

# Working With a Female Michael Jordan

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## Introduction

When I<sup>1</sup> first entered into the Adult Health and Development Program I had no idea how drastically my life would change. Eight weeks later I can truly say that my life has been positively impacted by my service and the genuine people I have met in this program.

On the first training session, each student was told the type of members that would be participating in the program. We would eventually have to make a decision on whom we would like to work with for the semester. When I heard we would be working with veterans, foreign born adults with little or no English skills, and developmentally disabled adults my heart literally skipped a beat. I had absolutely no type of training with adults of this kind and did not know how I could possibly manage working with adults I could not identify with. Finally, we were told that there would also be community members involved in the program and immediately a sigh of relief took over my body. This was definitely the type of member I wanted to be partnered with, no real problems that I could not handle.

The third Saturday of the program it was finally time to meet the members we would eventually be working with. All members and staffers were invited into the gym in Cole Field House for an ice breaker. We played games, introduced ourselves to one another, and enjoyed lunch together. It didn't matter to me what type of member I was paired with, they all seemed so great to me. I can't really explain what came over me when I met the members, I do remember becoming so much more relaxed once seeing them and then I was able to put faces with the different groups.

It was also at this meeting that I met Ellen Sith<sup>2</sup>. When Ellen walked through the door she seemed like a breath of fresh air. I vividly remember greeting her with a "hello," and immediately she responded, "hello, what's your name?" This was the very beginning of an unbreakable bond, something I would have never pictured in a million years.

Ellen Theresa Sith was born in 1962 in Washington D.C. Ellen is the middle child out of five siblings. Although Ellen's mother, father, and brother have died, she still has her sisters, and niece in the Washington/Maryland area.

## My Member, Ellen, The Basketball Player

Ellen is a developmentally disabled resident at the Community of the Ark group home in Washington D.C. She really enjoys living there where she has many friends, and feels at comfortable and at ease. However, Ellen did imply that her daily routine was monotonous at times, and that she was often lonely. For instance, she goes to work Monday-Friday at a preschool where she does contract work such as, cleaning the floors and bathrooms, then returns back home, eats dinner, and spends the rest of the evening clipping coupons out of the newspaper. Other than her friends in the group home, she only interacts with the members and staffers in the *AHDP*, and occasionally her family. Ellen's family doesn't call frequently, but they do pick her up for Christmas, Easter, and Thanksgiving holidays. Sadly, it seemed that the only calls Ellen received on a weekly basis were my own calls.

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<sup>1</sup> Names have been changed. Also, this Final Analysis Paper was written by a first semester staffer during the spring 1998 semester. Editing was minimal.

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<sup>2</sup> Members fall into four categories: Those residing in the Community; a sub-group of the Foreign-born, people with developmental disabilities, and VA Nursing Home residents nearly all of whom use wheelchairs. Staffer" is the term given to the students and volunteers working one on one with their older adult "member." During the spring semester there was about 70 staffers, 70 members, and 20 senior staff.

## Ellen and Her Two Hand Set Shot

During staff training, Dan tells this story about Ellen when she first came to the *AHDP* three years ago. One Saturday, early in the program, she and her staffer were shooting baskets in the gym. Her every effort was reinforced by a clap and verbal encouragement. It so happened that about 70 members and staffers had come into the gym waiting for a modified aerobics class to begin, and were watching her shoot. Silently, they were hoping that she would make a basket. She did. The crowd erupted in applause and gathered around her offering congratulations. The smile on her face was something to see. Subsequently, when she arrives on a Saturday, she heads to the gym to practice.

### Applying *AHDP* Concepts

During the fourth session<sup>3</sup> of the program, Ellen expressed to me that her goals for this semester were to improve her physical fitness, maintain her basketball skills, meet new and interesting people, and complete an arts and crafts project. With the use of the ACAEM Paradigm, I was successfully able to help Ellen accomplish all her goals and unexpectedly a little more.

**Assessment:** After talking with Ellen at great length about her past medical condition, I knew that she was not on medication, and was in good health. This provided a good basis from which to improve her physical activity, physical fitness, and social status. By means of physical testing, communication with Ellen, reading her previous Individual History Forms<sup>4</sup>, and talking with the

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<sup>3</sup> Editor's note: Experience has taught us that bonding, that is, a close, trusting friendship between the staffer and his or her member takes, on average, up to four sessions to occur. Sometimes it will occur on the first meeting. On the other hand, we had one situation that took 1½ semesters.

