



**Family Strengthening
Intervention for Resettlement
(FSI-R)
Seed Team Training Program
Manual**

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History of Family Strengthening Intervention for Resettlement (FSI-R)

Families exposed to displacement and loss due to forced migration often face a higher risk for poor family functioning and child mental health concerns including anxiety, depression, conduct problems, and traumatic stress reactions. Upon resettlement in the U.S., there is additional risk and vulnerability due to resettlement stressors (e.g., economic pressures, legal status, education, experiences of discrimination and difficulties navigating health and social service systems). The challenges of adjusting to life in the U.S. can often affect the entire family system, often resulting in parenting problems, impaired marital and family relations, family conflict, and risk of poor mental health and functioning in children. Mental health promotion services for the whole family and support in parenting are needed to reduce risks of mental health problems and strengthen family relationships essential for health, wellbeing, and long-term success.

To address the urgent needs of resettled families, the Boston College School of Social Work's Research Program on Children and Adversity (RPCA) co-developed the evidence-based Family Strengthening Intervention for Resettlement (FSI-R) in partnership with Somali Bantu and Bhutanese resettling communities. The FSI-R was designed to adapt to ever-changing refugee resettlement dynamics in the U.S. The RPCA originally collaborated with community organizations in New England to develop and deliver the FSI-R for Somali Bantu and Bhutanese families with school age children to promote family functioning and child mental health. This intervention was evaluated for impact on both of these resettled populations in New England with promising effects on both reducing child mental health problems and improving family functioning.

The FSI-R seeks to improve family functioning and subsequently child mental health in resettled families who have often experienced trauma due to armed conflict, loss, and displacement, as well as ongoing stressors related to resettlement and acculturation. Developed using a Community-Based Participatory Research approach, resettled community members were engaged in all aspects of the study, from design to implementation to evaluation. Following mass evacuation in Afghanistan in August 2021, the RPCA co-adapted and evaluated the impact of the intervention with resettled Afghan families in Maine and has since expanded the adapted Afghan FSI-R implementation in the state of Michigan.

Preventive interventions build resources in individuals, families, and social systems. Treatment helps people who currently have serious complications, including mental health problems, and works to address those issues. This intervention is not a treatment, but it works together with other tools used by resettled mental health providers to help address current problems and can be delivered concurrently with treatment interventions. The Family Strengthening Intervention (FSI) focuses on the long-term needs of children and families while strengthening the support system they have (e.g. family, peers, community) that increase healthy child development.

Section 1- Introduction to Foundational Training

Learning Objectives: Section 1 covers the main objectives of the Seed Team training guide and what Seed Team trainers should expect to learn from the manual. The section breaks down as follows:

- Section 1.1 How to Effectively Use the Guide
- Section 1.2 The Manual's Intended Audience
- Section 1.3 Key Learning Objectives
- Section 1.4 Purpose and Goals

After completing this section, Seed Team trainers will be able to:

- Develop a strong understanding of the Seed Team training objectives.
- Gain a better understanding of the leadership skills required of a Seed Team trainer.
- Prepare for the various skills that will be honed through the use of this manual.

Section 1.1 How to Use this Manual

Before training on the Family Strengthening Intervention for Refugees (FSI-R), Seed Team trainers should read through this guide to understand best practices and expectations for holding each training session. This guide offers the information needed to master leading and sustaining FSI-R trainee engagement, including moderating trainee dynamics, and holding the ability to respond to any challenge that may arise during coordination or facilitation. In addition to becoming well-versed in training on content delivery, Seed Team trainers will learn skills related to training and group facilitation. By being well-informed of the best practices of group facilitation, Seed Team trainers can ensure a productive use of FSI-R trainee's time and active participant engagement.

The manual is divided into seven main sections, each with various subsections that elaborate on key strategies for Seed Team trainers. Furthermore, the manual will outline how to gain FSI-R trainee trust. It is important for the Seed Team trainer to act as a leader while maintaining rapport with FSI-R trainees in order to be an effective trainer. Developed to ensure user friendliness, this manual trains Seed Team trainers through informative resources such as educating on handling risk of harm situations, providing referrals for services, mental health psychoeducation, strengthening interpersonal skills, and facilitating role-play-based training. The step-by-step toolkit holds the ingredients Seed Team trainers need to facilitate productive, ethical, and engaging training with FSI-R trainees.

Section 1.2 Glossary of Key Terms

Before beginning the training, it would be helpful for you to learn a glossary of key terms. Here we offer some terms with definitions.

- **Family Strengthening Intervention for Resettlement (FSI-R):** The FSI-R focuses on the long-term needs of children and families while strengthening the support system they have (e.g. Family, peers, community) that increases healthy child development. It is a strengths-based family-centered intervention for refugee resettled families.
- **FSI-R Interventionist:** A professional who can deliver the FSI-R to enrolled refugee families in their community after completing FSI-R training.

- **Master RPCA Trainers:** Professionals from the Research Program on Children and Adversity (RPCA) who are trained to deliver both seed team trainings and FSI-R training and facilitate weekly group supervision meetings for FSI-R interventionists.
- **Seed Team:** A seed team is a group of individuals with key expertise who are responsible for launching and establishing the foundation of a new project or initiative, essentially “planting the seeds” for successful wider adoption and rollout across an organization or community. For the FSI-R, the seed team is responsible for supporting the growth and expansion of the program through training and providing mentorship to new interventionists
- **Seed Team Trainer:** An individual who has completed the FSI-R training provided by RPCA and has experience delivering the FSI-R intervention. This person is then trained to serve as a Seed Team trainer if interested, equipping FSI-R trainees with the skills needed to implement the FSI-R practice with resettled families.
- **FSI-R training:** The FSI-R training includes Master RPCA trainers and seed team members training potential interventionists (FSI-R trainees)
- **FSI-R Trainee:** An individual who is screened and hired by their organization and meets the eligibility requirements for an FSI-R interventionist. They undergo FSI-R training to become interventionists who will deliver the FSI-R directly to resettled families.
- **Risk of Harm (RoH):** Any situation where a person’s safety or well-being is at significant risk. This includes not only immediate threats to life but also situations involving severe mental, emotional, or physical harm that requires intervention to prevent escalation.
- **Implementation Fidelity:** “The degree to which an intervention or program was implemented as it was prescribed in the original protocol or as it was intended by program developers” (Proctor et al, 2011)
- **Implementation Competence:** “Competence speaks to the general skills of non-specialist facilitated interventions rather than intervention specific skills” (Kohrt et al, 2015). “The overall quality of intervention delivery is dependent upon both fidelity and competence” (Bond et al, 2022)

Section 1.3 Audience

This comprehensive manual is designed for future Seed Team trainers who hope to learn the best practices of conducting effective FSI-R training for FSI-R trainees. Seed Team trainers must be motivated and open to learning the various aspects required of coordinating an FSI-R training. Furthermore, Seed Team trainers should understand how to utilize their experience and expertise as an FSI-R interventionist to obtain the necessary resources and materials for facilitation. Seed Team trainers should use this guide to refine their existing skills and capacities for leading a group.

Section 1.4 Key Learning Objectives

The following are key objectives that Seed Team trainers will learn throughout the manual:

- How to determine training logistics, such as the proper location, training materials, and providing accommodations for FSI-R trainees.
- How to set ground rules for training and ensure that FSI-R trainees follow best practices when they deliver the intervention in the future.
- How to establish rapport with FSI-R trainees and maintain engaging group dynamics.

- How to facilitate trainings and encourage FSI-R trainees to actively participate in discussion.
- How to address and overcome common challenges that may arise during the FSI-R training.
- How to evaluate trainee performance and provide constructive feedback.

Section 1.5 Purpose and Goals for This Guide

The purpose and goals for Seed Team trainers using this guide are as follows:

1. Content mastery and integration
 - a. Seed Team trainers utilizing this guide will learn and internalize the content of how to create a collaborative training team and facilitate an effective FSI-R training. In addition to being experts on the content of intervention delivery, Seed Team trainers will master skills relating to training and group facilitation.
2. Leading a group and appropriate facilitation
 - a. Seed Team trainers should be able to provide proper and appropriate facilitation of training to FSI-R trainees. This guide facilitates mastery around how to lead and sustain engagement of a group, including moderating FSI-R trainee group dynamics and ensuring all FSI-R trainee members are interacting with the content and participating fully. Seed Team trainers should know how to mitigate common challenges of group training sessions to create a positive learning environment and how to facilitate proper time-management of training sessions. Successful Seed Team trainers maintain fidelity to the training content but also exhibit competence in the soft skills required to effectively engage with FSI-R trainees and ensure retention of training materials.
 - b. Beyond simply leading and facilitating training, Seed Team trainers will utilize and engage their learnings from implementing the intervention to the FSI-R training. Seed Team trainers must be able to read the group and integrate personal experience to address challenges as they arise and best facilitate an effective training environment.
3. Providing constructive feedback & performance evaluation
 - a. A key part of training is providing constructive feedback to participants as they work through the material of the intervention. This guide will support Seed Team trainers in learning how to structure and provide feedback to participants in a constructive and supportive manner and how to evaluate performance and learning of training participants.
4. Setting boundaries & doing no harm as a Seed Team trainer
 - a. Seed Team trainers should be able to be experts on best practices for setting boundaries and mitigating risk of harm both within training and when implementing an intervention. This guide will provide necessary content and resources for Seed Team trainers to teach FSI-R trainees how to effectively set boundaries to avoid burnout, mitigate potential risks of harm, respond appropriately to a known risk of harm case, and do no harm in their work. Seed Team trainers should be able to both exhibit these skills within their work as a Seed Team trainer and effectively teach FSI-R trainees how to cultivate these skills into their work by utilizing role-play, vignettes, and personal experience.
 - b. Seed Team trainers should be able to mitigate common challenges as they arise and exhibit best practices when it comes to “doing no harm” in training and intervention implementation. Seed Team trainers will know how to manage risk of harm cases as both

an FSI-R interventionist and a Seed Team trainer and be able to mitigate and problem-solve challenges relating to risks of harm that may emerge during a training.

Section 1.6 Seed Team Training Evaluation

Master RPCA trainers utilize evaluation tools throughout the Seed Team Training to assess performance of potential trainers through role plays and discussions. This will include fidelity and competency rating checklists and pre and post-tests to assess knowledge of the FSI-R, interpersonal skills, inclusivity, group facilitation, and teaching and training skills. Seed team trainers are expected to complete their certification by directly delivering an FSI-R training. If there are concerns about graduating a trainee from the seed team program, Master RPCA Trainers will determine which actions should be taken and if additional training will be needed.

Section 2- Training Logistics

Learning Objectives: Section 2 covers the basics of logistical planning for a training. This includes finding appropriate training facilities and providing accommodations for FSI-R trainees in Section 2.1 as well as additional logistics to consider such as length and timing in Section 2.2.

After completing this section Seed Team trainers will be able to:

1. Identify appropriate locations to use as a training space.
2. Demonstrate an understanding regarding what materials should be used in an FSI-R training.
3. Describe essential accommodations that need to be considered when conducting an FSI-R training including meals, refreshments, transportation, lodging, and childcare.
4. Utilize time management skills to ensure that a training is meeting the appropriate length and covering the necessary topics.

Section 2.1 Training Facilities and Accommodations

Section 2.1.1 Location

Seed Team trainers should ensure that the training will be held in an adequate space which has room for all FSI-R trainees. A good choice for a location could be in a conference hall in a hotel or event venue.

The space should provide:

- Regularly serviced restroom facilities.
- Space for social distancing if recommended by the Center for Disease Control at the time of the training.
- Enough room and chairs for breakout group sessions for role play.

Section 2.1.2 Internet

It is important to find a space which provides Wi-Fi access, as many presentations and materials may be pulled from the internet. It is important to also remember that providing web-based engagement through the use of applications such as “Padlet”, “Doodle Polls”, and “Google Forms” will require internet access. Seed Team trainers should take time prior to starting the training to test the Wi-Fi and bandwidth to ensure that the internet will be accessible for the allotted number of FSI-R trainees.

Section 2.1.3 Projectors and Screens

Not all FSI-R trainees may bring in a laptop or tablet device or have access to one, so having a projector and screen to project will be essential for any PowerPoint or video presentations. Similar to testing the internet, Seed Team trainers should take time before beginning the training to practice use of the projector and test its ability to work. Doing so will prevent any time delay during the training.

Section 2.1.4 Meals

For longer training sessions (more than a couple of hours or interfere with mealtimes), meals should be planned ahead of time. The venue may be able to cater food, but if not, Seed Team trainers should schedule delivery from a nearby restaurant or store for meal times like lunch or dinner. It is important to gather dietary information prior to ordering any delivery or catering service so that participants are properly nourished and in no danger of exposure to a food allergy. It is recommended that when ordering for delivery, to get a large group option which can provide a buffet style or platter of choices.

It is important to model positive behavior by supplying healthy options. Finding a caterer or restaurant that provides varied healthy meals and healthy drink options is encouraged.

As mentioned previously, dietary restrictions are very important to be aware of when planning meals for training. For example: A previous FSI-R training for a group of Afghan interventionists provided halal approved food choices as all FSI-R trainees identified themselves as practicing Muslims.

Section 2.1.5 Refreshments

In addition to meals, refreshments should be provided even for a short training session (1-2 hours). Bottled water should be available. Similarly to meals, it is recommended that Seed Team trainers provide healthy refreshment options such as fruit rather than just chips and desserts.

See suggestions for healthy meeting snacks and meals in Appendix 2.1.5

Section 2.1.6 Childcare

Seed Team trainers should ensure that childcare services are provided while FSI-R trainees with children are in training. Finding local, trained individuals to watch children and finding a room near the training space to accommodate this is ideal. If unable to provide full childcare services, a stipend should be given to any FSI-R trainee to use for whomever they choose to provide childcare. Any childcare areas should have a range of toys, entertainment, and hygiene supplies. If childcare is being provided in a room near the training facility, Seed Team trainers should identify the number of children and their ages who will be coming to the training and supply age-appropriate toys and activities.

Section 2.2 Additional Training Logistics

Section 2.2.1 Materials

It is highly recommended that any training material be printed out and distributed for the FSI-R trainees' use as not all trainees may bring laptops or a tablet to access the information digitally. This may include PowerPoint slides, sample activities, and resource handouts. Ensure that any material is safe to distribute first before printing as some materials may need a copyright watermark. Other materials that should be considered for training are folders or binders to hold materials in, notebooks, and writing utensils. These are useful materials for note-taking, as well as for jotting down questions to ask trainers.

Section 2.2.1 Training Length

The training length will depend on the type of training being implemented. For example, the FSI-R runs for 10 days (or two working weeks) and is 8 hours each day. The training is required to be attended in full prior to assigning and enrolling participants in any intervention. Seed Team trainers should factor in time for 10-15 minute breaks after 1-1.5 hours of presentations when planning their schedule.

Section 2.2.2 Training Timing & Time Management

To ensure that the allotted time for training is being used effectively, Seed Team trainers should create a schedule for each day. A sample training schedule is provided in the appendix that has been used for the FSI-R (*Appendix 2.2.2*).

Seed Team trainers should encourage discussion and participation but should also be aware of the time to see to it that all valuable content is covered and that there is plenty of time for activities like role plays. Make sure to let FSI-R trainees know that you are listening to them and if time is running short, give gentle reminders to the group like “We appreciate all of your thoughts being shared in discussion and questions but we want to keep an eye on the time to make sure that we get through all of the material. If

we have time at the end of our session, we welcome you to bring any additional thoughts forward.” (See *Section 3.3 Responsive Facilitation for further information*)

Depending on how the training is running on time, it may also be necessary to inform FSI-R trainees at the beginning of a presentation that they will need to save their questions for the end to ensure there is time to cover all topics and that some questions may also get answered during the session. Encourage them to write down any questions that come up during the presentation. Always make sure to let FSI-R trainees know that if they ever have a question that goes unanswered, Seed Team trainers will be available after the session to address it.

Managing time effectively in training can be difficult, particularly when the topics being covered evoke emotions and opinions from trainees. It can be hard to stick to the schedule that was planned. Being flexible with time is a key skill. As seen in the schedule referenced above (*Appendix 2.2.2*), Master RPCA trainers for the FSI-R allotted extra time on the last day in case the remainder of training fell behind schedule or they needed additional time to cover topics which were brought up by the FSI-R trainees. Remember that an agenda may be ever changing and Seed Team trainers will need to learn to adapt to ensure that all FSI-R trainees are receiving the best possible training experience.

Section 2.3 Materials for Training

Section 2.3.1 Training Agenda/Schedule

The training schedule should be printed out for Seed Team trainers to follow along. See *Appendix 2.2.2 for a sample agenda/schedule*.

Section 2.3.2 Manuals and Workbooks

The FSI-R manuals and workbooks will need to be printed by the RPCA staff ahead of the training. The printing process can take time, so please allow at least a few weeks before the training for the RPCA to print copies and mail them to the appropriate location if needed. Each participant should receive one manual and at least five workbooks to start. The FSI-R workbooks will be used with each family but participants will want to follow along with the training using both the manual and one workbook, especially for role plays. Make sure to also check with the supervisors of the trainees about how many manual/workbook copies they would like for their organization.

Section 2.3.3 PowerPoint Presentations

As mentioned previously, it is a good idea to print out copies of any slideshow presentations or email digital copies to trainees who prefer to take notes and follow along on a device.

Section 3- Training Methodology and Guidelines

Learning Objectives: Section 3 covers the breakdown of roles and responsibilities, best practices involved in presenting, managing role play activities, building relationships at the individual- and group-level, and integrating personal experience into training. After completing this section Seed Team trainers will be able to:

1. Conduct group facilitation using best practices.
2. Demonstrate effective rapport-building strategies in group- and individual-level settings.
3. Describe why role play is an effective learning tool.
4. Cultivate role play skills for use with diverse populations.
5. Recall and describe relevant experiences to illustrate training concepts.
6. Demonstrate strategies for mitigating common challenges which arise in group facilitation.

