

8 Facilitation skills

Most of the participants on the Oxfam course in Kosovo, if they had had any formal education at all, were used to being taught in classrooms where the teacher set the agenda for learning; where students were expected to absorb information passively, without questioning what they were told, or being invited to contribute insights from their own experience; where the learners sat in rows of desks, facing the teacher, with whom all the interaction took place. If these people were to become effective trainers of adults, they needed to unlearn many of the habits that they had acquired at school and learn new skills of communication and organisation, more appropriate to the needs and interests of disabled people's groups and the staff of aid organisations and official agencies. For a start, they needed to understand that adults learn in very different ways from young children.

8.1 How adults learn

8.1.1 The 'process of learning' exercise

Time 50 minutes

Objectives For participants to examine their own ways of learning.
To appreciate how other adults learn.
To understand the conditions that encourage adult learning to take place.

Preparation Write the questions listed below on a large sheet of paper, or on a blackboard.

Process Explain the purpose of the session. Then give each person a piece of paper and ask them to think about and write down two things that they have learned outside school, as an adult, that are important to them and that affect their daily life. These should be things that they can actually remember learning.

Then each person should choose one of their personal lessons and think through the whole process of how he or she learned it, using the following questions, written up on large letters, as a guide:

- Why did you learn it?
- Who helped you to learn it?
- What was the relationship between you and the person who helped you?
- What was the situation in which you learned it?
- In what way did you learn it?
- Can you remember anything that made your learning easier or more difficult?

Each person reflects or writes for 10 minutes. Then ask participants to share these points in pairs, or groups of three, for 10 minutes.

Bring the whole group back together and invite them to report their conclusions, which you (or a reporter) should record on separate pieces of flipchart paper under the following headings:

- **Content:** What was learned?
- **Situation:** In what context?
- **Method:** How was it learned?
- **People:** Who else was involved?

Summarise the points made by the group, and include the four major points about adult learning listed in Handout 4. They are based on the ideas of Malcolm Knowles, who pioneered new methods of adult education.

(This activity was adapted with permission from *Training for Transformation* Book 1, by Anne Hope and Sally Timmel. For details, see the 'Resources' section at the end of this book.)

HANDOUT 4

The psychology of adult learning

1. Adults have a wide experience of life and have learned much from it. They learn most from their peers. So facilitators should help them to share their own experience and create a situation where they are encouraged to engage in a dialogue with one another. Let them sit in a circle, where they can see each other's faces, so that speaking and learning can both be helped by making eye contact.
2. Adults are interested in and learn quickly about things that are relevant to their lives. So the facilitator needs to create a situation in which they can share in the planning, choose the topics, and participate in regular evaluation of what they are doing.
3. Adults have a sense of personal dignity. They must be treated with respect at all times and never made to feel humiliated or ridiculous in the presence of others.
4. As adults grow older, their memories may get weaker; but their powers of observation and reasoning often grow stronger.

(Adapted from *The Leader Looks at the Learning Climate*, by Malcolm S. Knowles, published by Leadership Resources Inc., Washington DC, 1965)

8.1.2 Creating a positive learning environment

- Facilitator's notes** This is especially valuable for new groups of disabled people, or those who need to review what they do and how. It may be helpful to refer also to activities in Chapter 10 ('Action planning').
- Time** 30 minutes
- Objectives** To give information about four factors which create a positive learning environment.
To encourage participants to consider the application of these factors to their own experiences.
- Preparation** Prepare copies of Handout 5 for each participant.
- Process** On a large sheet of paper or a blackboard, draw the central part of a flower, with the stem and leaves below it.
Tell participants that the flower represents the group. Label the central part of the flower 'Group'.
Draw on it one large petal, labelling it '*Acceptance*'; use Handout 5 to explain the significance of this.
Repeat the process for the remaining factors that create positive conditions for learning (*Sharing information and concerns; Setting goals; Organising for action*).
Allow time for comments and questions. You can lead into a discussion by asking participants how these four factors relate to their own experiences of learning. And to the ways in which learning happens in their community. And to the ways in which they work (or intend to work) as facilitators.

HANDOUT 5

Creating a learning environment: four needs of the group

1. Acceptance

To begin with, people need assurance that they are truly accepted as they are – that it is safe to express what they really think and feel in the group or workshop. The unique value of each person, with his/her own experience and insights, needs to be recognised. People, like plants, need the right kind of ‘climate’ in order to grow, and the facilitator has a special responsibility for developing such a ‘climate’ in the group. Unless there is a spirit of respect and acceptance, people will not be free to learn, to rethink their old opinions, to change and grow, or to share their thoughts and feelings fully. The group will not grow into a real community.

2. Sharing information and concerns

People working or learning in groups need information about each other: their experiences, ideas, values, and opinions; and about the issue that the group is considering, which they should perceive as relevant to their lives. They need to work out for themselves what they need to know, what to accept and use, what to set aside.

The facilitator also needs an opportunity to share his/her information and concerns. But this should usually be done after the other members of the group have made their contributions, and should be offered for discussion, not imposed on the group.

3. Setting goals

The third need of any group that is learning together is to set goals clearly. This applies to the framework of the workshop itself, and to any action-planning activities within the workshop. Unless the goals are created by the group, the participants will not be interested or committed to implementing. Unless the goals are clear to all, people become frustrated. The way in which decisions are made is directly related to the degree of commitment that people feel to them when carrying them out.

4. Organising for action, or putting learning into action

Once goals have been set, the group needs to make definite plans to reach these goals and carry out decisions. Named people should take responsibility to do agreed, specific things, and they should be

accountable to the group to get these things done, where appropriate. That is why they should accept these responsibilities publicly, where possible. This implies the need for a structure which is appropriate for the group and which will ensure that one person will not assume all the responsibility or control all the actions.

It is essential to check how participants feel about a group or learning event, and the plans made; therefore an evaluation is needed immediately afterwards, and (where appropriate) again some time later, to make sure that plans are working effectively and that all are carrying out their self-chosen responsibilities. This second evaluation can be planned before the first meeting/workshop finishes.

These four needs should usually be met in this order in a meeting or workshop, but Gibbs points out that often they are not met once and for all. Any one of the needs can occur again at any point, and the best facilitators are those who are sensitive enough to recognise the need and find a way of meeting it.

(Adapted with permission from *Training for Transformation* Book 1, by Anne Hope and Sally Timmel, and *Basic Reading in Human Relations Training*, Book 1, by Jack Gibbs, published by the Episcopal Church, p.23.)

8.1.3 Stages of learning

Time 30 minutes

Process Introduce the topic: ‘We discussed in the previous exercise how we learn as adults. We are now going to consider some additional information about the process of learning. It will help you as group or workshop facilitators to support group members to learn.’

Explain that when we learn something new, we go through several stages. These have been described as follows:

- 1 **Unconscious ignorance:** this is the stage before actual learning starts, when you don’t know what you don’t know. Ignorance is bliss. For example, if you don’t know any disabled people in your town, you are unaware of the difficulties that they encounter in daily life, and you assume that everything must be OK.
- 2 **Conscious ignorance:** now you become aware of what you don’t know. This can be a difficult time, because knowing that you don’t know something can damage your self-confidence, make you feel insecure, confused, even angry and defensive. These are normal reactions.
- 3 **Conscious knowledge:** by this stage you have learned enough to be conscious of what you know (like when you have just passed your driving test, but still have to make an effort to find the gears).
- 4 **Unconscious knowledge:** by now you have fully internalised what you have learned; it is in your subconscious mind, and you don’t have to think consciously about what you’re doing in order to do it.

As the facilitator working with a group of people, you will find that different people will be at different stages of this process at different times. If you can identify where people are, you can help them to move on to the next stage. The most difficult stage is that of conscious ignorance. If you can recognise what people are going through, you can help them to develop the confidence and motivation to keep going.

Also, as the facilitator, you will probably know your subject so well that you no longer have to break it down into steps, or think consciously about it. To be a good facilitator – to be able to communicate and share your knowledge with participants and help them to find their route to knowledge – you have to go back to stage 3, conscious knowledge, to think through what you know and how it is done. For example, if you want to teach someone to cut hair, you need to go back to the time when you had to think carefully about everything you did, and break down the process into steps – what to do first and how, what to do next and how, etc. – explaining and demonstrating each step.

8.1.4 Rates of learning

Time 20 minutes

Preparation Make copies of Handout 6.

Process Introduce the topic: 'Different people learn at different rates and different speeds. If you are the facilitator of a group or workshop, you can help participants better if you are aware of this.'

