



Parents as partners in promoting well-being

A short course for
parents on supporting
the well-being of
children with vision
impairment

SESSION 3

How can we promote
well-being?

Part 2

BOOKLET

4

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Session 3:

Programme Guidance

Session 3: How can we promote well-being? – Part 2

N.B. Within a given section, timings in brackets refer to the breakdown of the overall time for the section.

Approx. Timing	Prog. Ref.	Guidance	Resources
5 minutes	3.1	<p>Welcome and introduction to Session 3</p> <ul style="list-style-type: none"> ■ Welcome parents to Session 3, the final session of the course, which will continue to focus on how we can promote well-being. ■ A facilitator to provide a quick reminder of the ground rules (as originally agreed unless amended in Session 2). ■ A facilitator to ask the group if anyone has been able to put into practice any of the strategies that were covered in Session 2 and, if so, would they like to share their experience. 	<p>PowerPoint: Slide 16</p> <p>Handout 3.1: Session 3 programme (Handout 3.2: Amended ground rules)</p>
25 minutes	3.2	<p>Childrens' well-being: Resilience (cont. from Session 2)</p> <ul style="list-style-type: none"> ■ A facilitator to explain that the initial activity will continue from Session 2 with a focus on resilience, reminding the group what this means. 	

Approx. Timing	Prog. Ref.	Guidance	Resources
	3.2.1	<p><i>Problem solving – Stop and Think!</i></p> <ul style="list-style-type: none"> ■ A facilitator to introduce this activity by referring back to the importance of problem solving to the development of resilience and that one approach, involving self-advocacy and preparation for potentially difficult situations, was explored during the last session. Another approach - Stop and Think! - will now be considered. ■ The facilitator to comment that Stop and Think! encourages reflection and offers a simple but powerful tool. The approach asks people to stop and think about good and bad experiences and analyse them so that good ones can be repeated and bad ones managed or avoided. The process can be broken down into four steps (Experience, Feelings, Thinking, Action – see Handout 3.3) which the facilitator explains and illustrates referring to the worked examples. ■ The facilitator then to invite parents to complete the process on a good experience of their own choosing, (followed by a bad one if they have time), on the blank templates supplied. 	<p>PowerPoint: Slide 17</p> <p>Handout 3.3: Stop and Think!</p> <p>Handout 3.4: Stop and Think! (Activity)</p>

Approx. Timing	Prog. Ref.	Guidance	Resources
	3.2.1 (cont.)	<ul style="list-style-type: none"> ■ Following the trial of the approach, the facilitator to invite any comments from the group. The activity is then concluded with discussion over the application to children and young people. 	
15 minutes	3.3	<p>Children's well-being: Self-esteem</p> <ul style="list-style-type: none"> ■ A facilitator to introduce the topic of self-esteem by taking the group through the 'Key points' Handout 3.5 (further detail provided in the Notes 3.1). 	<p>PowerPoint: Slide 18</p> <p>Handout 3.5: Self-esteem – key points</p> <p>Notes 3.1: Self-esteem – key points</p>
15 minutes	3.3.1	<p><i>The impact of low self-esteem</i></p> <ul style="list-style-type: none"> ■ Leading on from the introduction to self-esteem, the facilitator to explain that the impact of low self-esteem will be explored in more depth by considering how it can affect a wide range of our functioning, for example, our thoughts, learning, emotions, and relationships. The facilitator to: <ul style="list-style-type: none"> - circulate Handout 3.6 and run through the examples provided in each of the boxes, which reflect the impact of low self-esteem in different areas of functioning; 	<p>PowerPoint: Slide 19</p> <p>Handout 3.6: The impact of low self-esteem (Activity)</p>