<sup>4</sup>The Individual History Form is filled out by the staffer following each Saturday's session. It is then positively critiqued by the staffer's Associate Group Leader and Group

senior staff, I learned that she loved basketball, bowling, and bike riding. They were the means to achieve our goals. Also, they were fun.

Socially, Ellen was a very outgoing person and never complained about anything. She was very easy to please and communicated effectively about her plans for the afternoon. Because Ellen's positive outlook for the future was similar to mine, I knew we would get along just fine.

**Creativity:** Ellen and myself established long term goals and short term goals each week. Among her long term goals was her desire to meet people outside of her group home, memorize her phone number and address, and write her name in cursive. While helping Ellen achieve these goals I worked to keep our activities spontaneous, but also beneficial.

For example, to help Ellen remember her phone number I would show her a number on a sheet of plain paper to see if she could recognize it. By the seventh session she correctly identified the number as her own, and I rewarded her with praise. Then I asked her if she remembered her own number? She did. She repeated it back to me. We were both ecstatic. We hugged, clapped, and decided to go to the gym to have more fun shooting baskets.

**Action:** At the beginning of each session I pointed out the activity board to Ellen and had her choose her schedule. Usually two activities would keep us busy until noon. Of all the activities Ellen really enjoyed the bowling tournament. Ellen used a six pound ball to compensate for her small frame. While bowling she engaged in exercise without even noticing it. By picking the ball up in her hands and assuming the position to bowl, Ellen was engaging in arm curls that strengthened her biceps, stretching, and improving her coordination and balance. Next, as she bent her knees to throw the ball down the lane she was able to get strengthen her quads. Our three game set helped her improve her strength, balance, endurance, and coordination.

**Evaluation:** After a few sessions I noticed how close Ellen and I had become. She rarely left

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Leader, and returned to the staffer the following Saturday.

my side and liked me to do all activities along side of her. My gain was greater empathy and insight. On each Saturday, I was able to judge her mood by her mannerisms and communication style. I noticed that she had energetic and less than energetic days. This became very helpful because I could help her choose the activities that were fun and could be mastered by taking into account her energy level. For example, on a fairly energetic day I would take her to the bowling alley, basketball courts, or the new Physical Activities Center. On a more moderate day, she seemed very happy with arts and crafts, riding the bikes, and shooting the basketball.

**Modification:** To modify Ellen's long term goal of enhancing her game of basketball we worked on the essentials of the game instead of playing full court games. We practiced dribbling, bounce passes, chest passes, and free throw shooting. I found it helpful to break down the game of basketball to its specific skills (like shooting) and concepts (like team work, and defense). My judgement is that she has a better understanding of the game as a whole.

During the training session of February 28, 1998, each staffer was trained about the *Psycho-Social Stress Theory* (Leviton, Kennedy & Woodruff, 1995). The stress theory conceptualizes a person having to cope with a variety of physical and psycho-social stresses in life. For example, *AHDP* members are age 50 years or older. Many have coped or are coping with such stressors as death, dying, bereavement, retirement, illness, loss of limbs, being institutionalized, and loneliness. Psycho-social stressors are organized into domains of loss, deprivation, unwanted change, and unwanted change. In this variation of stress theory, the *AHDP*, its participants and ambience are a mediating variable. The ultimate goal is a positive or "healthy" stress response characterized by greater insight and psychological growth concerning stress. My goals were educate Ellen on stress coping skills, how to get into a *health and well-being groove*.

For example, death was a source of distress for Ellen. She initiated talk about the death of her mother and brother a lot which I encouraged. In fact, I joined in with my own recollection of the death of loved ones including pets. It was a

healthy and beneficial process for both of us, and brought us closer as friends.

When dealing with Ellen's feelings and emotions about death, I remembered that *Symbolic Interaction Theory* encouraged staffers to stress **empathy** more so than sympathy. Empathy enables an individual to understand someone's behavior and the meaning they given to the many facets of the problem. Thus, in conjunction with the psycho-social stress model, I decided to use the *ISAS Paradigm*<sup>5</sup> to enhance our relationship and help me understand her sources of distress and her ways of coping with them.

**Individual:** It was very important for me to understand Ellen's individual personality and characteristics in order to be empathetic about her stressors. When I speak of stressors, I am referring to Ellen's disabilities, group home life, and experiences with death. My Death Education class prepared me a great deal to help my member talk about her death related experiences. However, I did not have any previous experience with developmentally disabled adults. I found that Ellen, like everyone else, had concerns about what happens after one dies, why people die, and fears about pain and suffering.

