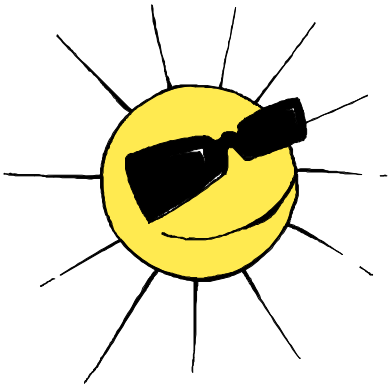
Avoid making a participant feel defensive.

Staff who complain that "Nobody really listens" may need to take a closer look at how much they put people on the defensive.



Sometimes we put people on the defensive in the most innocent ways. We can do it just by explaining why they're on WIC, or by how we request certain paperwork, or just by going over the growth chart. We can make people defensive by inferring they're not doing a good job or fussing at them in any way.

It's really unfortunate when another staff member has already explained a risk code or has already done something else to alienate the participant before she ever gets to you. Nutrition education is off to a rocky start. A lot of your effort, often to no avail, goes into trying to pull the participant out of her protective stance.

A defensive person is not going to get much out of your best efforts at nutrition education. They "close down" mentally and all they want to do is get out of there. It is important to develop an awareness of the things we might do that turn people off so that we can provide nutrition education that can make a difference.

Be extra sensitive to how you explain risk codes.

Try to increase the awareness of other staff who explain the codes.

Try not to alienate the participant in the process.

When some risk codes are explained to a participant, especially ones based on the weight grids, the partic-ipant often has an immedi-ate defensive reaction. Overweight can be a touchy area, so we will talk about it in this module.

No parent wants to hear that there is something wrong with how her child is growing. A mother may become upset, assuming that we think that she's doing something wrong. On top of that, she may totally disagree with us, feeling that her child is growing just fine, thank you very much.

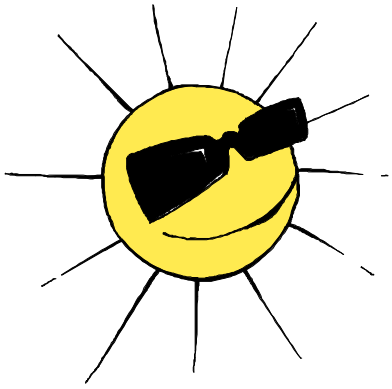
Mothers may be defensive about their overweight children because they may be afraid it reflects badly on their skills as a parent. Mothers may deny that there is any problem if you present the situation as a problem. Much skill can be required to approach over-weight so that a mother doesn't say, "I'm not wor-ried, he'll grow out of it."

One thing you can do is to sound **empathetic** rather than professionally factual. Here are some approaches you could try:

- **Watch your language!** Dictatorial words like "never," "should," and "must" make people defen-sive. The words "fat" and "overweight" also seem to

Don't Do It!

Fussing at anyone is a sure-fire way to make them defensive.



ring people's bells. Maybe it's this cultural thing we have with weight, but we don't want to hear those words applied to ourselves or our children!

You could, however, say you would hate to see the child **become** overweight. If the child is only slightly overweight, you could take the approach that he may not have a real weight problem now, but you'd hate to see him develop one. She would too, of course.

She may be more interested if you seem genuinely inter-ested in her child as a per-son who you'd hate to see become overweight, rather than hearing about how the weight-for-height grid says he is overweight. Often people can't really relate to (or understand) the grid. Only discuss the grid in any depth with mothers who seem genuinely interested.

• **Offer your advice as something the parent might want to consider, rather than something the parent has to commit to doing.**

"The first thing that comes to my mind is that maybe . . . (give idea). What do you think? Do you think that would work?"

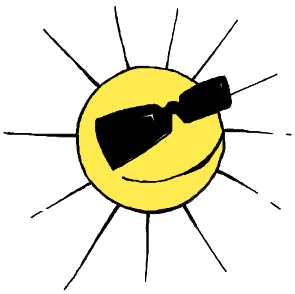
• **Relate, if you can, to the situation personally. Defuse the situation by talking about your kids or somebody you know.**

"My daughter had this same tendency to put on weight at this age and I found I had to . . ."

