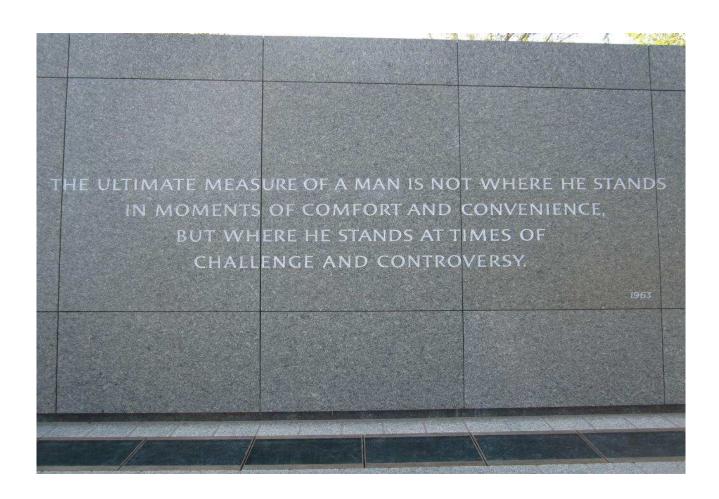


Examining Your Comfort Level

To get started thinking more about engagement from a new angle, consider the following exercise which requires you to think more about your own strengths and challenges as a counselor. If you are new at this and you have never seen clients, try to use your imagination based on what you know about your own approach and personality as a counselor.

It would be nice if, as a counselor, you were able to form a therapeutic bond with all types of clients that you meet, with the same amount of ability and ease. In reality, however, even if you may have excellent engagement skills, there are some types of individuals who may be easier to engage than others. When clients possess certain types of qualities and characteristics we are comfortable with, engagement can almost come naturally while with other situations, we may need to make more of an effort to make that essential therapeutic connection. So with that said, in the following exercise you are being asked to look at which area are strengths for you and which areas may be challenging to you when it comes to engagement.





Think about your strengths and challenges in the chart below. Consider areas and qualities of your clients which are easier and perhaps more comfortable for you when it comes to engagement and others that may not be so easy. Be honest with yourself: No one is good at everything.

| Client Qualities/Characteristics | Your Areas of Strength | Your Challenges |
|---|---|--|
| Background: (Age, social status, etc.) | For example: "I can form a bond a lot easier with middle class kids from the suburbs because that is my background" | For example: "I was never wealthy and I never felt comfortable with the elderly so I find it a challenge working with those populations" |
| | Your answer: | Your answer: |
| Presenting Problem/Diagnosis | Example: "I tend to work well with marijuana smokers and I also feel like I do well with people with Bipolar Disorder especially more manic type | Example: It can be a challenge for me to work with someone with a really chronic, long-term depression. Also, grief/loss issues are tough too |
| | <u>Your answer:</u> | Your answer: |
| Personality traits | Example: I do well with angry & defiant adolescents. I also like getting introverted people to open up | Example: Ugh I don't like working with someone who acts arrogant, grandiose & narcissistic! |
| | <u>Your answer:</u> | Your answer: |
| Interests | Ex: "I feel like I bond well with people who play an instrument because of my own love of music" | Ex: "I find it hard when someone is really religious because I don't know that much about religion myself" |
| | Your answer: | Your answer: |
| Other? What are your "Likes' vs. your "Pet Peeves?" that we haven't already covered | Ex: Give me anyone with a good sense of humor that can make me laugh!" | Ex: "I can find myself getting frustrated watching a smart kid throw his life away failing school |
| | Your answer: | Your answer: |
| | | |



So what was the point of this exercise? If we are going to look at our ability to engage with our clients, a great place to start is to acknowledge our own *comfort level*. There are always going to be some clients who fall right into our comfort zone and there will occasionally be some who don't. Fortunately as we gain experience as counselors, your comfort zone should expand outward to include more and more different types of clients. This does not mean that a counselor cannot work with someone outside of his or her comfort zone. To the contrary, counselors can spend a huge amount of time outside of their comfort zone and still be effective*. With the right amount of supervision and guidance, combined with honing one's skills at engagement, then a counselor can work through areas of discomfort and form a bond even with some of our most challenging clients. This is what the "Tools of Engagement" is all about.

*Working outside of one's comfort zone is not to be confused with working outside of one's qualifications or *expertise*. Working outside of your area of expertise is not recommended as it is important to be adequately qualified to work within your area of expertise, having first completed the education, training and supervision necessary for that population or for working with people with a particular disorder.

