

DEFINING GENTLE TEACHING

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Based on the life work of Dr. John McGee

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1. Introduction

Gentle Teaching makes a radical and compassionate difference in how service models are structured for individuals, and for agencies that serve people with vulnerabilities: intellectual disabilities, mental illness, being homeless, dementia, feeling marginalized, etc.

Developing a recognizable and acceptable level of credibility for Gentle Teaching is what policymakers and managers require in order to respond favorably in approving its application at a legislative level.

Beyond the effectiveness of Gentle Teaching and the mutual benefits of its applications, it is important that the underpinning of this philosophy and practice be strengthened and supported with greater research.

Elementary research on the effects of Gentle Teaching, however, can only be pursued after a brief, defining premise is provided for the inquiry. Basically, this needs to consist of stating what Gentle Teaching is, and also the basic indicators that will be used to evaluate Gentle Teaching outcomes for validating its objectives and practices.

A secondary purpose for establishing this definition and indicator scale is to benefit agencies that embrace the philosophy of Gentle Teaching, who need an instrument that will assess and qualify periodic evaluations. This instrument will indicate areas of progress, and also indicate areas of needed adjustment by the service provider.

A future purpose for this instrument would be for certifying Gentle Teaching agencies. This definition goes along with indicators that can be used to examine whether or not Gentle Teaching is being credibly practiced. (Note: the indicators don't measure results that we want, but will identify, for us, what's working and what's not, according to the application of a Gentle Teaching framework.)

Gentle Teaching is about building reciprocal relationships between people, where the reciprocity is spontaneous and based on unconditionality and equality. The way these relationships can develop is very much culturally dependent. While the principles of Gentle Teaching are universal, the practice of Gentle Teaching in the United States can look different from its practice in Europe, or in Brazil or Japan. The definition, then, cannot be so rigid that there is no allowance for this cultural diversity and flexibility. The same goes for the evaluation forms that are referred to in this document. On <http://www.gentleteaching.com> you can find and download examples of the forms. It's the responsibility of qualified Gentle Teaching trainers to make these examples more culturally specific.

This paper presents a definition of Gentle Teaching, one that can be useful for research and for validating its objectives and practices worldwide, using the determined indicators that support the processes and outcomes of Gentle Teaching.

2. In essence

A framework of Gentle Teaching guides an intentional teaching process in caregiving, focusing on establishing safe and loving relationships between caregivers¹ and the persons. This framework mobilizes four key areas of support for the benefit of the persons:

1. Developing unconditionally safe and loving relationships that make it possible to support a person, even in moments of frustration or fear;
2. Creating a safe and caring sense of community with the person, one that (s)he is part of and that allows him/her to be with others who value them and see them as equals;
3. Enriching quality of life through the experience and understanding of feelings, as this supports an overall experience of contentment. This also supports the person's own dreams and their personal development of potentials and qualities;
4. The personal/professional development of the caregiver who realizes that caregiving is not about changing the other, but it is a process of a mutual and interdependent development where (s)he has the primary responsibility to take the first step and invite the person to engage in the relationship.

3. History of Gentle Teaching

The Gentle Teaching philosophy was initially developed by Dr. John J. McGee, whose life work was dedicated to helping people with an intellectual disability, particularly those with severe behavior challenges. In the 1980's, McGee and three colleagues (F.J. Menolascino, D.C. Hobbs and P.E. Menousek)², developed Gentle Teaching as an alternative from the behavioristic approach that was being applied to people with an intellectual disability and/or with severe challenging behaviors.

McGee and Menolascino founded Gentle Teaching using the perspective of the Psychology of Interdependence³. Gentle Teaching thus became more than just a methodology; it became an expression of an overall view regarding human needs and human existence.