Approx. Timing	Prog. Ref.	Guidance	Resources
	3.3.1 (cont.)	<ul style="list-style-type: none"> - invite the group to split into pairs/subgroups and see if they can add to the examples in the boxes. (It may be helpful to ask some subgroups to work clockwise around the boxes and others to work counter-clockwise to ensure coverage); - obtain feedback from the exercise and add to this by providing Handout 3.7, which offers some typical examples of impact; - point out that the term 'Negative Beliefs' has been inserted in the central box as such beliefs give rise to low self-esteem. Refer to the cognitive-behavioural perspective (see Notes 3.2) to illustrate how beliefs influence behaviour. 	<p>Handout 3.7: The impact of low self-esteem</p> <p>PowerPoint: Slide 20</p> <p>Notes 3.2: The impact of low self-esteem</p>
40 minutes (including 10 minutes refreshment break)	3.3.2	<p><i>Strategies for promoting self-esteem</i></p> <ul style="list-style-type: none"> ■ Given that self-esteem is learnt and can be raised, (ref. Handout 3.5), what can parents do to promote it? ■ A facilitator to reassure parents that they are most probably already using a range of strategies to support their children's self-esteem e.g. by praising them for their efforts and achievements. 	

Approx. Timing	Prog. Ref.	Guidance	Resources
<p>(25 minutes including 10 minutes refreshment break)</p> <p>(15 minutes)</p>	<p>3.3.2 (cont.)</p>	<ul style="list-style-type: none"> ■ The facilitator to explain that the next activity will explore everyday strategies for promoting self-esteem. - the facilitator asks the parents to split into pairs/subgroups and share ways they have found helpful in encouraging self-esteem in their children with vision impairment or possible strategies that could be useful in the future. One person in the subgroup to keep a record of the strategies. <i>Refreshment break to be taken by subgroups at a time of their choosing during this part of the activity.</i> - the facilitator then to take feedback from each of the subgroups with another facilitator recording the different strategies on a flipchart; - the facilitator to conclude the exercise by offering the classification of strategies for promoting self-esteem in Handout 3.8, cross-referencing to examples from the feedback listed on the flipchart 	<p>PowerPoint: Slide 21</p> <p>Flipchart or A4 paper</p> <p>Flipchart</p> <p>Handout 3.8: Promoting self-esteem</p> <p>PowerPoint: Slides 22, 23</p> <p>Notes 3.3: Promoting self-esteem</p>

Approx. Timing	Prog. Ref.	Guidance	Resources
10 minutes	3.4	<p>Closing comments and activity</p> <ul style="list-style-type: none"> ■ With the completion of the strategies for promoting self-esteem activity, the programme has effectively run its course within the time available. A facilitator to offer some concluding remarks before commenting that just as there was a group introduction activity at the start of Session 1, it would be appropriate to round off the course with a closing activity: <ul style="list-style-type: none"> - Each parent and facilitator to be provided with a batch of 'Post-its' and asked to write down a brief comment about each of the other course members, including the facilitators, on a separate 'Post-it' (headed with name of the course member to whom the comment applies). - Comments to focus on something that was found positive or that was appreciated about the course member e.g. a particular quality or characteristic, a useful contribution that they made, etc. - Once a member has completed all the comments, they stick the 'Post-its' onto A4 sheets, each headed with a different course member's name, which have been spread out on tables or perhaps pinned to a large notice board. - Each member then collects and reflects on their sheet of collated comments. 	<p>'Post-its'</p> <p>A4 sheets, one for each course member, headed with their name</p>

Approx. Timing	Prog. Ref.	Guidance	Resources
10 minutes	3.5	<p>Session and course evaluations</p> <ul style="list-style-type: none"> ■ A facilitator to ask parents if they would kindly complete (anonymously) the evaluation of Session 3 and to put the forms in a box on leaving. ■ When all the parents have completed the session evaluation, the facilitator to ask if there are any further comments they would like to make regarding the course as a whole. One of the facilitators to record comments on a flipchart. ■ The facilitator, on behalf of the team, to thank all the parents for their participation. 	<p>Handout 3.9: Session 3 Evaluation form</p> <p>Flipchart</p>
		<i>End</i>	