Section 3.1 Training Roles and Responsibilities

Setting expectations and defining roles at the very beginning of a training is vital for its success. The table below highlights the designation or roles in training. Each member of the trainer team should have clear-cut roles and responsibilities. In particular, the Training Lead should be an expert on the content of the training and intervention of interest. The Training Lead can be a member of the Seed Team and will also lead the division of roles and responsibilities among Seed Team trainers. All Seed Team trainers should meet consistently prior to the training to divide roles, and map out specific tasks for before, during, and

after training implementation. All issues and challenges should be brought to the Training Lead as they arise during training sessions.

These roles can overlap with each other. For example, one of the supporting Seed Team trainers may also serve as a note-taker throughout the training.

| Role | Profile |
|----------------------|---|
| Training Lead | The training lead, who may be a member of the Seed Team, is responsible for conducting each session, and leading the associated activities including managing group dynamics and FSI-R trainees' engagement, leading and managing all role plays, and building rapport. Training leads are also responsible for directing training support and note-takers in their roles. |
| Supports | Other members coordinating the training should serve as support for the training lead during the session. These individuals will be consistently engaged in the presentation by presenting with the training lead, walking around, answering questions, supervising and helping to facilitate activities like role plays. |
| Note taker(s) | <p>For each session, there should be one individual who is responsible for taking attendance & taking notes. The note-taker is responsible for taking in-depth notes to fully reflect the minutes in training. They are responsible for not necessarily taking notes on what is being said, but how the training is going to guide further sessions and targeted improvements. Notes should include information such as:</p> <ul style="list-style-type: none"> ● What is working? Did the session go smoothly? ● What is not working? ● Are the FSI-R trainees engaged? What strategies were successful in engaging FSI-R trainees? ● What changes, if any, should be made? ● Which FSI-R trainees excelled in the session & which FSI-R trainees could use further training or 1-1 guidance? <p>Note-takers should follow a standardized note-taking template (<i>see Supplemental Materials for template</i>)</p> |

Section 3.1.1 Setting Ground Rules

One of the key roles of a Seed Team trainer is to manage complex group dynamics among people with diverse backgrounds and lived experiences. Setting ground rules at the start of training is vital to creating rapport and a training environment grounded in mutual respect. Use the time to create community guidelines as a discussion whereby the group creates the set of ground rules together. Creating community guidelines is a participatory process and should be done at the beginning of training. Find below an example of a template for an exercise to create ground rules:

Exercise 1: Creating Community Guidelines (~10 minutes)

Ask your audience for rules or guidelines that they think should be followed during this training, emphasize that creating these guidelines is up to them and they get to guide and set the tone for the training. Open it up to the group and tell them to shout out answers. Record all answers on a flipchart, chalkboard, whiteboard, poster-board, or other medium which can be displayed in front of the team and put it up in the training room for the rest of the training. Refer back to these rules throughout the training to remind participants. Consider opening training sessions every day with a call back to the ground rules created and allow for a few opportunities throughout the training for the group to discuss and add any additional guidelines as they see fit.

Some examples community guidelines to implement could include:

- Confidentiality: what is said in the group stays in the group
- “Step forward, step back.” This rule means that FSI-R trainees should take turns speaking. FSI-R trainees should just say one thing at a time and let others respond, rather than talking about many issues all at once and not letting others have a turn to speak.
- Phone will remain in bags and should be silenced.
- Be respectful of everyone’s time and show up on time and plan to stay for the entire length of each session.
- Be open to sharing! If you have a question and/or comment participants should share with the group.
- Minimize side conversations
- Challenge ideas not people

See [Appendix 3.1.1](#) for resource on setting ground rules: “15 Ground Rules for Running Productive, Insight-Driven Workshops”.

Section 3.1.2 Do No Harm in Training

Even with the best intentions, there is always a risk of unintentionally causing harm. To mitigate this, it is crucial to assess the potential impacts of planned actions thoughtfully. This involves emphasizing factors that foster unity within communities (connectors) and addressing those that contribute to divisions or conflict (dividers). This principle is central to the “Do No Harm” approach, one of the core principles of Mental Health and Psychosocial Support (MHPSS) as it is highlighted in Inter Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support (MHPSS) Coordination.

In the context of FSI-R training, both Seed Team trainers and FSI-R trainees must remain vigilant about minimizing harm, particularly given the potential of a non-clinical background for some of the FSI-R trainees. Without adequate supervision, resources, or training, Seed Team trainers may unintentionally mishandle tensions within training sessions, exceeding their scope of expertise. Proper preparation for Seed Team trainers is essential to ensure they can uphold the “Do No Harm” principle during training. This, in turn, equips FSI-R trainees to apply the same approach effectively when working with refugee families.

Section 3.1.2.1 Best Practices and Do No Harm Exercises

Key Takeaways for Trainers:

- Recognizing signs of participant distress and intervening appropriately aligns with the *Do No Harm* principle.
- Proactive strategies like setting clear expectations, offering content warnings, and providing opportunities for FSI-R trainees to step away can help mitigate risks.
- Trainers should model empathy, foster open communication, and prioritize emotional safety to create an inclusive and effective learning environment.

Exercise 1: **Creating a Safe Training Environment**

Background: Ahmed, a Seed Team trainer, is conducting a training session on Module 2 with a group of FSI-R trainees, especially talking about unique situations of refugee families from children's perspectives.

Scenario: During a discussion on real-life intervention scenarios, one of the FSI-R trainees, Layla, becomes visibly distressed. She appears emotional, avoids eye contact, and begins to fidget nervously when others share stories about working with families who have experienced trauma. Layla eventually steps out of the room without saying anything. Other participants seem uncertain about how to proceed, and the room feels tense. After the session, another participant mentions that Layla found the discussion overwhelming but didn't know how to ask for help.

Discussion Questions:

1. What specific signs of distress did Layla exhibit, and what strategies could the Seed Team trainer have used to address her concerns in real-time?
2. How could the Do No Harm principle guide your response as a Seed Team trainer in this situation?
3. How could the lack of response affect not only the trainee but also the morale and participation of the entire group?

Exercise 2: **Do No Harm and Confidentiality in Training**

Background: Confidentiality is a fundamental principle in training, especially in sensitive areas such as psychosocial support and family interventions. Maintaining confidentiality builds trust, ensures psychological safety, and fosters a productive learning environment. When confidentiality is violated, it can lead to mistrust, harm not only to FSI-R trainees but also to refugee family members, and potentially legal or ethical repercussions.

Scenario: During a training session, a Seed Team trainer discusses a challenging case involving his experience as an FSI-R interventionist working with a refugee family. The Seed Team trainer provides specific details about the family, including their names, locations, and private struggles. Although the Seed Team trainer's intent was to provide a learning opportunity to FSI-R trainees, one of them recognizes the family and shares this information outside the training. The family finds out their private struggles were disclosed and feels betrayed, leading to a complaint against the agency where the Seed Team trainer is employed.

Discussion Questions:

1. Why is confidentiality critical in training settings, especially when dealing with sensitive topics?

2. What are the potential consequences (ethical, professional, and personal) when confidentiality is violated?
3. How could the Seed Team trainer have shared the case details without compromising confidentiality?
4. If confidentiality is accidentally breached, what should be done to address the situation and rebuild trust?

Section 3.2 Active Participation

It is important to engage in active participation to create a more meaningful learning environment that focuses on conversation and knowledge instead of a lecture-style learning environment. Seed Team trainers should build in opportunities for conversation and discussion within the sessions, and ask many questions to check for FSI-R trainees' understanding. The training will also rely on active engagement and role playing to allow interactive learning of training materials.

Section 3.2.1 Utilizing Icebreakers

Start each day or session with an icebreaker activity to set the tone and get everyone comfortable speaking with the group. It is a good idea to use icebreakers when you have a new group of FSI-R trainees who are recently hired or all meeting together for the first time. These games will help them get to know each other better and help build group rapport to facilitate active participation throughout training. Icebreakers can also be used between sessions or to give FSI-R trainees a break.

In the first session of the first day of training, have each member of the group introduce themselves (depending on the size of the group) and then go into a designated icebreaker activity. *Review fun icebreakers for training pack in Supplemental Materials for an extensive list of potential icebreakers to engage the group.* Consider assigning a different member of the group to lead the next session's icebreaker to give everyone a chance to lead. Share some examples of activities for the next session and let them lead. Find an example of a common icebreaker activity below:

Exercise: Who is the Leader?

In this icebreaker exercise all participants are in a circle. They choose one to go out of the circle and into an area where they cannot see or hear the rest of the group. The group then chooses who will be guiding them in games - clapping, jumping, etc. The whole group tries to follow the leader's actions without the one who left being able to tell who the leader is. The one who left the circle will return and try to find the leader who the group chose to lead them. Repeat for a few rounds!

Section 3.3 Responsive Facilitation

A responsive trainer is one who can enthusiastically and attentively guide a group discussion. To do this, Seed Team trainers are required to maintain a conscious effort to gauge FSI-R trainees' understanding, commitment to discussion, and energy levels. A cue that FSI-R trainees are disengaged may be that there are no questions being asked on a topic. In this case, Seed Team trainers should use strategies to gauge whether or not the information is well-understood by FSI-R trainees. Not doing so could lead to lack of

responsiveness by FSI-R trainees. However, using the following tips to guide your group will help to ensure a smooth-running discussion.

Confidentiality: Ensure that the information shared in discussion is kept private, and that this sentiment is emphasized and repeated to FSI-R trainees. It is important to establish an agreement on maintaining confidentiality before the start of discussion, and reminding FSI-R trainees of this as an ongoing process. It is also important to let FSI-R trainees know they do not need to answer a question if they do not want to. This should be covered when creating the ground rules with the group.

Facilitating Effective Group Dynamics: FSI-R trainees will come to training with their own unique perspectives and personalities. Maintaining productive group dynamics with multiple different personality types is an important skill for Seed Team trainers to have. Below are some examples of how to best manage various scenarios that may arise.

| Group Scenario | Tips for Seed Team trainers | Example phrases or techniques |
|---|---|---|
| Interruptions | <p>Set ground rules at the beginning of the session that only one person may speak at a time. Seed Team trainers should know how to actively interject in a diplomatic way to refocus dialogue, so that every FSI-R trainee gets a chance to speak.</p> | <ul style="list-style-type: none"> ● <i>“Thank you for sharing your thoughts on this topic; does anyone else have any opinions about this?”</i> ● <i>“I appreciate everyone’s insights, but a gentle reminder to speak one at a time, so that all trainees may be heard.”</i> |
| Conversation Being Dominated by Some Trainees | <p>If a few FSI-R trainees are contributing to a majority of discussion, thank the trainees for their perspectives and use phrases as follows to redirect the topic to other FSI-R trainees.</p> | <p>Diplomatic interjection can be used to productively intervene and expand the conversation to the broader FSI-R trainees. Some phrases to do so may look like:</p> <ul style="list-style-type: none"> ● <i>“Thank you for offering to share, but I was wondering first if there’s anyone else who hasn’t gotten a chance to speak yet who would like to offer their perspective.”</i> ● <i>“I would be interested to hear what others think about this topic.”</i> ● <i>“It would be helpful to get more perspectives</i> |
| Lack of Participation | <p>There are a lot of reasons FSI-R trainees may not be speaking - they may be nervous, processing information, or there could be cultural differences in terms of participation expectations (i.e. gender norms).</p> | <p>Utilize open-ended or low-stakes questions to allow for more opportunities to share.</p> <ul style="list-style-type: none"> ● <i>“Would anyone like to share a personal experience with this topic?”</i> ● <i>“What might be some examples of [concept X] you have heard of?”</i> <p>Have folks work in small groups where participating may be less intimidating and then share back to the larger group.</p> <ul style="list-style-type: none"> ● Have FSI-R trainees write their thoughts or questions down on a piece of paper to be shared at a later time. ● Utilize phrases such as: <ul style="list-style-type: none"> ○ <i>“Is that question clear; would you like me to restate or rephrase it?”</i> ○ <i>“I know that was a bit of a tough question, so I’ll give you a moment to think about</i> |
| | <p>Nerves To encourage FSI-R trainees who may be nervous to speak, it is important to show active interest in what they have to say, and not to push for answers.</p> | |
| | <p>Processing information Make room for pauses to allow individuals to process information. Routinely reflect on the way information is being presented to the group, and evaluate whether your teaching style is effective for the specific dynamics.</p> | |

| Group Scenario | Tips for Seed Team trainers | Example phrases or techniques |
|----------------------|--|---|
| | <p>Differing participation expectations Depending on their background, FSI-R trainees will engage in training in the way they deem most appropriate. Some tips on facilitating conversations for when differing group norms may hinder group participation are in the following column.</p> | <ul style="list-style-type: none"> ● Mutual evaluation: Remind FSI-R trainees throughout the process to keep in mind that the Seed Team trainer values their performance and wants to support their learning in the best ways they can. By sharing, trainers have a better understanding whether FSI-R trainees are prepared for the tasks they will be undertaking. ● Don't point individuals out directly, as this causes more nervousness. Instead, utilize phrases such as: <ul style="list-style-type: none"> ○ <i>"I haven't heard from this area in a while, does anyone here have any thoughts on this?"</i> ○ <i>"Would anyone from this section like to share? I would appreciate more perspectives on this topic from those we haven't heard from yet."</i> |
| | <p>Check in with FSI-R trainees individually, during a break or after sessions, if there is repeated lack of participation.</p> | <ul style="list-style-type: none"> ● <i>"I've noticed you haven't been raising your hand as much. I wanted to check in if everything was okay, and if you feel comfortable participating. If not, what could we do to help you feel more comfortable?"</i> |
| Differing Viewpoints | <p>In a group setting, there is a high likelihood that FSI-R trainees won't always agree on every topic. When this arises, it's important for the Seed Team trainer to manage disagreements with sensitivity. Here are some tips to effectively avoid escalation during disagreements:</p> | <ul style="list-style-type: none"> ● Reiterate to members that having differing points of view is okay. ● If a disagreement starts to escalate: <ul style="list-style-type: none"> ○ Use phrases such as "I appreciate the different points of view, however it sounds like we're getting a bit off topic." ○ <i>"Everyone experiences things differently and this is okay..."</i> This allows the Seed Team trainer to validate each person's experience, without cornering any FSI-R trainee. ○ Find a common ground, and remain |

| Group Scenario | Tips for Seed Team trainers | Example phrases or techniques |
|-------------------------|---|---|
| Disengaged Participants | <p>Scan for Cues: Pay attention to signs of disengagement, such as distracted body language or side conversations, and assess their potential causes.</p> <p>Incorporate Activities: Use engaging techniques such as role-playing exercises (see Section 3.4) or icebreakers (see Section 3.2.1) to reset the tone and reinvigorate the trainees’ participation.</p> <p>Follow Up Individually: If disengagement persists, check in with the trainee privately during a break or after the session. Show understanding and offer support, as external stressors may be impacting their ability to focus.</p> <p>Build Rapport: Use one-on-one conversations to establish trust and ensure trainees feel seen and valued</p> | <ul style="list-style-type: none"> ● To Re-engage the Group: <ul style="list-style-type: none"> ○ <i>“Let’s take a quick moment to revisit our goals for this session and how they connect to the work you’ll be doing as interventionists.”</i> ○ <i>“I’d like to introduce a quick activity to bring this concept to life—let’s try a role-playing exercise!”</i> ● To Address Individuals Privately: <ul style="list-style-type: none"> ○ <i>“I noticed you seemed a bit distracted earlier—everything okay? I just wanted to check in and see if there’s anything I can help with.”</i> ○ <i>“If something is on your mind, feel free to share. I want to make sure you’re getting the most out of this training.”</i> |
| Managing Silence | <p>Silence during training sessions is not necessarily a bad thing. When you ask a question and do not get an immediate response, allow time for FSI-R trainees to process the question. Silence can often be a sign that participants are reflecting or considering their responses.</p> | <p>If the silence persists:</p> <ul style="list-style-type: none"> ● Rephrase the Question: Adjust the phrasing to make the question clearer or more approachable. <ul style="list-style-type: none"> ○ Instead of asking, <i>“How can a strengths-based approach improve family dynamics?”</i> ○ Rephrase it to: <i>“What are some ways focusing on family strengths might help them work better together?”</i> ● Offer Alternatives: Ask if there is another topic or perspective they feel more comfortable sharing. <ul style="list-style-type: none"> ○ <i>“If this question doesn’t resonate, is there a related topic you’d like to explore?”</i> ● Use Probes: If open-ended questions aren’t working, gently prompt specific individuals to |

Section 3.3.1 Gender Dynamics in Training

Gender refers to the traits and perceived differences of women, men, girls, and boys that are shaped by social constructs. According to the World Health Organization (WHO), this includes the norms, behaviors, and roles associated with each gender, as well as the interactions and relationships between them. Social definitions of what it means to be a man or a woman vary across societies, cultures, and communities and can evolve over time.

FSI-R trainees may observe power dynamics between men and women, particularly among individuals from non-Western countries, where cultural understandings of gender may differ. Adapting to these dynamics can be a gradual process for newcomers. As Seed Team trainers, it is essential to prepare to provide effective training and guidance to FSI-R trainees who may encounter such situations during their interventions.

Exercise: Inclusivity in Training

Background:

Seed Team training aims to prepare trainers to deliver the FSI-R training effectively. A critical aspect of this process is fostering balanced participation among FSI-R trainees, ensuring all voices are heard, including those who may feel less confident speaking up. Addressing gender dynamics during training is essential to creating an inclusive and collaborative learning environment.

Scenario:

During an FSI-R training, the Seed Team trainer, Sarah, leads a discussion with a group of FSI-R trainees about strengths-based approaches. Among the participants are James, an enthusiastic and outspoken trainee with prior experience in case management; Priya, a thoughtful but soft-spoken trainee with a background in education; Adi, who often shares detailed examples from his work with immigrant families; and Elena, who seems hesitant to contribute despite her extensive experience in community outreach.