**Symbols:** I found it important as a staffer to become attuned to my member's verbal and non-verbal communication. When she became irritated or frustrated in an activity we would move to something else. I realized that *my perception of how an activity was going was not necessarily similar to that of Ellen's*. Her feelings and desires were not always mine; however, on a Saturday, her desires always took precedent over my own.

**Actors:** I found it crucial for Ellen to interact with her group home members throughout the course of the day. In certain situations, such as playing a game she was not familiar with, she found it very comforting to be around people she

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<sup>5</sup> Behavior is a function of the (I)ndividual's S(ymbolic) meaning given to the (A)ctors and (S)ituation. To understand that behavior one must be empathetic rather than sympathetic.

knew. Ellen has been in the program for three years and has made a lot of friends, both members and staffers. She feels very comfortable around the staff and has an ongoing friendship with another returning member, Fran.

**Situation:** The *AHDP* social environment was supportive and reinforcing for Ellen. People were accepted without the baggage of stereotypes and labels. There were no put downs, coercion, or patronizing. Rather, the environment was one of encouragement, joy and laughter.

Even the less-than-ideal physical environment surrounding Cole Field House was a positive factor because it was associated with fun: opportunity to play basketball, bowl, parties and the like.

To ensure that Ellen met her goals concerning her beloved basketball, I applied the *Coaching Model*. Although Ellen and I worked on skills she was familiar with, we were also able to use the model for new skills. As a *friendly coach*, I let Ellen choose the activities she wanted to engage in each week. If she chose basketball, her favorite sport, I would call out the drills we needed to practice and see if she could remember them. She would execute them. To reverse the roles, I let her call out the drill, then I would shoot the ball until I missed a basket. This role reversal kept the sport interesting and fun. Also, *it reinforced the notion that we were equals* [editor's emphasis]. By the way, Ellen has really become a good basketball shooter. She can make a two-handed set shot better than I can. Often we will gather a group to play "Horse." She more than holds her own, and has won her share of games.

When Ellen would have trouble making the foul shots or dribbling with her left hand, I would suggest that she move closer to the basket, or use the other hand to dribble. My goal in making these suggestions was to *ensure her success* not only in the basketball, but with her self-esteem also.

## **Conclusion**

The Adult Health and Development Program was my first experience with gerontological issues and adults with disabilities. I found the *Staffers' Manual* extremely helpful to assess the progress I was making with my member. The ACAEM Paradigm informed me on how to go about

ensuring success with my member throughout the program. This unique clinical experience gave me the opportunity to apply theory to real individuals.

As a second year Family Studies major, I felt that working with adults ages 50 and over would help me prepare for my future endeavors in Gerontology, Hospice Care, and Family Therapy. The *AHDP* was a great vehicle in helping me pursue my future goals. I had the unique opportunity to work with community residents, a subgroup or foreign-born community residents, a group of persons with developmental disabilities, and those who are institutionalized. I found success in this program from actually being able to improve my member's health and well-being. I was able to challenge and motivate Ellen to try new and interesting activities and events. Most importantly, I dispelled all stereotypes I had of the old and developmentally challenged individuals. I realized how alike we all are. The only characteristic that separates human beings are our level of sincerity, generosity, and respect. Finally, I learned how to shoot a two-hand set shot.

My Group Leaders (GL) this semester were Alisa Scheiner, Julie Neale, and Alex. Outside of the large group discussion, my GLs' helped me a lot in narrowing down my goals for this semester. They taught me that the narrower my goals were for Ellen, the more precise my outcomes would be. Each Group Leader was very articulate and up front with all information that would help me succeed in this class. The smaller group discussions were very intimate and gave me a sense of comfort throughout the program. I felt secure enough to ask any questions that came to mind. If my Group Leaders didn't have an answer for my questions, they would ultimately find search it out, tell me what I wanted to know, and how they found it. My relationship with my GLs' helped ensure my success in the *AHDP* and a positive outlook on my progress in this course.

As a final evaluation of the Adult Health and Development Program, I can only relate this experience to my past experiences. Thus far, I have never been a part of a program that is so unique in its method of joining young adults and older adults together for the benefit of health and well-being. The *AHDP* has a special flare to it that has ensured its success to date.

Personally, I have come out of this program feeling a changed person. I have more patience and understanding for people older and different than myself. If programs such as this one were implemented in high schools across the country, our society would improve the health status of all Americans significantly. It would also help break down the barriers of communication that exists between younger and older generations. I only hope that when I turn 50 years old a program such as the *AHDP* will help improve my physical, mental, and social well-being.

### References

Leviton, D., Kennedy, J., & Woodruff, R. (1995). *AHDP Manual for Staffers*. College Park, MD: University of Maryland.

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