RA Helping Skills
Your Role as an RA

As a Resident Assistant you need to be a good listener, advisor, and/or support person to your residents. There are times when you need to use basic counseling, such as:

I. Attending Skills
II. Communication Techniques
III. Confidentiality
IV. Advising
V. Referral

Your role is to listen, advise, support, and refer.
I. Attending Skills

- Attending means that you are engaged and available to the resident with whom you are interacting.

- Attending to the resident involves being a good listener and creating an appropriate atmosphere where the resident feels comfortable sharing.
If a resident requests to talk to you about something important or the resident seems to be upset or needing some assistance, do:

- Determine if it is urgent or not.
  - If urgent, take steps to address the issue immediately. If not urgent, decide if you have the time to listen or if you need to set a time and place to talk.
- Be aware of the environment and your ability to focus.
  - Ask the resident where he/she would feel comfortable talking. Make sure it is a place with minimal distractions, interruptions and/or outside disturbances. Turn off the music, TV, cell phones, and/or the computer.
  - You have your own studying, family, relationships, and stuff to deal with, and if you are not in the right frame of mind to attend to a resident’s issues, then it is best to admit that and set up a time when you can be focused on the resident and his/her issues.
- Be honest about your available time.
  - If you only have fifteen minutes to talk, then only talk for fifteen minutes, or set up a different time to talk when you have more time. Don’t spend more time than you can handle addressing the situation. If you get a reputation that you are always available, then you may find yourself getting drained or frustrated because others don’t seem to respect your time and space. Communicate your limits early and often.

Avoid:

- Tuning out the resident because you have judged the resident or topic to be uninteresting.
- Faking attention and pretending to understand what is being said when your mind and attention is somewhere else.
- Showing your emotion (yawning, raising your voice, changing the subject).
  - Keep the focus on the resident and his/her concern.
Active listening is a way of listening that involves more than just hearing someone’s words. It involves seeking to understand the speaker’s situation, meaning, and emotions.

**Do:**
- Listen for content and feeling.
- Show you are listening by giving a short paraphrased statement about the content and/or feeling that was expressed and heard
  - Content: “I heard you say your roommate uses your stuff all the time without asking.”
  - Content & Feeling: “I heard you say your roommate uses your stuff without asking and that seems to make you feel frustrated.”
- Show interest by asking relevant questions and staying focused.
- Ask questions for further information, or if you do not understand, particularly open-ended questions.

**Avoid:**
- Asking “Why” questions
- Asking close-ended (“Yes” or “No”) questions
- Pressuring your resident to share more than he or she wants to.
Examples of Good Active Listening:

**Resident:** “I miss my family and friends. It’s like I’m just walking around in a daze and nobody notices or cares.”
**RA:** “It sounds like you miss home and your friends.”
**Resident:** “Yes. I’m not sure how to handle it.”
**RA:** “How do you feel?”
**Resident:** “I guess I’m just homesick and feeling a little lonely.”

**Resident:** “Every time I start studying, my roommate turns up the music.”
**RA:** “How do you react?”
**Resident:** “I don’t say or do anything. I pretend it didn’t happen.”
**RA:** “What would you like to do or say when it happens?”

**Resident:** “I’m so behind in my classes. I feel I can handle the 18 credits, but maybe I’m just not smart enough.”
**RA:** “You seem to be doubting yourself and seem scared when you think about how behind you are.”

**Resident:** “My parents just called and told me that they probably couldn’t afford to pay for next semester. They want me to take a semester off and get a job. I don’t want to leave Gannon.”
**RA:** “You sound scared that you might have to leave.”
**Resident:** “Yeah, but I think I can handle work and my classes at the same time.”
**RA:** “What are your options?”
II. Communication Techniques: Verbal

- Listen to the content of what is being said. Try to remember the important details. Resist “figuring it out” before you have listened to what the resident is saying.

- Listen for words, phrases, or feeling words that are repeated. What is said immediately before or after the word ‘but’ is important because it will demonstrate contradictions, sources of anxiety, frustration, or fear. Ask the resident to help you understand what they mean when they say “I like it here, but I want to go home.”

- Be patient. If you listen well, the resident will be more inclined to share how they are feeling with you. Residents may also need some time to build trust before they will say what is really going on.

