



Training Evaluation Report

“HIV/AIDS policies at the workplace”

**By Veronica Cretu
Training Program Facilitator/Trainer**

Training Theme: “HIV/AIDS policies at the work place”

Perioda: June 6-7, 2007

Place: Hotel Flowers, Chisinau

Trainers/Facilitators:

1. Mrs. Silvia Stratulat – Expert from National AIDS Centre
2. Mrs. Veronica Cretu – National Trainer, “CMB” Training Centre, Moldova and DiploFoundation, Malta

Program Speakers:

1. Ala Lipciu – National Correspondent, ILO Office Moldova
2. Elena Jodibin – ILO, HIV/AIDS Policies at the work place Program
3. Yulia Burmistenko – Manager, Social Issues – InterPIPE, Kiev, Ukraine. HIV/AIDS Focal Point.

Nr. of hours: 16 hours

Nr. of participants: 23

Objectives:

- To raise awareness among UNION FENOSA Company employees and employers vis-a-vis the HIV/AIDS in general: statistics, ways of transmission, problems vs. main challenges in Moldova today;
- To raise awareness among representatives of the UNION FENOSA vis-à-vis the need to implement HIV/AIDS policies at the work place;
- To familiarize the representatives of the UNION FENOSA group with a working model/Good Practice on HIV/AIDS policies at the work place, implemented by InterPIPE, Ukraine.

Topics discussed:

- HIV/AIDS - what is it?
- Ways of transmitting/infecting with HIV/AIDS;
- Impact of HIV/AIDS at the work place: statistics and numbers presented;
- Why is there a need for the HIV/AIDS policy at the work place?
- Why is there a need for the social partners to convene on a HIV/AIDS policy at the work place?
- What should a HIV/AIDS policy at the work place consist of?
- A Good Practice from InterPIPE Ukraine;
- Practical implementation of a HIV/AIDS policy at the work place.

DAY 1

Session 1 (duration 1hr 40 minutes)

Goal of the Session: Community Building

1) Presentation of the participants – the participants had 2 minutes each to find out as much information about the colleague sitting next to him/her. After working in pairs for 4 minutes, each participant had to present the person he/she talked with. They normally started the presentation with “it is my pleasure to present my colleague, etc.”

Comment: even if each participant had only 1 minute to present his/her colleague, the participants used more than 1 minute as they knew some prior information about each other. The other comment is related to the fact that the participants have not shared only the info they knew, but they tried to describe each other, which they normally don't do during the working day. This contributed to the community building even more.

2) Expectations and Threats: the Graffiti technique has been applied (with slight adjustments to the topic of the training). The participants counted from 1 to 3 and have been divided into 3 teams. Each team had a concrete task: **Team 1 had to write about WHAT EXPECTATIONS FO I HAVE FROM THIS TRAINING? Team 2: WHAT THREATS DO I HAVE VIS-À-VIS THE PROGRAM? Team 3: WHAT DO I KNOW about HIV/AIDS?**

Each team had a poster/flipchart and within each team every participant had to respond to the Q of the group without looking at what his/her colleagues are writing. Total time for the first step 3 minutes. After the teams had finished with the Expectations, Threats and What do I know about HIV/AIDS at the work place? the posters with the answers of which group have been exchanged. Thus, Team nr.1 had to respond to **WHAT DO I KNOW ABOUT HIV/AIDS?;** Team 2 **WHAT EXPECTATIONS FO I HAVE FROM THIS TRAINING?** And Team 3 **WHAT THREATS DO I HAVE VIS-À-VIS THE PROGRAM?** The participants had to read what was already answered by their colleagues, and had to complete/add new ideas if there were any. Total time for reading and adding what is missing – 5 minutes per group. **After this has been done, there has been the last exchange of posters: Team 1 Has now the WHAT THREATS DO I HAVE VIS-À-VIS THE PROGRAM? Team 2 WHAT DO I KNOW ABOUT HIV/AIDS?; and team 3 WHAT EXPECTATIONS FO I HAVE FROM THIS TRAINING?** The participants had again to read what was already answered by their colleagues, and had to complete/add new ideas if there were any. Total time for reading and adding what is missing – 5 minutes per group. After this was completed, the posters/flipcharts have been returned to the initial group – the posters “came back home”. The teams had to read everything that has been added on the poster by the other 2 teams and to make a summary of the ideas shared. Each group had to make a 3-5 minutes presentation on Expectations/Threats and What do you know about the HIV/AIDS at the work place.