As the session progresses, James and Adi dominate the discussion, sharing their perspectives on identifying family strengths. Priya contributes briefly but appears reluctant to elaborate, while Elena remains silent, occasionally nodding in agreement. Noticing this imbalance, Sarah takes intentional steps to engage Priya and Elena in the conversation.

Sarah pauses and says, “We’ve heard some great ideas so far, and I know each of you has unique experiences that can enrich this discussion. Let’s ensure everyone has a chance to share.” This approach successfully invites diverse voices into the conversation, but James and Adi soon resume leading the discussion. While appreciating their active participation, Sarah considers ways to balance the dialogue to include other trainees.

Turning to Priya, Sarah says, “Priya, you mentioned earlier that you worked with families in educational settings. How do you think strengths-based practices can support children’s learning in those environments?” Priya smiles and begins sharing an example from her teaching experience, which prompts Sarah to ask follow-up questions that encourage her to expand further.

By the end of the session, Priya and Elena are participating more actively, sharing their insights with confidence. Sarah reflects on the importance of fostering balanced participation and considers how these strategies can be modeled for the trainees to apply in their work with families.

Discussion Questions:

1. Which specific strategies (e.g., direct invitations, validating contributions) seemed most effective in fostering balanced participation?
2. How could Sarah ensure that James and Adi remain engaged while also balancing participation among the group?
3. What strategies would you bring with you and what would you do differently as a Seed Team trainer?
4. How can Sarah's actions serve as a model for FSI-R trainees when they work with families, particularly in contexts where power dynamics or cultural norms might silence certain members?

Section 3.4 Managing Role Plays

Role-play exercises are a valuable part of FSI-R training, bridging the gap between theory and practice. Role playing allows FSI-R trainees to apply what they've learned, better preparing them to deliver interventions effectively. Moreover, role play facilitation is crucial to ensure that FSI-R trainees are comfortable and confident in their delivery. As a Seed Team trainer, you are responsible for guiding the group through the role play activities when you lead the FSI-R training. This means that you will:

- 1) Give direction on which roles and scenarios they are to play for every module during the training
- 2) Provide helpful feedback and suggestions after observing their actions
- 3) Make sure that every FSI-R trainee in the group is participating and acting appropriately within the role play

Steps for Successful Role Plays in Training taken from John A. Gabriel's "Using Role Play as a Training and Supervisory Tool" (see reference in *Appendix 3.4.1*)

Step 1- Explanation Given by Seed Team trainers

It is recommended that the trainers provide expectations for learning activities at the beginning of the training. Explain to the group what role playing is and why role playing is a valuable learning tool for your training.

Step 2- Developing Situations for Role Play

You should provide FSI-R trainees with clear situations/scenarios that they will be acting out when you lead the FSI-R training. Ensure that all FSI-R trainees understand the situation they will need to act out. In the FSI-R, Seed Team trainers will go over a specific topic in lecture and discussion prior to beginning the role play that will be focused on that subject. For example, the larger group may have a discussion about presenting on the topic of puberty with a family, and will then use what they have learned to act out discussing puberty with the parents. Providing as much direction as possible is crucial with managing role plays. Role plays might seem overwhelming for people due to possible embarrassment or nerves with public speaking, so giving clear instructions can ease worries.

Learnings from FSI-R Training in Michigan (2023):

During the Michigan training of the Family Strengthening Intervention, RPCA trainers noticed that people were struggling with organizing their thoughts as they began the role plays for each section. Putting up a poster board on the wall for FSI-R trainees to refer to as they practiced was found to be helpful. The poster listed the key objectives of the role play and allowed a smoother practice instead of reading word for word from their manual/workbook. Here is an example of what was written on the poster board for Module 2 in the FSI-R.

- Check In*
- Discuss Family Strengths*
- Discuss Family Goals*
- Cover the facts of resettlement*
- Discuss managing and coping with stress of resettlement*
- Discuss children's coping with resettlement*
- Prepare caregiver for child meeting*
- Checkout*

Step 3- Selecting Trainees for Role Play

Depending on group size, breaking out into smaller groups is helpful so that each person can get a turn playing the interventionist and feedback may be given more openly in the smaller group setting. It is recommended each group has a Seed Team trainer sitting in with them to observe. If you are able to do so, it is encouraged to switch up the small groups each day so that FSI-R trainees can practice with different people.

If the Seed Team trainers feel it is appropriate, role play can also be presented by an individual or small group to the larger training group. The Seed Team trainer may observe that there is someone excelling within their small group during a role play activity and may want that person to model their skills for the larger training group. First, seek permission from the person or people that they are comfortable sharing with a larger group. It is also helpful to provide the opportunity for FSI-R trainees to volunteer themselves to demonstrate a role play scenario for the group. Keep in mind that some groups may not have FSI-R trainees who are comfortable with volunteering themselves.

Step 4- Role Play Prescriptions

Similar to explaining the scenario being role played, it is helpful for Seed Team trainers to assign specific roles to FSI-R trainees. This can help FSI-R trainees learn to navigate varying situations. For example, a Seed Team trainer may assign a group of four people roles- one to play the interventionist, one to play the mother, one to play the father, and one to play their child. It is helpful to give specific information about the roles as well such as, “the boy is a 12-year-old Afghan who recently resettled in the U.S. and is suffering from bullying at school”. With added experience, the trainees may be able to provide the role prescriptions themselves.

Step 5- The Role Play

Groups should be divided evenly and should coordinate with the role play situation. For example, the role play may include an interventionist, a mom, and a dad. In this case the training group can be divided into threes. If the number of trainees is larger, there can also be FSI-R trainees who may observe their group for one round of role playing. While you will want to ensure this person gets a chance to role play at some point, they can use this time to take notes and provide valuable feedback to their group. Role plays should be timed appropriately to ensure everyone gets a chance to try.

Step 6- Follow up Discussion

After the groups finish role playing, the larger group will come back together to discuss their observations and insights. FSI-R trainees should be encouraged to share their experiences, but Seed Team trainers may also share what they observed. This may include a technique that one of the FSI-R trainees used that could be provided as an example or the trainer may have noticed that FSI-R trainees missed key components, and can use this as an opportunity to remind the group about specific points to include. Keep in mind that it can be more valuable to use this time as a question-and-answer format rather than a lecture format when facilitating the discussion.

Section 3.5 Building Individual Relationships

Rapport building, or the establishment of trust and understanding between individuals, is an essential part of training. It leads to effective communication and positive relationship development. There are several different tactics to build rapport, specifically in a group setting. When a trusting relationship is established, this leads to an increase in motivation and productivity for all members. If there is a lack of rapport, FSI-R trainees are less likely to take a Seed Team trainer seriously, and will be less inclined to productively participate. However, if done properly, well-established rapport leads to effective group facilitation, meaningful conversations, and engaged group dynamics.

Some effective methods of building rapport are included in the following table.

| Rapport Building Strategies | Facilitator Tips |
|---|---|
| Active listening | <p>When you are actively listening, you are:</p> <ul style="list-style-type: none"> ● Paying close attention to what another individual is saying, both verbally and non-verbally. ● Allowing members to speak freely, and listening to them with a present mind. <p>As a result, individuals will develop a sense of trust and willingness to share their thoughts more openly.</p> |
| Welcoming body language | <p>It is important to utilize inviting body language so that members feel welcome and comfortable in participating. Some examples of this include:</p> <ul style="list-style-type: none"> ● Maintaining eye contact with members who are speaking ● Smiling; welcoming body language ● Keeping a relaxed posture <p>Appropriate body language <i>varies</i> from culture to culture, so it is important that you are aware of this before sessions (i.e. eye contact is viewed positively in some cultures, but disrespectful in others).</p> <p><i>See Appendix 3.5.1 for examples of the cultural variations of body language.</i></p> |
| Listening and responding with respect and empathy | <p>Leading discussion with respect and empathy means to genuinely value and try to understand the experiences that members are sharing with due regard. It is extremely important in building a productive relationship with members. If participants feel that they are not being listened to with respect and understanding, they will be <u>less likely</u> to fully engage in the conversation.</p> <p>When participants view the group facilitator positively, they are more likely to</p> <ul style="list-style-type: none"> ● Respond positively to guidance and feedback ● Engage in conversation ● Promote facilitator <i>and</i> respondent learning |
| Asking follow up questions | <p>Engaging in productive conversation includes asking follow up questions as necessary. When a group member is speaking, it is important for the facilitator to carefully listen and ask clarifying questions when appropriate. Doing so demonstrates that the facilitator is interested and engaged in what individuals have to say, and <i>invites members</i> to ask clarifying questions when needed. This also serves to strengthen one-on-one relationships with group members.</p> <p>Example follow-up phrases:</p> <ul style="list-style-type: none"> ● “Could you tell me more about...?” ● “That is an interesting point, could you please elaborate?” ● “Am I understanding correctly...?” |

Section 3.5.1 Boundary Setting in Training

Setting up boundaries helps ensure that the support you provide stays professional and effective. It protects you from burnout and helps FSI-R trainees you work with maintain their independence. For example, if some of the FSI-R trainees ask for help outside your role, it is okay to kindly redirect them to a resource that can assist them. It is not about saying no—it is about saying yes to the role you are trained to perform while ensuring their needs are met through the right channels.

Exercise: Setting Boundaries with FSI-R Trainees

Background: Seed Team trainers play a key role which requires maintaining professional boundaries while fostering an open and respectful environment for FSI-R trainees. Balancing these responsibilities can be challenging, particularly when FSI-R trainees seek excessive personal support or begin to blur the lines between professional and personal relationships.

Scenario: As a Seed Team trainer, you are training a group of FSI-R trainees who work with refugee families. One trainee, Sami, frequently approaches you after sessions to discuss personal challenges he is facing in managing his work-life balance and emotional exhaustion as a case manager. While you initially provided support and advice, Sami has begun contacting you outside of training hours, including late at night, to seek guidance or vent. During one session, Sami interrupts a group discussion to share a personal anecdote, steering the conversation away from the training topic. Other trainees appear uncomfortable, and the session's objectives are derailed. You realize that Sami's dependence on you and his over-sharing is affecting the training environment and your ability to maintain focus on the group's needs.

Discussion Questions:

1. At what point did Sami's behavior begin to blur professional boundaries?
2. What strategies can you use to establish and maintain clear boundaries with trainees? And how can you communicate these boundaries to Sami in a way that is professional yet supportive?
3. What guidelines or practices might you establish to ensure boundaries are respected throughout the training?

Section 3.6 Customizing and Personalizing the Training

Seed Team trainers should integrate personal experience into their facilitation. Intervention specific training manuals frame and guide sessions, but the trainers should also be able to read the room and utilize their previous experience with the intervention to build upon materials and vignettes. This is especially useful in role plays and to address specific questions raised by FSI-R trainees or challenges as they arise in sessions.

Learnings from FSI-R Training in Michigan (2023) :

During the training in Michigan in 2023 for the Afghan adaptation of the Family Strengthening Intervention, we noticed that more than half of our FSI-R trainees were male trainees. The Afghan pilot program that we conducted consisted of only female interventionists, but we were able to bring a male interventionist who worked with the Somali Bantu community to help train as a seed team member. The male Seed Team trainer was able to provide his experience and insight about working with families and

navigating gender dynamics that may occur with Muslim families as this topic frequently came up throughout the training. Bringing in a male trainer was important to engage the male FSI-R trainees and help them identify issues that may come up for them in engaging with Muslim families due to their gender. For example, some FSI-R trainees worried about engaging with the family and meeting with a female caregiver one on one (if the situation came up) as they had experienced within their own religion of Islam that this could be perceived as an inappropriate situation that the husband would not allow. The male trainer was able to reassure trainees with his experience and insight.

Moving forward in the training, Seed Team trainers kept these concerns in mind and brought them up in role play activities to further ease any worries and prepare FSI-R trainees for any difficult situations. In role play activities, trainers assigned roles such as a family where the husband speaks but does not allow his wife to speak as much and FSI-R trainees were able to practice navigating these situations.

Overall, Seed Team trainers should demonstrate flexibility when they facilitate training and keep in mind the importance of adapting the learning environment to meet FSI-R trainees' needs.

Section 4- General FSI-R Delivery Guidelines for Training

Learning Objectives: Section 4 focuses on providing general, practical skills for delivering the FSI-R training to FSI-R trainees covering topics that apply across all modules. This includes educating on Risk of Harm, referrals, mental health, and overall understanding the role of an interventionist. Additional detailed resources are found in the Appendix.

After completing this section, Seed Team trainers will be able to:

1. Identify the role of the interventionist and interpersonal skills needed when working with families.
2. Demonstrate an understanding of the Risk of Harm and referral procedures and be able to explain these processes to FSI-R trainees.
3. Explain the significance of mental health concepts when conducting the FSI-R training.

Section 4.1 Role of the FSI-R Interventionist

FSI-R interventionists support families through the resettlement process by providing psychoeducation on psychological concepts, mental health, and the U.S. education system. They act as partners, respecting parents' leadership roles, building on their knowledge, and offering guidance. FSI-R interventionists focus on skill-building in areas like problem-solving, communication, and social support, while fostering resilience and strengthening family dynamics. Their work is rooted in mutual respect and a strengths-based approach, empowering families to thrive in their new environment.

Exercise: Setting Boundaries as an Interventionist

Background:

The Al-Najjar family recently resettled in the U.S. after years in a refugee camp. The family consists of parents (Amir and Hana) and two children (Samah, 10, and Rami, 6). While they appreciate the opportunity to start anew, they face challenges such as language barriers, financial instability, and emotional stress.

Scenario:

During the FSI-R intervention session, Hana begins sharing her struggles managing the household and expresses that she feels unsupported. She asks for your advice on whether she should take on additional work outside the home. Meanwhile, Amir, who remains mostly quiet, suddenly asks if you could help them find a better apartment, as their current housing is too small. Samah mentions that her school counselor told her about after-school programs, and she asks if you could call the counselor on her behalf.

As an FSI-R interventionist, your role is to focus on guiding the family through the FSI-R process, which involves helping them identify strengths and build resilience. However, the family's requests fall outside the scope of your role and veer into responsibilities typically handled by caseworkers or other service providers. You must set boundaries while remaining empathetic and ensuring the family feels supported.

Discussion Questions:

1. What might be the challenges that the FSI-R interventionist encounters in this case?
2. As a Seed Team trainer, how would you ensure that FSI-R trainees remain mindful of their boundaries as interventionists, rather than taking on the roles of case workers or managers?

Section 4.1.1 Interpersonal Skills as an Interventionist

It is important for the Seed Team trainer to emphasize to trainees the value of strong interpersonal skills when delivering the FSI-R. Effective interpersonal skills are critical for navigating difficult conversations, especially when refugee families are dealing with trauma or distress and/or cultural differences and varying perspectives on gender roles influence family dynamics. These skills enable interventionists to foster trust, demonstrate empathy, and address sensitive topics without causing further harm which we discuss in Section 4.2 Safety and Risk of Harm. The ability to communicate effectively in challenging situations is essential for creating a safe space and supporting families through the FSI-R intervention. The following are tips that interventionists can use to encourage a strengths-based discussion.

Tips for Maintaining a Positive and Resilient Tone in Conversations:

- 1. Acknowledge Emotions Without Amplifying Negativity:**
When someone shares negative thoughts or emotions, validate their feelings without reinforcing negativity. For example, say, “I hear that this situation feels overwhelming, but it’s great that you’re taking steps to address it.”
- 2. Redirect Focus to Strengths and Accomplishments:**
Highlight the individual’s strengths or past successes to shift their mindset. For instance, “You’ve overcome similar challenges before, and that shows how capable you are.”
- 3. Ask Open-Ended, Strengths-Based Questions:**
Encourage positive reflection by asking questions like, “What has helped you cope in similar situations before?” or “What resources or support systems could help you move forward?”
- 4. Use Positive Reframing:**
Help the individual see opportunities within challenges. For example, “This may feel like a setback, but it could also be a chance to reassess and strengthen your approach.”
- 5. Model Positive Communication:**
Demonstrate resilience and optimism through your tone and language. Avoid overly focusing on problems and instead focus on solutions. For example, replace “This is a big issue” with “This is a challenge we can work through together.”
- 6. Practice Active Listening:**
Show empathy and understanding by listening attentively and repeating back key points. This can help individuals feel heard while guiding the conversation constructively.
- 7. Encourage Future-Oriented Thinking:**
Shift the conversation toward actionable steps or future possibilities. Ask, “What’s one small step you could take today to start improving this situation?”

Exercise: Supporting Family Members Struggling with Trauma and Low Participation

Background:

Trauma experienced by refugee families can manifest in various ways, including withdrawal and disengagement during interventions. Family members may struggle to participate fully due to emotional distress, feelings of shame, or differing understandings of the intervention’s purpose. It is essential for interventionists to approach such situations with empathy and to create a safe environment for all family members to engage meaningfully.

Scenario:

The Hossain family has recently started the FSI-R intervention. The family includes Fatima (mother), her two teenage sons, Ibrahim (17) and Khalid (15), and her younger daughter, Noor (9). Fatima expresses concerns about Ibrahim’s behavior, saying he often isolates himself, refuses to join family discussions, and avoids school. Khalid appears dismissive, interrupting his mother to say, “He’s fine. He just doesn’t care.” Noor remains quiet and clings to her mother throughout the session.

When invited to speak, Ibrahim avoids eye contact and says, “This is pointless. Nothing is going to change.” Fatima looks visibly distressed, and Khalid becomes defensive, saying, “You’re blaming us, but you’re the one who dragged us here.” Fatima sighs and says she feels unsupported by her sons and overwhelmed by her role as the sole caregiver after losing her husband in their home country.

Discussion Questions:

1. How might Fatima’s role as a sole caregiver impact her ability to manage family challenges effectively?
2. What strategies could you use to encourage Ibrahim to participate without pressuring him?
3. What advice would you offer to the FSI-R trainee who encounters this situation during the intervention?