So now that we have discussed the concept of a comfort zone, let's start thinking about our clients' comfort level. The following section considers looking at engagement from the client's perspective. We will consider the following:

- What is it like to be a client at your facility?
- What is it like to be your client and have you as the assigned counselor?





Looking at Engagement from a Client's Perspective

Pretreatment - Engagement starts well before the client sets foot into your facility. Consider the following checklists:

Your advertising and website: (If you are a clinician you may have little control over the following issues at your agency but these areas are still worth considering)

| | Is your agency telling prospective clients that your facility is "client-friendly" |
|--|---|
| | Is the language on your website and advertising sensitive to clients who may research your facility and programs? |
| | Are the pictures and illustrations on your website and advertising representative of the clients you really work with? |
| | Is your website and literature complicated, wordy, or filled with jargon or is it designed for people with mental health issues and/or addictions to easily understand and navigate? |
| | Are your community representatives and marketers engaging, friendly and "down to earth" from a client's perspective or do they just seem to want to cater to potential donors and referral sources? |
| The next step of engagement in pretreatment usually starts with the <i>phone</i> : Consider the following: | |
| | When someone calls, is it a seemingly endless maze to get a live person on the phone? |
| | If someone does answer, do they do so in a friendly, engaging and welcoming manner or is it more likely to be instead put on hold or forwarded to another voice mail? |
| | Does the person who answers the phone have the right customer service etiquette combined with the knowledge of the agency's mission, staff and programs in order to provide the needed help for the caller? |
| | Is it easy to get an appointment or is there a huge amount of red tape or waiting lists? |

Ok, after reviewing these points, now the "face to face" engagement starts. The *waiting room* is actually a key aspect of the engagement process because that is the client's first, in- person experience at your agency. Instead of reviewing another checklist of key elements of engagement in the waiting room, complete the following exercise below: *Remembering what it is like to be the client.*





Remembering what it's like to be the client:

It is interesting how easy it can be for people to forget what it is like to be on the other side of the desk, so to speak. Sometimes people in the workplace get a case of amnesia when it comes to remembering what it is like to be the customer or consumer of healthcare services. For this exercise, think for a few minutes about what it is like when you are the patient. For example, all of us go to the doctor every once in a while for yourself or for your children. For this exercise think about your own habits as a patient in a healthcare office setting. Answer the following questions in your mind after some honest thought:

- When you have an appointment, have you ever gotten there late? When they tell you to come ½ hour early for paperwork, do you listen?
- Are you always polite at the doctor's office or are you ever stressed out or anxious?
- How do you feel when support staff are short, rude or dismissive of you? How do you feel
 when you can't get an answer to your questions? How do you feel when you are just being
 treated like just another "number" in a long line of other patients?
- How do you feel about being handed a stack of redundant, time consuming paperwork to fill out?
- If you have kids, how do you feel when staff look at you funny if your kids misbehave or make noise or do other things kids do when they are bored or anxious?
- What is it like for you when the doctor makes you wait?
- What other things bother you about your doctor's waiting room or his staff?

When you are done considering those questions, try to use **empathy** and think about **what it is like for a client at your agency**. When you are working, do you get annoyed when clients are late or they ask too many questions? What about if they complain about the paperwork or just can't fill it all out? If they are stressed or anxious are you ready to help them in a calm and patient manner? Remember again the struggles you may have as a patient and now consider your patients who have the same struggles you may have plus on top of that mental health and substance abuse problems. Is it fair to expect our clients to always be punctual, polite, calm, and orderly? Are we looking for our clients to be the "ideal" patient, ready to cooperate and comply around our needs? If you work in mental health and addictions treatment it is crucial to be prepared to have an engaging attitude from the minute your client walks in the door, even if that is late. Patience, politeness, flexibility, empathy, and good old "niceness" are key factors when it comes to the pre-treatment stage of the engagement process. This holds true for clinicians as well as support staff at your agency.

It's not "my way or the highway" in mental health and addictions treatment. If you have the attitude that clients must do things your way or else go somewhere else, then be prepared to lose a lot of clients to other agencies in your area. Many clients will choose, the highway, if you cannot be flexible and engaging for their needs. Hopefully the point is driven home that the engagement process in treatment, starts early in the pretreatment phase and is of vital importance straight from the front door, so to speak. - www.takingtheescalator.com