Comment: This technique allows every single participant to share with the other participants in the training his/her expectations/threats and the knowledge he/she has about the topic of the training.

Session 2: Discussions on the Ways of transmission of HIV/AIDS

Ice – breaker: To help the participants learn each other's names in the most efficient way. All participants stood in a circle. The first participant had to tell his/her name and to show one gesture. The Second participant had to repeat the first participant's name and gesture as well as to say his/her name and gesture. So, that the last person should repeat all the names and gestures. There were a total of 23 participants, which means that all the names within this team have been at least repeated for 23 times.

It was a great game, thus it allowed everyone to remember the names of their colleagues, as well as the gestures have helped them remember easier, as sometimes there were participants who have remembered gestures better than the names.

Stage 1: ANALYSING THE RISKS activity - The expert on HIV/AIDS has moderated an interesting activity which served as an Evocation for the entire Session. Each participant was given a statement (on a coloured paper) related to ways of infection/transmission of HIV/AIDS and everyone had to read carefully, and determine the degree of the RISK. In the middle of the room, on the floor there were distributed 3 RISKS descriptions: **Low RISK**, **Moderate RISK** and **High RISK**. The participants had to stand up and place their statements (their paper with statement) next to the RISK it involved, by arguing and justifying his/her own decision. In case the decision was not very true, the expert would intervene, provide more details and explain how does it happen for real. There were about 23 statements analyzed and discussed.

Note: the expert did not have a long 40-45 minutes session of presentation but rather used this technique which has actively involved the participants in a brainstorming, analyses process as well as offered them the possibility to check the degree to which they were right or wrong about the decision made.

It is also important to note that the group itself has been very diverse in the sense that it had representatives starting from the Human Resources Department and ending with local offices representatives, and everyone felt free to share without any prejudices.

Session 3. The Wildfire Game and Discussions/Debriefing of the Game.

Stage 1. Before the game the participants had an ice-breaker, as it was right after the lunch and it is difficult to mobilize the participants in the second half of the day. Everyone sat on the chair in a circle in the middle of the classroom. There was only one single person in the middle who did not have a chair. In order to get seated, the person had to say a statement about HIV/AIDS that would be true about as many participants as possible (e.g. everyone who thinks that HIV/AIDS is a problem in the world today, stands up), as if the statement was true, then everyone whom it applies should have stood up and sit on a different chair. Thus, the person without the chair could have easily find a free chair. In the end, one participant/another person remains without a chair. And the game continues until 10-11 statements are made.

The purpose of the game is to have the participants apply the knowledge they got during the previous sessions.

Stage 2. Playing the Wild fire game.

Before the game the participants were familiarized with the Objectives of the game thus everyone understood that explain that the exercise is designed to make participants experience the feelings associated with HIV infection.

Note: at the very beginning everyone was interested and motivated to participate due to the fact that prior to this one, the participants have already participated in other games and ice breakers, and were opened to get involved again.

As soon as everyone knew the objectives of the game, the game started and the first step was the symbolic handshaking. The participants knew that a handshake is equivalent to having unprotected sexual intercourse. The game followed all its steps afterwards:

- A participant to be HIV infected has been selected;
- The participants experience the invisibility of infection: and they also try to identify the HIV infected person;
- Participants begin to shake hands with one another;
- After handshaking stops the participants are divide into 2 groups: those whose hands were scratched and those whose hands were not scratched;
- Outside circle and inside circle have been formed;
- Discussions are conducted with participants from both circles;
- Participants learn about their HIV Status: voluntary and confidential testing with counseling;
- Testing without consent;
- Participants develop strategies to live with the news that one is not infected;
- Participants develop strategies to live with the news that one is HIV infected;
- Participants develop strategies to live with HIV in our midst

Stage 3. Debriefing of the game – the participants discussed the importance of this game in changing ones attitude towards people with HIV; towards themselves and how to protect yourself and your family members; how to prevent the phenomena and how to inform the others about this infection. The participants, as during the previous trainings, liked the game very much and found it extremely relevant for the training program.