Section 4.2 Safety & Risk of Harm

During the intervention, FSI-R interventionists may encounter situations involving safety concerns or risks of harm. This section outlines how Seed Team trainers can address such cases and train FSI-R trainees to prioritize both their own safety and the safety of others.

Section 4.2.1 Risk of Harm

Risk of Harm (RoH) refers to any situation where a client or another person’s safety or well-being is at significant risk. This includes not only immediate threats to life but also scenarios involving severe mental, emotional, or physical harm that require intervention to prevent escalation. In Section 4.2, Seed Team trainers will learn how to teach FSI-R trainees to identify, address, and intervene effectively in RoH situations while supporting refugee families during their resettlement process.

RoH situations can be recent or ongoing and include the following:

- Risk of suicide or self-harm
- Risk of intimate partner violence
- Risk of harm to another person
- Risk of child abuse (including sexual abuse) or child neglect
- Risk of severe, untreated illness, disability, or physical health conditions, including disability or malnutrition
- Death of a caregiver or an enrolled child
- Risk of being victimized by violence or exploitation in any other form
- Risk of severe emotional or psychological distress impacting daily functioning

Section 4.2.2 Confidentiality & Risk of Harm

During the FSI-R intervention, anything discussed during a visit will remain private between the FSI-R interventionist and the family they are serving. This means that all information about the family is confidential and will not be shared with others without their permission, except in cases where safety concerns arise, such as risks of suicide, harm to others, or abuse. If the interventionist believes that someone might harm themselves, harm others, or be harmed by others, the interventionist is required to take steps to ensure the safety of all family members.

Here are some specific guidelines:

1. Conversations with Children:
 - Discussions between interventionists and the children are private and will not be shared with others, including their caregivers, without the child's permission, unless there are safety concerns (e.g., suicidality, abuse).
 - Children should know that general information about their well-being and the session agenda will be shared with their caregivers.
2. Conversations with Caregivers:
 - Discussions between interventionists and the caregivers are private and will not be shared with the children or others without the caregiver's permission, unless safety concerns arise.
3. Sharing Information with Supervisors:
 - As the interventionist, you work as part of a team to provide the best support possible. At times, the interventionist may share some information with its supervisors to seek guidance or improve the intervention. The interventionist will maintain strict confidentiality and use the information only to support its work together.

In certain situations, however, **confidentiality must be broken to ensure the safety and well-being of all family members**. While reviewing notes from child meetings, the interventionist should identify significant challenges the children in the family face related to resettlement and family functioning. Some issues, such as child sexual abuse or severe family violence, cannot be ignored and require immediate action.

Exercise: When Confidentiality Must Be Broken Due to Risk of Harm

Background:

Confidentiality is a cornerstone of ethical practice, but there are specific circumstances where it must be violated to protect individuals or others from immediate harm. These situations are often referred to as "Risk of Harm" (RoH) cases and require careful handling to ensure safety while maintaining professional integrity.

Scenario:

Amal, an FSI-R interventionist, is working with a refugee family who recently arrived in a host country. During a one-on-one session with Kareem during Module 8, the teenage son, Kareem discloses that he has been feeling deeply depressed and has been thinking about ending his life. Kareem asks Amal not to tell his parents, as he fears they will blame him or dismiss his feelings. This underscores the need for the interventionist to handle the situation delicately, balancing cultural sensitivity with the ethical obligation to address the risk of harm. Considering his cultural background, it must be assumed that this behavior or way of thinking would be a huge source of shame and challenge for the family. Amal is concerned about

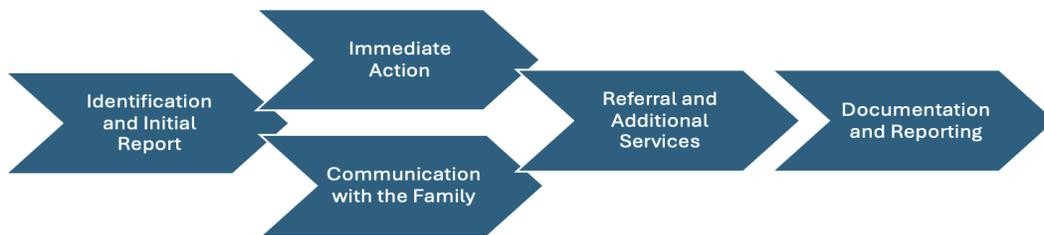
Kareem's safety and the potential risk of suicide. She decides to break confidentiality to address the immediate risk of harm but is unsure how to approach the family and involve other support systems.

Discussion Questions:

1. Why is breaking confidentiality necessary in this scenario, and what ethical principles justify this decision?
2. How should Amal inform Kareem about the need to share this information with others to ensure his safety?
3. How can Seed team trainers use this scenario to teach FSI-R trainees about balancing confidentiality and ethical responsibilities when addressing ROH?

Section 4.2.3 Risk of Harm Process Overview

[Risk of Harm Process Overview]



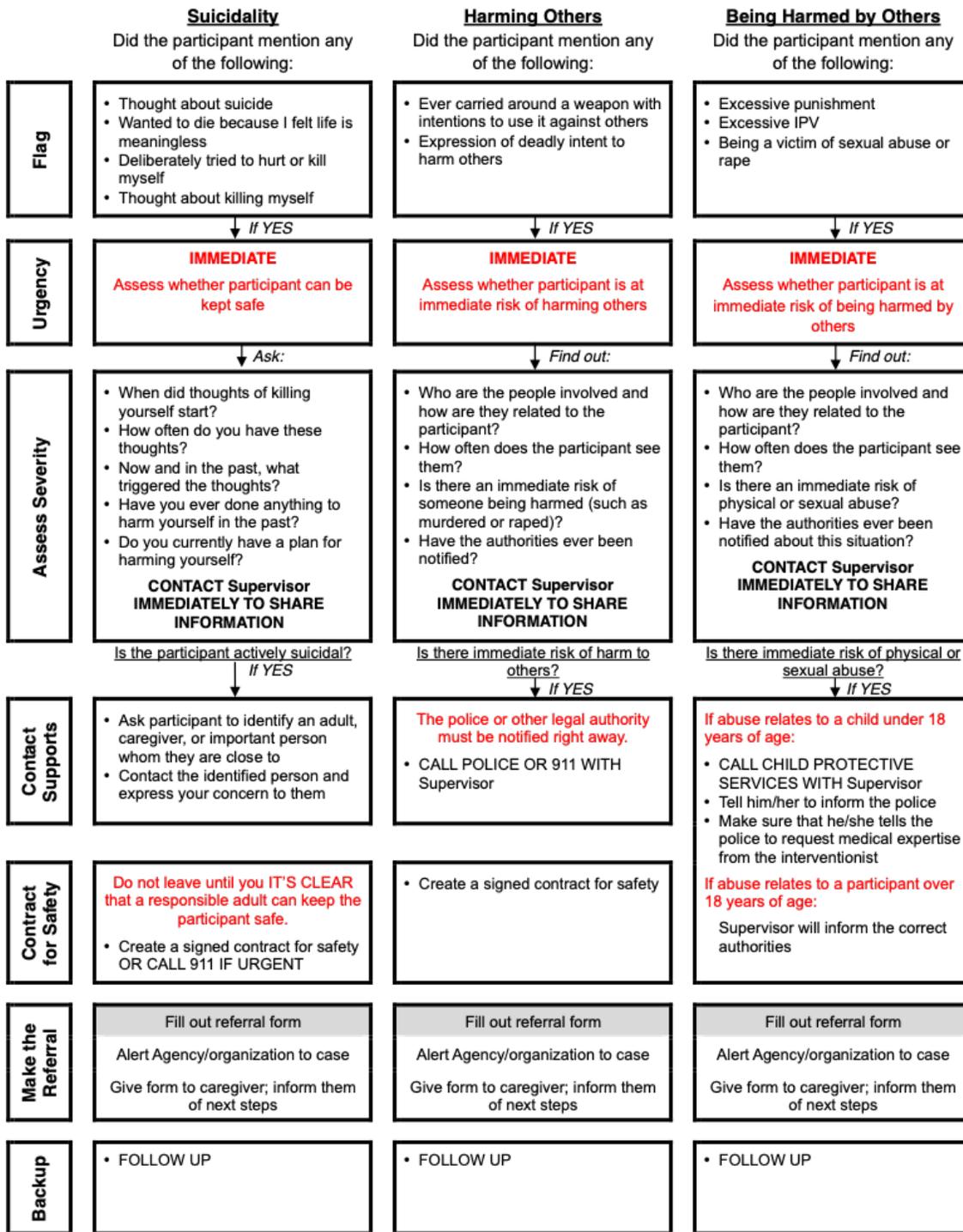
When such circumstances arise, the interventionist must prioritize the protection of all the family members by taking the following steps:

1. Identification
 - Identification of RoH might happen through
 - Spontaneous reports
 - Observation
 - Flagged questions while delivering the intervention
2. Immediate Action and Initial Report to Your Supervisor:
 - Inform your supervisor immediately upon identifying a Risk of Harm (RoH) situation, such as child sexual abuse or severe family violence.
3. Communication with the Family:
 - Explain the steps you must take and why confidentiality must be broken, ensuring the family understands that the actions are in their best interest.
 - Provide reassurance about ongoing support and services that will be available to help them through this process.
 - By addressing these circumstances with care and professionalism, the interventionist ensures the safety of the participants while adhering to ethical and legal responsibilities.
4. Referral and Additional Services:
 - Ensure appropriate referrals are made and additional support services are accessed. Follow best practices to connect the family with resources while maintaining their dignity and safety.
5. Documentation and Reporting:
 - Document the situation thoroughly, ensuring all details are accurate and objective.

- If required by law or organizational policy, report the case to the relevant authorities in coordination with your supervisor.

Please be mindful that requirements regarding referrals in cases of Risk of Harm may vary by state. Always follow the guidelines provided during your agency's training to ensure compliance with applicable laws and policies.

Section 4.2.4 Risk of Harm Decisions Flow Chart



Section 4.2.5 Follow-up after Informing the Person at Risk

Informing the person at risk about follow-up:

1. Express concern:
 - Address the child or caregiver who has disclosed a potential RoH. Emphasize the seriousness of the situation and the importance of addressing it to ensure their safety.
 - You might say something like:
“You mentioned having thoughts of hurting yourself or wishing you were dead. I am very concerned about you and want to ensure your safety. As we discussed during the consent process, if we believe someone is at serious RoH, we are obligated to share that information to help keep them safe.”
2. Explain the next steps:
 - Clearly outline what will happen next and reassure them that they will receive support. For example:
“To ensure your safety, I will notify someone from the agency who will follow up with you. They will reach out to discuss what can be done to keep you safe.”
3. Provide reassurance and answer questions:
 - Take time to ensure the individual understands why follow-up is necessary and emphasize that resources from your agency are available to help.
 - Encourage them to ask any questions they might have about the process and address their concerns with care and empathy.

Program Follow-Up: Process Details

[Risk of Harm Process Follow-Up]



1. Initial Contact with the Person at Risk
 - The FSI-R interventionist must first speak directly with the person at risk about the situation. Discussing the situation with anyone else prior to this is a breach of confidentiality.
 - Whether the follow-up is by phone or in person, the initial discussion must ensure the person at risk is not further endangered by sharing sensitive information.
 - If needed, the interventionist may indicate to others that they need to speak with the person at risk to locate or contact them, but the specifics of the situation must not be disclosed.
 - Immediate contact should be made via phone to gather information about the situation.
 - If the person at risk consents to sharing the situation, the interventionist may contact relevant stakeholders for further context or support.
2. In-Person Visit
 - The interventionist must visit the person at risk within 72 hours of the report. Multiple visits may be required to fully understand the situation and provide appropriate support.

3. Immediate Counseling and Safety Contract
 - Provide immediate counseling or support if needed.
 - Introduce and obtain a signed contract for safety if necessary.
 - i. This document is a preventative tool, wherein the individual agrees not to engage in harmful behavior towards themselves or others.
 - ii. Encourage all individuals at risk of harm to sign this agreement. (*Refer to Supplemental Materials for an example of a contract for safety.*)
4. Permission for Sharing and Identifying Support Services
 - Obtain permission from the person at risk to share their situation with appropriate stakeholders, negotiating as needed to ensure safe disclosure.
 - Identify support services in collaboration with the person at risk, balancing the interventionist's expertise with the individual's needs and comfort in engaging with service providers.
5. Connection to Support Services
 - The interventionist should connect the person at risk with relevant support services. Sharing information about the situation should be on a strict need-to-know basis and justified by the goal of securing necessary support.
 - Support services may include the individual or family's social network, local leadership, health officials, or other relevant entities, depending on the specific risk and context.
 - The interventionist should:
 - i. Coordinate appointments with service providers.
 - ii. Accompany the person at risk as needed.
 - iii. Advocate for high-quality, consistent services.
 - Each time information about the situation is shared, confidentiality must be emphasized, unless the person at risk has provided explicit permission for broader sharing.
6. Ongoing Follow-Up
 - The interventionist must follow up regularly to ensure that support services are being provided and that the safety of the person at risk is maintained.

Section 4.3 Referrals

FSI-R interventionists may encounter various situations where a family could benefit from additional support through referrals to specialized services. Referrals are not limited to Risk of Harm (ROH) cases but can also address other needs, such as housing, legal assistance, education, or access to community resources.

If a family member presents with significant mental health concerns, interventionists should consult their clinical supervisor from their agency to identify appropriate services. For ROH cases—such as those involving domestic violence or severe mental health crises—immediate action is required. In such cases, interventionists should follow the guidance in Section 4.2.4 Risk of Harm Flowchart and consult with their clinical supervisor without delay.

For non-ROH situations, such as a family requesting help with housing, legal issues, or education, the interventionists should also connect with their supervisor from their agency (and/or Seed Team trainer) to discuss available resources and determine appropriate referrals. Supervisors (and/or Seed Team trainer) can provide expertise and guidance on accessing the most relevant services for the family's needs.

It is also important to review the interventionists' agency's specific policies for making referrals and reporting risk of harm cases with their supervisor to ensure compliance and appropriate action.

Section 4.4 Mental Health

Mental health is something that affects everyone, just like physical health. It refers to your emotional, psychological, and social well-being. Taking care of your mental health is essential because it impacts how you cope with challenges, build relationships, and make choices. Think of it like your physical health—just as regular exercise and a healthy diet help prevent illness, there are steps you can take to support your mental health and prevent problems.

The FSI-R is a mental health promoting intervention which aims to provide psychoeducation on mental wellbeing and identifying strategies for self-regulation with the goal of reduced caregiver emotional distress and child mental health problems as key outcomes of the intervention. It is important that Seed Team trainers appropriately convey concepts of mental health during FSI-R training.

The following are key concepts of mental health that Seed Team trainers should know before leading the FSI-R training:

Common Misconceptions for Mental Health

- Mental health problems do not affect me
- Children do not have mental health problems
- People with mental health problems are crazy and can not be trusted
- Only people who are weak have mental health problems
- There is no hope for people with mental health problems
- Therapy is for the weak and a waste of time
- I can not do anything about my problems or other's
- You can not prevent mental problems

Basic Facts about Mental Health

- Mental health impacts your thinking, mood, and behavior
- Mental health is important and can affect people of all ages
- Mental health problems are very common.
- Suicide is a leading cause of death in the United States
- 1 in 5 Americans experience a mental health issue according to National Alliance on Mental Illness (NAMI) *
- 1 in 20 Americans have a serious mental illness according to National Alliance on Mental Illness (NAMI) and Substance Abuse and Mental Health Services Administration (SAMHSA)*
- Mental health is affected by biology (genes and brain chemistry), life experiences, and/or family history
- Many people with mental illness or mental health struggles are productive members of society
- People with mental illnesses are more likely to be victims than the perpetrators of violent crime
- Mental health problems can get better, and people can fully recover
- There are many treatments, services, and community support systems that are proven to work

Healthy Minds Can...

- Accomplish their goals
- Focus in school
- Make friends and build community
- Cope with life stressors
- Succeed at work
- Contribute to their family and community
- Learn from challenges

Ways to Promote and Maintain Healthy Minds

- Connect with others
- Stay physically active
- Get enough sleep
- Practice coping skills
- Help others
- Ask for help
- Seek professional help when needed

Identify Problems Early

The feelings and behaviors below are signs of poor mental health. It is best to identify them early, before they become bigger problems

- Decreased pleasure in people and activities
- No energy or low energy
- Feeling like nothing matters
- Unexplained physical problems
- Feeling hopeless or helpless
- Feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared
- Eating much more or much less than usual
- Sleeping much more or much less than usual
- Excessive smoking, drinking, or using drugs
- Frequent yelling or fighting with friends and/or family
- Frequent severe mood swings
- Can not get certain thoughts or memories out of your head
- Hearing voices, seeing or feeling things that others do not
- Thinking of harming or killing yourself or others

If any of these, or anything else, is causing problems in one's relationships, ability to do daily tasks, or impacting school or work, it is time to seek professional help.

*The mental health statistics were sourced from the National Alliance on Mental Illness (NAMI) website and SAMHSA's 2022 report, State-by-State Estimates of Adults with Serious Mental Illness (SMI) and Children with Serious Emotional Disturbance (SED).

Section 4.4.1 Suicide Prevention

It is important that FSI-R interventionists have a good understanding of suicide prevention. Seed team trainers can educate FSI-R trainees on why it is important to get help, what are warning signs for suicidal ideation, and how to manage a case in the moment if a family member that you are serving appears suicidal.

Why Is It Important to Get Support When Life Is Very Difficult?

Psychological stress is a common experience, and everyone encounters it at some point. When stress persists over time, it can negatively impact physical health, relationships with family, friends, and partners, as well as work or education. While it can be challenging to speak to others about these struggles, seeking help is critical for reducing stress and improving overall well-being.

Understanding Suicide Prevention:

In some cases, prolonged stress—such as job loss or other significant life challenges—can lead individuals to think about suicide. Suicide affects many Americans, with rates being even higher among certain resettled communities. It is vital to recognize the signs of suicidal ideation and know how to seek help.