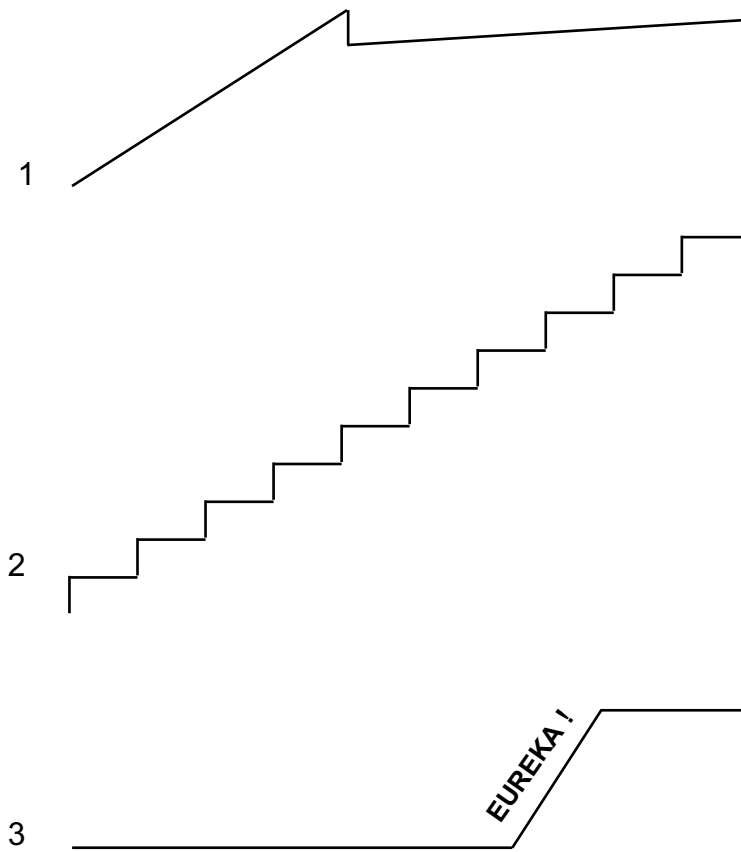
Copy the diagrams from Handout 6 on to a large sheet of paper or a blackboard, and explain the drawings:

1. Some people seem to learn a lot very fast, then they reach a peak and their learning levels out on to a plateau. They are often excited to learn at first, but they will probably need support to maintain their motivation after the initial enthusiasm.
2. Others seem to go more steadily, step by step, with many small plateaux between phases of progress. On the plateaux, learners may feel that they are making no progress, but these are in fact valuable opportunities to consolidate what has been learned so far and to prepare to move on to the next step.
3. Others seem to learn nothing for a long time, but suddenly, somehow, everything makes sense to them, and *Eureka!*: they have achieved their goal. The role of the facilitator is to help to maintain their motivation until they reach this point.

Allow time for questions and comments from participants. Can they identify their own typical learning rates?

HANDOUT 6

Different rates of learning



8.1.5 Components of training

Time 40 minutes

Objectives To review the elements that make up an activity or exercise.
To suggest a framework that facilitators can use when designing and/or facilitating learning activities.
For participants to analyse how the components fit together in an actual exercise.

Preparation Make copies of Handout 7.

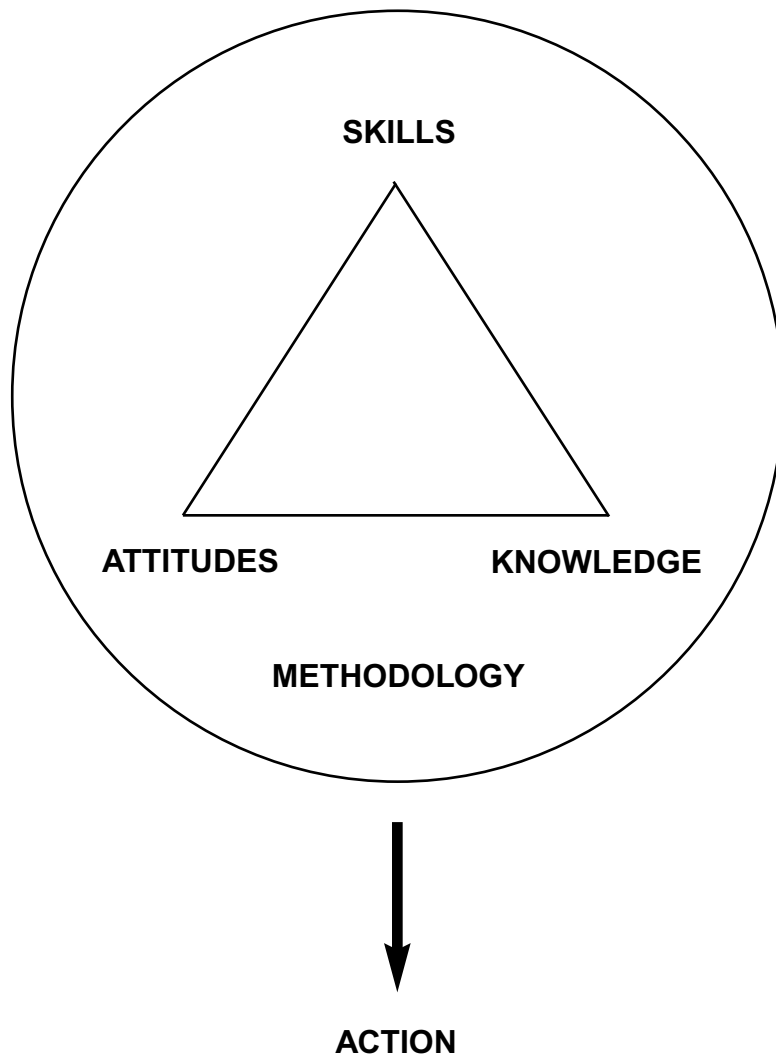
Process Introduce the topic by explaining that all effective training involves certain processes, as follows:

- 1 **Setting objectives:** facilitators and participants together should agree why they are taking part in the training, and what they want to achieve.
- 2 **Presenting the content**, which consists of the following components (illustrated in Handout 7):
 - *Skills:* how to do something; for example, how to listen to others, or how to motivate other disabled people to become activists.
 - *Knowledge:* what we know about something, for example, legislation about human rights.
 - *Attitudes:* how we think or feel about something, for example, a belief that disabled people are people, not cases for medical treatment or intervention by social services.
- 3 **Applying the methodology**, which should always be participative and should accommodate participants' different learning needs.
- 4 **Agreeing on further action:** what will happen as a result of the training – both in personal terms and in organisational/professional/political terms?
- 5 **Evaluation:** what was successful/OK/not successful? What did participants like/not like? Did we achieve our objectives? What will we do differently in future? What follow-up is necessary? What shall we do next?

(Based with permission on 'First Steps', published by Amnesty International)

HANDOUT 7

Components of training



ACTION

8.1.6 Whole-group activity

Time 30 minutes

Process With the whole group, facilitate an analysis of an activity that you have done together – maybe the ‘Process of learning’ exercise (8.1.1 above). Ask participants to break down the activity into its constituent parts:

- What were the objectives?
- What was the content – skills, knowledge, attitudes?
- What change could the activity lead to (theory into action)?
- How effective was it, and how could it be improved (evaluation)?

8.2 Facilitating adult learning

We use the term ‘facilitator’ throughout the manual, but we recognise that in some circumstances other terms, such as ‘animator’ or ‘moderator’, might be more meaningful, or may be more easily translated. Whichever word is used, the purpose of the role is to facilitate adult learning, as described in the previous section: by supporting and motivating people to learn by reflecting on their own experience and that of others.

After an activity which will help the group to define facilitation (8.2.1), there is a section devoted to facilitation skills. The exercises, presentations, and discussions introduce some of the main skills required by facilitators. Within the structure of a workshop, these can either be treated as a separate section, or introduced at various stages throughout the course. Where possible, a variety of methods is given for each skill.

Listening skills

- 8.2.2 Listening exercise (2)
- 8.2.3 Discussion of good and bad listening

Communication and observation skills

- 8.2.4 Open the day
- 8.2.5 Guessing game
- 8.2.6 Observation exercise

Fostering participation and supporting diversity

Listening to the other members of the group and showing respect for them are vital ways to encourage people to take an active part in a workshop. To supplement the three activities presented here, you could also use exercise 7.4.3 (on respect), and 8.1.2 (on creating a positive learning environment), as well as exercises in section 7.2 that help to develop self-esteem.

- 8.2.7 Mapping for Mars
- 8.2.8 Know your apple
- 8.2.9 Whole-group discussion of room layout

Timing and pacing

- 8.2.10 Whole-group discussion of timing and pacing

Explaining and giving instructions

- 8.2.11 Line-drawing exercise

8.2.1 Facilitation: brainstorm and discussion

- Time** One hour
- Objectives** For participants to share their experiences and understanding of facilitation
- Preparation** A large sheet of paper; copies of Handouts 8 and 9
- Process** Write across the top of the flipchart: *‘What is facilitation?’*
- Ask people to spend a few minutes thinking about their experiences of facilitation – as a participant in a facilitated group and/or times when they themselves were the facilitators. From their own experience, how would they define facilitation? What is a facilitator meant to do?
- Remind participants that in a brainstorm there are no right or wrong answers: they should say whatever they think, and not discuss the responses – there will be time for discussion later.
- Brainstorm ideas for five–ten minutes, and write them on the flipchart. After the brainstorm, review the list: any comments or questions about any of the responses? Seek clarification if the meaning is not clear, either to you or to participants.
- This may lead into a discussion, during which you can raise any points from Handout 8 that the group did not identify in the brainstorm: what do participants think about them, and why?
- Highlight the elements on the group’s list that relate to facilitating particular tasks, and those that relate to maintaining the well-being of the group and helping it to work effectively as a group.
- Point out that usually it is best to have two facilitators working together, one leading an activity, the other focusing on group dynamics and time-keeping, and helping the other facilitator if problems occur.
- Sum up by using Paulo Freire’s comparison of ‘banking education’ (= teaching) and ‘problem-posing education’ (= facilitation). (See Handout 9.)
- Options** For groups with whom brainstorms do not seem to be an effective method, either:
- Divide into groups of four or five, and give participants 10–15 minutes to make a written or verbal list of responses to the question; then each small group should present their list; finally, lead into the discussion.