In 1987, McGee and his colleagues published a book on Gentle Teaching. {McGee, J. J., Menolascino, F. J., Hobbs, D. C. & Menousek, P. Gentle teaching: A non-aversive approach to helping persons with mental retardation. (New York: Human Sciences Press, 1987)}

This broader perspective opened the door to a new horizon, recognizing the primary application and benefits of Gentle Teaching to be its relationship-building framework; no longer limited to people with an intellectual disability and challenging behaviors. Today we know that it is suitable and beneficial for serving all people who are or who feel marginalized.

From the early 1990's, Gentle Teaching expanded around the world. From the U.S., where it began, to Canada, Mexico, Brazil, Europe and Japan. The integration into other cultures gave rise to

¹ In this paper we use the word caregiver, but it can also stand for the parents, direct support professional, schoolteacher or other important people in the first support circle around a person.

² Gentle Teaching (1987), McGee et al, Plenum Publishers

³ Beyond Gentle Teaching (1991),

internationally shared dialogue, bringing new insight to an understanding of Gentle Teaching and its possible applications.

One of these insights was seeing the need to look beyond the relationships, and into the broader, practical aspects through which quality of life was perceived.

The words used in Gentle Teaching also developed. The word ‘valued,’ that was used in the early years of Gentle Teaching, was gradually replaced by the word ‘loved;’ and instead of only saying that people need to ‘feel safe and loved,’ we began to advocate that ‘feeling safe and loved’ is a human right. Every individual has the right to feel safe and loved.

This, again, opened the door to a new horizon for identifying and meeting basic, human needs. Gentle Teaching is for all people, of all ages not only for people who feel marginalized. Gentle Teaching is also a pedagogy⁴ for nurturing and educating children, with or without special needs. Gentle Teaching started in Omaha, Nebraska, more than thirty years ago, and today has branched out to at least twenty-two countries in all continents of the world.

4. A Psychology of Interdependence

A Psychology of Interdependence looks at human beings from a social perspective. Essentially, we all are social beings who can only develop our inherent potentials and intrinsic qualities by interacting with others. As social beings, being and interacting with others is our natural inclination.

A Psychology of Interdependence affirms four basic assumptions about our human nature:

1. All human beings long to feel engaged in an unconditional and interdependent safe and loving relationship with a few important others
2. Around our circle of important others, human beings are social beings and each needs to feel a sense of belonging to a safe community where people respect, and care for each other.
3. The quality of loving and caring for others is intrinsic to our human nature; experiencing this love and care begins to cultivate one’s feeling and perception that (s)he is socially accepted. (As this experience becomes integrated, the person can feel unconditionally accepted, and respond/reciprocate this back to others.)
4. Every individual is gifted with personal qualities and potentials, that can only develop in a genuine and natural way if the person feels safe and loved, and gains a sense that (s)he is part of a safe and loving community.

5. Companionship

When a framework of Gentle Teaching is applied through the practice of caregiving, interactions are guided by practical, gentle steps that create (social-emotional) connections and develop companionship. The framework serves as a practical guide for integrating the empathic valuing of one another, modeling elements of human companionship for relationship-building.

“Companionship is a sense of connectedness. Connectedness to others is the center of the human condition.” -Dr. John McGee

⁴ Pedagogy is the academic discipline that deals with the theory and practice of raising and teaching children in their development to adulthood.

Companionship is a primary key for social-emotional development and personal empowerment. This key unlocks human potential by providing access to intrinsic motivation and one's natural curiosity for learning, and developing one's potentials. Companionship cultivates this natural curiosity. Value and meaning become discoverable and recoverable as elements of companionship are on point with a Gentle Teaching framework.

Companionship is the cornerstone of a Gentle Teaching practice, creating meaningful, human connections between the person and the caregiver. The unconditional acceptance and gentle presence of this relationship establishes trust, and cultivates mutual learning and growing together.

A person learns about companionship through the caregiver's practice that teaches four life-lessons. As a pedagogy, Gentle Teaching teaches four, main lessons: *safe, loved, loving, and engaged*. These four life-lessons are 'the four pillars' of Gentle Teaching.