Key Points for Seed Team Trainers to Emphasize with FSI-R Trainees:

- **Recognizing Warning Signs:** Seed Team trainers should educate FSI-R trainees on identifying signs of suicidal ideation, such as changes in behavior, withdrawal from loved ones, expressions of hopelessness, or discussing self-harm.
- **Encouraging Open Communication:** FSI-R trainees must create safe spaces where individuals feel comfortable sharing their feelings without fear of judgment.
- **Promoting Available Resources:** FSI-R trainees may have access to available resources from their agency. But Seed Team trainers should provide FSI-R trainees with information about crisis hotlines, mental health services, and community support networks. For example, the National Suicide Prevention Lifeline (1-800-273-TALK) and similar local resources.
- **Understanding Cultural Sensitivity:** Suicide prevention approaches should be tailored to the cultural contexts of resettled communities, recognizing unique stressors they may face.
- **Taking Immediate Action When Needed:** Seed Team trainers should emphasize the importance of FSI-R trainees consulting their supervisor from their agency immediately in cases where there is a potential risk of harm.

By focusing on these key points, Seed Team trainers can help FSI-R trainees understand the importance of suicide prevention and equip them to support individuals effectively during challenging times. *For more information on the common stressors for suicidal ideation, warning signs, and what you can do to help see Appendix 4.4.1*

Exercise: When Confidentiality Must Be Broken Due to Suicidal Ideation

Background:

Suicidal ideation is a serious concern that can arise in families during times of stress or crisis. Non-specialists, such as community workers or volunteers, may encounter family members experiencing these thoughts while delivering interventions. Knowing how to identify warning signs, approach the situation, and connect individuals with appropriate resources is crucial for effective intervention and support.

Scenario:

Maria is a mother of three who has been struggling with financial difficulties and health challenges during the resettlement process in the U.S. Her family has noticed concerning changes in her behavior, such as withdrawing from family activities, frequently expressing feelings of hopelessness, and making comments like, “I just don’t think I can do this anymore.” During the intervention, you as an interventionist also heard her say, “It would be better if I wasn’t here.”

You feel deeply worried but are unsure how to address Maria’s statements or how to guide her toward help. You know that handling this situation carefully is important but lacks the confidence to intervene effectively.

Discussion Questions:

1. What behaviors or statements from Maria suggest she may be experiencing suicidal ideation?
2. How can you create a safe and open environment to talk to Maria about her concerns as an interventionist?
3. If Maria confirms that she is having suicidal thoughts, what immediate actions should you take to ensure her safety? How would you talk about this scenario as a Seed Team trainer when training?

Section 4.4.2 Additional Mental Health Resources for Interventionists

A variety of relevant and ready-to-use resources are available in the Appendix to support interventionists. These resources include tools for identifying mental health concerns, strategies for engaging with families, and guidance on accessing additional support services.

Seed Team trainers are encouraged to familiarize themselves with these materials to enhance their ability to provide effective and compassionate support to FSI-R trainees. These resources are designed to equip them with practical strategies and knowledge to navigate complex situations confidently.

Refer to the Appendix 4.4.2 for detailed instructions and links to supplementary materials.

Section 4.3.4 Understanding Trauma

Trauma is a profound and often invisible wound that can impact every aspect of a person’s life. It has the power to pull individuals back into the past, replaying life-threatening events triggered by unpredictable moments. For those affected, it can feel like being trapped in a cycle of pain and memory, making it difficult to move forward.

While trauma cannot be erased, it is possible to learn how to live with it and carry it in ways that allow for healing and growth. Much like a scar that remains after a wound has healed, trauma leaves its mark, but it does not define the entirety of a person’s life.

The FSI-R intervention focuses on helping families navigate these challenges by building on their existing strengths and nurturing their hopes for the future. Through this strengths-based approach, families can rewrite their narratives, cultivating resilience and finding ways to thrive despite the scars of

trauma. It is important that interventionists have a good understanding of the concept of trauma and how it affects one's mental health and functioning. *For more on basic facts and common responses of trauma see Appendix 4.3.4*

Exercise: A Family Struggling with Past Trauma from Evacuation

Background:

The Omar family, originally from Afghanistan, has been resettled in the U.S. for the past six months. The family consists of parents (Omar and Leila) and their three children (ages 8, 12, and 15). They have been trying to adjust to their new life but face ongoing challenges. Omar, the father, often withdraws and avoids conversations, while Leila, the mother, shows signs of heightened anxiety, frequently checking on the children and overreacting to minor incidents. The children have become irritable and struggle to focus at school. The family rarely talks about their experiences in Afghanistan or the trauma they endured during their displacement journey.

Scenario:

During Module 7, Leila expresses concern about Omar's lack of involvement and the children's difficulty adjusting. She shares that Omar sometimes wakes up shouting in the middle of the night but refuses to talk about it. She also feels overwhelmed by her own fears and responsibilities. During Module 8, the children mention that they miss their friends and struggle to understand the new school environment but feel they cannot share this with their parents because "they have enough to worry about."

Discussion Questions:

1. What signs of trauma can you identify in the family members (e.g., Omar, Leila, and the children)?
2. What strengths can you identify in the family? How can you help the family use these strengths to address their challenges and build resilience?
3. What strategies will you use when leading the FSI-R training regarding this topic?
4. As a Seed Team trainer leading the FSI-R training, how do you understand the FSI-R intervention's role in reframing family narratives toward hope and resilience?

Section 5 - Module-Specific Delivery Guidelines

This section focuses on module-specific delivery guidelines that Seed Team trainers should be aware of when training new interventionists. It provides a summary of all of the modules as well as the key points of each module for Seed Team trainers to focus on for training. Seed Team trainers can use the key points from this section to guide each training section effectively, with the presentation slides serving as a resource to support their delivery.

Specific exercises for each module can be found in the *Appendix Section 5*. These exercises can be used in FSI-R training and for self-reflection as Seed Team trainers.

Section 5.1 Module Summaries

| Module | Module summary |
|---|--|
| Module 1: Introduction | <ul style="list-style-type: none"> ● Introduce the intervention’s goals & structure |
| Module 2: Family Strengths and Goals | <ul style="list-style-type: none"> ● Learn about the family’s unique strengths and goals |
| Module 3: Children and Family Relationships | <ul style="list-style-type: none"> ● Learn about the children’s unique strengths and goals ● Talk about family strengths and challenges with children ● Build communication skills for family meeting with children |
| Module 4: Responsive Parenting and Caregiving | <ul style="list-style-type: none"> ● Find ways to act with children, build a positive parent-child relationship, and encourage good behavior. ● Talk about ways to discipline children appropriately ● Explain importance of adults’ active involvement and communication with their children |
| Module 5: Engagement with the US Education System | <ul style="list-style-type: none"> ● Discuss the importance of participating in the US education system and talking about school with children ● Practice specific, age-appropriate activities that families can use to talk to their children about school |

| | |
|---|---|
| Module 6: Promoting Health, Wellbeing, and Safety | <ul style="list-style-type: none"> ● Discussion and tips for stress management ● Provide guidance for healthy eating and physical activity ● Discussion of household hygiene ● Explore effective strategies for prevention and wellness ● Understand the health risks of too much alcohol consumption ● Learn about staying safe in the community and at home |
| Module 7: Communicating with Children and Caregivers [for Children] | <ul style="list-style-type: none"> ● Build communication skills ● Find ways to respond well to hard questions ● Use strategies for building stronger families ● Prepare for Family Meeting |
| Module 8: Communicating with Children and Caregivers [for Caregivers] | |
| Module 9: Uniting the Family: Family Meeting | <ul style="list-style-type: none"> ● Family Meeting(Gathering) ● Create shared understanding of resettlement and focus on family strengths ● Understand each family member’s experience and views |
| Module 10: Bringing It All Together | <ul style="list-style-type: none"> ● Review all modules and what was learned ● Create a plan with the family for future family meetings |

Section 5.2 Module Key Takeaways

Module 1: Introduction - Caregivers and Family Relationships

Theme: Caregivers and Family Relationships

Purpose: Start building rapport with the caregivers and begin to understand the family’s story

Overview

- Check-in
- Learn about the Family
- Focus on Family
- Focus on Children
- Check-out

Key Learning Objectives

This module aims to help FSI-R interventionists understand the caregivers’ strengths and goals. These conversations may be unfamiliar to the family, but FSI-R interventionists should encourage and motivate their active participation throughout the module.

Key Points for Training

1. Building Rapport

Rapport means building trust and creating a comfortable connection where individuals feel heard and understood. To successfully deliver FSI-R to refugee families, it is essential to build rapport with both caregivers and children.

2. Be Sensitive When Talking About Children

Discussing children with caregivers may be difficult due to feelings of guilt, fear, or past trauma. FSI-R interventionists should acknowledge and validate these emotions, creating a safe space for caregivers. Empower them to share family stories by focusing on strengths and positive aspects of their parenting journey.

See Module 1 Exercise: Strengths-Based Approach in Appendix Section 5 for a good scenario to present when training this module.

Module 2: Family Strengths and Goals (Caregivers only)

We believe in the power of family strengths and family goals in the process of transforming the resettlement experiences in the U.S. as a refugee family into a more positive way.

Overview

- Check-in
- Discussing Family Strengths and Goals
 - Identifying Family Strengths
 - Identifying Family Goals
- Resettlement & Coping
 - Increase Caregiver Knowledge of Post-resettlement Family Life
 - Discussion: Managing and Coping with the Stress in Family Life
 - Helping Children Cope with Stress
 - Discussion: Distress related to Resettlement
- Discussing the Children's Role in the Family Strengths and Goals
- Check-out
 - Prepare for the Child Meeting

Key Learning Objectives

- Establish a trusting relationship with caregivers while being mindful not to trigger trauma related to migration.
- Encourage family members to reflect on their strengths and set goals in a positive and empowering way.

Key Points for Training

1. Individual strengths & Family strengths

- If family members have difficulty identifying their own strengths, FSI-R interventionists can encourage them to share compliments with one another.
- For example:
 - “Thank you for always being kind to me” highlights the strength of warmth.

- “Thank you for doing house chores” reflects the strength of cooperation and support.
- When family members struggle to discuss these topics, interventionists can guide the conversation by asking specific questions, as outlined in Module 2 of the FSI-R training manual.

2. Family Goals

- Family goals are like preparing a meal together. Each family member has a role—chopping, cooking, or setting the table—and their combined efforts create something meaningful and enjoyable for everyone. Working toward the shared goal of the meal strengthens their bond, and enjoying it together brings joy and fulfillment.
- FSI-R interventionists should emphasize that family goals are not achieved in isolation but often with the help of neighbors and the community.
- Once family goals are identified, FSI-R interventionists can take the lead in brainstorming actionable steps to achieve these goals, encouraging collaboration and support.

3. Resettlement and Coping

- Begin by discussing the facts, stressors, and benefits families experience during resettlement in the U.S.
- Explain what stress is and introduce strategies to manage it effectively.
 - Avoid unhealthy behaviors: Address risks such as aggression or increased drinking and smoking.
 - Develop coping skills for kids: Offer age-appropriate strategies to help children navigate stress in a healthy way.

See Module 2 Exercise: Coping Skills- Stress Level and Management for Caregivers in Appendix Section 5 for a good scenario to present when training this module.

Module 3: Children and Family Relationships (Children only)

Theme: Children and Family Relationships

Purpose: To introduce the intervention to the kids, to identify strengths and hopes of children and to talk about family relationships.

Overview

- Check-in
- Introducing Children to the Intervention
- The FSI-R Goals and Intervention Guidelines
- Child Strengths and Family Strengths
- Child Goals and Family Goals
- Khadija’s Story
- Preparing for the Family Meeting
- Check-out

Key learning objectives

- Build a trusting relationship with children
- Understand family's unique situation from a child's point of view
- Encourage children to reflect on their strengths and set goals in a positive and empowering way

Key Points for training

1. FSI-R Goals and Intervention Guidelines

FSI-R interventionists should introduce the program and explain the module structure to children using age-appropriate language and approaches that consider their developmental stages. It may be helpful to establish ground rules to manage distractions or inappropriate behavior during the module. Emphasize confidentiality and safety, ensuring families and children understand that their privacy will be respected, except in cases of safety concerns.

2. Child Strengths and Family Strengths

FSI-R interventionists should create a supportive space during Module 3 to help children identify their strengths and family strengths. If children struggle to express these, FSI-R interventionists can use guiding questions, such as:

- What are some things you are good at doing?
- Can you describe a time when you helped a family member?
- What do you like about your family?

See Module 3 Exercise: Identifying Child Strengths in Appendix Section 5 for a good scenario to present when training this module.

Module 4: Responsive Parenting and Caregiving

Theme: Positive Parenting Strategies

Purpose: To help caregivers review their use of parenting strategies and develop positive parenting strategies that strengthen their family

Overview

- Check-in
- Warm-up Discussion: Current Parenting Practices and Challenges
- Building a Good Relationship with Children
 - Spending time with your children
 - Playing and interacting with your children
 - Communication and active involvement
 - Spending time together as a family
- Involvement of All Caregivers
 - Facilitate caregivers' discussion to enable them to understand each other's household and parenting responsibilities
 - Understand the role of father and mother, and other adults in the family
- Hitting and Any Forms of Violence Damages Family Relationships

- Other forms of abuse
- Tension amongst caregivers
- Effective Discipline and Positive Parenting Strategies
 - What is Positive Parenting?
 - Consistent boundaries
 - Encouraging good behavior
 - Preventing undesired behavior through natural consequences, by modeling good behavior, and by giving good instructions
 - Staying Calm
- Vignette – Mahmood and Sakina’s Story
- Fidelity Checklist
- Check-out

Key learning objectives

- Identify the parenting strategies currently used within families.
- Promote the adoption of positive parenting strategies by caregivers to support healthy family dynamics.

Key Points for Training

1. Understanding Parenting and Caregiving in Resettlement

Parenting is the process of raising, caring for, and nurturing children. However, not all children are cared for by parents—they may be supported by relatives, friends, neighbors, or foster parents. In such cases, the term “caregiving” may be more appropriate.

Resettlement can make parenting even more challenging. Families face significant stressors as they adapt to a new culture and environment. Parenting practices may need to evolve, and caregivers often navigate these changes at their own pace and in their own time.

The purpose of this module is to focus not only on raising children but also on supporting caregivers. By asking about their difficulties, we aim to show that their experiences and challenges are valid. Empowering caregivers with support, rather than judgment, is key to fostering positive change.

2. Promoting Positive Parenting Strategies

Caregivers are doing their best for their children, even in difficult circumstances. Positive feedback is essential—highlight their strengths, praise good interactions, and focus on what they are doing well. Encourage caregivers to take the lead in sessions, with FSI-R interventionists providing guidance and support as needed.

3. Three key strategies to promote positive parenting include:

- a. Displaying love and affection: Use verbal and non-verbal expressions of care.
- b. Spending quality time: Engage in meaningful activities together as a family.
- c. Playing and interacting: Foster connection through shared experiences.

4. Addressing Violence in the Family

Violence in the family includes hitting, sexual abuse, emotional abuse, and neglect. While perspectives on hitting may differ, if caregivers express that their intent is to discipline rather than harm, FSI-R interventionists can suggest alternative, positive strategies and empower caregivers to choose what works best for their family.

5. A Trauma-Informed Approach

FSI-R interventionists must remain mindful of the significant challenges families may have faced before, during, and after migration. Understanding these experiences is crucial for providing sensitive and empathetic support.

Above all, FSI-R interventionists should respect each family's unique journey, recognizing that resettlement and parenting adaptations take time. By empowering caregivers and focusing on strengths, FSI-R interventionists can help families build resilience and grow stronger together.

See Module 4 Exercise: Addressing Physical Discipline During a Module in Appendix Section 5 for a good scenario to present when training this module.

Module 5: Engagement with the US Education System

Theme: Education and Family Engagement

Purpose: Teaches caregivers about education and school system in the U.S. It helps caregivers understand why they should be involved in their children's schooling and give advice for when and how to do this.

Overview

- Check-in
- Continue Family Strengths and Goals by including School Experiences
- The American School System: Rights & Responsibilities
- General Conversations
- Performance & Progress
- Report Cards
- Homework
- After School / Extracurricular Activities
- Children's Personal Relationships / Social Life
- Children's Emotional Life
- Bullying and Other Hard Conversations
- Health and Food at School
- Check-out

Key learning objectives

- To teach caregivers about the education system in the U.S.
- To help caregivers participate with schools and their children

Key Points for Training

1. Introducing the U.S. Education System

FSI-R interventionists should use this module to provide caregivers with an overview of the U.S. education system, including academic, social, and emotional aspects. Encourage them to ask questions and share any concerns they have about their child’s school experience.

2. Create Tools for Parent-Child Engagement

FSI-R interventionists should help caregivers develop simple tools to support their child’s education, such as asking daily conversation starters:

- “What did you learn today?”
- “How can I help you with your homework?”
- “What did you eat for lunch?”

3. Address Concerns with Confidence

This module provides guidance on how parents can navigate challenges like bullying, identity questions, or emotional struggles. FSI-R interventionists can highlight where to seek support (e.g., teachers, counselors, or school staff) during the module.

4. Empower Parents to Be Advocates

It is important for FSI-R interventionists to encourage caregivers to get involved in their child’s education by building relationships with teachers and school staff. Remind them that their participation, regardless of language or background, can positively impact their child’s success.

See Module 5 Exercise: Creating Tools for Caregiver-Child Engagement in Appendix Section 5 for a good scenario to present when training this module.

Module 6: Promoting Health, Wellbeing and Safety

Theme: Promoting Health, Wellness, and Safety

Purpose: To promote the health, wellbeing, and safety of families. This module is to help caregivers learn about good physical and mental health and strategies that promote health, wellness, and safety; and address challenges in ways that support overall health. Children can be invited to attend.