Or

In the round, ask each participant to say one thing that a facilitator is or does. Write up all suggestions as they are said. No one should say something that has already been said. Remind people of their right not to speak. Depending on the size of the group, do one, two, or three rounds. Then lead into the discussion.

HANDOUT 8

Facilitation of groups and workshops

The dual role of a facilitator (also sometimes known as an animator or moderator) consists of the following elements.

- 1. Facilitating the group in tasks** (some or all of the following)
 - Ensure good communications.
 - Provide clear instructions.
 - Find the links between ideas and comments contributed by the participants.
 - Motivate group members to:
 - participate (on an equal basis)
 - think critically and constructively
 - identify problems
 - find new solutions.
 - Provide a learning or group environment in which people can:
 - feel accepted
 - exchange and discover concerns, information, ideas, experiences
 - develop skills, knowledge, or attitudes
 - set goals, make decisions
 - plan action.
 - Provide information, ideas, experience.
 - Provide materials.
 - Co-ordinate activities and keep time: ensure that group activities do not over-run the time available.
 - Summarise discussions.
 - Don't do all the talking!

 - 2. Group maintenance**
 - Understand the social and cultural background of the group, and plan activities accordingly.
 - Understand the emotional and psychological dynamics of the group.
 - Observe.
 - Listen.
 - Keep every member actively involved.
 - Co-ordinate the activities.
 - Mediate (identify any problem, help the group to understand and deal with it constructively).
-

HANDOUT 9

‘Banking’ education and ‘problem-posing’ education

The Brazilian educator Paulo Freire summarised the differences between the role of a teacher in conventional education, which he compared with ‘banking’, and the role of a facilitator in ‘problem-posing’ education.

Banking education

- The teacher talks, passing on information.
- The pupils sit and listen quietly, and act passively.

Problem-posing education

- The animator/facilitator poses a problem and asks questions.
- The participants are active, describe their experiences, share ideas, analyse, and plan together.

With banking education, the teacher ‘owns’ the knowledge and is the ‘expert’. With problem-posing education, the facilitator draws out learning through debate, sharing, and action. The group uses each participant’s contribution to gain a better understanding and find solutions to problems.

(Adapted with permission from *Training for Transformation*, Book 2, by Anne Hope and Sally Timmel)

8.2.2 Listening exercise (2)

Precede this exercise with *Listening exercise (1)*, section 7.4.2, if you have not already used it.

Time 30 minutes

Objective To give participants an opportunity to practise their listening skills

Preparation Work out a topic for participants to discuss. It may be related to disability, or to a controversial topical issue.

Process Participants will discuss the topic in pairs (A and B) for 15 minutes. Explain the rules: A starts, and B is not allowed to give an opinion until he or she has repeated back to A – to A's satisfaction – what A has said. Then B gives his or her opinion, and A must repeat it back to B satisfactorily before being allowed to respond.

Ask the whole group for feedback, based on the following questions.

What did you discover from this exercise?

Was it hard to repeat back satisfactorily what the other person had said? Why?

What can you do to make sure that you really hear what the other person is saying?

8.2.3 Discussion of good and bad listening

Facilitate a brainstorm in which participants identify things that prevent us from listening properly, and things that we can do to ensure that we listen well. Write up the responses on a large sheet of paper or a blackboard. Fill in gaps, using information from Handout 10.

HANDOUT 10

Good and bad listening

(Based on *The Oxfam Gender Training Manual*, p.469)

Blocks to good listening include the following:

- ‘On-off’ listening: the listener ‘switches off’ at times.
- ‘Red-flag listening’: certain words trigger a response which causes us to stop listening.
- ‘Open-ears, closed mind’ listening: we decide in advance that we know what will be said.
- ‘Glassy-eyed listening’: we appear to listen, while actually we are thinking about something else.
- ‘Too-deep-for-me listening’: we stop listening because we don’t understand.
- ‘Don’t-rock-the-boat-listening’: we deliberately don’t listen to something that may challenge our opinions.

In listening we should try to do the following:

- Show interest.
- Understand the other person.
- Express sympathy.
- Identify the problem (if there is one).
- Listen for the causes of the problem.
- Help the speaker to associate the problem with the cause.
- Encourage the speaker to develop competence and motivation to solve his or her own problems.
- Cultivate the ability to be silent when silence is needed.

In listening, do not do the following:

- Argue.
 - Interrupt.
 - Pass judgement .
 - Give advice (unless it is requested by the other person).
 - Jump to conclusions.
 - Become emotionally involved.
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8.2.4 Open the day

See 7.2.2 for detailed instructions.

8.2.5 Guessing game

See 7.2.5 for detailed instructions.

8.2.6 Observation exercise

This activity can be used to assess levels and types of participation within a group and to observe patterns which might indicate the need to do some work on fostering participation and supporting diversity within a group.

Process Divide the whole group into three small groups. Two of the small groups will watch the third group discuss the proposition that *‘Disabled people need jobs as much as non-disabled people do’*. The discussion group will consist of six people, each of whom plays one of the following roles in the discussion:

- bored
- dismissive (s/he thinks s/he knows everything already, so regards the discussion as a waste of time)
- the joker
- dominating (s/he likes to talk more than listen)
- supportive (s/he likes to hear what other people have to say and supports what they say)
- uncomfortable (s/he does not feel at ease in this group)

The two observation groups should watch the discussion and try to see what is going on in the group: how each person is feeling, thinking, speaking, etc., and what role they are playing in the group, how much they talk, etc.

After the role play, the two observation groups should separately discuss what they have seen, write their conclusions on a flipchart or blackboard, then come back as a whole group. Each observation group should share its conclusions, then everyone can comment and discuss. Here are some learning points to draw out (see also Handout 11: ‘What to observe in a group’):

- Facilitators should closely observe participants’ expressions and non-verbal communication, and intervene when necessary.

- Some appropriate interventions might be changing the pace; taking a break; directly addressing an apparent problem; asking a participant privately after the session about an apparent problem; refocusing the group; varying the format of activities (pairs, small group, whole group) so that more people get a chance to contribute; using a talking stick or other prop to limit the time taken by a very talkative person and give others the space to talk.
- Sometimes it is hard to read a person's expression. For example, they may look annoyed, but it may have nothing to do with the workshop: maybe they have a problem at work or at home.

HANDOUT 11

What to observe in a group

We have all spent a good part of our lives in various sorts of groups, but we rarely take time to stop and observe what is going on, and why the members are behaving in a certain way. It is difficult to observe and participate at the same time, and the skill of doing both at the same time needs practice. We need to observe at three different levels:

- A. Content:** What is the group talking about? What is each person saying?
- B. Non-verbal expressions:** Apart from what they say, what indications are people giving of their feelings and reactions? For example, gestures, tone of voice, body language, facial expressions, order of speaking, etc.
- C. Feelings, attitudes, concerns, hidden agenda:** These factors have an important effect on the well-being of a group and must be taken into account. Sensitive observation of people's words and non-verbal expressions can give us clues about their feelings, but these clues may easily be misinterpreted; so if they seem important, they should be checked with the person concerned, for example: 'Do you feel uncomfortable about that decision, Paul?'

We can also observe the pattern of communication:

- Who talks? for how long? how often?
- Whom do people look at when they talk?
- Who talks first?
- Who interrupts whom?
- What style of communication is used?

This can give us clues to important things which may be going on in the group, such as who leads whom, or who influences whom.

(Adapted with permission from *Training for Transformation*, Book 1, by Anne Hope and Sally Timmel)

8.2.7 Mapping for Mars

See 7.4.1 for detailed instructions.

8.2.8 Know your apple

See 9.3.6 for detailed instructions.

8.2.9 Whole-group discussion of room layout

Objective To understand the effect of room layout on people's participation, with input from facilitator (see Handout 12).

8.2.10 Whole-group discussion of timing and pacing

Initiate a discussion, involving the whole group, about the importance of keeping an overview of the time and varying the pace of activities. Use Handout 13 to prompt ideas.

HANDOUT 12

Room layout

Research has shown that the arrangement of a room has a strong effect on the level of participation in a discussion. For sighted participants, those who can see all the other faces are at an advantage, and those who cannot are at a disadvantage. If people are sitting in straight rows, it is very unlikely that a good discussion will develop between them, because they cannot see each other's faces. It is also harder to hear what someone is saying if he or she is sitting some rows behind, or in front of you.

Every effort should be made to enable the participants to sit in one circle, where everyone can see everyone else's face and hear what each other is saying. If the circle becomes so big that people cannot hear each other, it is better to have two concentric circles (or horseshoes, if they need to look at something displayed on the wall).

Whether participants are sighted or not, the circle or horseshoe arrangements help to create positive energy among the members, and a feeling of openness which encourages sharing and participation.

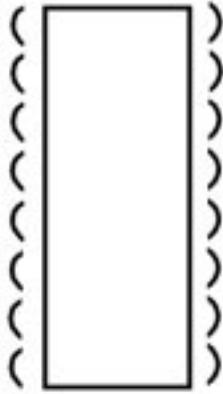
In cultures where people are used to sitting behind desks in rows, whether for education or political gatherings, it can take time for people to adapt to more open and participative seating arrangements. Discussing the advantages and disadvantages, for the participants and the facilitator, may help the process of adjustment; games and small-group activities may also help to overcome inhibitions. In some circumstances it may also help if participants sit around small tables in a circular formation. Some suggested layouts are shown overleaf.

If an interpreter (of sign language or any other language) is used, ensure that s/he is placed so as to see/hear everyone and to be seen/heard by those directly using the interpretation.

