

## Guide 4 Annex 1: Training exercises and tips

In these Guides you will find practical tips for using this manual 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 effectively simply by giving information or knowledge, 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 use them to inspire your own ideas.

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. However, in general, make sure you have thought about:

- **Something on which you can write or draw big enough for the group to read** (e.g. 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 4

After working through this Guide, participants should be able to explain:

1. Why assessment of stigma and mental wellbeing is important.
2. The difference between quantitative and qualitative methods and the advantages and disadvantages of each.
3. How to select the best assessment method(s) to use for their purpose and context.
4. Which instruments are appropriate for use in NTD-endemic countries and can be used across NTDs.

### Exercise 1: Warming-up exercise

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You can use this exercise as an introduction to Guide 4. The objective is to have people start thinking about the (im)possibility of measuring stigma.

#### Steps:

1. Ask a participant to explain in a few sentences what stigma is.
2. Divide the room in 2, and mark the sides with YES and NO.
3. Ask the group, 'Do you think that stigma can be measured?'
4. Ask participants to choose a side – either YES or NO.
5. Ask some participants to explain why they think it's possible or not. Allow participants to change sides during the conversation.

## Exercise 2: What do we want to know?

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In this exercise, participants think about the purpose of measuring stigma and mental wellbeing. The objective is to have participants think about the actual use of measurements before deciding how to measure.

### Steps:

1. Give the following introduction: 'Before we start talking about *how* we can measure stigma, I would like to think about another question: *Why* would you want to be able to measure stigma?'
2. Let participants buzz in sets for a few minutes.
3. Write all answers on the left of the board or flip. Make sure you have at least 5 to 7 reasons (you may need to add some yourself if participants do not come up with sufficient purposes). Examples include:
  - ✓ Donor funds
  - ✓ Media story
  - ✓ Advocacy at national level to adjust laws
  - ✓ Input for your health clinic
  - ✓ Awareness for e.g. for a school/workplace
  - ✓ Baseline and monitoring)
  - ✓ ...
  - ✓ ...
4. The different purposes demand different information. Ask the group to think about examples of information that one would need for the mentioned purposes. There can be a number of examples for each. For example:
  - Media/awareness: personal stories of children who have no access to school because their parents suffer from leprosy.
  - Donor: data on how many patients report better family ties after families participated in the family self-help groups in the last year.
  - Advocacy at national level: data on how many people were denied a job because of a law that allows employers to discriminate.
  - Number of students who are more open to handicapped co-students after all classes had a session with a leprosy champion.
5. Conclude: There is a variety of information to be measured: who, what, qualitative, quantitative.

### Exercise 3: NTD Morbidity and Disability (NMD) Toolkit

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In this exercise, participants will explore the NMD Toolkit and present a method. The objective is to get participants acquainted with the InfoNTD website, <https://www.infontd.org/ntd-morbidity-and-disability-nmd-toolkit>, and how to use it.

#### Steps:

1. Ask participants to sit with 2 or 3 together and open the website.
2. There are around 7 tools that have to do with stigma. Ask the group to find the names and list them. Allow some time for this. Encourage participants to open 1 or 2 documents to find out more about the method.
3. Ask the groups if these are qualitative or quantitative tools and let them explain why.
4. Have a brainstorm on qualitative tools or methods participants know.



#### Exercise 4: Choosing a method for assessment

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This exercise is an alternative way to make participants aware of the pitfalls when choosing a method. By making it a quiz, you encourage participants to actively search for answers. If you have a little prize for the winner, it will make it a real contest and more exciting.

#### Steps:

Tell participants you will do a contest:

- You have 10 minutes to write down points that you should take into account when selecting a method for measuring stigma.
- You get 1 point for each good answer.
- You can use the Guide as a reference.