Overview

- Check-in
- Managing Stress/Tension
- Healthy Eating
- Physical Activity
- Household Hygiene
- Prevention & Wellness
- Puberty
- Alcohol
- Safety
- Check-out

Key learning objectives

- To help caregivers learn about good physical and mental health
- To identify strategies that promote health, wellbeing, and safety

Key Points for Training

1. Caregiver Expertise and Respect for Cultural Sensitivity

FSI-R interventionists should emphasize that caregivers are the experts on their children and that their cultural, religious, and personal beliefs must be respected when discussing health, wellbeing, and safety.

2. Stress Management and Emotional Health

FSI-R interventionists should highlight practical strategies for managing stress, such as mindfulness techniques, and equip caregivers to normalize discussions about puberty, emotional changes, and exposure to alcohol.

3. Healthy Eating and Physical Activity

FSI-R interventionists should focus on discussing realistic and culturally appropriate dietary and physical activity recommendations while being sensitive to barriers like cost, access, and cultural preferences.

4. Tailored and Inclusive Approaches

It is essential to ensure that FSI-R interventionists know how to tailor the module to a family's specific needs, involve caregivers in discussions, and handle sensitive topics with empathy and care.

See Module 6 Exercise: Promoting Healthy Eating in Appendix Section 5 for a good scenario to present when training this module.

Module 7: Coaching Children on Communicating with Caregivers [Children]

Theme: Working with Children on Communicating with Caregivers

Purpose: For children to practice skills related to improved child-parent communication and to plan for the Family Meeting

Overview

- Check-in
- Defining Resilience
- Building Communication Skills
- Planning for the Family Meeting
- Check-out

Key learning objectives

- To prepare children for the Family Meeting
- To build skills for improved child-parent communication

Key Points for Training

1. Build Rapport with Children

- Start with trust-building activities such as games or songs to create a comfortable environment.
- Use age-appropriate language and examples to help children feel at ease and engaged.

2. Teach Resilience and Communication Skills

- Define resilience as “bouncing back” from challenges, and guide children to identify their sources of social support (e.g., parents, teachers, friends).
- Help children practice communication skills by teaching active listening and clear self-expression using “I” statements.

3. Prepare for the Family Meeting

- Encourage children to identify family strengths and challenges they want to discuss.
- Collaborate with caregivers and children to create a concise, flexible agenda that respects family boundaries and priorities.

4. Focus on Strengths and Sensitivity

- Highlight family resilience and positive behaviors while being sensitive to discomfort with sensitive topics.
- Tailor discussions to the family’s cultural and situational context, emphasizing patience and positive reinforcement.

See Module 7 Exercise: Preparing a Child for Family Meeting and Building Communication Skills in Appendix Section 5 for a good scenario to present when training this module.

Module 8: Communicating with Children and Caregivers [Caregivers]

Theme: Working with Caregivers on Communicating with Children

Purpose: For caregivers to practice skills related to improved child-parent communication and to plan for the Family Meeting. This module will practice child-parent communication.

Overview

- Check-in
- Defining Resilience
- Building Communication Skills
- Planning for the Family Meeting
- Check-out

Key learning objectives

- To prepare caregivers for the Family Meeting
- To build skills for improved child-parent communication

Key Points for training

1. Preparing Caregivers for the Family Meeting

- Confidentiality: Respect children’s privacy; share only general impressions unless safety is a concern.
- Agenda Building: Keep the agenda concise, mixing challenging and positive topics agreed upon by both caregivers and children.
- Caregiver Leadership: Encourage caregivers to lead the discussion while offering support and facilitation as needed.

2. Improving Child-Parent Communication

- Difficult Questions: Stay calm, acknowledge feelings, and express appreciation for the child’s openness. Be honest if unsure of an answer and commit to follow-up.
- Role-Playing: Practice the Family Meeting with children to build confidence and reinforce family strengths.

3. Building Resilience

- Focus on Strengths: Highlight parental strengths and strategies that help children cope with resettlement stressors.
- Supportive Dynamics: Encourage caregivers to maintain open and supportive communication with their children.

See Module 8 Exercise: Preparing Caregivers for the Family Meeting in Appendix Section 5 for a good scenario to present when training this module.

Module 9: Uniting the Family: Family Meeting

Theme

Purpose: To have a successful Family Meeting. The Family Meeting is to help create a shared understanding of resettlement in the family, focus on the family’s strengths, and build resilience and improve mental health in the family. Each family member’s experience will be heard.

Overview

- Check-in
 - Put the family at ease – thank them for coming
- Conduct Family Meeting
 - Review key skills (and ask one of the parents to start the meeting conversation)
 - If appropriate, have caregivers review psychoeducational information
 - Encourage individuals to share their perspectives
 - Point out connections between individual perspectives
 - Address concerns through problem-solving
- Wrap-up
 - Point out accomplishments
- Check-out
 - Congratulate family
 - Leave on a positive note

Key learning objectives

- To build positive communication between children and caregivers

Key Points for Training

1. Purpose and Goals of the Family Meeting

- Emphasize that the Family Meeting aims to improve listening, communication, and problem-solving for successful resettlement.
- Focus on discussing family strengths, resettlement concerns, psychoeducation, and plans to address challenges.
- Remind trainees to reinforce the message that families can succeed together despite difficulties.

2. Managing Challenges Effectively

- Teach strategies for handling common challenges:
 - Distractions: Thank the participant and refocus the discussion. Provide activities for younger children.
 - Emotional Upset: Show empathy, give time to calm down, and continue when ready.
 - Reluctance to Speak: Encourage family members with safe, comfortable topics.
 - Conflict: Promote calmness, clarify the issue, and table unresolved topics for later.

3. Facilitating and Structuring the Meeting

- Guide trainees to follow a clear structure:
 - Beginning: Relax the family (e.g., prayer, storytelling) and introduce the agenda.
 - Heart of the Meeting: Share perspectives, review psychoeducational topics, and discuss solutions.
 - Wrap-Up: Summarize outcomes, highlight progress, and outline next steps.
- Train trainees to balance caregiver leadership with interventionist support, ensuring smooth facilitation.

4. Promoting Engagement and Shared Understanding

- Encourage equal participation by all family members while respecting boundaries and confidentiality.
- Teach trainees to help families connect stories, identify shared perspectives, and find common solutions.
- Stress the importance of flexibility since every Family Meeting will differ based on the family's unique dynamics.

See Module 9 Exercise: Managing Challenges Effectively in the Family Meeting in Appendix Section 5 for a good scenario to present when training this module.

Module 10: Bringing It All Together

Theme: Bringing It All Together

Purpose: To review the Family Meeting with the family, discuss their experience, and help with any problems. The Review should help families think about how to use FSI skills in the future.

Overview

- Check-in
- Reflect on the Family Meeting
- Guided Discussion of Family Meeting
 - Review Each Topic
 - Answer Questions and Concerns
 - Solve Misunderstandings
 - Make Connections
- Review Goals and Accomplishments
- Using the FSI to Think about the Future
- Planning Future Family Meetings
- Resources for the Future
- Next Steps
- Check-out

Key Learning Objectives

- To review the Family Meeting with the family, discuss their experience, and help with any problems. The Review should help families think about how to use FSI skills in the future.

Key Points for Training

1. Reviewing the Family Meeting with Families

- Congratulate the family for completing the Family Meeting and intervention.
- Reinforce the tools they've learned for problem-solving and communication, emphasizing their relevance beyond the intervention.
- Encourage families to plan their next Family Meeting and remind caregivers of their leadership role.

2. Supporting Emotional Reflection

- Ask direct questions to help families reflect on their feelings about the Family Meeting (e.g., "How did this conversation make you feel?").
- Highlight individual strengths and contributions from family members to foster positivity.
- Be prepared to address problems or questions that arise during the review.

3. Planning for the Future

- Guide families in planning future Family Meetings, emphasizing their ability to continue building strengths and addressing challenges.
- Remind trainees to record any additional needs (e.g., mental health treatment) and share concerns with a supervisor if necessary.

4. Reflecting as an Interventionist

- Reflect on what FSI-R interventionists have learned from working with the family and how the intervention can be improved.

- Reinforce the importance of documenting key insights and feedback in their Workbook for future reference.
- Address the emotional difficulty of letting families go by suggesting supervision support when needed.

See Module 10 Exercise: Reviewing the Family Meeting in Appendix Section 5 for a good scenario to present when training this module.

Section 6 Evaluating Performance and Supporting Learning

Section 6.1 Identifying Personal Strengths and Weaknesses

The FSI-R training is an opportunity not only to engage with newly recruited FSI-R trainees but also to assess their strengths and areas for growth that can be addressed during the training period before they begin program implementation as FSI-R interventionists.

From this training, it is helpful to develop **individualized performance development plans** based on the FSI-R trainees' performance. These plans can help address areas of improvement after the training period or identify complementary skills and personalities that can serve as resources to one another throughout the program. It is critical that this information be used to create actionable plans with clear deliverables and timelines to ensure accountability and effective follow-up.

Interventionists will be encouraged to share this plan with their clinical supervisor following the training. Seed team trainers will also have the opportunity to create their own individual performance development plan after Seed Team training with master RPCA trainers.

An individual performance development plan template can be found in the Seed Team Supplemental Materials with an example to follow.

Section 6.1.1 How to Give Constructive Feedback to FSI-R Trainees

Constructive feedback is essential for fostering growth, improving performance, and building confidence. It helps Seed Team trainers learn how to support FSI-R trainees effectively while maintaining positive relationships with them. Here's how Seed Team trainers can embody this vital skill during the FSI-R training:

1. Model Specific and Clear Feedback

Demonstrate the importance of addressing specific actions or behaviors and explaining their impact. During the FSI-R training, provide examples of clear, actionable feedback to guide FSI-R trainees. For instance, instead of saying, "You need to communicate better," provide specific, actionable feedback such as, "When you summarize the family's concerns at the end of the session, it helps ensure that they feel heard and understood. Let's work on making this a consistent practice."

2. Balance Strengths with Opportunities for Growth

Begin feedback with positive observations to build rapport and openness, followed by constructive suggestions framed as opportunities for improvement. Use real-life scenarios to practice this balance.

3. Make Feedback Practical and Actionable

Deliver feedback with clear, practical steps to ensure it is both actionable and helpful. Use examples and exercises to break down complex feedback into manageable, achievable actions. Additionally, please ensure feedback is provided in a private and professional setting rather than in a public area.

4. Foster Two-Way Communication

Encourage FSI-R trainees to engage in a dialogue during feedback sessions with the Seed Team trainer, inviting input and perspective from the recipient. Create a collaborative environment where feedback becomes a shared effort for growth.

By embodying these principles, Seed Team trainers can effectively deliver constructive feedback to FSI-R trainees, modeling best practices and ensuring trainees feel supported and solution-

focused. This approach not only enhances FSI-R trainees' development but also equips them to apply similar feedback strategies in their work with families.

Exercise: How Can Seed Team Trainers Have Hard Conversations with FSI-R Trainees

Background: During FSI-R training, Seed Team trainers may need to address challenges FSI-R trainees face in a constructive and supportive way. Providing feedback during training sessions is essential for ensuring the trainees' readiness to deliver FSI-R effectively. Handling these situations with sensitivity and professionalism helps maintain the trainee's confidence and fosters growth.

Scenario: During an FSI-R training session, the Seed Team trainer, Putri, notices Alex who is one of the FSI-R trainees struggling with a role play exercise. Alex provides unclear instructions as an interventionist delivering content, leaving other FSI-R trainees in the group confused. In a group discussion, Alex becomes defensive, saying, "The module content doesn't work in real situations," and the tone of the session becomes tense.

Putri decides to address the issue privately. After the session, she approaches Alex and says, "Thanks for your contributions today, Alex. I noticed some challenges during the role-play, and I'd like to work with you to ensure you feel confident presenting the module. Could we chat about it?"

Putri starts with encouragement: "You bring great creativity and energy to the training, which will benefit families. Let's refine your approach to make presenting the module work better for you." She offers solutions, including practicing more discussion, pairing Alex with a peer for support, and reflecting on what works after each exercise. She also gives Alex a chance to ask any questions about any concepts he is still struggling to present. Putri closes by saying, "I'm confident you'll find your rhythm. Let's check in next week to review your progress."

Discussion Questions:

1. How did Putri's private approach help Alex feel supported rather than criticized?
2. What strategies can Seed Team trainers use to help FSI-R trainees embrace feedback during training?
3. How can Seed Team trainers address defensiveness constructively while maintaining a positive group dynamic?

Section 6.2 Daily Debriefings

Daily debriefings are a vital part of the training process, offering Seed Team trainers a structured opportunity to reflect together on daily activities, address challenges, and plan for improvement. These sessions foster feedback, discussion, and growth.

Purpose of Daily Debriefings

1. Reflection: Encourage Seed Team trainers to reflect on their performance, successes, and areas for growth both for
2. Feedback: Provide constructive, actionable feedback in a supportive setting.
3. Problem-Solving: Address any challenges Seed Team trainers faced during the FSI-R training
4. Planning: Identify strategies for improving performance in the next training session.

Structure of a Daily Debriefing

1. Opening Reflection: Seed Team trainers reflect with an open-ended question like, “What went well for us today?” or “What challenges did we encounter?”
2. Master RPCA Trainer Feedback: Master RPCA Trainers provide specific, balanced feedback on Seed Team trainer performance, focusing on strengths and actionable improvements.
3. Group Discussion: Master RPCA Trainers foster collaboration by inviting Seed Team trainers to share their perspectives and offer peer support or suggestions.
4. Goal-Setting: Seed Team trainers identify one or two specific goals for the following day, ensuring they are realistic and achievable.

Section 6.3 FSI-R Interventionist Certification

Evaluating trainee performance is essential to establish certification as FSI-R interventionists. Seed team trainers will fill out the fidelity and competency rating checklists (*found in Supplemental Materials*) which will determine whether a trainee can go on to deliver the intervention in their community. If there are concerns about graduating a trainee from the program, these should be brought to the attention of the clinical supervisor to determine which actions should be taken and if additional training will be needed.

Section 7- Next Steps, Action Plans, & Training Wrap-up

The Seed Team training provides a unique platform to not only onboard newly recruited Seed Team trainers but also to refine their skills and competencies. This process ensures that they are equipped to deliver the FSI-R training effectively and confidently, fostering consistency and quality in program implementation.

Section 7.1 Seed Team Trainer Role Review

Seed team trainers are expected to continue a role of mentorship among newer FSI-R interventionists. This can be done through co-facilitation of weekly group supervision sessions with master RPCA trainers and through regular check-ins. Through these opportunities, seed team trainers can continue to offer their insight with delivering the intervention while creating a space for mutual learning among all FSI-R staff.

Exercise: Review of Seed Team Training Discussion

Discussion Questions:

1. Are there any roles and responsibilities that you are concerned about performing?
2. What are ways that you can overcome these concerns, if any?

3. What is one thing that you have learned from this training that you will use when you are training potential interventionists?
4. What is a strength that you have identified in yourself as a Seed team trainer after completing this training?
5. What is one area where you can improve as a Seed team trainer?

Section 7.2 Seed Team Trainer Certification and Renewal

Master RPCA trainers utilize evaluation tools throughout the Seed Team Training to assess performance of potential trainers through role plays and discussions. This will include fidelity and competency rating checklists and pre and post-tests to assess knowledge of the FSI-R, interpersonal skills, inclusivity, group facilitation, and teaching and training skills. Seed team trainers are expected to complete their certification by directly delivering an FSI-R training. Master RPCA trainers will evaluate this delivery through the same tools used to evaluate role play activities in Seed Team training. If there are concerns about graduating a trainee from the seed team program, Master RPCA Trainers will determine which actions should be taken and if additional training will be needed.

Seed Team trainers are expected to renew their certification annually through the FSI-R portal. This will involve completing a recertification test and reviewing training materials through the website. Once an adequate score is reached on the tests, a recertification will be issued to the trainer.

Section 7.3 Training Action Items

Following the conclusion of this training, Seed Team trainers will be responsible for the following activities:

1. Attendance at the weekly super-supervision meetings with Master RPCA trainers.
2. Coordination with RPCA when a new FSI-R training opportunity arises
3. Renewing their seed team certification on an annual basis

Section 7.3 Seed Team Individual Performance Development Plans

Just as newly trained FSI-R interventionists are expected to create and review individualized performance development plans (*see template in Supplemental Materials*), Seed team trainers are expected to complete one of their own to review with Master RPCA trainers and their clinical supervisor. These plans can help address areas of improvement after the training period and identify strengths after completing the Seed team training program. The individual performance development plan can be followed throughout the year by the Seed team trainer and reviewed upon recertification.

Seed Team Training Program Manual Appendix

This appendix expands on key topics covered in the Seed Team training program manual and provides additional resources for Seed Team trainers to explore specific topics further. While FSI-R interventionists will receive their own resource packet, some resources and topics in this appendix may overlap with those in their packet. The information provided here is not exhaustive, so please consult your agency and community for additional local resources.

To access the embedded links to resources at the end of each section, please scan the QR code below. If the links are no longer working, please inform your supervisor.

[QR Code for Accessing the Appendix Online]



Section 2- Training Logistics

Appendix 2.1.5 [My Vanderbilt Health - Expert advice for healthy living](#)

- This website gives you suggestions for healthy meeting snacks and meals.