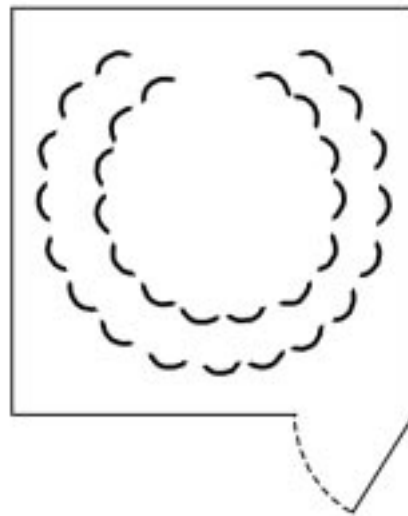
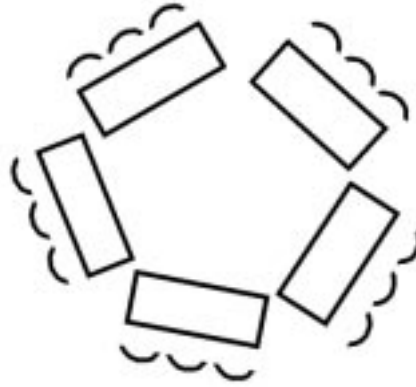
(Adapted with permission from *Training for Transformation*, Book 2, by Anne Hope and Sally Timmel)

(continued)

Not this



But this



HANDOUT 13

Timing and pacing

One of the most important skills for successful facilitation is accurate timing and appropriate pacing. The facilitator should be very sensitive and watch for non-verbal cues to judge whether people are ready for a change of group, pace, or type of activity. Often in a big group, a few are still very interested when the majority have become bored or sleepy. The facilitator should check whether participants are getting a 'glazed stare' in their eyes, or starting to fidget, or looking at their watches, out of the window, or at the ceiling. All these are signs that it would be good to go into a small-group activity, change pace, or take a short break. It might be appropriate for those who are still involved in the original activity to continue, while others do something else.

The facilitator must constantly make judgements about when a discussion has gone on long enough, or when the allocated time should be extended because people are very much involved in something that is important to them.

People remain far more interested and involved if there is a variety of activities and a good balance between work in small groups and work in big groups. It is important to allow times for talking and times for listening, and times for being active and times for being thoughtful. It helps to change the pace from fast to slower work and vice versa.

Using any type of interpreter may slow down a discussion or activity. The facilitator should factor this in to the timing, and the group should be encouraged to allow extra time for translation, because this is an important aspect of making the workshop accessible to all participants. Whatever pace the facilitator initially sets for a discussion or activity, the interpreter should try to match the energy-level of the facilitator, because this will help to maintain the pace. Of course, participants themselves will often change the pace, consciously or not, and both facilitator and interpreter need to be responsive to this.

(Adapted with permission from *Training for Transformation*, Book 2, by Anne Hope and Sally Timmel)

8.2.11 Line-drawing exercise

Time 20 minutes

Objectives For participants to experience how their instructions may be interpreted differently by listeners.
To consider what constitutes clear, easily followed instructions.

Preparation Copies of Handout 14, blank papers, and pens.

Process Put participants in pairs, A and B.

Give partner A a copy of the line-drawing (Handout 14), which partner B is not allowed to see.

Partner A must give instructions to partner B, telling him/her what to draw, on a separate sheet of paper, in order to replicate the line-drawing that A has been given.

Partner B is not allowed to ask questions about the object to be drawn.

When they have finished, they should compare the two drawings.

Bring the whole group back together and discuss the activity:

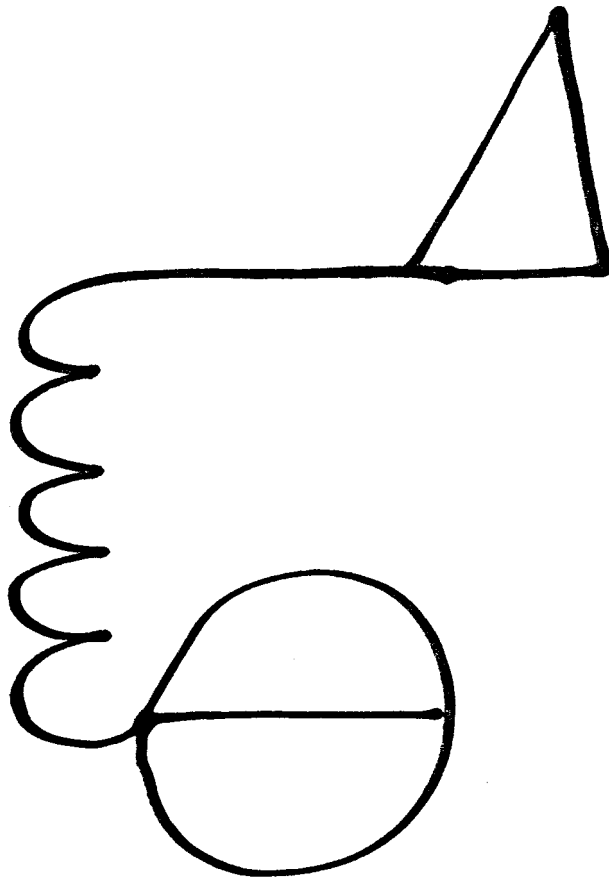
- How accurate were the drawings?
- Was it easy or hard to replicate the original? Why?
- For pairs whose drawings were accurate, what did they do?
- With those that were less accurate, what could they do differently?
- What can we learn from this exercise about successful facilitation?

Try to elicit some of the following learning points:

- The meaning of what we say may be interpreted very differently by our listeners, depending on their understanding of a particular word. This might depend on their culture, history, political allegiance, mood on that particular day, personal experiences associated with the word, etc.
- When giving instructions for activities, facilitators should take care to anticipate or watch out for different constructions that listeners might place on their words, and they should modify or clarify the wording of their instructions accordingly.
- Be as specific as possible; break things down into small steps.

Then present the guidelines for giving instructions or information that are listed in Handout 15.

HANDOUT 14
Line drawing



HANDOUT 15

Guidelines for giving instructions or information

1. Facilitators need to be able to explain clearly both what they want participants to do, and why they want them to do it. If participants understand the relevance of an exercise, they will be more interested in it.
2. The structure of the facilitator's input or explanation can help to ensure that it is easily understood:
 - **Introduce:** tell participants the main points of what you are going to tell them (and why).
 - **Explain:** tell them, with details, what you want them to know or to do.
 - **Summarise:** tell them the main points of what you have told them.

Use the following tools to help you to structure your input, such as:

- **'road signs'** that tell listeners what to listen out for next, and what stage you have reached in your talk ('another way to think of this is ...', 'to conclude ...');
 - **'flags'** that clearly highlight key points ('the most important thing is ...', 'it is vital to ...');
 - **links** that make a logical bridge between statements, or between one issue and the next. ('As we identified in last week's session, access to education is a big problem in our community. Let's now spend some time considering the options for solving this problem.')
3. Use simple, short sentences, supported by appropriate gestures and facial expressions.
 4. Use nouns (such as 'the exercise' or 'non-disabled people'), instead of pronouns (such as 'it' or 'they').
 5. Repeat the main points, to emphasise what is important. But do not do this to excess, or participants will become bored and feel patronised.
 6. Vary your tone of voice and the speed at which you talk, and pause when necessary.
 7. Have a friendly, open approach.
 8. Show interest in the subject.
 9. Do not fidget; avoid 'non-words', such as 'er', 'you know', 'um', 'kind of'.
-

Practice in facilitation

To reinforce the principles of facilitation that this section has emphasised, you could set aside half a day or a whole day in which each participant gets an opportunity to facilitate an activity with a small group. Allow time for the others to give feedback on their performance.

The activities suggested below give participants exposure to a range of group-work methods. Photocopy the activity and give each participant a copy. Allow 20 minutes' thinking time before they try out their activities. Each facilitator should decide:

- How to introduce the exercise.
- How to give the instructions.
- Any necessary modifications to make the activity accessible for all participants.
- How to summarise and end the exercise.
- What are the learning points about facilitation from this exercise?

Creating group solidarity: *What I like about you* (7.2.7)

Fostering self-esteem: *What I am proud of myself for* (7.2.8)

Pair work: *I respect you/you respect me* (7.4.3)

Facilitating discussion with a large group: *The right to education* (9.3.13)

Brainstorming: *Discussion of good and bad listening* (8.2.3)

Analysing problems: *Problem-tree exercise* (9.2.2)

Using role play: *Improvised drama about disability rights* (9.3.11);
Puppets exercise (9.3.14)

Using mime and movement: *Two ways to cross a river* (9.3.15);
The game of life (9.4.6)

Using visual aids and objects: *Prevention in the home* (8.4.3);
Camouflage game (9.3.1); *Know your apple* (9.3.6)

Using case studies: *Barriers case study* (9.2.5)

Speaking in front of a group: *Prevention of impairment* (8.4.1)

8.2.12 Facilitation checklists

Time 40 minutes

Objectives To conclude the focused work on facilitation skills, we included this exercise to give participants an opportunity to reflect on, share, and summarise their experiences during the practice sessions, as well as information taken from the facilitators' input, discussions, etc.

It also gave the facilitators the opportunity for an informal evaluation of participants' learning about facilitation to date.

Preparation Large sheets of paper and pens

Process Participants take a few minutes to think back over their own facilitation of the practice sessions: what went well and what they found difficult. They should think also about everything they have learned from the facilitator and other participants about facilitation skills.

