

## Online courses

### **Managing disappointment and frustration**

The subject will be carried out in one lecture with a control test at the end.

The lecture main topics are: the shock related to the diagnosis, the creation and grieving of the idolized child and a guide to help the parents.

To help the parents ease the emotions of frustration and disappointment, it is first of all crucial for the special educator to understand why they are going through this experience.

-The confirmation of the diagnosis first of all is a shock for the parents that grow into them overwhelming feelings such as anger, guilt and sadness. This situation beside creating heavy frustration also destabilize the familial system of values and beliefs and the relation between the members.

-A normal tendency as a parents is to place into the child expectation and hopes into its future, receiving the diagnosis crushes this image of what could be the life of the child, this represent deep disappointment. The acceptance of the situation can be a complicated phase that takes time and emotion steps, depending of the person. This phase is compared to the grieving since they have to accept that the image created of the child will not be in adequacy with the reality. The stages of grieving are: Negation, Anger, Negotiation, Depression and finally Acceptation.

-It is a difficult task for the social educator to help parents that goes through a situation that has to take time, self-reflection and acceptance. But by creating first of all a warmth and positive environment, where parents can share free from judgement their feelings and doubts on their child as well as responding to their informational and educational necessities, it can help procure a presence and make the parents feel less alone in this situation. What has to be achieved is normalize the disability and the emotions, showing support and provide a place to share emotions, and tools to control them such as the Emotional Intelligence program.

The most important information to keep in mind about this subject are:

- The knowledge of the disability of the child destabilize the basic systems of emotional, familial and even beliefs values that will need reconstruction
- When learning about the confirmation of the diagnosis, the parents enter a normal phase of grieving as to accept the child that will be born without satisfying those expectations
- The feelings and the time that take to accept the diagnosis vary depending on the person experiences, values...
- The overwhelming of the tragedy speech can discourage the parents, a warmth environment where positive attitude and even humor is used when adequate is better

## **Social withdraw and shame**

The subject will be carried out in one lecture with a control test at the end.

The lecture main topics are: the sources of the shame, social withdraw meaning and effects and a guide on how to prevent it.

-The shame is a normal emotion that comes from different sources, some are misconceptions, some are outside the control of the parents and are the result of their environment and finally some are inside feelings. By giving different sources of the shame collected through testimonies and experiences, it provides to the special educator more tools to normalize this feeling as well as being more prepared to the different scope of experience that (s)he will face.

-Social withdraw is the result of different circumstances that can be combined that isolate the members of the family inside the family cocoon. Those circumstances can be: over sensitivity, social shame, relatives and friends' abandonment and tiredness. Parents' life and their child are imprisoned inside the medical and familial environment without social interaction and with the disability as only topic of discussion.

The social withdraw of one of the member (most likely the caretaker), will affect the other members of the family, feeling guilt, as not to abandon him/her, they can also join her into it.

This alienation of society into an environment where the disability of the child takes over every moment of their life has drastic consequences on the whole family environment: increase in the frustration and stress, and its overflow can be released on other members, feeling of resentment from having been dragged into the social isolation, altercating with the social and independency capacity (depending of the level of the disability) of the child and his self-esteem...

-The special educator can help prevent this coping strategy by explaining and normalizing the feeling of shame as well as the disability and inform them on the risks of the social withdraw. Showing a supportive and positive attitude when meeting the parents is important, the special educator have to reassure the parents that there is no ideal parenting and provide them with informational necessities. Encouraging on social interaction and taking time for oneself is crucial as to reduce stress and anxiety. Emotional intelligence is a tool that can be taught to parents as to control feelings of shame and anger in cases of toxic social interaction from judgement.

The most important information to keep in mind about this subject is:

- Shame can be a normal emotion to feel and whatever the source it should not be judged.

- Social withdraw is a strategy that consist into isolating the family and the child with disability into the family cocoon (home) from the social world (the outside) to dodge the feeling of shame from auto/judgments and critics among others
- Positive attitude really helps during situation of withdraw, advice to embrace the skills of the child, he's a person with proper characteristics and skills and the caring of the parents will also develop their skills
- Knowing the right of your child and the disability specifics is the best way to advocate for him when facing prejudice or judgement, helping them with these subject is primordial.

### **Family disruption (including neglect of other children and martial conflicts)**

The subject will be carried out in two lecture with advices to give and a control test at the end of each one.

The first lecture is about: the deconstruction of the familial group and the stages of the acceptance and the importance of the couple in its reconstruction.

-The diagnosis of the disability affects all the familial system (relation, believes and values). The family goes through different stages before the acceptance which are: disintegration, negation and acceptance, reconstruction.