"I've always had a weight problem myself, so I'm al-ways sensitive to the prob-lems kids have when other kids tease them and every-thing, so I'd like to talk with you about this and maybe we can come up with some ways you can help him without making a big deal out of this for him . . ."

• **You can defuse the anxiety by making the problem sound very common and share what has worked for others.**

"You know, I've seen a lot of kids gain weight at this age and I think a big part of it is that . . ." (*Here you*



mention what you may have picked up in the dietary assessment, such as:) . . . they love to go to all the bigger kids and eat whatever they're eating, all their cokes, chips, and candy. It's a common thing . . . does Kevin do this a lot?"

• **Parents seem to respond well to the thought that their child does not have to LOSE weight, they just have to "grow into" their current weight,** by growing taller but not getting rounder. People always think we're going to put their children on diets. If you make it clear early on that you have no such thought, they will relax a little and probably be more receptive to what you do have to suggest.

• **If a participant seems to be defensive, try making it clear that you know that the true expert on that child is sitting across from you!**

"You know, Hannah is your baby and you're the expert here because you feed her every day. Nobody knows her better than you, but I've talked with a lot of mothers over the years and I'm thinking, 'What's worked best for other moms with babies like Hannah?' and it seems like . . ."

Ways you can keep participants from becoming defensive:

✓ Watch your language! Don't sound dogmatic!

✓ Offer advice provisionally, as something a participant might want to consider.

✓ Relate to the situation personally, if you can.

✓ Make the problem sound common and share what has worked for others.

✓ Make it clear that nobody knows the child like the parent does . . . but you **do** have a few ideas you could share.

ACTIVITIES to do before Discussion

Avoid making a participant feel defensive

The focus of these activities is to help you avoid putting people on the defensive. You can use some counseling techniques that help put people at ease and make it clear that you are not telling people what to do.

1. ***What happens in your clinics that result in people becoming defensive, angry, or upset by the time they are ready for nutrition education?*** Are any of them things that are preventable? On the average, how many adults out of every 20 arrive at your area upset or irritated? On the Activity Worksheet write down 3 different things that upset participants and discuss them.

2. ***What subjects come up in nutrition education that make people a little defensive?*** Note on the Activity Worksheet and discuss them with your supervisor and other staff.

3. ***Copy this page and then cut out this list of ways you can keep participants from becoming defensive.*** Put it up over your desk for the next two weeks. Remind yourself to look at the list between participants and try using the suggestions. Which suggestions are you able to incorporate more into your sessions? What others could you add?

✧ I could offer advice the participant might want to consider.

✧ Can I relate personally?

✧ I could share what has worked for others.

✧ Nobody knows the child like the parent does . . . I do have a few ideas to share.

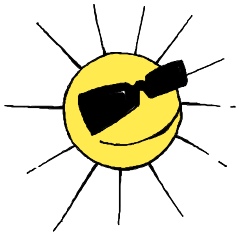
4. ***Are you comfortable offering advice provisionally, as something a parent might want to consider?*** For one week, make a conscious attempt to say that your ideas are something the participant might want to consider. Is this a new habit? Are you comfortable? How do your participants respond?

5. ***What do you usually do in the first 30 seconds of a session?*** Different things, of course, depending on the situation, but you probably have about 3 basic patterns. What are they? Watch what you do--how you greet people, what you look at, how you sit, what you reach for, what you say to break the ice. Write your 3 main patterns down on the Worksheet and bring them with you to the Discussion Group.

Thinking about and doing these Activities will prepare you for the Discussion Group. Look for feedback from participants to see if new ways of sharing ideas result in better sessions. Complete the Activity Worksheet as you practice these activities.

Activity Worksheet
Bright Ideas - Unit 3

Name_____
Date_____



Avoid making a participant feel defensive

Write down three different things that make clients upset, defensive, or angry.

1.

2.

3.

What subjects come up in nutrition education that make people a little defensive?

1.

2.

3.

Which suggestions helped you to keep participants from becoming defensive? List three things that you tried with this unit:

1.

2.

3.

What do you usually do in the first 30 seconds of a session?

I have decided to make the following changes in the first 30 seconds for each WIC appointment:

Discuss these ideas with your supervisor or in a staff discussion group. These activity pages and a discussion are to be done for completion of the module.