In pairs, they should make a checklist for themselves – to remind themselves of important points to keep in mind next time they are facilitating.

One partner can write for both people in the pair. They have 15 minutes to do this, on a large sheet of paper.

Display all the lists around the room. Give people time to move around and read each other's lists.

Ask them to make a (mental) note of anything that is not clear to them. When everyone has read all the lists, bring them back together and give time for questions, clarification, and comments.

If the group includes people who have impaired sight, or are not literate, or experience pain when moving, adapt the methods of making the list and of getting feedback from the whole group to suit their needs.

Further practice in facilitation In the Oxfam course in Kosovo, further opportunities to practise facilitation were built in. Each week one pair of participants chose and facilitated the introductory (or warm-up) exercise, and another pair chose and facilitated the evaluation exercise. Pairs volunteered for these tasks one week in advance, in order to have time to prepare. In addition, every week for six weeks, a small group was given written instructions for an exercise to be facilitated the following week. The exercise fitted into the rest of the day's content. The group worked out and practised the exercise among themselves in the intervening week.

Participants gained confidence in speaking in front of the group, and practice in giving clear and structured presentations, through frequent five-minute reports/feedback on small-group work to the whole group.

On the final evaluation form, participants reported that enough practice had been provided, and they felt confident about facilitation. However, the three co-facilitators felt that on future courses more time should be allowed for more practice sessions, and that as facilitators they should have given more (and more structured) feedback to participants. We note this here, not as a reflection on participants on the course, but simply to stress that the more one is actually exposed to the experience of being a facilitator, the easier and more effective it becomes.

8.3 Planning workshops

Careful planning is one of the most important elements of a successful workshop. Facilitators should pay equal attention to the staging of the workshop, the agenda, and the contents.

8.3.1 The eight sunrays of planning

Time 40 minutes

Preparation Handout 16

Process Explain that the image of eight sunrays of planning is a useful tool to help us to remember the key elements of planning. (Without the sun's rays, clouds and rain move in and ruin the event.)

On a large sheet of paper, or a blackboard, draw a round sun, with eight sunrays coming from it. Starting at the topmost ray on the right, label each ray in turn:

- **Who?** (as you write, ask 'Who should be involved?')
- **Why?** (ask 'Why should they be involved? What is the aim? What will they/you gain?')
- **When?** ('When should it happen?')
- **Where?** ('Where should it happen?')
- **What for?** ('What objectives do you want to achieve?')
- **What?** ('What needs to happen in order to achieve the objectives?')
- **How?** ('How should it happen? What methods should you use?')
- **With what?** ('With what resources, such as people, money, materials, etc.?')

Explain that the cyclical rays remind us that planning is an on-going process, one that should be applied to each stage of whatever event or activity is being planned, from the general concept to the practical details. Many of the questions are interrelated.

Applying the eight sunrays to a practical example, ask the group to imagine that they are facilitators, planning a workshop. Go through the sunrays one by one, asking them to call out answers to the eight questions. Take one suggestion given in answer to the first question and then build the rest of the exercise around it. Here is an example given by the group in Kosovo:

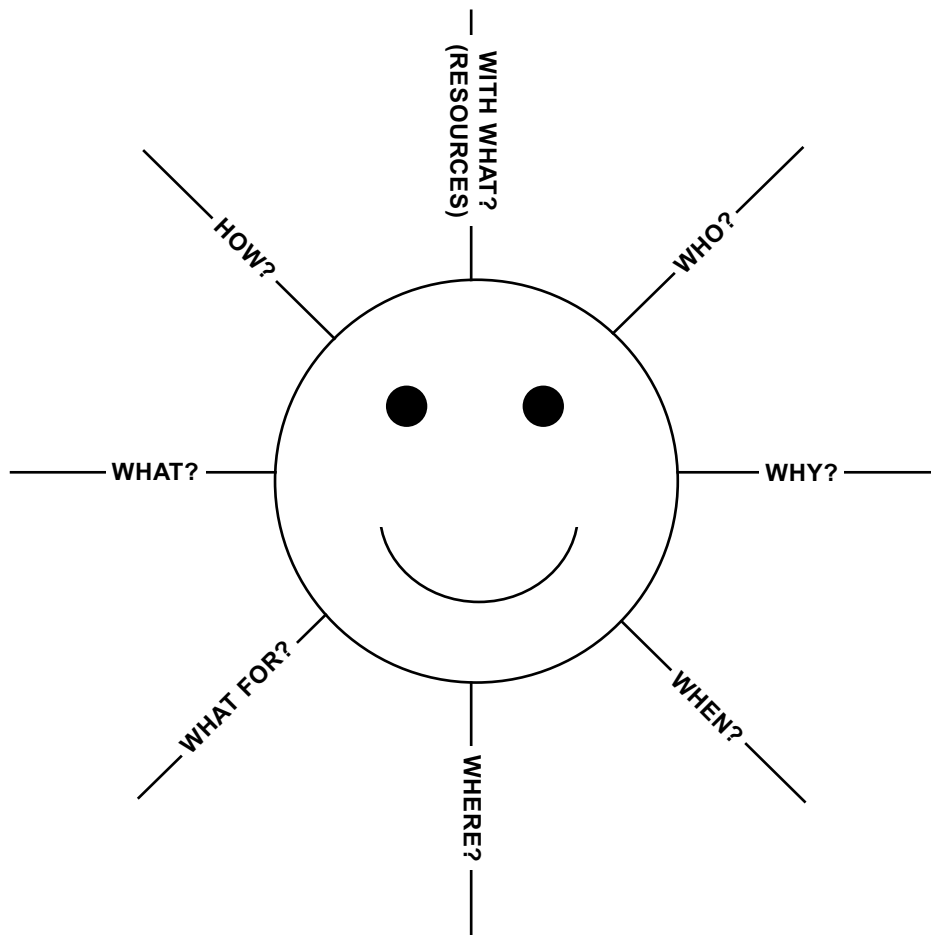
- **Who?** Parents of disabled children.
- **Why?** To get them more involved in the disabled children's community centre.
- **When?** On a date and at a time that would ensure the biggest attendance.
- **Where?** At the disabled children's community centre. (Go back to 'why?'. To help the parents to get to know the centre and help them to feel comfortable there.)
- **What for?** So that parents will learn about child development and the role of the centre.
- **What?** Skills, knowledge, attitudes, leading to changes in action.
- **How?** Role play, round-table discussion, pairs exercises. (Go back to 'when?'. In what order should you introduce the exercises and activities, which are designed to achieve the 'what for?', which is dependent on the 'what?' and 'how?'?)
- **With what?** Money for materials, transport costs, and driver's wages; donated refreshments. (Go back through the cycle to plan who is going to be responsible for obtaining which resources, and how.)

Allow time for questions or comments. Ask participants to relate this exercise to their own experience of planning some event or activity (not necessarily a workshop).

Link That was a quick general example. In order to look into this in more depth, we will do an exercise in pairs, to focus our attention on the organising of the workshop itself.

HANDOUT 16

The eight sunrays of planning



8.3.2 Organising the workshop: a two-part exercise

(Adapted with permission from *Training for Transformation*, Book 2)

- Objectives** For participants to apply planning skills to a worked example.
To help participants to appreciate the amount and type of preparation that must be done before a workshop, and the length of time involved.
- Preparation** Handout 17

Part 1

Time 45 minutes

- Process** Ask participants to work in pairs. They should imagine that they are co-trainers, responsible for planning, administering, and facilitating workshops with their local DPO.
- Hand out the list of 17 tasks (lettered A–P) that need to be done in order for the workshop to run.
- They have 20 minutes to decide in which order to do the tasks, according to what they think should be done first, second, etc. Which tasks should be done at the same time? Then they should write their list on a sheet of paper.
- They may find it helpful to refer back to the eight sunrays of planning during this activity. Leave the drawing up where it can be seen.
- For feedback, ask one pair to join up with another pair to compare their answers.
- Ask the whole group for their feedback. Did everyone agree on the best sequence for the tasks? If not, why not? Are there any important activities that should have been included and were not? What? At what point might they have been done? Conclusion: there is not necessarily one ‘right’ order, or one ‘right’ way. It is important to include all the necessary elements and sequence them in the way that best fits your circumstances.

Possible solution:

- | | | | |
|----|---------|-----|---------|
| 1. | E | 7. | K |
| 2. | I | 8. | D and H |
| 3. | M and Q | 9. | O and L |
| 4. | B and G | 10. | C |
| 5. | A | 11. | F |
| 6. | P | 12. | N and J |

HANDOUT 17

Planning a workshop: task list

- A. Invite all participants (by letter, telephone, or personal visit) and inform them where and when the workshop will take place, what topics it will cover, etc.
 - B. Find an accessible venue, of the appropriate size, and book it for the day required.
 - C. Begin the workshop.
 - D. Prepare written materials for handouts; make copies for participants.
 - E. Meet with your local DPO representatives (staff and ordinary members). Discuss the possible objectives and scope of the workshop, and who should be invited.
 - F. Take home any participants who need assistance with transport.
 - G. Arrange refreshments for the participants and trainers.
 - H. Prepare flipcharts and make puppets.
 - I. Meet with your co-trainer to decide on the outline of objectives, content, methods, probable agenda, number and types of participants to invite.
 - J. Make payments for refreshments, venue, etc.
 - K. Buy paper, pens, etc.
 - L. Arrange seating in the workshop room.
 - M. Meet with local DPO activists to tell them your proposed objectives, content, method, agenda, number and types of participants; finalise the date of the workshop, in consultation with them.
 - N. Evaluate the outcome with local DPO activists: what changes would they have made to any aspect of it?
 - O. Send vehicles to collect participants who need assistance with transport and bring them to the venue.
 - P. With your co-trainer, work out in detail the content and methods of the workshop, the approximate timing of activities, and the division of work between you: who will facilitate which activities?
 - Q. Make arrangements for transport, if required.
-

Part 2

Time 50 minutes

Process Introduce the activity: ‘Now we know what has to be done and in what order, we need to think more about the timing of all these tasks. We need to allow enough time in which to do everything. Each pair should work on their ordered task list, and convert it into what is called a time-line. This is what a time-line looks like.’

