

*Youths for Advocacy (Y4A) Presents:*

Carolina Health and Transition (CHAT) Youth Curriculum:



**Practical Tools for Youths**  
**Transitioning from Pediatric to Adult Health Care**  
**Using Scenarios: Guidelines for Youth Leaders**

*Welcome!*

The following guidelines will help you enjoy watching five brief stories about youths and their health care provider. You will find suggestions for talking about each scenario and ideas for enacting scenes with your group.

If you are new to leading a youth group, using these scenes is a great way to begin. You will find the *Let's Talk about It* or the *Now You Try* section after each part of a scenario. Take a look at *Tips for Leaders* so you can review the scene before you present it to your group.

We hope that you and your group enjoy this interactive way to practice speaking up and prepare to transition successfully from pediatric to adult health care.

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CHAT is a federally-funded project of the North Carolina Division of Public Health-Children & Youth Branch. CHAT aims to change systems of practice for youth with special healthcare needs with three initiatives: for youths, for families, and for health care providers.

The Y4A Advisory committee includes representatives from CHAT.

**University of North Carolina Center for Development and Learning,**  
a University Center for Excellence in Developmental Disabilities Education, Research, Service  
Carolina Institute for Developmental Disabilities

## *About the CHAT Scenarios~~*

### **The CHAT DVD includes five scenarios.**

- Scenarios are *captioned* to be accessible to individuals who are deaf or hard of hearing. Spoken words are printed on the screen.
- Scenarios are *audio described* to be accessible to individuals with low vision. A listener hears words that describe what a sighted person sees.

### **Five scenarios without the CHAT DVD.**

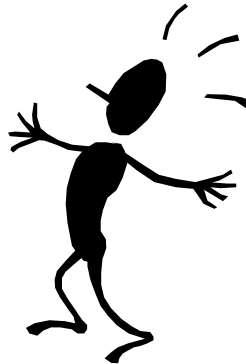
- You can enact the scenarios yourself instead of using the **CHAT DVD**. Invite one or two other youth leaders to join you.
- See “Tips for Leaders” below for pointers on acting a scene.

**In each scenario, your group will meet a youth and watch a brief story about his or her health care issue.**

1. If you are using the DVD, click on the story that you want to watch:

**Lee Speaks Up**  
**Marcel Takes Charge**  
**Chris Asks Three**  
**Sam Makes the Call**  
**RJ Covers Her Bases**

2. Watch *Part One*.
3. Then the *Let's Talk About It* screen allows you to stop to share ideas.
4. Watch *Part Two*; see what is different. (One story has a *Part Three*.)
5. The next screen, *Now You Try*, gives you ways to act the scene yourselves.



## Tips for Leaders

- A. After your group watches each part of a scenario, be sure that everyone has a chance to share ideas and feelings about the story before you continue with the next part.
  - a. The *Let's Talk About it* screen shows some discussion ideas.
  - b. More ideas and questions are listed below.
  - c. You may find it helpful to write comments on a flipchart.
- B. The *Now You Try* screen has ideas for acting scenes about the story. This fun activity is a good way for your group to try something new.
  - a. Try out several ways to act the story. Your scenes can be different from the DVD scenarios. You might exaggerate the story or use a new way to handle a situation.
  - b. Before you act the scenes, it is helpful to give the actors a minute to take their places and quietly feel ready to enact the scene. Then someone can call "Action" and the scene begins; call "Freeze" to stop the scene.
- C. After your group enacts a scene, take a few minutes to talk about it.
  - a. Name how the youth feels and how the doctor feels in the scene.
  - b. What might happen next?
  - c. How is the story the same or different from your visits to the doctor?
- D. Act each scene again. You can ask someone who played the part of the youth to switch and play the doctor.
- E. Try to use a prop or a costume piece when you act a scene because it helps everyone imagine the situation is real. [See lists below.]
- F. Remember that there is never only *one* "right" way. Acting the scenes may help you discover many helpful ways to deal with a situation in real life.