Session 3:

Handouts

Course Programme

Session 3

How can we promote well-being? – Part 2

3.1 Welcome and introduction to Session 3

3.2 Children's well-being: Resilience (cont.)

3.2.1 Problem solving – Stop and Think!

3.3 Children's well-being: Self-esteem

3.3.1 The impact of low self-esteem

3.3.2 Strategies for promoting self-esteem

Refreshment Break

3.3.2 Strategies for promoting self-esteem (cont.)

3.4 Closing comments and activity

3.5 Session and course evaluations

End

Ground Rules (amended)

(To be prepared where amendments were made to the ground rules in Session 2)

Stop and think!

Wouldn't life be great if you could make good things happen more often and make bad things happen less often? This simple idea is the basis of a powerful tool used by people in many different walks of life to stop and think about good or bad experiences and work out how to repeat the good ones, but how to avoid the bad ones. The process can be broken down into 4 steps, listed below.

EXPERIENCE – You focus on something that happened that was really good or really bad.

FEELINGS – You find the words for how you felt about it. Get everything off your chest so that later, you can think more clearly.

THINKING – You figure out, calmly and rationally, what you can do to avoid the bad experiences and repeat the good ones.

ACTION – You plan what to do next time.

Many people find that writing things down helps them get their thoughts clear, but it is also the thinking that is really important. Examples are provided of how this can work:

Date: Tuesday

EXPERIENCE

Jack came home from school upset and angry as his science teacher had told him to remove his sunglasses in the classroom. He tried to explain that he was light-sensitive and needed to wear them inside, but the teacher just ignored him.

FEELINGS

So angry! I've already sent a letter to the school explaining why Jack needs to wear the sunglasses! The information obviously hasn't been passed round! I'm going to really give them stick when I phone!

THINKING

Made a cup of tea first, calmed down and thought it over. Do I really want to phone up and make such a fuss? Jack is in Year 7 now, perhaps he needs to be more independent and speak up for himself. I don't want him to be thought of as a 'mummy's' boy.

ACTION

Discussed with Jack after we'd had dinner and we'd both calmed down! We discussed what would be best and decided that he would take a copy of the original letter into school, show it to his science teacher and explain why he needs to wear sunglasses. Jack felt quite good about taking control himself instead of having 'mummy' ring up.

Date: Friday

EXPERIENCE

Went to a family 18th birthday celebration on Saturday at the village hall. It was a disco, quite dark with flashing lights and very noisy, loads of people! Sharzia clung to my side and wouldn't mix in at all. Lots of her friends came up and tried to get her to join in but she just wouldn't!

FEELINGS

I tried to encourage her to go with her friends, but she was really sulking and in the end I told her she had to help herself, that I couldn't always do everything for her and that she was 15 not 5 years old!!

THINKING

Then I felt quite guilty. Maybe I had got too cross, but Sharzia needs to be more independent! I'm scared that she'll end up with no friends and be really unhappy.

ACTION

I don't really know what to do. We can't keep on arguing like this though as it just gets us both upset. I'm not really keen on her using a cane as I think that singles her out as vision impaired, but maybe I should invite the mobility officer to come and talk to us both and see if she has any ideas that will help Sharzia.

Stop and think! (activity)

Choose an experience that was really positive for you and complete the Stop and Think! Blank below.

If there is time, repeat the exercise for a really negative experience.