These four life-lessons model unconditional acceptance of who the person is and gently teaches the person how to feel safe and how to feel loved.

- The person feels safe with the caregiver
- The person feels loved by the caregiver
- The person feels loving towards the caregiver
- The person feels connected/engaged with the caregiver

Feeling safe is more than being safe. It's not about the caregiver's intentions, but how the person is able to interpret what he feels from the presence and interactions of the caregiver. The person's actual experience of these interactions is influenced by a combination of factors, social perceptions, and clinical conclusions. These perceptions are typically or somewhat already in place with narrative scripts (verbal, clinical, social), that represent the person's life story, and are also incumbent upon the person's disability.

Feeling loved means that the person knows, and is feeling in his/her heart, that the caregiver is making a personal connection, and is unconditionally accepting of the person as s/he is, and remains vigilant and present to the loving principles of Gentle Teaching. It means that the caregiver is empathic toward the person's feelings, and all related or unrelated suffering and/or oppression, and does whatever possible to alleviate any sense of distress or disconnection. It means that the caregiver recognizes and honors the person's ability to become known by others as becoming wholly human, and contributes to a coherent, narrative life script that includes past, present, and future aspects of the person's story.

Feeling loving means that the person can reciprocate (reflect back to the caregiver) what has been modeled through elements of teaching companionship. It means that the person is experiencing that it is good to be with others, and loving towards others, and that (s)he can reciprocate these feelings in a loving way. As a person experiences new meaning and new moral memory, his/her empathy and capacity for an active participation in the loving relationship is cultivated.

Feeling engaged/connected means that the person's awareness shifts from being primarily focused inwardly, to including some processing of external awareness, making connections with the interactions of the caregiver. As trust deepens in the relationship, the person gradually makes this outward shift, indicating that (s)he is receptive and appreciative of the gentle guidance and support of the caregiver, even during moments of stress.

The process of teaching these four feelings and the reciprocation usually takes a lot of time, depending on the vulnerabilities and life story of the person and of their earlier experiences in human relationships.

6. Unconditional

The relationship and the feelings involved are unconditional. This doesn't mean that everything the person does is acceptable, but that help is given, promises are kept, and the gentle and safe presence of the caregiver is maintained, regardless of the behavior of the person.

Modifying the behavior of a person through methods of compliance, control and consequences is contradictory to Gentle Teaching. Disturbing behaviors are seen as the outcome of deeper problems and vulnerabilities the person is facing, such as:

Deeper problems

- Frustration due to lack of quality of life
- Traumatic memories of a painful childhood, abuse, frequent punishment or rejection, etc.
- Fear

Special vulnerabilities

- Insufficient inner locus of control
- Not feeling engaged with others
- Negative self-image
- Negative role-model

Acknowledging these deeper problems and vulnerabilities will help to facilitate outcomes that include the person becoming more relaxed and better attuned to his/her environment, and to positive emotions within their environment.

Indicators for the use of Gentle Teaching

- Caregivers give help and keep promises, regardless of the behavior of the person.
- Caregivers don't use violence, domineering strategies or systems of conditional reward to manipulate the behavior of the person.
- The caregivers encourage the loving reciprocity in their interactions with the person.
- When the person feels stressed, the caregivers try to engage with the person and gently guide him through this moment of stress.
- The caregivers express their understanding for the deeper problems that cause disturbing behaviors from the perspective of the person, and remain focused on solving these problems.

7. Tools of gentleness

Teaching feelings of companionship can only be achieved through a process of experiential learning. The only way the caregiver can teach a person to feel safe, loved, loving and engaged, is through interactions with the person.

With Gentle Teaching, the teaching tools are the regular communication tools (both verbal and non-verbal) that we intentionally use in Gentle Teaching, to teach 'safe and loved' and to create a culture of hope.