Put up a piece of flipchart paper horizontally and draw a horizontal line through the middle from one edge to the other. A few inches before the right-hand end of the line, make a mark and write a capital C (to identify the task that says ‘Begin the workshop’). Above the letter C, write the date of the imaginary workshop, say 6 May.

Tell participants that they should work backwards from the date of the workshop, and put in the other tasks, in their agreed order, adding approximate dates for the tasks.

Ask people to work in their original pairs, and give them flipchart paper and pens. They have 25 minutes for the activity.

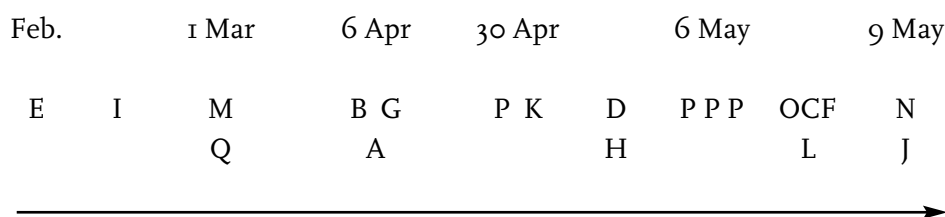
For feedback, ask each pair to display their time-line on the wall. Everybody should spend 10 minutes walking around looking at each other’s solutions. Display your own solution too. Note: focus on how much time people have allowed. Did they start their first task a couple of weeks before the workshop, or a couple of months before?

Bring the group back together, ask them for their impressions and comments. What have they learned?

Give participants feedback on key points that you identified from their timelines, including general conclusions and potential problems. Did anyone think of allowing extra time for working out the details of the workshop contents (letter P)? This is something that usually takes more time than expected, so plenty of time should be allowed for it.

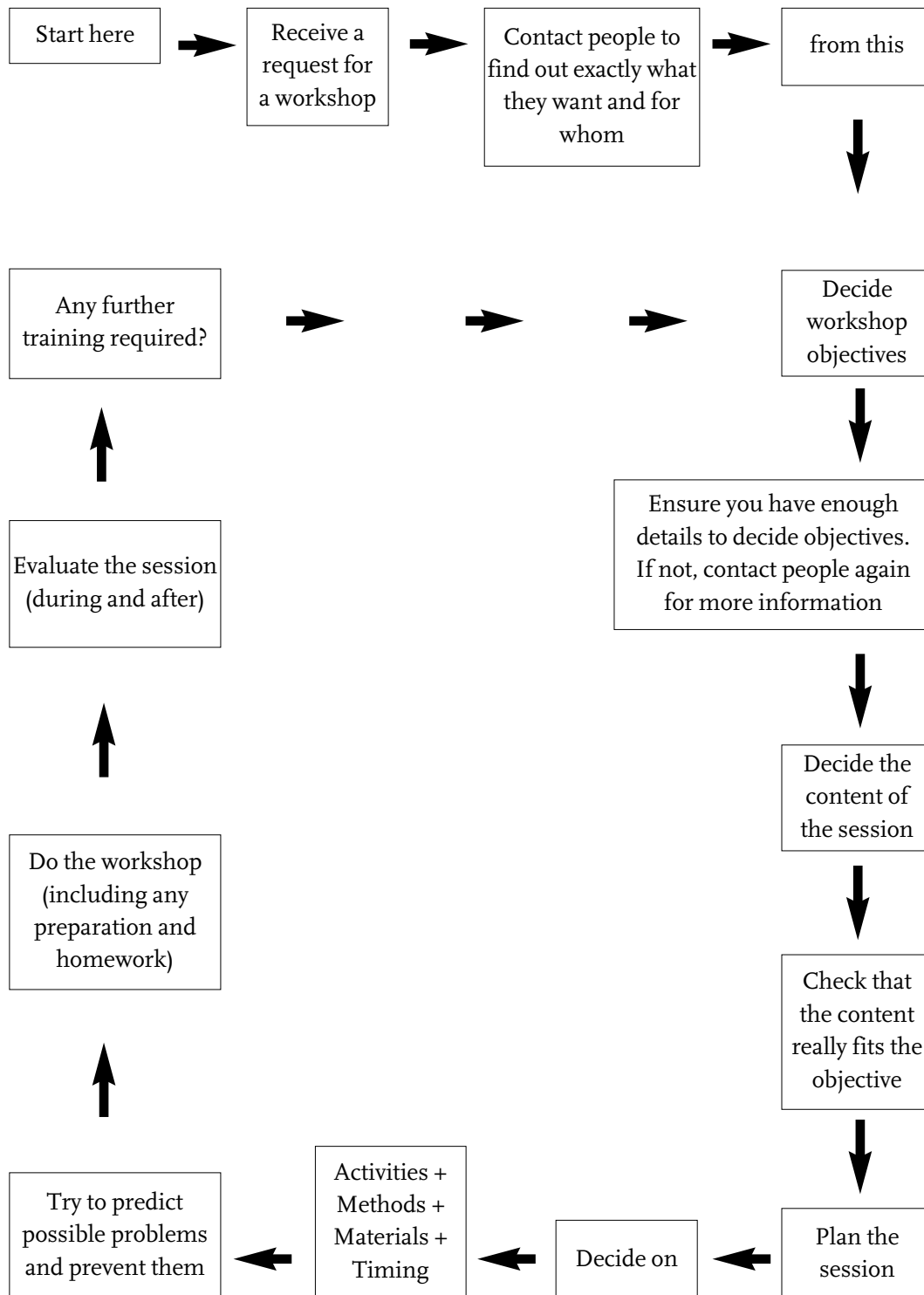
Refer to Handout 18: ‘The whole training process’, which participants may take away and keep for future reference.

Possible timeline solution:



HANDOUT 18

The whole training process



8.3.3 Planning the agenda and contents of a workshop

Time 1 hour 15 minutes

Objectives To practise planning the content and timing of a workshop.

Preparation Make up one set of 12 activity cards per small group, using topics and activities taken from this manual, or making up your own to suit. See the examples in Handout 19. Leave three cards in each set blank. Include introductory and evaluation activities, energisers, etc.

Process Ask participants to form groups of four people; give each a set of cards.

They have 30 minutes to work together to plan a two-day training schedule, using the activity cards and deciding what to include and what to leave out. There are some blank cards in each set, so they can invent their own if they wish.

They should also decide approximately how much time to allow for each activity, and write this in on the card.

When they have put their chosen cards in order and filled in the timing, they should stick them in sequence on a large sheet of paper.

One person from each small group should present the group's work to everybody. Facilitate the feedback. Allow time for comments, questions, and discussion, using the following questions as prompts:

- Questions**
- Was it easy/difficult to decide on the sequence? Why?
 - Was it easy/difficult to decide on the timing? Why?
 - How long would they allow themselves in real life for working out the exact content and proposed agenda for a workshop? Emphasise that this is actually a time-consuming process (lasting much longer than 30 minutes!), so facilitators need to invest a lot of thought and time in preparing for a workshop.
 - If any groups used all the cards, ask their reasons for this. Point out that there would not be enough time in two days to cover all the topics in depth, so it is important not to do too much, and to cover fewer things more effectively. There is a limit to what workshop participants can absorb in one day!

Options To save time, omit the individual feedback. Ask participants to display their solutions on the wall, and ask everyone to walk around and look at them during a break. Then bring the whole group together for comments and discussion, based on the questions above.

HANDOUT 19

Sample activity cards

Activity:

The three models of disability: presentation and discussion

Time allowed:

Activity:

Rights: Calendar game

Time allowed:

Activity:

Agreeing group guidelines

Time allowed:

8.4 Handling difficult topics

The Oxfam course in Kosovo included a consideration of the psychological impact and prevention of disability/impairments, in order to expose participants (future facilitators) to ways of thinking about these personal, complex issues, as well as giving them practice in facilitating group work on potentially difficult issues. Such sensitive subjects should not be addressed until participants have gained confidence, feel comfortable with each other, and have become familiar with the concept of the social model of disability and the human rights of disabled people.

This section is relevant also for DPO activists, who often have to deal with such topics in the course of their work, and for professionals working in the fields of medicine and public health.

The psychological impact of impairment and disability

We included this topic in the workshop because it is one of the principal issues of concern for KAPP/Handikos and its volunteer members, many of whom are not disabled but spend much of their working time visiting disabled people in their homes. The visits are largely a waste of time if members do not understand the normal psychological processes that disabled people go through in reacting to their impairment, or if the visitor has no strategies to use to reach out to the disabled person. Often this leads to misunderstandings, to negative labelling of the disabled person, and to the offer of inappropriate assistance.