Date:

EXPERIENCE
FEELINGS
THINKING
ACTION

Date:

EXPERIENCE
FEELINGS
THINKING
ACTION

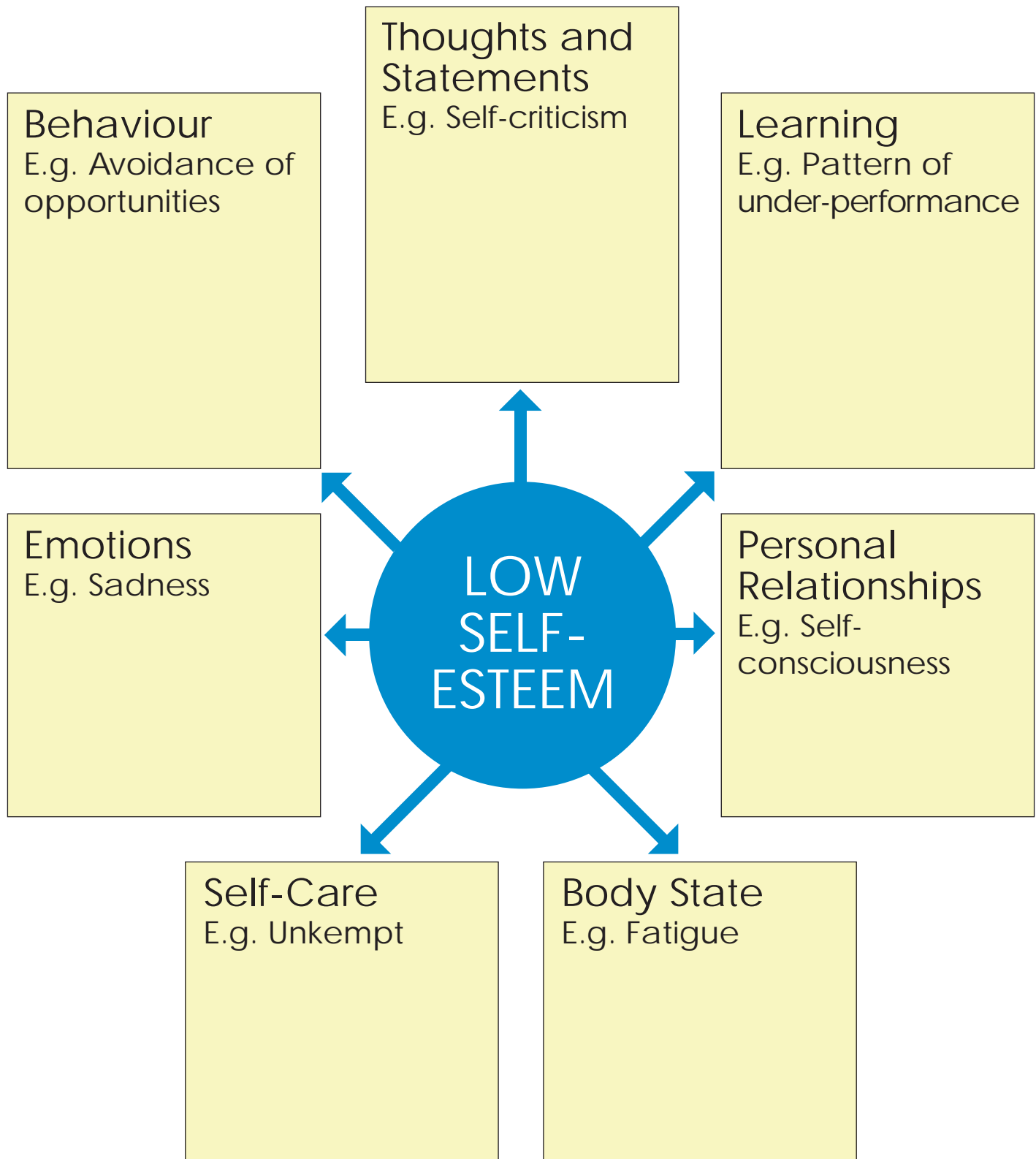
Self-esteem – key points

Self-esteem:

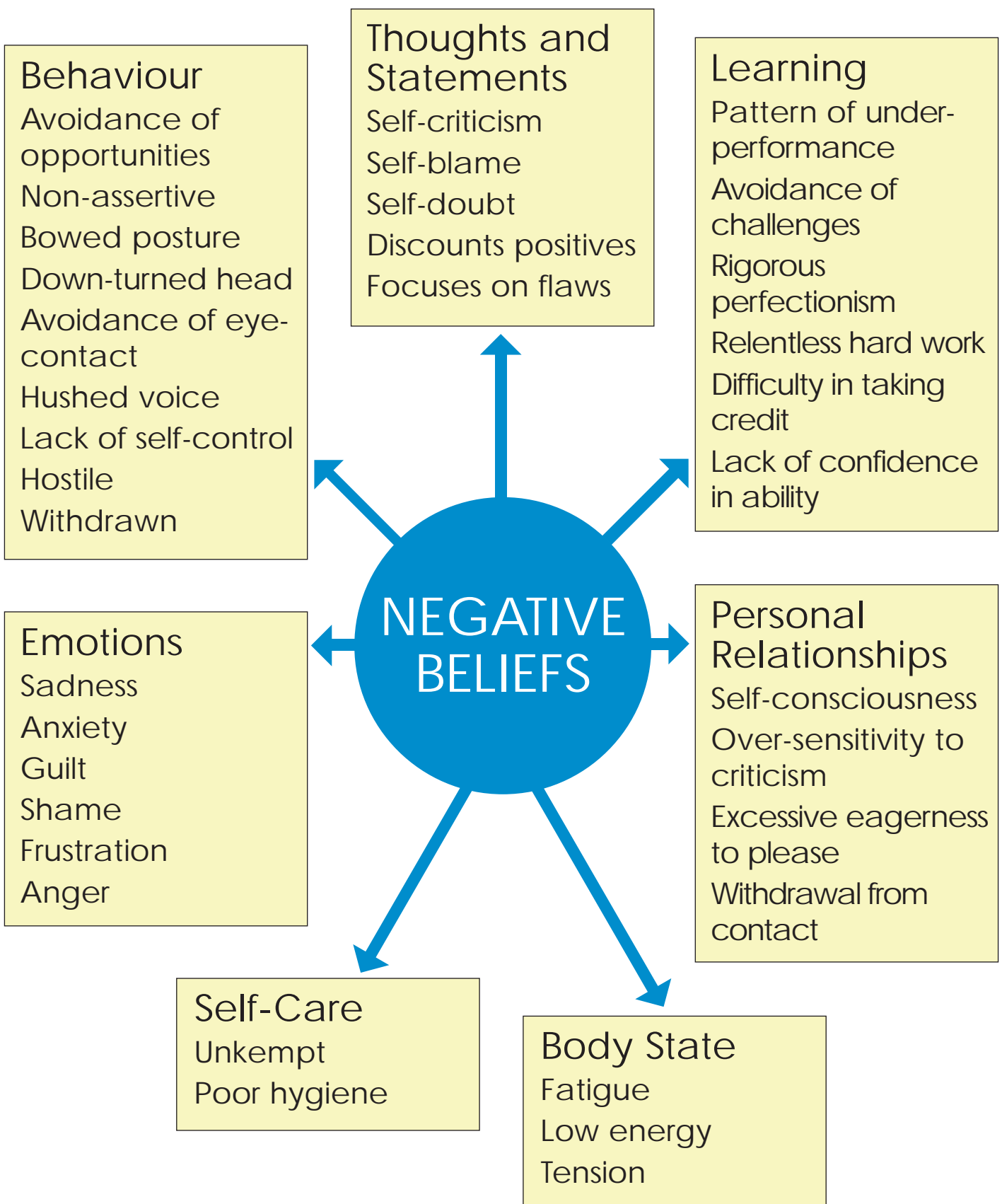
- is about the value we place on ourselves
- is the gap between self-image and self ideal
- has many facets and a number of levels
- is important as it can impact on all areas of life
- is something that can be learned and raised (or lowered)
- is strongly influenced by parents and other family members, teachers and friends
- children and young people with vision impairment are at greater risk of developing low self-esteem than their sighted peers (why?)