During those stages a reorganization of the family values has to take place as well as a reorganization of the daily activities: Labor changes (work shifts, place), management of time (agenda of appointments with specialists, medical entity and rehabilitation) and the caretaking of child (stop working to take care of the child, sharing responsibilities between the couple...)

-The couple experiencing a turmoil of emotions such as sadness, anger guilt... can affect the relation between them (communication, feelings, intimacy), the reorganization of the family has to be done with the effort of both, and their consent on the tasks to carry on. That's why it is important to first of all reestablish the communication and prepare them for the necessities of the child with a disability can bring with him/her. Time management is a good tool to help the parents share the caretaking, to reserve a "me" time and a time for the couple. Encourage the couple time to be outside of the environment of the disability. It is good to advice to seek joint counselling if needed, it is something many parents have found necessary. Emotional intelligence program can help reestablish an interpersonal relationship between the couple.

The main topics of this lecture is:

- The family goes through stages of acceptance as a joint: disintegration, negation and acceptance, reconstruction
- Two main experience are highlighted: The strengthen of the couple through the caretaking of the child with a disability, the crumble of the couple because the disability overtook their relationship and their partner by the same occasion

The second lecture is about: the short and long term effect of having a disabled sibling and how to help the parent find a balance in their relations with their child

The sibling will be affected socially and in its education as well as experience feelings that can be similar to the parents and a fair share of responsibilities in the caregiving of his brother/sister with a disability.

That's why it is important to collect through testimonies and experiences different emotions and tendencies that can take over the sibling as to enhance the special educator competencies.

Testimonies of siblings are varied and diverse, affected by the family values, the parents' acceptance and the personal values of the sibling. These testimonies tend to be positive but they can also bear mixed feelings and negatives ones.

The emotions shared between the parents and siblings about this situation can be: disappointment, anxiety, overprotection, shame...

Those emotions tend to change through time, and are affected by the age of the sibling and its rank in the family (if the child with a disability is the older sibling, emotion of shame are more easily expressed for example).

Tendencies in sibling of a child with disability can be also drowned that varies through times: Hunger for attention of the parents, the perfect kid tendency as to ease the burden of the parents and take on the hopes and expectation of the disabled child, the early maturity due to the responsibilities that (s)he carried to help the family.

It is necessary to help parents find a balance between their child even though they don't require the same attention. Through a to do/ not to do list, parents can more easily find this balance and assure a good environment for both (or more) children.

Explaining the disability to the child, help him/her manage the emotions felt, grow into him a positive look on the disabled child, spend time with him/her outside the daily environment as to show presence, are some of the advices that can be given.

The main topics of this lecture is:

- The responsibility of the sibling to take care of his brother/sister can lead to him to take on parental figure and acquire a what seems to be an early maturity depending on the degree of responsibility
- Siblings are after the parents, the first caretaker of the child with disability, they share the anxiety of future such as financial incapacity to reach higher studies and long term commitment to be done (taking care of the brother/sister after that the parents are unable to)
- The lecture will have a to do/not to do list for parents such as: Spend 1-1 time, do not project into the sibling the disillusion and expectations that were felt toward the child with disability...

### Face to face training

The face to face meetings as a complementary training should include an introduction to the program, a presentation of the participant (draw the profile of the participants), a course on the guideline when meeting the parents with an evaluation, and a training to the Emotional intelligence program and active listening that are tools useful for both the educators and to be taught to the parents. (Knowledge of emotions and how to control them, self-motivation, empathy, interpersonal relationship).

The face to face training could then take place as shown above

Session	Topic	Activities	Hours
1	Introduction	Introduction to the program of the ESEC project and the agenda Collect the profiles of the participants	1.5
2	Guideline of interaction	Information on the guideline when interacting with the parents as to create a safe from judgement and warmth environment during the meetings	2
3	Active listening training	Introduction to the active listening training, Tools and advice to enhance the listening capacity: -Key elements of active listening -Paraphrasing -Open ended questions -Nonverbal gestures and communications	2
4	E.I : Introduction and assessment of the level of EI	Introduction the Emotional Intelligence program and its relevance, introduction to the variant emotions and the capacity to recognize them and a short assessment of the level of EI	2.5
2	E.I : Self-knowledge of the emotions felt and how to control them	Training on the capacity of comprehension of the emotions: To understand is to control Training on the control of emotions: breathing technique, self-reflection, self-questioning, silent retreat	2.5
6	E.I : Empathy and auto-motivation	Training in enhancing empathy through the share of video and experience and to reflect on the emotions and how to deal with them if we were in their place. Training on positive attitude and self-motivation: boosting achievement, commitment and	2.5

		optimism, determinate the objectives to be done	
7	E.I : Final evaluation	Evaluation of the capacities of the Emotional Intelligence and the implementation as a program to be trained to the parents	1
8	Group discussion	Group discussion on the objectives reached and the evaluation of the program training	1