Guide 3 Annex 1: Training exercises and tips

In this Annex you will find practical tips in case you are using the Guides in an education or training setting.

We do this to encourage you to use learner-centred approaches instead of lectures. Learning, especially on a topic like changing attitudes (on stigma), does not happen by lectures but demands a personal learning process. Most exercises therefore stimulate active participation and relating the material to the participants’ own context.

This Guide is not a training course or programme. You can use the exercises which suit you, adjust them to your situation or only let them inspire you.

At the start of each Guide you will find the most basic learning goals of the theme. You can adjust those to the specifics of your participants, add, remove or modify.

There are no specific instructions for materials, as the contexts of users of this Guide differ. Make sure you have thought about:

- **Something on which you can write or draw big enough for the group to read** ((digital) whiteboard, flipchart and felt pens, blackboard and chalk or even the wooden/concrete floor and chalk or sand and a stick).

- **Papers for the participants to write on** (Post-it notes, small paper and tape).

- **Something to allow the group to choose sides** (red and green papers to vote, tape or a rope to divide the room).

Learning objectives for Guide 3

After working through this Guide, you should:

- Understand that stigma reduction interventions are relevant in many different disciplines.
- Understand that before designing a stigma reduction intervention:
  - It is important to identify the sources of the stigma you plan to tackle.
  - It is important to assess what you would like to change with your intervention, and how you think your intervention will influence this change.
- Understand why you should involve persons affected by NTDs in interventions, and that there are different ways or levels in which this can take shape.
- Have an overview of possibilities for stigma reduction interventions per source type (communities, health services, organisations and institutions, laws and policies, media).
Exercise 1: Warming-up exercise

This exercise can be used as a starter to Guide 3. The objective is to have participants think about how stigma can be positively or negatively influenced by sources in the media.

Steps:
1. Start with a video – for example, Yomeddine, mentioned in chapter 5
   https://www.youtube.com/watch?v=bjO6pmjHs3U
2. Ask the learner what they think of a movie like this. Do they see them often? Why not?
3. Have a group discussion: how does media have an effect on stigma?

Exercise 2: Sources of stigma

In this exercise, participants explore sources of stigmatisation. The objective is to create awareness that stigma can be reinforced or initiated by media, laws, doctors, community figures and institutions, among others.

Preparation:
Make separate cards and write on each one a different source of stigmatisation:

- **Community** (family, local faith-based institute, traditional healers, local leaders, spouse etc.)
- **Health services** (doctors, nurses, non-medical staff, students)
- **Organisations and institutions** (school, police, micro finance institute, workplace)
- **Laws and policies** (local laws, national laws, government policies, bureaucracy)
- **Media** (news media, soaps, websites)

Steps
1. Introduce the cards 1 by 1 to the group.
2. With every card, ask: ‘How could [the name on the card] have an influence on stigma?’ Have a 2- to 3-minute discussion about this.
3. Divide the group of participants in smaller groups of 2 to 4 persons. Give them all 1 or 2 of the 5 ‘sources’ cards.
4. Ask the groups to think about a **concrete example** how the people or thing named on the card negatively influences stigma. It can be a short story, a little play, or an anecdote. Make sure at the end of the exercise you have 1 example under each heading.
5. Ask groups to show or tell their example. Ensure it is concrete and actual.

6. Make sure as a trainer you have some stories prepared in case participants do not come up with concrete examples.

Exercise 3: Involving affected persons in the design

This is a long exercise that can take some time. It makes participants think critically about interventions. The objective is to support participants to go through some steps of a project design phase.

Steps:

1. After you have heard all the stories and plays of exercise 3, write on the board or flap the following questions:
   - Imagine we can CHANGE this story. We can make it a situation in which stigma is positively influenced. What does it look like?
   - What things need to change to achieve this? Write them all down.
   - Who is involved in that change? Write them all down.

2. Let the participants go back to their groups and discuss the 3 questions.
   NOTE: Alert the groups NOT to discuss action or interventions yet! Only the dream situation and the actors and factors that need to change.

3. Imagine we are designing a project to reduce stigma in the stories and dreams that we just discussed. What is an absolute necessary step before we start thinking about interventions?
   NOTE: You want the group here to discover that they need the involvement of the affected persons to design the project to avoid making wrong assumptions. Let the group brainstorm. As a trainer you guide the brainstorm by asking probing questions, like ‘If you had funding, could you design the project fully in the correct way?’ ‘If you had permission from authorities, could you design a perfectly fit project?’

4. Read the chapter on ‘Interventions by source type’ carefully.

5. Ask the groups to answer the 4 questions for the ‘change’ in the source:
   - In what way you will involve affected persons in the design of the project?
   - What possible interventions you can think of that will influence the stigma at the source?
   - What people/stakeholders need to be involved in the project?
   - Does an intervention like this exist in your context? Is it successful? Why or why not?