Session 4: Case Study: presentation of CREDINTA association: people living with HIV/AIDS by the President of this Association

During one hour the participants had the possibility to address any HIV/AIDS related questions to the leader of the Credinta Association. The President of the Association has shared

- the major challenges that people with HIV/AIDS are facing today
- the major problems faced by people with HIV/AIDS in Moldova
- lack of behavioral models
- the current stereotypes
- possible solutions

Note: Initially, it was planned that the President himself would share his own story/case, but in the last minute he refused. Anyway, the discussion was useful and the participants had the possibility to interact with someone who represents people with HIV/AIDS in Moldova.

DAY 2

Session 1: Impact of the HIV/AIDS on the work place – the goal of the session is to familiarize the participants with impact of HIV/AIDS on the work place, through the prism of current statistics.

Ice breaker – saying a nice compliment from the early morning to each other. The participants stood in a circle, with face to face to each other and had to Greet each other as well as to make a compliment. This has allowed everyone to say a compliment to his/her colleague – which does not usually happen at the work place.

Dealing with Statistics

Stage 1: The group has been divided into 4 groups, and each group received a set of number (mln) and a set of descriptions of these numbers. All they had to do was to brainstorm and to match the numbers with the descriptions, thus trying to predict what are the current statistics in regards to the number of people with HIV/AIDS both in the world and in Moldova.

Stage 2: After discussing within the groups their predictions, they could compare their results with the real dates, as each group has received a handout with the recent statistics. The expert intervned every time it was necessary to provide/illustrate any example/case, etc.

Stage 3: Based on the numbers/statistics, the participants had to reflect and come up with a list of effects/impacts of these numbers on the society/our life as well as on our workplaces.

Stage 4: they discussed impacts as well as compared later on the list they came out with the list of the impact as of ILO 2007.

Then the participants have had more discussions and found out other new details and info from the program expert.

Comment: The activity was useful indeed, as many of the participants were not aware at all about the real number of people affected/living with HIV/AIDS.

Part 2 of the Session 1. – Unlike any previous training programs, this time the participants have benefited from the presence of Yulia Burmistenko – Manager, Social Issues – InterPIPE, Kiev, Ukraine. HIV/AIDS Focal Point. Mrs.Yulia had presented

1. Current Statistics in Ukraine
2. The Good practices implemented by InterPIPE in Ukraine, as to HIV/AIDS policies at the

workplace.

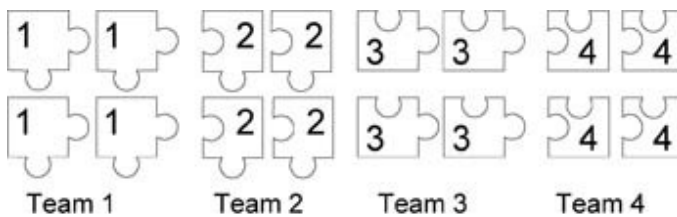
Yulia's presence was really successful for the training as such, as the representatives of the UNION FENOSA could address any possible questions related to the implementation issues.

Session 2: Policies and programs on HIV/AIDS at the work place

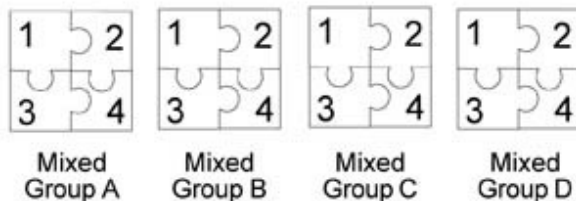
The goal of the session was to

To familiarize the participants with:

- What would a HIV/AIDS related policy change if implemented at the UNION FENOSA?
- What should a HIV/AIDS policy stipulate?
- What would change if the social partners convene on a HIV/AIDS policy?
- A lucrative model of How can a HIV/AIDS policy be implemented at the work place?



JIGSAW Technique was used for the purpose of discussing the Policies and Programs on HIV/AIDS at the work place (all the materials and questions are available)



Step 1: The group was divided into teams of 4 people: and they counted 1,2,3 and 4. This were home groups created. The participants had to remember who was in their home group.