- Notice that verbal attending has more to do with listening than talking.

**Avoid:**

- Being judgmental. Be aware of your own biases and values. If you feel your personal beliefs will get in the way of being supportive then it is appropriate for you to tell the resident that you are not comfortable handling this situation and you will refer the resident to the RHD.

- Trying to take notes and writing down everything that is said in a meeting with a resident. After the resident leaves take some time to write down the important points that the resident communicated.

- Sharing personal information to get your point across. When you are talking about you, you are not listening to the resident.
II. Communication Techniques: Non-Verbal

**Do:**

- Be aware of your, and the resident’s, body language and tone of voice.
- Face the person and establish/maintain good eye contact.
- Be aware of and respect personal space.
- Keep an open posture. Crossed arms and legs may be comfortable, but it can convey you as being unapproachable or uninterested.
- Be aware of non-verbal behaviors that contradict verbal behaviors (i.e. A resident may say, “Yes,” while shaking his or her head to mean “no.”)
- Stay calm and relaxed.

**Avoid:**

- Wandering eyes; tapping fingers, feet, or pencils; snapping of gum; slumped posture, or fidgeting, as this communicates the message that you are really not listening.
- Asking questions that have nothing to do with the resident’s concerns.
III. Confidentiality

- Confidentiality means that a person can share with confidence and know that what he or she says will not be told to others, including: other staff members, residents, friends, family members, etc.

- For some situations, it is possible to keep things completely confidential between the resident and yourself.

- For other situations, it may be necessary to share information with someone else, like your RHD and/or UPD.
Keys to Confidentiality

Do:

- **Be honest and upfront.** Let your residents know that you will do your best to keep things confidential, unless it is absolutely necessary.

- **If you are going to share the information, always inform the resident first.** Never share secretly. You will only share what a resident tells you when you have legitimate reasons. Explain the reasons to the resident and ask the resident to understand your role as an RA. The resident may or may not understand, but your primary responsibility is the health and safety of your residents.

- **Know when to call a “time out.”** If another RA is telling you about a confidential conversation, then gently remind them that they should keep it confidential, or talk with their RHD or a counselor.

- **Seek help if you need it.** Many situations are tricky and you will not always know if you should, or should not, break confidentiality. If in doubt, it is best to consult with an RHD or counselor to review what options you have and what is the best way to proceed.

Don’t:

- **Make promises you can’t keep.** Never promise that you can keep something confidential. Breaking promises will only lose you the trust you’ve gained from your residents.
IV. Advising

After listening to your resident, the next step is to brainstorm ideas.

Do:

- Create an action plan.
  - Ask the resident what he or she hopes to accomplish.
  - Ask for his or her ideas first.
- Encourage the resident to be open-minded.
- For roommate disagreements:
  - Utilize the Roommate Agreement Form, if possible.
  - Determine whether or not you need to meet with your resident’s roommate, either one-on-one, or with the resident.
  - It may be helpful to have the resident write out what he or she plans to say to the other roommate.
  - Encourage residents to avoid “You” Statements.
    - “You” Statement: “You never do the dishes.
    - “I/Me” Statement: “I feel that I always do the dishes.”
  - Come up with a back-up plan.
- Let the resident decide the best plan of action, under your guidance.
- Make sure everyone is respectful of one another.
- Follow up with the resident.
  - Ask about what worked and what didn’t.
  - Ask about what he or she learned from the process, and what he or she would do differently next time.
  - Refer to your RHD, UPD, or Counseling Services if necessary.
V. Referral

- Refer to your RHD, UPD, or Counseling Services if necessary.

**SUNY Cortland Counseling Center:**
Van Hoesen Hall, Room B-44
Phone: (607) 753-4728
http://www2.cortland.edu/offices/student-development-center/counseling-center/index.dot
Tips

• Not all residents want help; allow residents to come to you with problems, unless you believe the resident may be in danger.

• Not all problems can be solved and not all residents are interested in taking responsibility for solving their problems.

• Some residents will seek you out to just talk out a problem and are not looking to you for a solution. By just listening, reflecting, and asking what he or she thinks needs to be done, you can be helpful.

• Believe in your residents. Each has the potential for finding and getting what he or she wants and needs.

• Try your best to help the resident find solutions and know your limits.

• Ask for help if you need it!