The impact of low self-esteem (activity)

In pairs/small groups discuss and add further examples of the impact of low self-esteem in the areas headlined within the boxes.



The impact of low self-esteem



Promoting self-esteem

- Improving the child or young person's self-image
 - by developing independence, personal and social skills and other competencies
 - by providing positive feedback
 - by providing opportunities for the experience of success
 - by providing an expectation of success

- Adjusting the child or young person's self-ideal to more realistic levels

- Helping to change the way the child or young person explains his or her success and failure

Session 3 Evaluation Form

1. Please indicate how much you agree with each sentence:

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree
I think my child could benefit from using the 'Stop and Think!' approach.					
The session gave me increased understanding of self-esteem.					
The session provided me with some practical ways to promote my child's self-esteem.					

2. Is there anything you intend to try out as a result of this session?

3. Do you have any comments you would like to add about the session (e.g. how it could have been improved)?

4. Now that the course has been completed, how would you rate the course overall on the scale below (please circle your rating)?

Low

High

1 2 3 4 5 6 7 8 9 10

Thank you for completing the form. Please place it in the box provided before you leave.

Session 3:

Facilitators' Notes

Self-esteem –key points

(N.B. The depth of coverage is offered for facilitators' background information. It is unlikely to be necessary to cover all of the content with the group or indeed feasible in the time available).

■ Self-esteem is about the value we place on ourselves

Refer back to Session 1 when the term 'confidence' was used as a definition. Self-esteem is certainly reflected in our confidence level – those with high self-esteem are generally seen as confident and willing to try things, those with low self-esteem typically lack confidence in themselves and their abilities.

However, more precisely, it is about the value we place on ourselves. It is a judgement about our feelings of significance, capability and worthiness.

High self-esteem is associated with a positive overall opinion of ourselves, low self-esteem with a negative overall judgement.

■ Self-esteem is the gap between self-image and self ideal

Self-esteem can also be conceptualised in terms of how the self-image measures up to the self-ideal where:

- Self-image refers to the way we see ourselves – our physical appearance and abilities, our psychological characteristics, intelligence etc.
- Self-ideal refers to how we would like to be or what we think we should be like.