Step 2: Next, the participants grouped per numbers: **1 to 1, 2 to 2, 3 to 3, and 4 to 4.**

And these were the expert teams. Each expert team received a piece of material (different for each group) related to HIV/AIDS at the work place. They had some time to discuss within the group, after reading the new material, a certain question. Besides, each expert group had to be able to respond to the question addressed to the group and to be able to “teach” the new information when going back to the “home” group.

Step 3: When each expert team was ready to share the new information with the Home colleague, everyone returned back to the home group. Within each home group, every expert had to “teach” his/her part. (see row 2 in the picture)

Step 4: After all home groups got acquainted with all the information related to HIV/AIDS policies at the workplace, each home team had a certain Question to answer and to prepare a presentation.

Note: the group has been divided into 6 small teams:

Team 1 had to make a presentation on: What would a HIV/AIDS related policy change if implemented at the UNION FENOSA?

Team 2 on What should a HIV/AIDS policy stipulate?

Team 3 on What would change if the social partners convene on a HIV/AIDS policy?

Team 4 A lucrative model of How can a HIV/AIDS policy be implemented at the work place?

Team 5: Has elaborated a list of all questions that remained unanswered by Mrs. Yulia from Ukraine;

Team 6: Acted as if they were journalists and they were the only group/team authorized to post questions to any of the teams during the presentations.

Step 5: Interactive presentation by the teams, which used the posters and tried to illustrate graphically the answers to the questions.

Comment: The activity was very active, the participants learned much new information in a very short time

– could actively participate in the discussions and elaboration of concrete answers and proposals. Actually the representatives of the UNION FENOSA Group have made presentations on clear proposals that could be implemented at the FENOSA work place.

Session 3: Elaboration of the Intervention plans

Session 3 started with an ICE-BREAKER called “the horses” in order to “wake up” the participants after lunch.

The participants were asked to make a circle in the middle of the room. Everyone sat on the chair and had to sit very close to the colleagues next to him/her. The moderator explained that for 5 minutes everyone imagines that he/she is a horse and by this everyone should imitate some moves and noise made by the horse. At the moderator’s sing the participants had to imitate all together starting from slow moves and increasing to very fast.

This activity contributed to very good atmosphere since the very beginning of the day, even it did not have any direct link to the topic of the day. The participants have enjoyed it a lot.

Comment: the participants liked it a lot, it was much fun and it gave them new energy to work on the Intervention Plans during the Session. Besides, after debriefing this game, everyone agreed that only due to the fact that they have acted together the group made such an excellent game. And that only together they can elaborate and implement concrete proposals related to HIV/AIDS at the work place.

Stage 2 of the Session 3 – Every participant has received handouts with “Intervention Plan” in which the task was to identify and describe the first step that should be undertaken at the UNION FENOSA. There were very many concrete and realistic suggestions shared. All the steps proposed by the FENOSA Group are present below:

STEP 1:

- Free distribution of condoms
- Distribution of booklets with information about HIV/AIDS (calendars, T-shirts);
- Discussion with families about HIV/AIDS and protected sex; informational events at work place;
- Trainings on this topic, I think they are the most efficient. Advantages: cost, rationally used time, efficiency, result;
- Implementing seminars about HIV/AIDS;
- Making presentations on HIV/AIDS topic;
- Periodically inform staff about HIV/AIDS;
- Organizing different seminars; to introduce some compulsory classes;
- To inform the customers while they are waiting online for the operator to answer (on the phone);
- Trainings, informational campaigns for the employee;
- Approval and implementation of an adequate policy;
- Approval of an action plan and its implementation;
- Establishing posters on the territory of an eEnterprise (halls), which would attract the employers attention on HIV/AIDS infection risks;
- Announcements on internet which will include 2 more illnesses as tuberculoses and hepatitis;
- Round table discussions;
- Conferences on this topic, in which both the employees and employers should participate;
- Open Doors days organized by organisations which activate in HIV/AIDS field;
- Information campaigns at the work place, schools, kindergartens;

STEP 2:

1. Essay Contest;
2. Sports events;
3. A TV announcement/video clip;
4. Special reports on HIV/AIDS by doctors;
5. Seminars with families;
6. Giving the workers a day off for taking the HIV/AIDS test;
7. a Session with a “questions – answers” with the employers;

STEP 3:

1. Fee of charge tests;
2. Drawing contests for children;
3. The persons who took part in such a seminar to receive red ribbons;

STEP 4:

1. Hot line 24 hrs from 24

10 minutes – Final Evaluation of the Program.**Quantitative Analysis
of the Evaluation Questionnaires**

The participants have been asked to evaluate each of the following aspects of the training program on a **1 to 4 marking scale**, in which the participants mark with 1 if they strongly disagree, with 2 if they have a moderate disagreement, 3 if they agree and 4 if they strongly agree.

