

# PLAN YOUR TRAINING

## An overview of toolkit materials, plus tips and resources for trainers

This toolkit is designed to be a flexible resource that can serve training needs for a variety of audiences and settings. It is not a structured curriculum, but rather a collection of activities and materials that can be used individually or in combination, based on the timing and agenda of individual workshops.

Here is an overview of the toolkit materials to help you think about how best to structure your specific workshop.

### TOOLKIT MATERIALS

#### PLAN YOUR TRAINING

##### Sample agendas

- **One-day agenda:** This includes the most popular and effective activities if you have limited time.
- **Two-day agenda:** This layers in additional activities for further exploration of topics and ideas.

**PowerPoints for workshop flow:** Use and adapt these PowerPoint slides, which follow our one-day and two-day sample agendas, to provide visual guidance for participants throughout your training. Slides include titles of activities and instructions for each, plus logistical training pieces like welcome and introductions, the day's agenda, breaks and workshop conclusion.

**Worksheet: Calculate how many printed handouts you need.** Once you've determined your agenda and know the number of facilitators and participants, use this simple Excel spreadsheet to calculate how many facilitator guides and handouts to print for each of your chosen activities.

**Certificate of completion:** This can be adapted to include your agency's information, workshop details and each participant's name, then handed out upon workshop completion.

#### EVALUATE YOUR IMPACT

- **Workshop feedback form:** This allows participants to provide feedback on your training and the sessions they found most useful and interesting.
- **Pre- and post-workshop evaluation:** These matched pre- and post-workshop surveys evaluate your training's impact by assessing participants' values and beliefs regarding abortion before and after training.

## INSTRUCTIONAL POWERPOINTS

- **Overview of unsafe abortion** is a 15-minute presentation that introduces audiences to the global public health crisis of unsafe abortion, the factors that cause this crisis, and the proven ways to reduce unsafe abortion to improve women's and girls' reproductive health.
- **Abortion care 101** is a 30-minute introduction to abortion methods and the components of comprehensive abortion care. This presentation includes clinical information and can be tailored to suit the knowledge level of your workshop's participants.
- **The case for safe abortion in humanitarian settings** is a 30-minute presentation that highlights the reasons why refugees and those living in crisis settings are at risk for unintended pregnancy and unsafe abortion, and the reasons why safe abortion can and should be provided in these settings—including the legal grounds for provision.

## ACTIVITIES

- **Reasons why:** This activity helps participants explore the reasons why women have unintended pregnancies, why they decide to have abortions, and why governments regulate pregnancy and abortion. Participants will discuss and identify how individuals' subjective level of comfort with different reasons affects women's access to safe abortion care.
- **Cross the line:** This activity brings participants' different views on safe abortion care to the surface and addresses the connection between safe abortion care and cultural norms and stigma. It helps participants understand how cultural norms and stigma affects people's diverse views and experiences with abortion.
- **Thinking about my values:** This self-reflection and analysis activity consists of a three-part worksheet that is completed individually, followed by group or paired discussion about each part, and then debriefed as one whole group. The worksheet helps participants consider the role of certain external influences—including family/social norms, displacement, religious beliefs and age/life stage—that contribute to their current values and beliefs about abortion.
- **Why did she die?** This activity features a case study that highlights the cultural context of sexual violence against women, unintended pregnancy and lack of access to safe abortion care in humanitarian settings. Participants discuss one woman's tragic story and are asked to articulate their personal beliefs and professional responsibility to provide necessary medical care and avoid preventable deaths.
- **Personal beliefs and professional responsibilities:** This activity helps participants assess where their personal beliefs are in alignment or in conflict with their professional responsibilities to provide or support provision of safe abortion care—emphasizing the responsibility of medical-humanitarian organizations to ensure women have access to reproductive health care.
- **Four corners:** This activity involves movement around the room and allows participants to develop a deeper understanding about their own and

others' beliefs about abortion, to empathize with others' values, and to consider how personal beliefs can create stigma and affect the provision of high-quality safe abortion care.