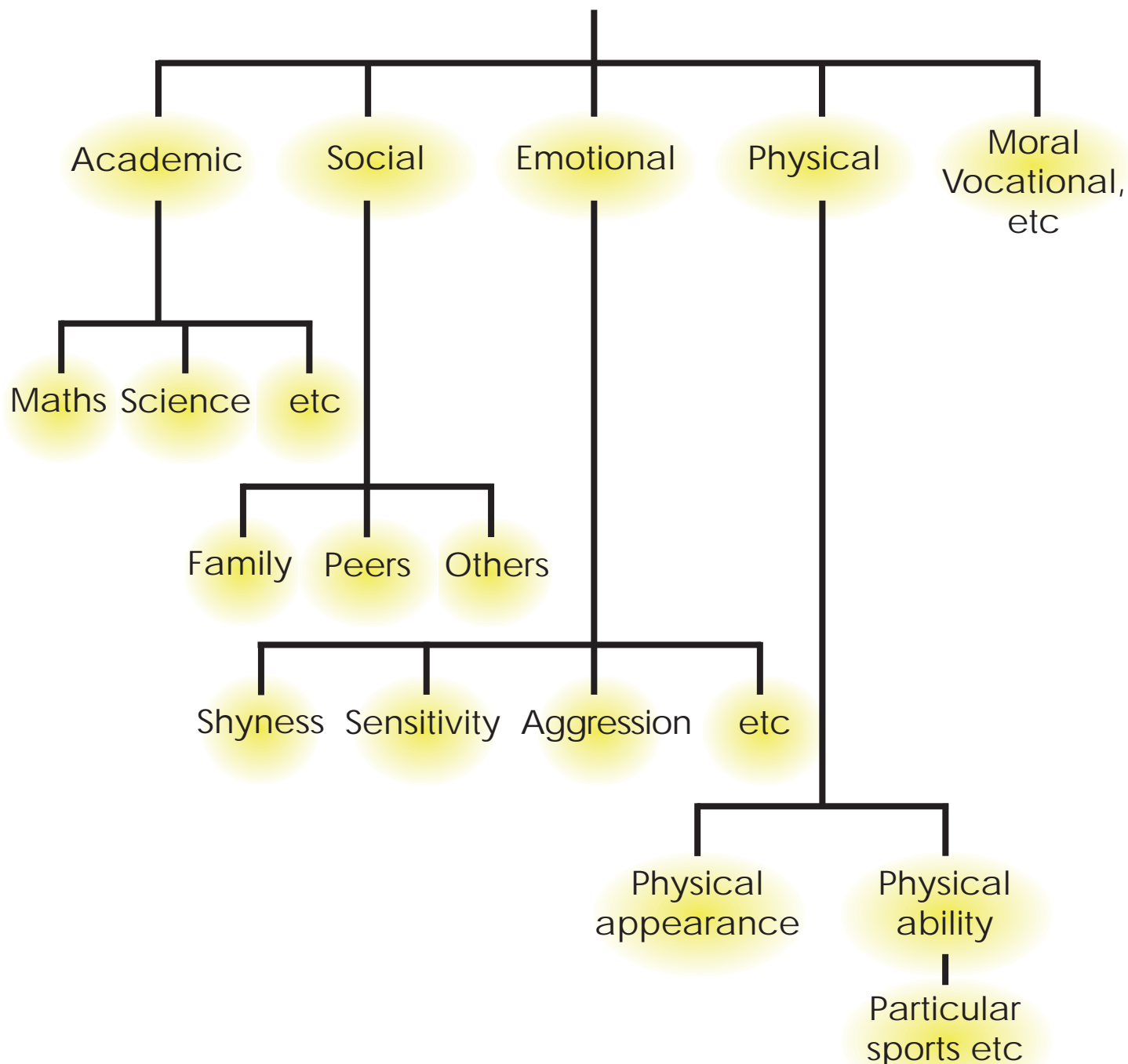
N.B. It is inevitable and normal for there to be a discrepancy between our self-image and our self-ideal, what we strive to be. Without this we would have no aspirations and become apathetic and poorly adjusted!

■ Self-esteem has many facets and a number of levels

Self-esteem is a combination of our general sense of liking ourselves, being happy with the way we are and the way we live our lives, and of the judgements we make about our competence in certain specific areas that are important to us at

each stage of our life span. The areas of importance change with age although physical appearance and social acceptance have been found to remain particularly significant. The diagram below illustrates different areas and levels of self-esteem.

General self-esteem



N.B. Children with high overall self-esteem have been found to discount the importance of areas in which they are less competent e.g. sports. Children with low self-esteem are more prone to see a lack of competence as a confirmation of their view of themselves.

- Self-esteem is important as it can impact on all areas of life
Self-esteem can have an impact on all areas of life e.g. education, employment and relationships. It affects our motivations, attitudes and behaviour and it is central to our emotional well-being and important for resilience.

- Self-esteem is something that can be learned and raised (or lowered)

Self-esteem is not something we are born with. It is learned and develops over time.

The messages we receive lead to our central beliefs. Where these are essentially positive, high self-esteem develops. Where they are mainly negative, low self-esteem is formed.

- Self-esteem is strongly influenced by parents and other family members, teachers and friends

In developing self-esteem, children can help themselves and also be helped by others. Healthy self-esteem results from both valuing the self and being valued by others.

The expectations and beliefs held and communicated by parents and other family members, teachers and friends play a significant role in the development of children's beliefs about themselves, and hence their self-esteem.

Parents have a strong influence on a child's attitude and individual psychology, especially in the case of younger children. For the first four or five years, parents are the most important influence. When children start school, teachers and friends become important. Once they reach adolescence, peer groups begin playing a greater role.