Appendix 2.2.2 [A Sample Training Schedule for FSI-R Training](#)

- This sample schedule would assist you in creating the FSI-R training schedule for each day:

Day 1- Monday, May 15th

Group Introduction/distributing materials 9:00am-9:45am

Slides 1-8

FSI-R Introduction 9:45am- 10:45 am

Slides 9-23

Break 10:45-11:00am

FSI-R Introduction 11:00am-12pm

Slides 24-34

Lunch 12:00-1:00pm

FSI-R Introduction 1:00 pm- 2:15 pm

Role play: Check-in

Role play: Check-out

Slides 35-44

Break 2:15 pm- 2:30pm

Fidelity Monitoring 2:30 pm- 3:15 pm

All slides- 11

Wrap Up 3:30 pm- 4:00 pm

Day 2- Tuesday, May 16th

Check In 9:00am-9:15 am

Pre-Meeting 9:15am- 10:30am

Role Play: Check in and orientation to intervention

Slides 1-15

Break 10:30am- 10:45am

Pre-Meeting 10:45am- 12pm

Role play: Confidentiality

Slides 16-32

Lunch 12pm- 1pm

Module 1 1:00pm- 2:15pm

Slides 1-11

Break 2:15 pm- 2:30pm

Module 1 2:30pm- 3:30 pm

Role Play: Focus on children

Slides 12-13

*** If finish this early, then start module 2

Wrap Up 3:30pm- 4:00pm

Day 3- Wednesday, May 17th

Check in, 9:00am-9:15am

Module 2 9:15am- 10:30am

Role-play: Family Strengths and Goals

Slides 1-15

Break 10:30am- 10:45 am

Module 2 10:45 am- 12:00pm

Role play: Resettlement and Wellbeing

Role play: Discussing upcoming child meeting

Slides 16-41

Lunch 12:00pm- 1:00pm

Module 3 1:00pm- 2:15pm

Role play: Orientation to the Intervention

Slides 1-12

Break 2:15pm-2:30pm

Module 3 2:30pm-3:30pm

Role play: Family Strengths and Goals

Slides 13-29

Wrap up 3:30pm- 4:00pm

Day 4- Thursday, May 18th

Check in 9:00am- 9:15am

Module 4 9:15am- 10:30am

Role Play: Building a good relationship with your child

Slides 1-15

Break 10:30 am- 10:45am

Module 4 10:45-12:00pm

Slides 15-55

Lunch 12:00pm- 1:00pm

Module 4 1:00pm- 2:15pm

Role play: Staying calm and positive parenting strategies

*Role play: Parenting in Action **If there is time*

Slides 55- 68

Break 2:15-2:30pm

Module 5 2:30 pm-3:30pm

Role play: Rights and responsibilities

Slides 1-10

Wrap up 3:30pm- 4:00pm

Day 5- Friday, May 19th

Half day training for clinical supervisors only OR they could join first day of training for first half of the day.

Group Introduction/distributing materials 9:00am-9:30am

FSI-R Introduction 10:00am- 10:45 am

Break 10:45-11:00am

FSI-R Introduction 11:00am-12pm

Last half of the day- interventionists

Module 5 1:00pm- 2:15pm

Role play: Report cards

Role play: Homework

Slides 11- 31

Break 2:15pm- 2:30pm

Module 5, 2:30 pm- 3:30pm

Role Play: Extra curriculars

Role Play: Social life

Slides 32-45

Wrap up 3:30-4:00pm

Day 6- Monday, May 22nd

Check in, 9:00am- 9:15 am

Module 5 9:15am- 10:30am

Role Play: Hard conversations

Role play: Health and food at school

Slides 46-58

Break 10:30am-10:45am

Module 6 10:45 am- 12:00pm

Role play: Stress and Tension

Slides 1-20

Lunch 12:00pm-1:00pm

Module 6, 1:00pm- 2:15pm

Role play: Healthy and unhealthy foods

Slides 21- 37

Break 2:15pm- 2:30pm

Module 6, 2:30 pm- 3:30pm

Role-play: Family meals

Role play: Physical activity

Role play: Household hygiene

Slides 38-59

Wrap up 3:30-4:00pm

Day 7- Tuesday, May 23rd

Check in 9:00am- 9:15 am

Module 6 9:15am- 10:30am

Role play: Puberty

Role play: Prevention and wellness

Slides 60- 78

Break 10:30am- 10:45am

Module 6, 10:45am- 12:00pm

Role play: Excessive drinking

Role play: Safety

Slides 79-102

Lunch 12:00pm- 1:00pm

Module 7, 1:00pm- 2:15pm

Role play: Review child module

Slides 1-13

Break 2:15pm- 2:30pm

Module 7 2:30pm- 3:30pm

Role Play: Responding to difficult questions

Role Play: Build resilience and strong families

Slides 14-32

Wrap up 3:30pm-4:00pm

Day 8- Wednesday, May 24th

Check in, 9:00am-9:15am

Module 7, 9:15am- 10:30am

Role Play: Communication and problem solving skills

Role play: Preparing for family meeting

Slides 33-46

Break 10:30am- 10:45am

Module 8, 10:45am- 12:00pm

Role Play: Defining Resilience

Role Play: Communication Skills

Slides 1-12

Lunch 12:00pm-1:00pm

Module 8, 1:00pm- 2:15pm

Role Play: Family meeting and preparation

Slides 13-22

Break 2:15pm- 2:30pm

Module 9 2:30pm-3:30pm

Slides 1-13

Wrap up 3:30pm-4:00pm

Day 9- Thursday, May 25th

Check in, 9:00am-9:15am

Module 9, 9:15am- 10:30am

Role play: Family Meeting

Slides 14-15

Break 10:30am-10:45am

Module 10 10:45am- 12pm

Slides 1-8

Lunch 12pm-1pm

Module 10 1:00pm-2:15pm

Role play: Talk about the family meeting

Slides 9-17

Break 2:15pm- 2:30pm

Module 10, 2:30pm-3:30pm

Role play: FSI and the future

Slides 18-24

Wrap up 3:30pm-4:00pm

Day 10- Friday, May 26th

Check in 9:00am-9:30am

Module 10 9:30am-10:30am

Role play: Future family meetings

Role play: Next steps

Slides 25- 37

Break 10:30am- 10:45am

10:45am-12:00pm*

Lunch 12:00pm-1:00pm

1:00pm- 2:30pm*

Wrap up 2:30pm- 3:00pm*

If extra time needed to catch up schedule can extend until 4pm for wrap up.

Section 3- Training Methodology and Guidelines

Appendix 3.1.1, [“15 Ground Rules for Running Productive, Insight-Driven Workshops”](#)

- Written by Leslie Ciborowski, President and Founder of TrainSmart. Dec. 5, 2023

A productive session requires more than just bringing a group of smart people together in a room. Without a structured approach and clear guidelines, workshop discussions can easily veer off course and devolve into unstructured debate or groupthink. **Ground rules create the foundation for open, constructive dialogue and effective consensus building.** They foster an environment where participants feel safe to express candid perspectives without fear of judgment or reprisal. When all group members commit to upholding ground rules, you enhance the quality of ideas shared, the ability to challenge assumptions, and the momentum to drive decisions and follow-up actions

Based on in-the-trenches lessons from countless sessions, here are **15 ground rules** to establish at the start of any productive workshop:

1. Be Fully Present and Avoid Distractions

- Multi-tasking diminishes a participant's contribution to the workshop. Set the expectation upfront that attendees avoid distractions and be fully engaged for the session. **We specifically call out shutting down laptops and putting phones on silent as a rule.** This signals people should actively listen and participate rather than passively sitting there partly tuned into their email.

- For example, in a recent strategic planning workshop we facilitated, two executives kept glancing at their phones until we set the distraction-free ground rule. This immediately changed their body language and level of eye contact.

2. Practice Active Listening

- Active listening creates understanding, shows respect, and improves the flow of dialogue. **Tell participants to listen closely to others without interrupting and allow each speaker to fully finish their thoughts before responding.** Ask people to build on others' contributions to weave the discussion together versus jumping randomly from point to point.
- In a workshop on improving cross-departmental collaboration, we instituted active listening ground rules, which led to richer idea-sharing as attendees felt heard.

3. Balance Airtime Appropriately

- Ensure all participants get sufficient opportunity to contribute meaningfully while also keeping discussions on track. **We frequently use the phrase “share often but share concisely” and remind more extroverted talkers to leave space for quieter group members.**
- For example, in a recent workshop, a couple of senior leaders tended to dominate the dialogue until we established the airtime rule. This helped draw out insights from more junior staff who had been hesitant to speak up.

4. Challenge Ideas Respectfully

- The challenge is healthy, but attacking individuals is counterproductive. Make it clear that critiquing ideas is fair game, but **participants should constructively question assumptions.** Say “just to play devil’s advocate...” and avoid accusatory language.
- We ran workshops where challenging perspectives too aggressively created defensiveness. Introducing the “respectful challenge” rule transformed critiques into thought-provoking discussions.

5. Bring Solutions, Not Just Problems

- Workshops easily turn into gripe sessions unless you explicitly set the expectation that participants should raise issues along with suggested solutions. Saying “I disagree with X part of the strategy” is unhelpful; **saying “I’m concerned about X and think we should address it by doing Y” keeps the conversation productive.**
- In a recent workshop, the CFO called out individuals who brought up problems without solutions and asked them to reframe their concerns constructively. This improved the actionability of the output.

6. Maintain Confidentiality

- For sensitive topics, clarify upfront that discussions should not leave the room. **Ensure participants can share openly without concerns about leaks or gossip spreading through the organization.**
- In workshops dealing with changes to compensation models where emotions can run high, the confidentiality ground rule creates a safe space for honest dialogue and early surfacing concerns.

7. Test Assumptions Through Inquiry

- Many unproductive debates are rooted in untested assumptions and a lack of data. Encourage participants to transparently probe the validity of assumptions by **asking questions like “What evidence do we have for that thinking?” or “What data supports or contradicts that view?”.**
- At a recent workshop on updating internal policies, we frequently pointed to the “test assumptions” rule, which revealed outdated beliefs driving certain positions. We were then able to have more meaningful debates.

8. Limit Unnecessary Side Conversations

- Off-topic sidebar discussions during a workshop show disengagement and slow the group's progress. **Remind participants to stay focused on the issue and avoid pulling the dialogue off track through tangents and side conversations.**
- In workshops with frequent breakout sessions, point to this rule when bringing the group back together if we hear too many hushed side exchanges. This signals getting quiet and turning back into the full group.

9. Maintain an Open Mindset

- **Insist that participants remain open to new ideas and perspectives shared rather than stubbornly clinging to initial assumptions.** Emphasize that the purpose of the workshop is to explore ideas together with fresh eyes.
- Early in a recent workshop, one participant announced he disagreed with a core strategy the group was set to debate. We coached him to approach the session with an open mindset, which led to him conceding specific points by the end.

10. Speak Your Truth Authentically

- Creating psychological safety for candor is key. **Let participants know they should feel comfortable respectfully sharing their perspectives or concerns,** even if their view contradicts the mainstream opinion in the room.
- In one workshop, the CEO reinforced this rule, which empowered participants to question certain assumptions openly without fear of professional reprisal. This ultimately strengthened the strategy.

11. Stay on Topic

- It's easy for workshops to go down rabbit holes into irrelevant tangents. **Remind participants to keep comments focused on the goal and core topics** so they can progress effectively through the agenda. If discussions veer too far off course, we pause and explicitly refer back to the "staying on topic" ground rule to reel the conversation back in.

12. Balance Your Airtime Appropriately

- If specific individuals have already spoken a lot, they should create space for others. **If someone hasn't contributed much, urge them to share their perspective** since others would benefit from their insights. Proactively managing airtime prevents imbalanced and unproductive discussions.

13. Discuss Ideas Openly Without Attribution

- Attributing who said what can inhibit openness. **Let participants know that you encourage discussing positions transparently without referencing specific people.** This avoids finger-pointing dynamics that shut down productive debate.

14. Commit to Action Items and Next Steps

- Workshops should drive tangible outcomes and decisions. If meetings get stuck analyzing without progressing, **we highlight the action-orientation ground rule.** This prods attendees to move the discussion toward what we will do about the issues debated.

15. Continually Improve Group Dynamics

- Pause periodically to evaluate what group behaviors are working well and what can be improved. Quickly discuss any issues openly so you can adjust in real time. **Maintaining a growth mindset as a group is critical.**
- **In summary,** principles around mindset, communication, and action orientation create the foundation for driving robust insights and alignment through workshops. Of course, specific sessions may require additional ground rules around confidentiality, device usage, and so on. The critical piece is clearly establishing group norms upfront rather than assuming everyone is on the

same page. With the right ground rules, you enable workspace dialogue to spark breakthrough thinking and meaningful decisions.

Appendix 3.4.1 Role Play Reference

- Gabriel, J. A. (1982). Using role play as a training and supervisory tool. *Child Welfare*, 383-387.

Appendix 3.5.1 Body Language Resources

- Rugsaken, K. (2006). Body Speaks: Body language around the world. Body Language Around the World. <https://nacada.ksu.edu/Resources/Clearinghouse/View-Articles/Body-Language-Around-the-World.aspx>.
- Cultural differences and body language - 6 Minute English. (2017). YouTube. Retrieved from <https://www.youtube.com/watch?v=oTPZWpQ9pbA>.

Section 4- General FSI-R Delivery Guidelines for Training

Appendix 4.4.1 Suicide Prevention

Common Stressors for Suicidal Ideation

- Job loss
- Financial losses or difficulties
- Difficulties or conflicts in the family and community
- Relationship problems or losses
- Death or illness of loved ones
- Feeling alone or without support
- Violence
- Stigma and discrimination
- Trauma

What Are Some Signs That Things Are Not Okay?

Below are common feelings and reactions people can experience when they are having a difficult time:

- Feeling stressed, anxious, or depressed
- Feeling hopeless
- Crying easily
- Having difficulties sleeping, or sleeping too much
- Loss of appetite, or increase in appetite
- Not enjoying fun activities
- Having trouble concentrating, or remembering things
- Using alcohol or drugs
- Feeling disconnected from relationships with friends and family
- Becoming irritable, aggressive or violent
- Taking risks
- Has made a suicide attempt in the past, or has been thinking about suicide

What Can You Do to Take Care of Yourself

Below are some tips on what you can do to help take care of yourself if you are having a difficult time:

- Tell someone about what is bothering you
- Ask for and accept support. It is not weak to ask for help.
- Share your feelings. It is important to tell someone when you feel depressed, hopeless, helpless, or upset. It is also important to share when you feel all alone, angry, anxious, afraid, ashamed or guilty.
- Tell an adult who can help. A family member, parent, partner, teacher, coach, nurse, counselor, religious leader, doctor, community member, or trusted friend.
- Try to practice some strategies to reduce stress/tension. These might include
 - Getting regular sleep
 - Getting regular exercise
 - Keeping a healthy diet
 - Engaging in activities that you enjoy- music, dance, mindfulness, cultural events, reading.
 - Reconnecting with social supports- family, friends, community members.
- Remember, no matter how difficult things can feel, they will get better with help and support.

Where Can I Get More Help?

- Below are some suggestions on where you can get more help.
- Speak to a medical or mental health professional about your concerns
- Visit an emergency department or call 911 if you are at risk of harm
- National Suicide Prevention Lifeline: 1-800-273-TALK (8255)- 24 hours, tele-interpreters available

When You Are Worried about Someone

It can be hard to know what to do when you think that someone is having a difficult time, is experiencing a lot of stress, or may even be thinking about suicide. It is important for family and friends to recognize the signs that something is not okay and know how to help the individual.

What Are the Warning Signs That Someone Is Thinking About Suicide?

Below are common signs that someone may be thinking about suicide or experiencing mental health issues:

- The person talks about suicide. They may say things like:
 - “I have decided to kill myself”
 - “I wish I were dead”
- The person gives away their things
- The person plans for death
- The person thinks or talks about death
- The person doesn't enjoy their favorite things or activities
- The person was sad, but now he/she is calm and happy
- The person takes risks and might put his/her life in general
- The person is angry, aggressive, or irritable
- The person suddenly likes/dislikes religion
- The person is using drugs and/or alcohol
- The person had a recent loss: employment, death, divorce, money, status, relationship, etc.
- The person may talk about:

- Feeling hopeless or worthless- “Who cares if I’m dead anyway”
- Being difficult for people, “my family would be better off without me”, “soon you won’t have to worry about me”
- Being in extreme pain- “I can’t take this anymore!”, “I just want out”

The person shows signs of depression. These can include:

- Sleeping more, or sleeping less than normal
- Eating more, or eating less than normal
- Irritability and/or anger
- Fatigue/ Being tired
- Disconnection or isolation from others
- Trouble concentrating
- Increases in alcohol or drug use
- Negative thoughts
- Not taking care of themselves

What Can You Do To Help?

Below are some tips on what you can do to help:

ASK AND LISTEN

- Talk to the person alone in a private place. Plan a lot of time
- Be supportive and listen to what the person wants to say
- Tell them that you see that things are different- “I’ve noticed that you said you feel hopeless a lot lately.”
- Ask if the person is thinking about suicide-“Are you thinking about killing yourself?” “Are you thinking of ending your life?” “Have you been so unhappy lately that you’ve been thinking about ending your life?” “Sometimes when people feel very hopeless they can think about ending their life. Are you thinking about suicide?” Remember that it is okay to ask someone if they are thinking about suicide. You are not putting the thought into their head by doing so.
- Listen and allow the person to talk
- Listen openly and do not judge
- Believe what a person says, and take all threats seriously

OFFER YOUR SUPPORT

- Let the person know how much you care about them and want to help them
- Share your concerns with them
- Try saying “I am really concerned about you and I am here for you- I want you to know that there is support to help you get through this”
- Show understanding of their difficulties and be positive and encouraging- “You are going to get through this, but I know it is really hard right now!”

HELP THEM GET SUPPORT

- Tell the person that help is available and help him/her get help.
- Give hope, say: “You are not alone”, “Things can get better with help,” or, “We will find a way to get help.”
- Ask them if you can help them: “Will you go with me to get help?”; “will you let me help you?”

- If they refuse to go for help, you should talk to a family member, counselor or anyone else you trust.
- It is important to be serious about what the person says. You can also get help from agencies specializing in crisis intervention and suicide prevention like the National Suicide Prevention Lifeline on at 1-800-273-TALK (8255).
- If you think they are at immediate risk of suicide, do not leave them alone. Act immediately. You could:
 - Go with them to get help.
 - Call 911 and if you are with the person, stay with them until help arrives.
 - If it is a family member in your home, you can remove things from the home that could hurt the person (e.g. guns, prescription medications, poisons, knives, etc.)