## 1) Lee Speaks Up

### *Introduction:*

“You are about to meet Lee who has a stomach ache. Lee will talk with Dr. Walters in three different ways. You can decide what way works best.”

### **Watch the Scenario:**

<u>Who:</u>	Lee Dr. Walters
<u>What:</u>	Lee visits her doctor because of a stomach ache
<u>Where:</u>	Dr Walter’s examining room

**PART 1:** Lee demands that Dr. Walters "cure" her right away. She does not respond well to questions, but speaks loud and “in-your-face” to Dr. Walters, then rolls out the door. [**Aggressive style of communicating**]

### **Discuss:**

- Did Lee use good eye contact?
- Did Lee describe why she is visiting the doctor?
- Did Lee use good voice tone?
- Did Lee get good results from the doctor appointment?

**PART 2:** Lee is timid and worried. She does not respond to questions and she even apologizes about being there. [**Passive style of communicating**]

### **Discuss:**

- Did Lee use good eye contact?
- Did Lee describe why she is visiting the doctor?
- Did Lee use good voice tone?
- Did Lee get good results from the doctor appointment?

**PART 3:** Lee makes good eye contact and describes how she feels. When Dr. Walters asks a question, Lee responds and offers more information that may be helpful. Lee thanks Dr. Walters as the scene ends. [**Assertive style of communicating.**]

### **Discuss:**

- Did Lee use good eye contact?
- Did Lee describe why she is visiting the doctor?
- Did Lee use good voice tone?
- Did Lee get good results from the doctor appointment?

## Discussion Questions and Points:

You are sure to find that *Part 1 aggressive* and *Part 2 passive* are exaggerated and not very realistic—even funny! These scenes can help you name what works and what does not work.

In *Part 3 assertive*, Lee is able to say how she feels and she has her questions ready to ask Dr. Walters.

- Everyone communicates a little differently. Which Lee scene feels close to how you communicate?
- Is there anything you want to change about how you communicate? Why?
- How do you think Lee felt in each scene?
- How do you think Dr. Walters felt in each scene?

## Now You Try:

Ask someone to act the scene as Lee in either *Part 1*, *Part 2*, or *Part 3*.

Props/Costumes ideas:

- White jacket/stethoscope for Dr. Walters
- Chart/pen
- Magazine for Lee

Watch the scene, then ask the group to name which “Lee” was acted. Was she or he *aggressive*, *passive*, or *assertive*?

Then, someone can act a different Lee Scene.

Act the scene again with someone acting Lee as *assertive* in *Part 3*.

What do you want to remember about talking to YOUR doctor for good results?

## 2) Marcel Takes Charge

### *Introduction:*

“Do you ever feel that a doctor or nurse does not listen to you? As you watch Marcel in this scene with Dr. Simpson, think of some suggestions so that Marcel has input.”

### **Watch the Scenario:**

- Who: Marcel  
Doctor Simpson
- What: Marcel goes to the doctor because of headaches.
- Where: Dr. Simpson’s examining room

**PART 1:** Dr. Simpson greets Marcel briefly, changes voice tone, and talks only with Mom asking questions such as:

- How much pain does Marcel have?
- How often are the headaches?
- How long have these headaches been going on?
- What medication is Marcel taking?

Dr. Simpson does not talk with Marcel. Marcel seems to give up trying.

### **Discuss:**

- How does Marcel feel about this?
- What can Marcel?
- What can mom do?

Let's see how this scene is different when Mom is Marcel’s advocate.

**PART 2:** Dr. Simpson greets Marcel, changes voice tone, and looks at Mom with questions such as:

- How much pain does Marcel have?
- How often are the headaches?
- How long has Marcel had these headaches?
- What medication does Marcel take?