- **Talking about abortion:** This activity helps participants anticipate challenging comments and reactions related to their provision of safe abortion care. Participants brainstorm constructive responses and gain practical experience articulating those responses, drawing on their agency's organizational documents on safe abortion care and their own experiences.
- **The last abortion:** Different scenarios in this activity highlight the complex circumstances surrounding a woman's decision to seek an abortion. Participants are encouraged to examine and challenge their biases against certain pregnant women or certain circumstances, helping to illustrate the difficulty and consequences of valuing one woman's reasons for seeking safe abortion care over another woman's reasons.
- **Comfort continuum:** This activity helps participants reflect on their level of comfort discussing, advocating for and/or providing abortion services by reflecting on their own life experiences that influenced their comfort level—and how these relate to norms on abortion.
- **Facilitating dialogue:** In this activity, a thought-provoking story is used to highlight the problem of unintended pregnancy and unsafe abortion in contexts where your agency works, and to spark discussion among participants about your agency's role in the provision of safe abortion care.
- **Closing reflections:** This activity can be completed at or near the end of a training to help participants reflect on their experiences during the workshop; identify what knowledge, feelings or opinions have remained the same or changed as a result of the workshop; express any outstanding issues or concerns related to the material that was covered; and declare "one thing I will do" as the result of the workshop.

## TIPS FOR PLANNING AND FACILITATING

Experienced VCAT trainers from around the world have shared the tips compiled here. These suggestions may be helpful in planning and facilitating rewarding VCAT workshops that have meaningful results for participants.

### PLANNING

- Work closely with co-facilitators to select activities and content for the training, which may vary depending on the mix of participants. Focus on selecting activities that will be most relevant to participants' experience, knowledge and local context—and adapt activities as needed to the local context. If participants will have limited English proficiency and you're using this toolkit's English materials without translating, select activities that do not involve participant worksheets with a lot of required writing.
- Meet with co-facilitators at least one day prior to the workshop to review workshop content and define roles. Also meet or talk with local workshop organizers to discuss country- and region-specific sensitivities and issues

that will come up for participants. For example, young, unmarried women receiving abortion care is very controversial in some settings. And depending on local laws and the public's knowledge of the law, health providers in some settings may fear being imprisoned for providing an abortion service. Make sure you understand local laws so you can address such concerns.

- Work closely with logistical coordinators to ensure access to all needed facilities (for example: breakout rooms if needed, printing of participant handouts, etc.). Review materials lists, including printed participant handouts for activities, prior to beginning your workshop. Place participant materials in folders to be handed out on the first day.
- Prepare a flipchart labeled “parking lot” or “garden” to capture ideas for later discussion throughout the workshop. A “parking lot” or “garden” is a place to write down and remember ideas, questions and concerns that the group wants to make sure are addressed, but that are not directly relevant to the current discussion or activity. Pausing a conversation that has veered off topic and identifying items to write down in your workshop’s “parking lot” or “garden” allows you to get back on track while also validating participants’ ideas and ensuring you remember to come back and address them later.
- If possible, play music and/or use a nonverbal signal (chimes, a bell, etc.) to gather participants back from activities; this helps to create an atmosphere of receptivity. Using engaging icebreaker and energizer activities also helps create a receptive atmosphere for learning.

## FACILITATING

- Remember that as a VCAT facilitator, your job is to create an open, safe space in which participants can share feelings and thoughts honestly and explore the complicated issues surrounding abortion through deep and sometimes difficult discussion. Facilitators should refrain from sharing their own subjective opinions and beliefs and from identifying some ideas as good/bad or right/wrong, as this can have a negative impact on participants’ experience and willingness to share openly and experience true growth in their own understanding of the topics. A VCAT facilitator should encourage all participants to feel comfortable openly sharing their opinions, whether they are supportive of abortion care or not.
- The goal of all the VCAT activities in this toolkit is to foster deep conversations about complicated issues. If a given activity is producing excellent engagement and conversation, you may choose to lengthen that activity because it’s going so well, and then omit or shorten other activities to compensate. A successful training does not necessarily stick strictly to the agenda and complete all activities as planned, but rather generates meaningful, thought-provoking discussion. Feel free to adjust timing of activities based on the group’s engagement level.
- Ensure that enough time is allocated on the first day for participant registration and pre-workshop evaluation. Please be sure to follow the instructions for matching pre- and post-workshop evaluations.
- In a workshop of more than one day, it’s highly recommended on subse-

quent days to include a “review/preview” five-minute section at the top of the agenda to summarize what was covered the day before and what’s coming next. An icebreaker to start subsequent days is also recommended to build group cohesiveness.

