

Building Compassion-Based Relationships with Caregivers

Section 12



Throughout this section, caregiver is used to represent parents, legal guardians, grandparents, and whomever is the primary caregiver for a student.

The opportunities educators have for relationships with students' caregivers can leave them vulnerable to compassion fatigue too. The drivers of compassion fatigue around caregivers can be very similar to those that drive compassion fatigue around students. When we come to understand the trauma families face, try to meet unrealistic expectations of those relationships, and/or feel ineffective in building positive relationships with caregivers, it can lead to behaviors that are signs of compassion fatigue. We do not have to look far to hear educators blaming caregivers, using the home life as an excuse for lowered expectation of students, and not wanting to get to know the family context of their students. Of course, the same is true in reverse. It is not uncommon to hear caregivers blaming educators for the challenges their children face and spending time building fences rather than bridges.



So, how do we recognize that we are on the same team and learn to “tag-team” our support for children? Clearly, there are benefits when the game plan is designed together and tasks are understood and communicated. The biggest benefit of a successful caregiver-teacher collaborative team, other than the success of the child, may be the decrease of compassion fatigue for both the caregiver and teacher!

In the book, *Powerful Partnerships: A teachers Guide to Engaging Families for Student Success*, (2017) Karen Mapp and her colleagues present four essential core beliefs for family engagement:

1. **All families have dreams for their children and want the best for them.**
2. **All families have the capacity to support their children's learning.**
3. **Families and schools are equal partners.**
4. **The responsibility for cultivating and sustaining partnerships among school, home, and community rests primarily with school staff, especially school leaders.**

Compassionate engagement strategies include educators being able to take these six steps for compassionate action when caregivers are distressed.

1. **Notice** – Be present in the moment and able to recognize signs of distress in caregivers.
2. **Self-check** – Be aware of our emotional connections to our past and our initial judgments (cognitive appraisals). Appraisals are natural and dependent on your frame of reference from your experience and “training” and often not accurate or are incomplete.
3. **Seek to understand** – Suspend appraisals. Listen to understand the concerns/distress from the other's perspective. Move towards generous interpretations of another's behavior.
4. **Cultivate empathy** – Genuine concern develops based on what we have come to understand. This leads to a growing desire and intention to help. Keep listening for understanding if empathy seems out of reach.

Developed in partnership with:



compassionresiliencetoolkit.org

Building Compassion-Based Relationships with Caregivers

Section 12



INFORMATION

5. **Discern best action** – Work with the families to figure out what would actually be helpful to them rather than what you think would be helpful or was helpful to you in past, similar circumstances.
6. **Take action** – Be aware that intention alone is not compassionate action.

(Combined from works of Monica Worline, *Awakening Compassion at Work*, 2017 and Beth Lown, *The Schwartz Center for Compassionate Healthcare*, 2014)

SELF-CARE



STRATEGIES

Bringing It All Together Through My Hands – An activity to summarize compassion and self-compassion

1. **Please hold your hands out and squeeze them into fists** (hold for at least 30 seconds and invite participants to close their eyes for the rest of the activity).
 - a. Explore how you feel, what emotions arise as you clench your fists?
 - b. Say how you feel out loud.
 - c. **This is a metaphor for self-criticism or resistance** – what it feels like when we fight with ourselves or our experience.
2. **Now, open your hands and turn your palms upward.**
 - a. Explore how you feel, what emotions arise?
 - b. Say how you feel out loud, open mic style.
 - c. This is a metaphor for mindfulness – what it feels like when we are present and open to ourselves and our experiences.
3. **Now, extend your palms and your arms forward.**
 - a. How does this make you feel?
 - b. Say how you feel out loud, open mic style.
 - c. **This is a metaphor for common humanity** – what it feels like when we reach beyond ourselves and include others. In our vulnerability we discover the common aspects of humanity and can form bonds with others.
4. **Now, place one hand in the other with both palms facing upward. Slowly bring them to your chest. Feel the warmth and gentle pressure. Breathe gently.**
 - a. Reflect on your feelings with this last change.
 - b. Say how you feel out loud, open mic style.
 - c. **This is a metaphor for self-kindness or self-compassion.** Caring for ourselves is the foundation that supports our mindful compassion for others and the avoidance of self-criticism and resistance to what we are experiencing. Self-compassion allows us to find comfort and strength in our common humanity

Building Compassion-Based Relationships with Caregivers

Section 12

Compassionate Connections with Caregivers Activity

1. Give an example of a challenging behavior by a student's caregiver (select one that is relevant to what your staff have experienced.)
2. Ask staff to talk in pairs about their initial thoughts about the potential meaning of the behavior and how they would respond.
3. Have six different perspectives on the same family from different people in the family's life written on cards. Pass out the cards to six different people in the group and ask each person to read his or her description to the group. Continue until all six perspectives are read.
4. Now ask the pairs to make any revisions in their planned response based on the broader perspective.
5. Discuss as a whole group. Did insight into the family change your response? How? What, if anything, will you need/would like from others in or outside of the school to make a positive connection with this caregiver?

Example:

Challenging behavior: Parent has not returned the calls, texts, or emails you have sent about your concerns about your student's sadness during the school day. Every day he has a period of sadness either first thing in the morning or the last half-hour of the day.

Other perspectives:

Grandmother: "He's always been a pouty kid, but he is OK. I just distract him when he gets sad. Food works pretty well."

Pastor: "He is a live wire with us. Loves to play with the kids in Sunday School."

Last year's teacher: "I had a hard time at first getting a call back, but after she showed up to see him perform in the school music concert and I connected with her, she would text with me. I never had a chance to talk about his sad moods though. Those seemed to be short-lived last year."

Big sister: "He's just sad that he is the only boy at home and I get to go to my cousin's house after school because they are all girls and he has to go to the after-school program."

After-school program leader: "He seems tired after the long school day. I usually just let him hangout with me and rest and talk. He likes to talk about cars. He loves the fancy ones and knows a lot about them. Mom always picks him up on time. I don't know much about her."

Police liaison: "Yes, I know of that family. The mom has a brother in the next town and a sister living here. The brother's son died by suicide two years ago."

