contact as a prerequisite

Take care that you only take the driver's seat when you know the contact permits it. A good contact is an important condition. The better it is, the more you can confront the other. So be aware you have two roles: first you work on the contact by following the lead of the other; on the other hand you have a controlling role. You need to switch during the conversation between these roles. Both roles are essential.

### Asking supplementary questions

When you take a steering role, you can expect resistance. That can happen in a direct way, e.g.:

"I do not agree with that, I see that completely different".





But mostly, the resistance is coming along very subtle, e.g. through a question:

"What can somebody else do about it?"

Quite often the question is rhetorical: he does not have any faith in professional help. You can consider this as resistance. It is advisable to not answer the question but to examine the resistance, e.g.:

"Do you say this because you think you cannot be helped?... How come you think so?"

Resistance emerges also many times because of fear. You could also react by saying:

"Is this what you are afraid of, that a professional helper can't do anything?...What are you afraid of mostly?"

### DEALING WITH PEOPLE THAT HAVE SUICIDAL THOUGHTS

Talking about suicide is overstraining for volunteers. It is about questions of life and death. Own experiences and own opinions about existential issues play an inevitable role. Being aware of your own position/attitude towards suicide is an important condition for contact that makes sense.

Next to the fact that the subject is profound, the ambivalent behaviour of your partner causes tension. He/she expresses to end his/her life and at the same time contacts your TES; he/she is about to break up with everybody while he/she contact you. That is a controversial signal.

Reactions you may experience are:

- anxiety
- helplessness
- fear of falling short
- uncertainty of what can be said or not
- obstructing the other/ wanting to take over the decision
- irritation when somebody contacts you frequently
- not being able to unwind from the story
- feeling guilty because the conversation did not go well.





These reactions you have to deal with, you can't run away from them. On the contrary, take your time for these tensions and feelings and look at it from an outside point of view. This is not meant to loose yourself in your feelings, but to stay in contact with yourself. Then the contact can deepen. The other is invited to get to the core what it is about instead of walking in circles. Your openness can lead to an emotional contact that can be the thread to life for suicidal people.

From which angle do people, who intend to commit suicide, contact aTES?

- People express their wish to end their life to flee from the weight of their problems.
- People ask for help in their effort to commit suicide or ask for help after failing to commit suicide.
- People who are at the verge of committing suicide or are in the process of committing it already.
- People who accidentally mention the possibility or thought about it.
- People that arise the suspect of suicide with you.

## Useful help can be:

- Acknowledging the signals indicating suicidal tendencies
- Breaking through the isolation in which your partner is finding himself by expressing what you think you hear
- Breaking the silence of your partner's opinions of himself, his future, his relationships with others
- Talking about the suicidal thoughts and wishes or maybe better formulated of not wanting to live his life any longer
- Taking the ideas your partner has seriously but do not agree with him that it is completely hopeless
- Asking your partner which help he needs or wishes: always check the expectations and think about that because maybe you can't or don't want to fulfill them
- Offer help, that is: discuss the possibility to call 112 (emergency number) when your
  partner has taken pills and discuss the possibility to call the practitioner/first aid when
  your caller has concrete plans to commit suicide. Respect the choice of your partner,
  even when he does respond to your offerings. When your conversation partner does not
  want to accept any help, or when the situation is less urgent, advise him to 113Online (in
  the Netherlands only, but in other countries there might be suicide prevention help
  organisations).

Be aware that you can take the lead to offering professional help, see enclosure 6.2: Taking control in a crisis-conversation. In this way you can offer help actively. On the other hand: respect your partner's wish of not accepting any help. The contact you have is the most important thing you can offer.

Realise yourself at all times, that you are not responsible for someone else's behaviour. You can offer help, but it is not your responsibility to accept the help offered. You have no control over everything.





After ending the conversation, it can be important to take the time and space to think the conversation over. You might want to contact somebody of your TES organisation to talk about what happened to you.





## **ASSIGNMENT: CONCENTRATION ON SUICIDE**

Before you start talking to somebody with suicidal thoughts or concrete ideas about committing suicide, it is of utmost importance to be aware of your own attitude, thoughts and feelings about suicide and of your (first) reaction to it. As soon as you are aware you can recognize your own attitude, thoughts and feelings and make a choice as to what you are going to do with them during the conversation.

Your attitude, feelings and reactions toward suicide come from, of course, your own boundaries to values, your outlook on life, experiences, etc.

However, many of those 'natural' feelings/thoughts can prevent yourself to really listen to the meaning of the suicide message of your conversation partner.

That is why we first start to concentrate on your own first reactions and feelings about suicide.

Imagine yourself somebody tells you: "I want make to an end to mylife".

1. What is your first thought?

2. How do you feel when says so?

3. How do you react?