Appendix 4.3.3. Additional Mental Health Resources for Seed Team trainers and FSI-R interventionists

- [Strategies For Staff And Supervisors To Mitigate Burnout, Vicarious Trauma, And Other Occupational Hazards](#) (Switchboard Webinar)
- [Give an Hour](#)
 - At Give an Hour, they provide mental health tools and training with a variety of focuses, including mental health tools and tips, support for mental health professionals, military/veterans, the rare disease community, workplace topics, suicide prevention, trauma, violence and crime, youth, and addiction.
- [What is Refugee Child Trauma?](#)
 - The National Child Traumatic Stress Network (NCTSN) provides information and resources on child trauma and its various types. Topics include bullying, community violence, complex trauma, disasters, early childhood trauma, intimate partner violence, medical trauma, physical abuse, race-based trauma, refugee trauma, sexual abuse, sex trafficking, terrorism, violence, and traumatic grief.

Appendix 4.3.4 Understanding Trauma

Basic Facts:

- Traumatic events produce emotional shock and can cause many long-term problems
- There are some common reactions to trauma, but everyone responds differently
- These reactions are normal and most people feel this way for a few months after trauma
- Individuals and families can develop resilience, and there are treatments that can help

Life After Trauma

- Fear and anxiety in situations that are not dangerous
- Unwanted thoughts, memories, nightmares or images of the trauma
- Avoiding situations, people, or places that remind you of the trauma
- Feeling jumpy, shaky, easily startled
- Trouble concentrating or sleeping
- Problems with getting along with people
- Isolation

- Increased use of drugs or alcohol
- Unhealthy or unsafe behavior
- Denial of effects of the traumatic events

Common Feelings After Trauma:

- Impatience, anger, and irritability
- Numbness and lack of emotion
- Guilt and shame
- Grief, depression, and hopelessness

Common Thoughts After Trauma:

- I am going crazy
- I am bad, damaged, or weak
- I cannot trust anyone
- The world is a bad and dangerous place

How Children Might Respond to a Caregiver with Trauma:

- Feel confused and not understand their caregiver's behavior
- Feel worried about their caregiver
- Think that the caregiver does not like or love them
- Show some of the same behaviors and feelings that the caregiver does
- Try to take care of the caregiver and act too grown-up for their age
- Difficulty getting along with family, friends, or other people in the community
- School problems

Resources:

- Doctors, nurses, and social workers at health centers or hospitals
- Family, friends and community
- Additional Mindfulness Activity

This resource, by the International Rescue Committee, provides mindfulness activities for students and/or youth can use whenever they feel dysregulated <https://www.rescue.org/uk/resource/mindfulness-moments-cards>

Seed Team Training Exercise Resources

Section 5- Module Specific Delivery Guidelines

Seed Team Training Exercise Resources

Module 1: Introduction

Exercise: Strengths-based Approach

Background: Caregivers in resettled families may face significant emotional stress due to feelings of guilt, fear, or past trauma related to their parenting. These emotions can make it challenging for them to open up about their children during interventions. FSI-R interventionists play a critical role in building trust and rapport with caregivers by creating a safe, non-judgmental space where families feel heard and

supported. A strength-based approach helps empower caregivers to share their experiences and reflect on their unique family strengths.

Scenarios: Amina, a single mother, recently resettled in the United States with her two children, 8-year-old Rania and 5-year-old Yusuf. During the first session of the FSI-R intervention, Amina appears anxious and reserved. When the interventionist, Susan, gently asks about Rania and Yusuf—what she appreciates about them or what parenting has been like for her—Amina shifts uncomfortably in her seat.

After a moment, Amina quietly says, “I’m not sure I’m a good mother. Life has been so hard since we moved here. I feel like I’m failing my children.” Her voice trembles, and she looks away. Susan recognizes this as a moment where Amina may feel overwhelmed by past challenges, parenting worries, or feelings of guilt. Susan needs to respond in a way that acknowledges Amina’s emotions while gently guiding the conversation to focus on her strengths as a parent.

Discussion Questions:

1. How can you as an FSI-R interventionist shift the conversation to focus on Amina’s strengths and the positive aspects of her parenting?
 2. As a Seed Team trainer, how would you guide FSI-R trainees to handle similar situations where caregivers struggle to talk about their children?
 3. What alternative strategies could you suggest to FSI-R trainees to help Amina feel safe and share more about her children and their family dynamics to the FSI-R interventionist?
-

Module 2: Family Strengths and Goals

Exercise: Coping Skills – Stress Level and Management for Caregivers

Background: Caregivers in resettled families often face overwhelming stress from managing household responsibilities, navigating cultural changes, and coping with past trauma. This stress can impact their well-being and their ability to support their families effectively. FSI-R interventionists play a crucial role in helping caregivers recognize their stress and adopt positive coping mechanisms to improve their resilience and emotional health.

Scenarios: Farid, a single father, works long hours to provide for his 8-year-old son, Ali, but he struggles to manage his finances. Exhausted from work, Farid isolates himself at home, often too tired to engage with others, including Ali. Ali feels the impact of his father’s stress. He misses spending time with Farid and sometimes feels lonely when his questions or stories about school are met with silence. At school, Ali has become quieter, and his teacher notices he’s less engaged in activities. Farid loves Ali deeply, but his stress makes it difficult to connect, creating a growing distance between them.

Discussion Questions:

1. How can FSI-R interventionists intervene in this situation to support both Farid and Ali in a healthier, more effective way?
2. As a Seed Team trainer, how would you guide trainees to handle this situation with sensitivity and professionalism?

3. What alternative strategies could you suggest to FSI-R trainees to help Farid manage his stress and rebuild a stronger relationship with his son, Ali?
-

Module 3: Children and Family Relationships

Exercise: Identifying Child Strengths

Background: When working with resettled children, FSI-R interventionists must create a safe, engaging space for children to identify and reflect on their strengths. Children may initially struggle to express their abilities due to shyness, stress, or uncertainty about what “strengths” mean. Interventionists need to use age-appropriate language, activities, and a positive tone to help children feel comfortable and confident in recognizing their unique qualities.

Scenario: Maya, an FSI-R interventionist, is meeting with 8-year-old Evan and his 12-year-old sister Mariam during Module 3, which focuses on child strengths. Evan seems distracted, playing with his shoelaces, and doesn’t respond when Maya asks, “What are some things you’re really good at?” Mariam, on the other hand, avoids eye contact and shrugs, saying, “I don’t know... I’m not good at anything.”

Maya realizes she needs to adjust her approach to make the session engaging and comfortable while guiding both Evan and Mariam to identify their strengths in a way that feels fun and encouraging.

Discussion Questions:

1. How can an FSI-R interventionist use age-appropriate strategies to help Evan and Mariam identify their individual strengths?
 2. As a Seed Team trainer, what creative techniques can FSI-R trainees use to keep Evan focused and help him recognize his strengths without making him feel pressured?
 3. What strategies would you point out how FSI-R trainees can ensure that children leave the session feeling positive, proud of their strengths, and excited to share more next time?
-

Module 4: Responsive Parenting and Caregiving

Exercise: Addressing Physical Discipline During a Module

Background: The Rahimi family have recently arrived after fleeing conflict. Parenting in their new environment has posed challenges, as cultural norms around discipline differ significantly from those in their country of origin.

The Rahimi family includes Zara, a mother in her mid-30s, her husband Zain, and their two children, 10-year-old Hana and 7-year-old Ibrahim. During a module focused on positive parenting strategies, the family discusses their experiences openly.

Scenario: During the session, Zara mentions that she sometimes uses hitting as a form of discipline, explaining, “This is what my parents did with me, and it worked. I don’t mean to hurt Hana or Ibrahim—it’s just to teach them respect and good behavior.” Zara’s tone is calm, but Zain seems uncomfortable, shifting in his seat, while Hana looks down at her hands.

The FSI-R interventionist, Isha, listens attentively. Isha recognizes that Zara’s openness provides an opportunity for meaningful dialogue but understands the need to tread carefully to maintain trust and avoid judgment. Isha must now guide the discussion in a way that respects the Rahimi family’s cultural background while introducing alternative, positive parenting strategies.

Discussion questions:

1. What would be an appropriate and effective response as an FSI-R interventionist if caregivers mention disciplining their children by hitting during the module?
2. As a Seed Team trainer, how would you guide FSI-R trainees to handle this situation with sensitivity and professionalism?
3. What alternative strategies could you suggest to FSI-R trainees to help caregivers adopt positive parenting practices in this circumstance?

Module 5: Engagement in the U.S. Education System

Exercise: Creating Tools for Caregivers-Child Engagement

Background: For many resettled families, the U.S. education system can feel overwhelming and unfamiliar. Caregivers may not be aware of the resources available at schools or understand how to advocate for their children. FSI-R interventionists play a critical role in empowering caregivers to recognize issues like bullying and guiding them to communicate effectively with school staff to support their children’s well-being.

Scenario: Rafi, a father of a 12-year-old daughter, Tara, recently resettled in the United States. During an FSI-R session, Rafi shares that Tara has been withdrawn at home and reluctant to go to school. When prompted, Tara reveals that some classmates have been teasing her about her accent and making fun of her lunch. Rafi says, “I didn’t know this was happening. I didn’t think I could do anything about it—I thought the school would take care of these things.”

Tara looks down and says, “They don’t care. It just keeps happening.” Rafi feels helpless and uncertain about what steps to take, as he’s unfamiliar with how to communicate with the school about such issues.

Discussion Questions:

1. How can FSI-R interventionists help Rafi understand his role in advocating for Tara and the importance of communicating with the school?
2. What specific strategies or tools can Seed Team trainers suggest to FSI-R trainees to help caregivers like Rafi approach the school effectively about bullying concerns?
3. As a Seed Team trainer, how would you guide FSI-R trainees to empower caregivers to build confidence in advocating for their children while navigating the U.S. education system?

Module 6: Promoting Health, Wellbeing, and Safety

Exercise: Promoting Healthy Eating

Background: Caregivers in resettled families often face barriers to maintaining physical and mental health, including limited access to healthy food, cultural dietary restrictions, financial constraints, and high stress levels. These challenges can impact the wellbeing and safety of both caregivers and children. Seed Team trainers should equip FSI-R trainees with practical strategies to engage caregivers in conversations about health, promote positive changes, and address sensitive topics like stress management, healthy eating, and alcohol use with respect and cultural sensitivity.

Scenario: Mira, a mother of two children, shared during the module 6 that she struggles to cook healthy meals because fresh fruits and vegetables are expensive in her neighborhood. She explained that the only nearby grocery store does not carry many options that align with her family’s cultural preferences. Mira feels frustrated because she wants to provide nutritious meals but often resorts to quick, inexpensive processed foods. She is open to ideas but feels unsure where to start.

Discussion Questions:

1. What affordable, culturally appropriate suggestions can FSI-R interventionists offer to help Mira incorporate healthier food options into her family’s meals?
2. What positive reinforcement strategies can Seed Team trainers recommend to FSI-R trainees to encourage Mira to make small, manageable changes toward healthier eating habits?
3. As a Seed Team trainer, what local resources (e.g., food banks, community gardens, or cultural organizations) can you suggest to FSI-R trainees to help Mira access nutritious, affordable food?

Module 7: Communicating with Children and Caregivers (For children)

Exercise: Preparing a Child for the Family Meeting and Building Communication Skills

Background: Preparing children for the Family Meeting is essential to ensure they feel confident and ready to participate. FSI-R interventionists can use rapport-building activities to create a safe space where children feel comfortable practicing communication skills. These skills help children share their thoughts effectively and engage meaningfully during the Family Meeting.

Scenario: During Module 7, FSI-R interventionist Samira is helping 9-year-old Zaid and his 7-year-old sister, Lina, prepare for their upcoming Family Meeting. Both children seem nervous about participating, with Zaid saying, “What if I say something wrong?” and Lina quietly shaking her head when asked if she has anything to share.

To help ease their anxiety, Samira suggests a fun activity to build communication skills and confidence. She introduces a game called “Share, Ask, Listen,” where they practice three key communication actions. Samira starts by sharing something about herself: “I love chocolate because it makes me happy.” She then asks Zaid, “What’s your favorite food and why?” and listens attentively as he responds.

Samira continues the activity, encouraging Zaid and Lina to practice sharing, asking, and listening to each other. Zaid talks about his favorite soccer player, and Lina shares how much she enjoys art class at school.

Samira gently guides them to think of one positive thing they could share about their family during the meeting, like, “I like when we eat dinner together.”

By the end of the session, Zaid and Lina feel more comfortable expressing their thoughts and are excited to share their ideas during the Family Meeting.

Discussion Questions:

1. What other activities could FSI-R interventionists use to help children practice sharing, asking, and listening?
 2. How can FSI-R interventionists help children feel more confident and less anxious about participating in the Family Meeting?
 3. As a Seed Team trainer, how would you guide FSI-R trainees to prepare children for the Family Meeting while building their communication skills?
-

Module 8: Communicating with Children and Caregivers (for Caregivers)

Exercise: Preparing Caregivers for the Family Meeting

Background: The Family Meeting is an opportunity for caregivers and children to discuss strengths, challenges, and shared goals. Caregivers are encouraged to take the lead during the meeting to foster empowerment and open communication. However, caregivers may feel unsure about how to structure the conversation or address sensitive topics. FSI-R interventionists play a key role in helping caregivers build confidence and prepare effectively.

Scenarios: During an FSI-R session, the interventionist, Nadia, is working with Hanan, a mother of three children, to prepare for the Family Meeting. Hanan expresses concern about leading the discussion, saying, “What if my children bring up something I don’t know how to respond to? I’m worried I’ll make things worse.”

Nadia reassures Hanan, explaining that the meeting is a safe space to discuss both strengths and challenges. She helps Hanan brainstorm a simple agenda based on previous conversations with the children and caregivers. Together, they include topics such as:

- Family strengths like cooking and eating meals together.
- A recent stressful event the children mentioned—arguments about homework.
- A positive goal the family could work on together, like spending more time outdoors.

Nadia then practices with Hanan, role-playing the meeting. Nadia takes the role of one of the children and asks a challenging question, such as, “Why do we always argue about homework?” Hanan initially feels unsure but, with encouragement, practices responding calmly, acknowledging the child’s feelings, and steering the conversation toward solutions.

Discussion Questions:

1. How can the FSI-R interventionist help Hanan feel more confident in leading the Family Meeting and addressing sensitive topics?
2. What strategies can the Seed Team trainer share with the FSI-R trainee to encourage Hanan to approach difficult conversations with her child?

3. As a Seed Team trainer, how would you guide FSI-R trainees to support caregivers like Hanan in preparing for and leading Family Meetings?

Module 9: Uniting the Family (Family Meeting)

Exercise: Managing Challenges Effectively in the Family Meeting

Background: Family Meetings can be emotionally charged, with moments of distraction, reluctance to speak, or even conflict. Trainees must learn strategies to manage these challenges with empathy and professionalism. By addressing these situations effectively, interventionists can help families stay focused and make progress in their communication and problem-solving.

Scenario: During a Family Meeting, Hala and Zayd, parents of three, are leading a discussion about resettlement challenges. Their 10-year-old son, Paraveen, becomes visibly upset and exclaims, “It’s not fair! I hate it here, and no one listens to me!” He folds his arms and refuses to speak further. Meanwhile, Hala and Zayd look flustered and unsure how to proceed, while Paraveen’s younger sister, Anika, starts drawing loudly on her notebook, distracting everyone.

The interventionist, Mary, notices the tension and calmly addresses the situation. She acknowledges Paraveen’s feelings, saying, “It sounds like you’re really frustrated, and that’s okay. We’re here to listen. Can you tell us more when you feel ready?” She then suggests giving Paraveen a few moments while redirecting Anika with a quiet drawing activity to keep her occupied. Mary reminds Hala and Zayd of the agenda and encourages them to refocus on the next topic until Paraveen is ready to share again.

Discussion Question:

1. How can the interventionist address Anika’s behavior in a way that minimizes disruption while keeping her engaged?
2. As a Seed Team trainer, what steps would you recommend FSI-R trainees take to empower caregivers to continue leading the meeting despite challenges?
3. As a Seed Team trainer, how would you guide FSI-R trainees to handle situations involving emotional upset and distractions during a Family Meeting?

Module 10: Bringing it All Together

Exercise: Reviewing the Family Meeting

Background: The Family Meeting Review is an opportunity for families to reflect on their accomplishments, address any concerns, and plan for the future. The FSI-R interventionist plays a crucial role in helping the family process the meeting in a constructive and encouraging manner, reinforcing their strengths and the tools they’ve gained to navigate challenges.

Scenario: During the Family Meeting Review, the interventionist, Khalid, meets with Zainab, her husband Sayed, and their two children, Abel (12) and Miriam (9). Khalid begins by congratulating the family: “You all did an amazing job during the Family Meeting. It’s clear how much you care about each other and want to work together.”

He highlights a positive moment: “Miriam, it was so thoughtful of you to share how much you miss your old friends, and Abel, your idea to help Miriam make new friends at school was really kind. Sayed and Zainab, it was great to see how you supported their ideas.” Zainab nods and says, “It reminded me how important it is to give them space to share their thoughts.” Sayed adds, “It was good for us to talk about these things together as a family.”

Khalid asks, “What was your favorite part of the Family Meeting?” Miriam says, “I liked when Mom and dad said they were proud of us.” Abel adds, “I liked talking about spending more time together.”

To wrap up, Khalid encourages them to plan their next Family Meeting. He asks, “When do you think you’d like to meet again? And what would you like to talk about next time?” The family agrees to set a goal of planning a fun weekend activity together, like a picnic or family movie night.

Discussion Question:

1. How can FSI-R interventionists like Khalid help families recognize and celebrate their progress during the Family Meeting Review?
2. What strategies can Seed Team trainers use to highlight specific strengths and positive moments from the Family Meeting while training FSI-R trainees?
3. How can Seed Team trainers teach FSI-R trainees to guide families to set realistic goals for their next Family Meeting and encourage continued use of the tools they’ve learned?