- **hands** and the way of touching -
- **eyes** and facial expression
- **words** and the tone of the words
- **presence** (physical, mental and emotional presence)

Learning how to use our tools effectively for a practice of gentleness, cultivates awareness. Subtle signals in our communication style convey meaning and value, as we reflect on how we are using our hands, eyes, words and presence.

The way caregivers use these tools may be different depending on the caregiver's own age, gender and cultural beliefs.

While using these tools, caregivers are not only aware of how the person will experience and feel the interactions, but they are also aware of their own feeling and emotions at that moment. If these feelings and emotions are not congruent with what the caregiver intends to express, it will cause confusion.

Touches are a very concrete and a direct way for teaching feelings. Many persons have memories of unsafe touches or even physical or sexual abuse. Therefore, the touch has to be very safe and loving, respecting the integrity of the person, fitting with the self-perception of the person, fitting into the cultural context, and free from any kind of sexual implication.

Many persons harbor the memory that eye contact is used to check whether or not they can be trusted, or as a non-verbal way of communicating a warning for them to behave properly and obey the demands of the caregiver.

Eyes are the most transparent part of the body. Through the eyes, we want to let our soulful reflection become present, so that we may also recognize a soulful reflection through the eyes of the other person. Eye contact and facial expression should be warm, loving and supporting.

Words and the tone of words are not used to put demands on the person or to make the person do something (s)he doesn't want to do. Often the tone of the words is more important than the content.

Words are used for

- uplifting and helping the person,
- developing the dialogue in ways that teach about safe and loved, loving and engaged,

- For inscribing meaning and new moral memory, developing narrative and sharing life stories.

The presence of the caregiver has three aspects:

- Physically he/she is to be near the person with a body language that clearly communicates safe and loved.
- Mindfully, he/she is with the person, without expectations or judgments, having an open mind and level of awareness that is present to the dynamics and circumstances, here and now.
- Emotionally he/she is present with loving feelings toward the person and strives to connect with the feelings of the person, instead of focusing on the person's behavior.

Using these tools to teach feelings of companionship requires that caregivers also develop an awareness of the person's memories of how these tools have been used in their past, and how these memories might be affecting him/her in present circumstances, and how the person is experiencing the way these tools are being used now.

When a person is very disconnected and inward-focused, caregivers have to use enough empathic resonance⁵ to gently their way into his or her space, and create a window in his or her un-chosen wall of "self-protection," through which a meaningful connection can be made, and then support the person in breaking through these walls, these social-emotional, personal barriers.

Indicators for the use of Gentle Teaching:

- Caregivers are aware of the impact of their body language on the feelings of the person.
- Caregivers make frequent, safe and loving contact with the person, without making him/her do anything (s)he doesn't want to do.
- Caregivers use their tools intentionally and with enough empathic resonance that the person can undoubtedly experience the presence and intention of the caregiver.
- Casual and functional interactions (like helping) are combined with personal attention, using the tools of gentleness.

8. Creating a culture of gentleness

For every individual, it's important not only to have companionship with a few important others, but also to be part of a safe and caring group or community of people one can feel engaged with, like family, close friends, home mates in a group home, colleagues at work or the activity center, other kids in the class, etc.

⁵ Empathetic resonance is a feeling of the immediate presence of the other in expressing the living values that the other experiences as giving meaning and purpose to their life. Meanings of Empathetic Resonance and Validity in Visual Narratives: A passion for compassion and loving what we are doing. Jack Whitehead 26 March 2010

Gentle Teaching is not only focused on the individual, but also on developing a culture of gentleness and hope within the group/community, because it is within the community that one can identify themselves as an individual. The community itself should be based on the same four pillars of companionship (safe, loved, loving and engaged).

Important elements of the culture of gentleness are:

From obedience to warm guidance

Instead of setting rules for people and demanding obedience, caregivers and persons talk together about the moral concepts of how they can be with each other in a safe and caring way. When it's difficult for a person to follow these concepts, the caregiver connects with him and gently guides him through the challenging moment.