- For staff of humanitarian agencies participating in a training, it is important for them to hear from their own leadership at the beginning of the workshop about organizational policy on abortion and how abortion work will be integrated into their programs. Allow at least 15-30 minutes to present a verbal report of current policies, status of integration, and the top challenges. If an agency does not have leadership present at the training, request this material beforehand so you can provide it to participants.
- A 10-minute wrap-up session at the end of each day can help participants to coalesce the learning. It is helpful to have access to a whiteboard or flip-chart and markers for the discussion.

## RELATED RESOURCES

You may find additional helpful information for your trainings in this collection of resources that focus on abortion in humanitarian settings, comprehensive abortion care, abortion rights and policies, and values clarification training.

Center for Reproductive Rights. (2018). *The world’s abortion laws map 2018*. Interactive website: <http://worldabortionlaws.com/map/>

Fetters, T. (2006). Abortion care needs in Darfur and Chad. *Forced Migration Review, 25*, 48-49. Accessible here: <http://www.fmreview.org/sites/fmr/files/FM-Rdownloads/en/peopletrafficking/fetters.pdf>

Inter-agency Working Group (IAWG) on Reproductive Health in Crises. (2018). Inter-agency field manual on reproductive health in humanitarian settings. IAWG. Accessible here: <http://iawg.net/resource/field-manual/>

Ipas. (2013 & 2014). *Woman-centered, comprehensive abortion care: Reference & Trainer’s manuals (second ed.)*. K. L. Turner & A. Huber (Eds.), Chapel Hill, NC: Ipas. Accessible here: [www.ipas.org/HealthProviderResources](http://www.ipas.org/HealthProviderResources)

Ipas. (2018). *Clinical updates in reproductive health*. L. Castleman & N. Kapp (Eds.). Chapel Hill, NC: Ipas. Annually updated and accessible here: [www.ipas.org/clinicalupdates](http://www.ipas.org/clinicalupdates)

Lehman, A. (2002). Safe abortion: A right for refugees. *Reproductive Health Matters, 10*(19), 151–155.

McGinn T. & Casey S.E. (2016). Why don’t humanitarian organizations provide safe abortion services? *Conflict and Health, 10*(8). Accessible here: <https://conflictandhealth.biomedcentral.com/articles/10.1186/s13031-016-0075-8>

Schulte-Hillen, C., Staderini, N., & Saint-Sauveur, J. (2016). Why Médecins Sans Frontières (MSF) provides safe abortion care and what that involves. *Conflict and Health, 10*(19). Accessible here: <http://conflictandhealth.biomedcentral.com/articles/10.1186/s13031-016-0086-5>

Turner, K.L. & Page, K.C. (2008). *Abortion attitude transformation: A values clarification toolkit for global audiences*. Chapel Hill, NC, Ipas. Accessible here:

[www.ipas.org/HealthProviderResources](http://www.ipas.org/HealthProviderResources)

\* Also available: *Abortion attitude transformation: Values clarification activities adapted for young women*

Turner, K., Pearson, E., George, A., & Andersen, K. (2018). Values clarification workshops to improve abortion knowledge, attitudes and intentions: A pre-post assessment in 12 countries. *Reproductive Health*, 15(40).

World Health Organization. (2012). *Safe abortion: Technical and policy guidance for health systems (2nd ed.)*. Geneva: World Health Organization. Accessible here: <http://www.who.int/reproductivehealth/publications/unsafe-abortion/9789241548434/en/>

World Health Organization. (2014). *Clinical practice handbook for safe abortion*. Geneva: World Health Organization. Accessible here: <http://www.who.int/reproductivehealth/publications/unsafe-abortion/clinical-practice-safe-abortion/en/>

World Health Organization. (2015). *Health worker roles in providing safe abortion care and post-abortion contraception*. Geneva: World Health Organization. Accessible here: <http://srhr.org/safeabortion/>

World Health Organization. (2017). *Global abortion policies database*. Geneva: World Health Organization. Accessible here: <http://www.who.int/reproductive-health/topics/unsafe-abortion/global-abortion-policies/en/>