



Welcome

Michigan WIC Program
Client-Centered Webinar Series

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Guidelines

- ▲ Phones on mute
- ▲ Raise hands
- ▲ Chat box



The Plan

- ▲ **Topic area: Handling Sensitive Topics in Counseling**
- ▲ **Sensitive topics: what makes them sensitive**
- ▲ **Asking about sensitive topics**
- ▲ **Sharing information about sensitive topics**
- ▲ **Issues around weight and growth**

Sensitive Topics: What are They?

- Weight Issues
- Improper feeding behaviors
- Late weaning
- Failure to thrive
- Substance abuse
- Smoking
- Mental health issues
- Postpartum depression
- Behavioral delays / issues
- Food insecurity
- Breastfeeding
- Domestic violence

What Makes a Topic Sensitive?



- Our own anxiety
- The participant's anxiety
- The potential for resistance

The Emotions of Sensitivity

- Embarrassment
- Fearing judgement
- Feeling judged
- Topics not normally discussed
- Shame
- Guilt

Emotions...They Happen



- Emotions happen at WIC
- Be ready
- Notice them
- Listen

Discussing Weight



Why Discuss?

- **Women**
 - Conception challenges
 - Pregnancy challenges (pre-eclampsia, GDM, etc.)
 - Health issues (cardiac, joint, etc.)
 - Self-esteem / Prevents other healthy behaviors
- **Infants and Children**
 - Feeding issues
 - Growth issues, failure to thrive
 - Health issues
 - Self-esteem / Prevents other healthy behaviors

Strategies for Approaching Sensitive Topics

- Open-ended questions
- Normalizing
- Providing a range
- Being transparent

Open-Ended Questions

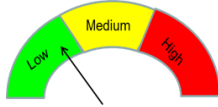
- Use motivational interviewing - how do they feel about the topic, what if anything they would like to change about specific topic.
- With weight issues, I ask them to first tell me what concerns they have about their/their child's weight and go from there.
- Trying to assess readiness for change, not using harsh words. Using words like "we" instead of "you".
- I ask how do you feel about your child's growth? What did the doctor say about growth?
- Has your doctor ever discussed ("that particular risk or concern") with you?

Normalizing

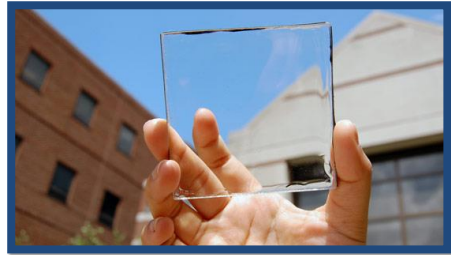
- Pregnancy is a time when some women have sad or anxious thoughts. Has this been an issue for you?
- Some parents feel frustrated when it comes to getting children to be more active and watch less T.V. Have you ever felt like that?
- Some women experience physical or verbal abuse in their homes by family members, boyfriends or spouses and we help them with resources. Do you have any problems with this?

Providing a Range

- Some people smoke a few cigarettes a day and some smoke several packs a day. What is your smoking like?
- Some women exercise very rarely and others exercise almost every day. What is your level of activity like typically?



Transparency



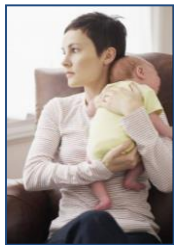
Transparency

- Inform them what you'll be doing first and why before you ask the questions.
- Explaining the WIC process and letting them know we are asking the questions [because] WIC does a lot of research and they want to know about what is happening in the community to help guide the program towards the needs of the clients.

Transparency

Remember why we ask, use this with clients if needed. For example- we screen for alcohol and drug use because we have resources to help women who are struggling with addiction, or, this is a safe place to discuss concerns like these (substance abuse /intimate partner violence). WIC is here to help and support you if you struggle with these issues.

Poll Question



Strategies for Approaching Sensitive Topics

- Practicing non-judgement
- Asking permission
- Being direct

Non-Judgement



- Be very careful, non judgmental.
- Asking with an open ended question, not asking loaded questions.
- Respect their decision not to talk about it. Just let them know that you care. That is why you brought it up.

Asking Permission

- Is it ok if I ask you some questions about your feelings around your weight and eating habits?
- Would it be alright with you if I asked you some questions about your alcohol use?

Being Direct



Have Referrals Ready



"Having plenty of referrals handy to help the client for whatever the need is; and achieving confidence from client in our capabilities to get them what they need."

Child Growth Charts

- If we take 100 kids at X age and line them up, this is where your child would fall. How do you feel X is growing?
- What we are looking for is consistency with growth, being above or below the growth curve does not automatically mean a health concern, but we want to follow to ensure consistent weight gain continues and that healthy habits are in place.

Child Growth Charts

- I typically tell them that this is one tool that gives us pieces to the puzzle of his overall health. I tell them that as far as percentiles are concerned, I don't care so much about where he is compared to the other kids, I care about where he is compared to where he has been and whether or not that is consistent.
- I say between the 5% and 95% is the normal range. below the 5% is underweight and above 95% is overweight.

Prenatal Weight Gain Discussions

- Higher prenatal weight gain is associated with higher postpartum weight retention.
- Women are likely to get pregnant again without taking off all the weight from the previous pregnancy.
- This process can lead to obesity.

Postpartum – to ask or not to ask?

- I do not ever mention weight post-partum unless a mom asks me about it.
- I often see them so soon after delivery that I don't bring it up.



Framing the Question - Postpartum

- What weight range do you feel is a healthy one for you? Would you like to talk about strategies to help you move closer to a healthier weight for you?
- I ask the client what's your goal weight for yourself or what was your weight before you got pregnant with your first child.
- Asking them what their thoughts are about their body changes. Asking if they made any nutrition changes during/after their pregnancy.
- For starters, asking them if they are concerned about it or wish to know more. If not, I let them know they can always call me should they change their mind.

Poll Question



How would you frame the question?

Postpartum

Resisting the Righting Reflex



Signs of Resistance



Signs of Resistance

- They close down, state they're not concerned, or begin offering their reasons for why.
- The first thing will say my doctor said he is fine, that means she will not listen whatever we say.
- Folding arms - pulling away - verbal negative statements.
- Sometimes a "look" on their face, or seeming to clam up when talking about it.
- When reviewing the growth chart they might say "All my kids have been big" OR "His dad is big" OR "Our family is big boned".

CCS Skill: Reflecting Resistance



- ▲ You're not concerned about his growth.
- ▲ Weight is not an issue for you right now.
- ▲ You'd rather focus on eating healthy foods and not a number on the scale.

Shifting Focus



Reading the Signs is Not Always Easy



Sharing Information



- To share or not to share
- Sharing a concern
- Knowledge gap

Holding Education



- I bring it up at the end of the appointment after asking the questions.

Ask about Knowledge Base

- Asking "What have you heard about..."
- I usually ask "What do you know" about the particular topic.
- Asking what they have heard from outside sources like family members, friends, medical providers.
- Asking what they have tried to do to remedy a situation.

Offering a Concern

- Ask permission
 - "Ask the parent if I can share a health concern I have related to this topic."
- Emphasize autonomy
- Ask for input

Poll Question



When a parent is proud of a feeding practice with their child, such as early introduction of solids.

Expressing a Different Viewpoint



Sensitive Topics



Time to Share