From behaviors to feelings

The focus is not on the behavior of a person, but on how he feels. When a person gets captured by his emotions or mental illness, the caregiver understands where it comes from and what kind of support the person needs, and offers comfort.

From individualism to community

Persons and caregivers form one, undivided community. Caregivers do not enter any person's space like a 'professional,' but as a friend or companion. Caregivers have no privileges that the persons do not have. They don't talk about the persons in a separate place, and they share with the persons. In this one community, persons and caregivers share their stories, joy and sorrow, and they work and play together.

Valuing individual talents

In the safe and caring community, each individual person is challenged to express self and personal talents in being attuned to others, and in safe and caring interactions with other members of the community.

'Helping' as a bridge to relationships

Helping each other is a natural element of human relationships. Caregivers do not help because they can do it better or faster, but because they want to please and connect with the person. Help is given, even if it is something the caregiver knows the person can do independently. They understand that the request for help is more for emotional reasons than for practical reasons. Help is seen as a way of expressing love towards each other and showing the unconditional nature of the relationship. In a culture of gentleness, caregivers also encourage persons to help each other.

Non-violence

When a person loses his self-control and expresses his stress with violence, the caregiver redirects and absorbs the violence so nobody gets harmed, including the person himself.

From punishment to support

Caregivers understand the many negative side-effects of using punishment, These include:

- Diminishing the person's feelings of being safe and loved

- Damaging the relationship with the caregiver
- Damaging the person's feeling of being part of a supportive group
- Damaging self-esteem

Instead of punishing a person for undesirable actions, caregivers teach coping skills and other paths to solving problems without hurting self or others. The caregiver continues to offer positive support throughout challenging events.

Avoiding conflicts

Whenever possible, caregivers should give the person what he asks for, as long as it does not present harm or danger. The peace created by these actions creates an environment that is conducive to teaching feelings of companionship. People do not have to earn favors or privileges in their own homes.

Positive language

When caregivers speak about a person or write reports or plans, they don't use stigmatizing words; they know these words will influence their own feelings and actions towards the person. Caregivers only use words that value the person's feelings and needs.

Indicators for creating a culture of gentleness

- The team has a plan for developing or maintaining the Culture of Gentleness
- The team periodically evaluates the culture, using the evaluation form 'A Culture of Gentleness'
- Non-violence and absence of punishment
- Caregivers encourage persons to help each other
- Persons and caregivers sit together and share experiences, stories, joy and sorrow.
- No privileges for caregiver
- Use of positive words
- No conflicts over things the person wants and the caregivers are able to give
- Caregivers can identify and validate the person's talents and preferences

9. Supporting Quality of Life

The first focus of Gentle Teaching is establishing companionship and making the persons feel safe and loved. This establishes a strong foundation and invitation for the persons to become fully engaged in their own narrative and life story.

A quality of life model, developed within a framework of Gentle Teaching, recognizes that external conditions can influence one's quality of life, but that quality of life itself has to do with the feelings of a person, and not with these external conditions as such:

In Gentle Teaching we relate quality of life with how satisfied a person feels about how his dreams and longings are integrated and realized in his life, whether or not he is fully aware of them⁶.

A person's dreams and longings are expressive of the eight basic human values, universally identified as the conditions for a sense of well-being⁷:

Feeling safe: feeling safe among people, feeling safe to express your opinion, feeling safe in the place where you are, feeling safe to go into the community, being free from all kinds of feelings of fear, etc.

Having safe and loving relationships: feeling companionship, feeling cared for by people a person meets regularly, feeling helped and respected by people you only meet occasionally or in public areas. Feeling that the other person appreciates it when you help them or express warm feelings towards them.

Feeling a sense of connectedness: feeling connected with, and participating in the world around you. The world of people, facilities, events, as well as the more abstract world of religion, ideas, philosophies, music, art, etc.