This time, Mom lets Dr. Simpson know that Marcel can answer and the scene continues. When Marcel is asked about medication, Mom reminds him about the *portable medical summary* form (See [www.hrtw.org](http://www.hrtw.org)) to show Dr. Simpson.

### **Discussion Questions and Points:**

Marcel does not give control over to Mom, but asks for back-up and Mom supports this. Don't rely on friends or family members, but ask them to be your back-up so you can be your own advocate.

- What did Marcel's Mom do in Part 2 that was different from what she did in Part 1?
- What was helpful to Marcel?
- How would a *Portable Medical Summary* form be useful?
- What other suggestions do you have?

### **Now You Try:**

Ask someone to act the scene as Marcel in either Part 1 or Part 2.

Props/Costumes:

- White jacket/stethoscope for Dr. Simpson
- Chart/pen
- *Portable Medical Summary* form (see your CHAT Youth Guide to Transition for a tear-out form. Or visit [www.hrtw.org](http://www.hrtw.org) to print a form)

What are some points that you want to remember next time you see your doctor or other health care professional?



### 3) Chris Asks Three

#### *Introduction:*

“You are about to meet Chris. He is visiting his doctor because he feels achy and tired with chills and coughing. As you watch, be aware of your thoughts and feelings. After the scene, let’s talk about your suggestions for Chris and Dr. Nelson.”

#### **Watch the Scenario:**

Who: Chris  
Dr. Nelson  
What: Chris has been feeling achy and tired with chills and coughing  
Where: In Dr. Nelson’s examining room

**PART 1:** Chris says that he thinks he has the flu but he doesn’t give information about how he is feeling. Dr. Nelson writes him prescription to help him feel better.

#### **Discussion Questions and Points:**

Do you think something was wrong in this scene? What happened?

Chris didn’t give enough information—Why?

- Maybe Chris waited to be asked and Dr. Nelson didn’t ask.
- Maybe Chris didn’t know what information to tell.

Dr. Nelson didn’t ask for information—Why?

- Maybe Dr. Nelson didn’t think Chris could give information.
- Maybe Dr. Nelson was in a hurry and the prescription is OK.

What suggestions do you have for Chris?

- Think of questions ahead of time and list them to bring with you.
- Be ready to **Ask Three** (Have a list of three important questions.)
- Tell Dr. Nelson about the symptoms and when they started.

List some questions for Dr. Nelson to ask. Leaders can prompt these suggestions.

- What symptoms are you having?
- How long have you had these symptoms? When did they start?
- Does it happen after you eat? Before? When you eat certain things?
- Do you have a fever? Let’s take your temperature.
- Tell me about your cough—
- Where do you ache?
- Have you taken any medications?
- On a scale of 1 - 10, how bad do you feel (10 being the worst pain)?

What could happen next in the scene?

***PART 2:*** Chris tells about his symptoms and has three questions ready to ask Dr. Nelson.

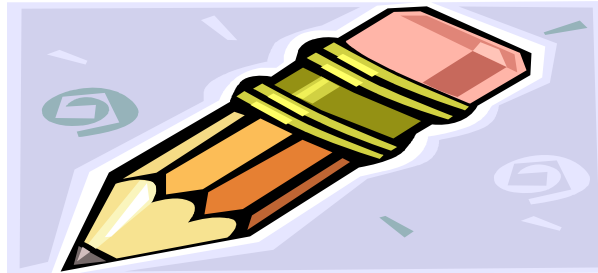
**Now You Try:**

Act the scenes and try some ideas and suggestions you talked about. Act it again and try different ideas.

Props/Costumes:

- White jacket/stethoscope for Dr. Nelson
- Chart/pen
- Paper to write the prescription

What do you want to remember from this scene for YOUR next doctor visit?



#### 4) **RJ Covers Her Bases**

##### *Introduction:*

“It’s not always easy to ask for what you need. As you watch this scene, think of what RJ may need to ask for.”