By the psychological impact of **impairment**, we mean the effects of the trauma – both physical and psychological – experienced by people when their faculties or capabilities are first impaired (through illness, war, accident, etc.). By the psychological impact of **disability**, we mean the effects on people's lives and well-being caused by the (discriminatory) reactions of society to their impairment – whether they were born with it or acquired it later.

Given that our participant group contained a mix of disabled and non-disabled people, women and men, we felt that the most appropriate way to approach these issues was to invite a disabled person – in this case Halit Ferizi, the President of KAPP – to share his first-hand knowledge and experience with workshop participants. Below we reproduce a summary of the session that he led.

The physical and psychological isolation experienced by disabled people means that they rarely have an opportunity to discuss personal issues and work through them with their peers. Some of these issues are common to men and women, but some are specific to one sex or the other. Informal peer-support groups can offer space for personal concerns to be raised, experiences to be shared, and solutions to be considered. It is not appropriate to encourage people to deal with them in mixed-sex groups.

Summary of the session led by the President of KAPP

The work of the KAPP starts with each individual, and must respond to each individual's needs. People who were born with an impairment, and grew up disabled, are in a different situation from people who became disabled later in life. They are less likely to have been able to attend school, or they may have received a second-class education in a 'special' school; they are less likely to have been employed, married, etc. These types of discrimination often make people feel less confident about themselves and their abilities.

People who become disabled as children or adults, as well as going through physical trauma, also experience a radical change in their life: they are often in shock, and have to begin their lives again from zero. Suddenly they don't know who they are, and they lose confidence. These problems are compounded by the attitudes of society and the barriers that they start to encounter.

The experience of hospital and rehabilitation can be disempowering if it is concerned only with operations and therapy. What was useful about rehabilitation for me was meeting other disabled people and learning from them, finding out what was possible, and how they had organised themselves into self-help groups. It helped me to move beyond the shock and trauma.

One thing that disabled people share – no matter when or how they became disabled – is the fact that impairments and disability can be a source of strength and motivation. However, very often disabled people internalise other people's negative attitudes. In Kosovo, society alienates disabled people, who as a result may become isolated and depressed, and start withdrawing from contact with others, even refusing food until they become undernourished and vulnerable to illness and death. Some families will tell you that the disabled person is neurotic and aggressive. Is it because of their impairment, or because of the influence of their environment – their family or community? Who would not react with anger if they were treated as perpetual children, or locked alone in a room?

Sometimes families prevent KAPP members from visiting their disabled family member, or they are hostile to visitors. Sometimes the disabled person has become so isolated that he or she does not want to see anyone.

Volunteers need to think about all these things in their work and adapt their approach, interaction, and advice to suit each individual, in order to help them to become motivated, to gain confidence, stop thinking negatively about themselves, and participate or return to participating in life.

Some ways to help isolated disabled people

- Arrange for a disabled activist to visit them.
- Arrange peer support, one-to-one, or in informal groups.
- Build a relationship with the person, gradually over time.
- Don't expect them to be comfortable talking to you straight away, especially about personal matters.
- Help them to recognise their emotions – shock, trauma, denial, anger, lack of self-confidence – as normal reactions to their situation, and to see that they can move forward. They can help themselves, and others with disabilities, by developing a positive approach, refusing to be frustrated or de-valued by other people, turning to other disabled people for support when things are difficult.
- Talk directly with them, not (only) with their family.
- Call them by their name; don't refer to them as 'the patient'.
- Be friendly, not official.
- Find out what they are interested in and talk about that – not just about their impairment.
- Identify the barriers that they experience at home; help them to work out ways to remove them.
- Analyse yourself, your experience and knowledge, and how that can help.
- Use and share information about disability rights, the disability movement, etc.
- Encourage and motivate, using positive examples.
- Focus on what disabled people can do, not what they can't, and build on that.
- Don't fall into the trap of telling someone that his or her impairment 'is not as bad as' someone else's, that 'it could be worse', and they should be 'thankful that it's not'.
- Invite them to meet you somewhere outside the home, or to join you in attending an event in the community or one arranged by the DPO.

Causes and prevention of disability/impairments

Some people might initially question the inclusion of this issue in a Disability Equality course. It is indeed true that in most countries prevention is a difficult subject to tackle, because many people consciously or unconsciously subscribe to the idea 'Better dead than disabled'. The aim of this section of the manual is to give facilitators (and/or DPO members) a means of challenging that very negative notion of prevention, and to suggest an alternative.

The conventional understanding of prevention focuses on 'preventing disabled people from existing' or 'getting rid of disabled people'. It includes

such practices as aborting impaired fetuses; euthanasia for disabled children and adults; and the sterilisation of disabled people to prevent them from having children. Such approaches are often promoted by well-meaning members of the medical profession to whom the families of disabled children and adults turn for advice. But often that advice is one-sided, insensitive, and ignorant of the value of disabled people's lives. It is not unknown in so-called 'developed' countries for doctors to advise the parents of children born with Downs Syndrome, for example, to put them in an institution and forget about them, 'because he/she will be dead by the age of eleven anyway' – in ignorance of the fact that most such children live to healthy adulthood and can make their own unique contribution to the lives of those around them. Sophisticated technology is used to detect impairments before birth, based on the virtually automatic assumption that abortion is the only appropriate solution. In Kosovo and elsewhere, it is common for disabled babies in hospital to be 'allowed to die'; it even happens that parents of disabled children who consult a doctor for a condition unrelated to the disability, like influenza, are sometimes offered euthanasia for the child.

The underlying message of this approach is that the most efficient way to prevent 'disability' is to eliminate the person with the impairment. Such a gross abuse of the right to life makes it an appropriate and significant topic for consideration in a longer course based on disability rights. It is especially relevant on a course for trainee facilitators, or for activists who will have to deal with the issue in the course of their work. But discussions need to be handled very carefully, because many disabled people have internalised the negative values of the context in which they live.

An alternative approach to disability prevention consists of two elements. The first is to recognise that disability is a social construct, and to challenge society's hostile, disabling reactions to people with impairments. Disability can be prevented by creating an enabling world (see further the sections on Models and Barriers in Chapter 9).

The second element is to recognise that many physical and mental impairments are caused by the abuse of basic human rights: injuries resulting from landmines are a prime example. To prevent impairments, society should start by taking active steps to protect people's rights: for example by banning landmines, providing health education about proper nutrition for pregnant and nursing women, ensuring immunisation against infectious diseases, and passing and enforcing labour laws that provide protection for workers in hazardous conditions.

Here we present a small selection of activities and discussion-based exercises which cover a range of target participant groups and give scope for consideration of the topic on global or local levels, or both. The exercises may be used separately or in various combinations. We hope they will encourage readers to develop their own ideas for their own workshops.

8.4.1 Prevention of impairment: presentation and discussion

Time 45 minutes

- Objective** To provide information about:
- the main causes of impairments (as distinct from disability)
 - preventing impairments by addressing the causes
 - preventing impairments by protecting people's rights

Preparation Prepare the presentation (see the suggestion below, and/or refer to Handout 20), and prepare flipcharts to support the presentation.

- Process** Introduce the topic. Suggested presentation: start by differentiating between the concepts of preventing disability (changing society's attitudes and construction) and preventing impairments. We need to start by looking at the causes of impairments. They include the following:
- **Poverty:** inadequate medical care and information; poor nutrition and sanitation; overcrowding. Examples: blindness due to vitamin deficiency; diarrhoea, leading to dehydration and brain damage in malnourished babies; paralysis caused by improper use of injections; tuberculosis arising from malnutrition and overcrowded, insanitary living conditions.
 - **War:** injuries inflicted on civilians and military personnel. Examples: amputations and blindness caused by landmines.
 - **Accidents:** on roads, at home, at work. Examples: paraplegia and brain damage resulting from crashes on badly maintained roads; burns from cooking pots; amputations necessitated by accidents with machinery; loss of hearing in noisy factories; chronic muscular and respiratory problems in work-places where health and safety are disregarded; paralysis and the loss of sight caused by the use of pesticides without safety precautions, etc.

Such causes are responsible for the majority (perhaps two-thirds) of all impairments.

Facilitate a discussion, based on the following questions:

- What rights are being abused in situations like these?
- Who is responsible for these abuses?
- How can these types of impairment be prevented? (By protecting people's rights, eradicating poverty, providing safe and decent working conditions, etc.)

Presentation continues (write key words on a blank sheet of flipchart paper as you speak): in many countries it is common to prevent impairments in a different way: by eliminating the people affected, using the following methods: abortion of impaired fetuses; euthanasia (by denying medical treatment or food so that disabled adults and children die); eugenics (forced sterilisation, or not allowing disabled people to marry or have sexual relationships, in case they produce children with genetic impairments).

Facilitate a discussion, using the following questions:

- What rights are being abused in these cases?
- Why do some people in society think that disabled people have less right to live than non-disabled people?
- What do participants think about the policy of employing abortion, euthanasia, and eugenics in response to the problem of disability?
- Why do governments often prefer such policies to the option of protecting human rights and preventing impairments?

HANDOUT 20

Disability – incidence and causes

Disability and poverty are linked, both at an individual level and at the level of countries and continents. The World Bank estimates that disabled people may account for as many as one in five of the poorest people in the world ('Poverty and Disability: A Background Paper for the World Development Report', World Bank, 1999). Wherever they live, they are accorded low social status and are discriminated against when they try to find paid employment. Eighty per cent of the world's disabled people live in Asia and the Pacific region, but they receive just 2 per cent of the resources allocated to the needs of disabled people worldwide (according to Action on Disability and Development, Five-Year Strategic Plan, 1998–2002). Recent UNESCO studies have suggested that only two per cent of disabled children in developing countries receive an education ('Disability, Poverty, and Development', UK government Department for International Development).