Body integrity: having a good feeling about one's own body, the body being respected by others, feeling healthy and energetic, taking pride in how you look and how you are dressed

Feeling self-worth: being proud of who you are and the self-respect that comes with this feeling, feeling valued by others for who you are, rather than for what you do, being aware of your own talents, being seen as an individual, being able to make your own choices, etc.

Feeling secure: having the daily routines or structures you need, having a religion that gives support, having a person who is always there to support you, having your own meaningful rituals, having plans for tomorrow or the future further away.

Having meaningful daily activities and a meaningful and valuable day: being able to develop and express your talents in what you do, liking the activities you do, finding meaning in doing activities together with others, earning money.

Feeling inner contentment: getting support when you are overwhelmed by emotions, being free of traumatic memories or psychiatric disorders, being able to express your emotions, feeling relaxed.

The extent to which people are able to experience and fulfill their dreams and human needs, determines the quality of life they experience. This is what we mean when we discuss quality of life.

⁶ WHO defines quality of Life as individuals perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns

⁷ The expressions given for each of these basic values are only examples; Individual ways of expressing desires and needs are varied and unlimited by expression, but are related to one or more of these basic human values.

Most human behavior is related to quality of life. People do things to get what gives quality of life, or avoid what conflicts with their quality of life. And they express joy when they feel quality of life, or express disappointment or frustration when they don't.

When a person is frustrated, caregivers try to identify how s(he) is experiencing feelings in relation to the eight basic values of quality of life. These eight values derive from universally basic human needs for survival and development. Caregivers try to avoid frustrating moments for the person by teaching the person how to get what he wants by himself, or they give him what he wants, or find an alternative way to satisfy the basic value involved.

It is helpful for the caregiver to gain an understanding of these quality of life values, and how they are defined and utilized, as they give a full picture of the aspects of human development and fulfillment that are relatable to the person's experience, when trying to make meaningful connections with the person. It is the meaningful connections and activities, and the creation of new moral memory with the person, that has an integral, transformational effect on the person's ability to experience life overall, and this is the person's quality of life.

When we try to teach the person something new, we begin by relating it to one or more of these eight, quality of life values. These areas of value comprise the primary aspects for social-emotional development, and, as a whole, are naturally 'wired' to a human being's intrinsic motivation to learn and explore and discover and do what he has learned.

Indicators for supporting Quality of Life:

- A personal support plan describes what will be done to improve a person's quality of life and reduce any frustrations caused by a lack of quality of life.
- The personal support plan of a person includes what the person wants or needs in order to experience quality of life.

8

10. Personal/professional development of the caregiver

Every caregiver has a unique relationship with each person. Entering into an interdependent relationship is not possible if the caregiver is not willing and able to self-reflect, understand how personal beliefs shape their views, feelings and actions, and shift perspectives. It requires a continuous effort of self-exploration and the developing of effective competence.

Each caregiver brings in their own personal life story and experiences. Therefore, every caregiver will develop their own, effective way for using the tools of gentleness.

Gentle Teaching is not about changing the person. It's about mutual change that starts with the caregiver's change of perception.

⁸ Whether or not this plan, and other plans we talk about, is in a written out document, may depend on the culture of the agency or country.

The change of the caregiver is on the level of personal beliefs, actions and emotions.

- Beliefs can be valid, but they may not always be relevant in the moment with a person.
- Actions are focused on teaching safe, loved, loving and engaged, instead of modifying behaviors or holding on to rigid working patterns.
- Emotions that hinder the development of companionship with a person are released or transformed into joy and compassion in an authentic way.

Indicators for the caregiver development

- Each caregiver has a personal plan that describes how he will develop the competence needed for effective use of Gentle Teaching
- Each Personal Support Plan (for the person being served) includes a section where the caregiver describes what they can see for themselves that they have to learn and develop in order to teach the person the feelings of companionship.
- Caregivers frequently self-assess and evaluate their professional development, using the tool of a personal plan to become a Gentle Teacher.