##### **Watch the Scenario:**

Who: RJ (patient)  
Dental receptionist  
What: RJ needs to request accommodations to have dental work.  
Where: Front desk at dental office

**PART 1** : RJ enters the dentist office. She is asked to sign in and the receptionist tells her what is planned for the visit—an x-ray and a filling. RJ says okay.

##### **Discussion Questions and Points:**

RJ will need accommodations, but she did not ask about them. Can you think of some accommodations that RJ may need from what the receptionist told her?

Say some sentences that RJ could use to let staff know about her accommodation needs? (You can write ideas on flipchart)

Possible responses:

- RJ may have a drug allergy and would need different medication;
- RJ may need to have the X-ray machine made accessible;
- RJ may need an accessible dental chair.

**PART 2**: RJ makes accommodation requests of dental receptionist.

Did RJ ask for accommodations that you didn’t think of?

What accommodations would be helpful for YOUR doctor/dental office to know?

##### **Now You Try:**

Act the scene with group members asking for different accommodations.

Props/Costumes:

- Clipboard/pen
- Counter or table for receptionist area

What are some things that you want to remember about asking for accommodations the next time you see your doctor or other health care professional?

## 5) Sam Makes the Call

### *Introduction:*

“Sometimes Sam is very busy. As you watch this scene, think of suggestions so that Sam is successful at ordering medications.”

### **Watch the Scenario:**

Who: Sam  
What: Sam needs to order more medication  
Where: At home in the kitchen

**PART 1:** Sam is in a hurry. Suddenly, Sam sees that a medication needs a refill. She finds the phone and looks for the drug store phone number. Sam calls and says, "Hello, John! This is Sam. I need more meds!" She hangs up and leaves.

### **Discussion Questions and Points:**

Sam needs your advice--What suggestions do you have?

Suggestions may include:

- Keep drug store phone number handy.
- Have the pill bottle ready with the correct information.
- Say your last name when you call.
- Ask for the cost.
- Other suggestions?

**PART 2:** Sam sees that she is almost out of her meds. She calls the drug store and calmly gives information to John for a refill. She finds out when she can pick it up.

### **Now You Try:**

Act the scene; this time Sam uses the suggestions.

Props/Costumes:

- Pill bottle
- Phone
- Purse
- Table or drawer area

Repeat the scene several times, taking turns enacting Sam. After each scene, ask which suggestions work well for Sam.

- What works well for you when you get a medication refill?
- What do you want to change about how you get your medication refill?

Follow-Up guidelines:

### **Check List : Steps for Making an Appointment with a Health Care Provider**

#### **Schedule an appointment:**

- ❑ Get ready to call:
  - Find your health care provider phone number, pencil, and your calendar.
  - Be ready to say why you need an appointment (health concern, follow-up appointment, check-up, etc.)
- ❑ Make the call
  - Jot down appointment time and place on the date in your calendar.
- ❑ Find transportation to and from your appointment. Choices may include:
  - Check bus schedule
  - Call transit company to make appointment
  - Call taxi to make an appointment
  - Call friend/family member who can give you a ride
- ❑ Make arrangements
  - Call work, volunteer site, school, or other to change your schedule, as needed when it conflicts with your appointment time.

#### **The day before your appointment:**

- ❑ Call to confirm that your ride is set.
- ❑ Have your portable medical summary (visit [www.hrtw.org](http://www.hrtw.org)) form ready to bring.
- ❑ Write your list of symptoms.
- ❑ Write your list of questions for the doctor.
- ❑ Note what time you will need to start to get ready.

#### **Your appointment day:**

- ❑ Shower or take a bath (you may prefer to do this the day before)
- ❑ Put your medications in a bag to take with you.
- ❑ Take your lists with symptoms and questions.
- ❑ Take pencil and paper to write information that your doctor may give you.
- ❑ When you arrive at the office, go to the front desk to check in with the receptionist.



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