It is difficult to interpret statistics, since official surveys tend to use only medical sources of evidence, and to classify impairments only by clinical criteria. Also, it is not easy to compare statistics gathered in different societies, which might employ different definitions. But the World Health Organisation's estimate is widely accepted: 10 per cent of the world's population is disabled in some respect.

The major causes of impairment are poverty, accidents, and war. As many as 50 per cent of all cases are preventable and directly linked to poverty. Broad classifications of the causes are given below:

Malnutrition	20% of all cases
Accident/trauma/war	15%
Infectious diseases	11%
Non-infectious diseases	20%
Congenital conditions	20%
Other (including ageing)	13%

(Source: *Overcoming Obstacles to the Integration of Disabled People*, UNESCO, 1995)

However, such figures raise many questions, and can confuse rather than clarify matters. For instance, some congenital (pre-birth) conditions can be linked to malnutrition, which is fundamentally related to poverty. Similarly, many infectious and non-infectious

(continued)

diseases are secondary to poverty-related factors, such the drinking of polluted water.

It is also difficult to allow for ageing as a cause of impairment and disability. In the rich industrialised countries, a large proportion of 'disabled' people are over the age of 60, a proportion which increases as life expectancy increases. Ageing is also a factor in poor countries of the South – but less so, because life expectancy is lower there.

Poverty

A large proportion of the populations of poor and conflict-torn countries don't get enough to eat. Added to this is the problem of dietary deficiencies. Approximately 100 million people have impairments caused by malnutrition. In India, 15,000 children go blind every year from lack of vitamin A, because their families have no land on which to grow vegetables and no money with which to buy them. Globally an estimated 200,000 children each year lose their sight through vitamin deficiencies.

'To prevent the disabilities that result from poverty, big changes are needed in our social order. There needs to be a fairer distribution of land, resources, information and power. Such changes will only happen when the poor find the courage to organize, to work together, and to demand their rights. Disabled persons and their families can become leaders in this process.' (David Werner, *Challenging a Disabling World*)

Accidents and war

Some 78 million people (16 per cent of disabled people) have impairments caused by accidents and trauma (including road accidents). Hazardous working conditions are common in developing countries, because people are so desperate for paid work that they will tolerate very dangerous conditions, often working for companies that have deliberately based themselves overseas to escape European/north American health-and-safety legislation, in order to produce goods as cheaply as possible. The mining and chemical industries are notorious for dangerous practices.

Conditions in Angola dramatically illustrate the link between war and disability. It was estimated in mid-2002 (*Jornal de Angola*, 27/06/02) that 80,000 people had been mutilated by unexploded landmines during the civil war. Between 4 and 5 million landmines remain in place. Accidents continue at the rate of 60 per month, and 30 per cent of those injured die of their wounds.

8.4.2 Prevention of impairment: small-group discussion

Time One hour

Objectives For participants to share knowledge or raise questions about the prevention of impairment in their community.
To identify potential sources of information about the prevention of impairment.

Preparation Flipchart paper and pens

Process Divide people into groups of four and ask them to make a list of the five most common types of preventable impairment in their country (region, community, etc.).

Next they should think about the cause of each of the impairments on their list, and write it next to its corresponding impairment.

As an example, the typical Kosovan custom of swaddling fevered babies in many layers of blankets can lead to brain damage.

They should consider how each impairment might be prevented. (In the Kosovan example, by health education and access to information.) If they don't know, or are not sure, it doesn't matter: they should just put a question mark.

After 30 minutes, each small group reports back to the whole group for five minutes.

If there are any question marks on the lists, ask other participants for suggestions. Again, it's OK if no one can answer. You can use this as an opportunity to emphasise the importance of having access to information, which most people are denied. Most people try to do the best they can, but often end up harming themselves or their relatives or patients because they cannot get the information that they need.

Where, in this community, can we get information about these things? (Other people who have had similar experiences; doctors and community workers who are trained in preventing impairment and disease; traditional healers who have a positive approach to disabled members of the community; books and newsletters; trade-union officials or other people who know about workplace safety, etc.)

Options Depending on the composition of the group, this exercise can be done without writing, either in small groups with whole-group feedback, or in the whole group from start to finish.

8.4.3 Prevention in the home: picture-based exercise

Time 20 minutes

Objectives To raise participants' awareness of potential causes of disability in the home.

Preparation If appropriate, redraw the picture in Handout 21 to fit local culture and circumstances, making sure not to omit any of the five potential accidents.

Make one copy per participant (or draw it on a board or large sheet of paper).

Process Give out the pictures and read out the story: 'Like many girls, nine-year-old Amina regularly looks after her baby brother. One afternoon her mother is suddenly called away from home. She asks Amina to look after her brother and keep an eye on the evening meal, which is cooking on the paraffin stove. Amina settles at the table to do her homework, while the baby plays in one corner. Then Amina hears a friend calling her name. She hurries to the door. Meanwhile, the baby is curious and crawls to the other side of the room.'

Participants work in pairs. They have five minutes to look at the picture and identify five things that might cause an accident, disability, or death.

Bring the whole group back together, and ask participants to call out their answers. Keep going until they have called out all five causes. Supply the answers if they miss any of them.

Can they think of other causes of accidents in the home that might put a child in danger, possibly resulting in an impairment?

Answers

1. **Unprotected cooking pot:** baby might burn himself on the pot; liquid from the pot might scald skin or damage eyes; an older child might tip the pot over, scalding and burning skin.
2. **Paraffin stove:** unguarded flames can burn skin, hair, and clothing; baby might tip the stove over, causing flames to spread; paraffin might spill, causing fire to spread; fire can spread quickly and baby cannot escape; thick smoke can cause breathlessness, disorientation, and slow reflexes.

3. **Paraffin bottle:** a baby or young child might tip an open bottle over, causing paraffin to spill on skin; or he could be poisoned by drinking paraffin.
4. **Matches:** baby might put matches in his mouth, causing obstruction or choking or poisoning; an older child might strike matches, causing burns or creating a fire that gets out of control.
5. **Knife:** young children could cut themselves on sharp edges.

Other dangers for discussion:

Burns: caused by open fires, faulty electrical appliances, or dangerous fluids, such as bleach, petrol, etc.

Cuts: from jagged tins, broken glass, etc.

Poisoning: from eating or drinking harmful things, such as fuel, medicines, etc.

Falls: from unsafe and unsupervised fixtures, stairs, balconies, ladders, etc.

HANDOUT 21

Preventing accidents in the home



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8.4.4 Fishbowl exercise

This exercise is designed to address the links between disability and human-rights abuses. It can also introduce participants to the use of fishbowl exercises, in which some of the group engage in a role play and others observe the discussion from the outside. By tapping them on the shoulder, you can get the observers to take the place of any of the role-playing participants at any point during the discussion.

The example given here was developed to fit local circumstances and structures in Kosovo, some of which will be familiar and some unfamiliar to readers in other societies. We hope that readers will use it as a starting point, and adapt it to fit their own specific contexts.

Time One hour

Objective For participants to think about and discuss a locally specific example of the abuse of disabled people's rights.

For trainee facilitators to experience the use of 'fishbowl' exercises to explore difficult issues.

Preparation No written materials to prepare. Work out a scenario and roles to suit your situation, or use/adapt the example given.

You can either ask for volunteers to play roles, or, if you think it will make the exercise more effective, you can assign particular roles to particular participants before the session (but remember their right to opt out if they don't feel comfortable about an activity).

Process Announce the roles: four doctors, one representative of the local DPO, and one (or more) observer(s). Give each set of people their instructions separately.

- **The DPO representative:** you have invited doctors from the local health clinic to a meeting, because your organisation is concerned to hear reports from its members that some doctors are routinely telling parents who have a disabled child not to have any more children. The point of the meeting is for the representative to learn about the doctors' opinions and policies; to facilitate a discussion about the advice being given to parents; and to get the doctors to consider the human-rights issues involved. (These include the parents' right to have full information and make an informed choice about whether they want to have more children or not.)

- **The doctors:** your role is to participate in the discussion as you think a doctor would (which may be different from your own personal views, which you should forget about for now). Explain that they are meeting with the local DPO representative to share what advice they would give to parents who have a disabled child and are wondering whether to have more children or not.
- **Observer(s):** your role is to watch and make a note of the dynamics of the discussion: the relationships between the various participants; how people are feeling (interested, bored, angry, insulted, argumentative, co-operative, open-minded, not listening, etc.) and how the DPO representative, as the facilitator of the discussion, responds to those reactions throughout the discussion. You should be prepared to give comments at the end about what you have seen.
- The doctors and the DPO representative should sit in a circle. The observer and the rest of the group should sit around them.
- Allow twenty minutes for discussion in role. Then bring everyone together for feedback.

Questions Do people agree/disagree with the doctors' views? Why? Why not?

Deciding to abort a foetus solely because it has an impairment is like making a statement that disabled people and their lives are without value. How do participants feel about that statement?

How does that policy fit with the Universal Declaration of Human Rights, which asserts that we are all equal and all have the right to life?

On the facilitation process: how/what did the various participants feel or observe? What happened, and why? If there were perceived difficulties (such as silences or anger), why do people think they happened? How did the DPO representative deal with it? What would others have done in his/her place?

Can difficult moments (such as silences and disagreements) be used constructively in group situations? When? How? What is the responsibility of the facilitator at such times?