11. Methodological aspects of Gentle Teaching

Gentle Teaching is not a methodology that describes exactly what steps to take in which phase of the process, like a GPS telling you exactly how to go from A to Z.

The methodology of Gentle Teaching is like a toolbox with several tools you can use, and with guidelines on how to use them. At each moment you have to decide which tool you need for the next step and how to use it.

The caregiver works with the person to create a safe and loving environment, both for his living and learning, making sure the person feels safe and loved. This is the beginning. Following are some of the essential characteristics you will find in the practice and applications of Gentle Teaching as the relationship builds and the journey unfolds:

Goals

Formulating goals is helpful to give direction to your actions and to evaluate the progress. Goals in a Gentle Teaching support plan are never focused on changing behaviors of a person; 'goals' are created for developing companionship or for achieving a positive outcome, relating to one or more of the basic values of quality of life. In this way, goals are meaningful for the person.

What is happening in the moment of interaction is always more important than the goal you had in mind when you started the interaction. If the person is not receptive to what you particularly had in mind for the interaction, you should let go of the goal and the plan and, in that moment, and re-establish a feeling of being safe and loved.

Stretching

Stretching is an important technique used in Gentle Teaching. At the beginning of developing companionship, you are mindful about asking things from the person that may cause stress.

As possible, you give the person what he wants. After establishing a foundation of safe and love and of trust, you slowly ask more from the person, but never so much that the person disconnects. Through this stretching, you teach the person that, in a stressful situation, he/she can rely on you, and that together you will get through challenging moments.

Sharing

Being able to share is fundamental in a social environment. Persons who are in an egocentric position, or who are afraid that they won't get what they need for themselves, are not able to share with others. Teaching a person to share, therefore, begins with letting him experience that sharing does not mean not getting enough for self. Then you slowly teach him that sharing is good. For some persons this can take a long time.

In this process of teaching the person to share, you emphasize the joy of making others happy by sharing with them. You teach the person that it's good to be with others and do things for others, to share the space, toys or other possessions, food, attention, playing or working together, etc.

Dialogue

Dialogue is an ongoing interaction with a person, through which you exchange feelings, experiences, thoughts, insights to give meaning and value. A dialogue can be verbal or non-verbal. It always starts where the person is and the caregiver has no hidden agenda; only a theme for the dialogue. This theme is usually about the importance of friendship, helping each other, feeling safe, living your dreams, etc. A dialogue is not about behaviors, tasks to be done, or something the person did wrong.

Reframing

In an interaction, many different images can play a role.

- The image the person has of you and your tools of gentleness
- The self-image of the person
- The image you have of the person and any behavior
- The image you have of yourself.

You should be aware of all these images and when there are images that are counter-productive in developing companionship and community, or for the self-esteem of the person; you would deliberately create new, productive images.

Faultless learning

If we want to teach a person new skills or how to perform an activity, it's important that they feel unconditionally loved by us during this process, and that they are not frustrated or fearful of making mistakes. Make the steps small and/or give as much support as needed to make sure that what you do together always appears successful in the eyes of the person.

Indicators for using the Gentle Teaching Methodology

- Goals are created from the perspective of companionship and/or the basic values of quality of life.
- Caregivers are flexible and let go of a goal for an interaction if the person isn't receptive in the moment.
- Caregivers are aware of the elements of the methodology they are using at any given moment
- The caregiver prevents frustration by giving enough help with activities

Love cannot be sentimental; as an act of freedom, it must not serve as a pretext for manipulation. It must generate other acts of freedom; otherwise, it is not love. Only by abolishing the situation of oppression is it possible to restore the love which that situation made possible. If I do not love the world – if I do not love life – if I do not love people, I cannot enter into dialogue.

Paulo Freire in *The pedagogy of the oppressed*.

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