- Children and young people with vision impairment are at greater risk of developing low self-esteem than their sighted peers (why?)

It may be helpful to invite the views of parents on this matter.

Findings from the literature highlight the following themes:

- Children with vision impairment are at risk from developing low self-esteem as a result of the added pressures in their lives.
- The realisation of the restrictions that their vision loss imposes upon them, usually in comparison to their sighted peers, may be a trigger for a series of negative emotions and leave the children vulnerable to psychological stress, frustration and even depression.
- Following on from the above, by constantly comparing themselves to their peers, children with vision impairment may confirm their already existing belief of the limitation of their abilities. This can increase their frustration, negative attitude and lower self-esteem.
- Children with vision impairment may experience greater feelings of failure, particularly in relation to sport and exercise.
- Children with vision impairment may be less accepted by their peer groups and have fewer friends which is likely to impact on their self-esteem.
- Children with vision impairment may have difficulty in observing and imitating their peers, which can impact on the development of positive self-esteem.
- Children with vision impairment tend to be more dependent on their parents in many areas which adversely affects the development of a sense of independence which is one of the most important factors in relation to their self-esteem and adjustment.
- Parents of teenagers with vision impairment can exhibit overprotective or permissive behaviours, which can prevent the young people from learning what they should and should not do, adversely impacting on their self-esteem.
- People may have inappropriate expectations about what those with vision impairment can see and do and thus self-esteem may be negatively affected when the child or young person is unable to meet expectations.

The impact of low self-esteem

Low self-esteem reflects in a lack of confidence, over dependence on others and feelings of inferiority. All children will go through periods of feeling low in self-esteem. This can happen as a result of many factors but is mainly due to the lack of affirming, positive feedback from others. Problems may arise, however, if feelings of low self-esteem continue over a longer period. This may then contribute to the development of mental health problems.

The activity on the impact of low self-esteem helps to show how negative beliefs can influence a wide range of our functioning, including our emotional well-being. This can be further highlighted using the cognitive behavioural perspective illustrated in the table below:

BELIEF	→	EMOTION	→	BEHAVIOUR
They're out to get me		Anger		Hit out
I'm stupid		Depression		Don't ask questions in class
Something dreadful will happen		Anxiety		Refuse to attend School

Table: A cognitive behavioural perspective

Parents may have come across the term 'Cognitive Behavioural Therapy'. This is a psychological therapy based upon the understanding that our thoughts and beliefs affect the way we feel which, in turn, influences our behaviour. Change the negative thoughts and beliefs and the emotions and behaviour can change.

Promoting self-esteem

STRATEGIES FOR PROMOTING SELF-ESTEEM:

■ Improving the child or young person's self-image

- by developing independence, personal and social skills and other competencies

(E.g. provide new responsibilities; take an interest in their hobbies and areas of ability; provide opportunities for children to do lots of different things so they can learn what they are good at and what they enjoy);

- by providing positive feedback

(E.g. praise them for effort and a job well done. N.B. We need a lot of praise before we can take criticism without affecting our self-esteem);

- by providing opportunities for the experience of success

(E.g. help to set some short term goals and some slightly longer term goals, and discuss what they will do to try and achieve them, and how they will know when they are successful).

- by providing an expectation of success

(Children and young people will take confidence from (realistic) expectations of success. This will enhance their chances of succeeding and belief in their capabilities).

■ Adjusting the child or young person's self-ideal to more realistic levels

(It is important that the child or young person's vision impairment is not denied or glossed over. If parents over-normalise the situation, this can lead some children to have a crisis of identity when they are faced with the limitations caused by their vision impairment).

- Helping to change the way the child or young person explains his or her success and failure

(Children and young people with low self-esteem will tend to attribute the reasons for failure to themselves and for success to external factors. Encouraging positive thinking and problem solving will help promote confidence).

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