3. **The training objectives have been accomplished:** 21 participants marked with 4 points; and 3 participants marked with 3 points. An additional comment were: I liked the real case with HIV/AIDS positive persons; I found out useful methods; the information was interesting; very heart touching, bravo, fully happy with this program.
4. **The topics/themes/issues have been successfully chosen for this training:** 18 participants marked with 4, 6 participants marked with 3. Additional comments: only Mr. Igor could have rendered the real emotions; less presence of Mr. Igor; interesting and useful; there were chosen specific; simple and easy to understand;
5. **The training methods have been appropriately selected for the purpose of this training program:** 21 participants marked with 4, 3 participants marked with 3. Additional comments were: you can remember more than 50% of the information; it was educational and useful; the ice-breaking games were made on time; the training was successful.
6. **The training methods have been efficiently applied:** 20 participants marked with 4, 4 participants marked with 3. An additional comment: useful information; rational.
7. **The training program was useful:** 23 participants marked with 4, 1 participant marked with 3. An additional comment were: very useful: it is good to know more and more information; new knowledge and impressions.
8. **The atmosphere has contributed to the success of the program:** 24 participants marked with 4 and . An additional comment: I felt myself good being among my colleagues discussing such kind of things; sure.
9. **I have been actively involved in the learning process:** 18 participants marked with 4, 5 participants marked with 3. An additional comment: I found out new and useful things; work in team; without realizing this now I have more knowledge.
10. **The program has been well organized:** 22 participants marked with 4, 11 participants marked with 3. An additional comment: we'll use the learned things; perfect.
11. **I will apply the knowledge/skills gained during the program:** 18 participants marked with 4, 6 participants marked with 3. An additional comment: I will share the information with my friends and colleagues.

12. **My reaction/impressions vis-à-vis the program are positive:** 21 participants marked with 4, 3 participant marked with 3. An additional comment: it is very useful; sure; very much.

13. **I will recommend this training program to other colleagues:** 21 participants marked with 4, 3 participants marked with 3. An additional comment: sure; sure it will be very useful for them; of course.

14. **No Other /Additional comments.**

15. **Name 2-3 topics/issues out of which you learned the most:**

- how to behave with a HIV/AIDS positive person,
- the examples and presentations from Ukraine;
- transmission ways, “WILDFIRE Game”,
- real data; protection
- implementing HIV/AIDS policy at the work place;
- case from Ukraine
- the international and international organizations’ statistics, actions at work place;
- HIV/AIDS: virus transmission/infection;
- HIV/AIDS policies at the work place;
- methods of treatment of HIV/AIDS;
- I’ve learned a lot about ways of transmission,
- training’s methodology;
- the expert from Ukraine;
- danger of the HIV/AIDS;
- the ways of prevention and fight;
- prevention’s way.
- The possible ways of contamination;
- how to behave with an infected person;
- games that make you think;
- the results of treatment;
- new treatment ways;
- information about HIV/AIDS: the transmission ways and the ways through which you can’t be infected;
- teaching methods;

16. **Name 2-3 topics/issues which you would like to learn more about in the future:**

- protection methods; transmission ways
- legislation of Moldova, examples of organizations which apply HIV/AIDS policies in Moldova
- training for companies on the topic;
- to train the children
- presence of an HIV infected person – direct discussions
- transmission ways;
- trainings for families
- how to present and to explain such things to the children;
- discussions, seminars, trainings;
- concrete actions, case studies and methods;
- more information to more organizations;
- How to overcome the fear;
- the virus’s modification;
- HIV/AIDS Policies and Programs at the work place;
- Ways of implementing HIV/AIDS policies within a certain organization.

17. **Name 2-3 topics/issues out of which you have learned the most:**

- the method from the 3rd part – JIGSAW;
- JIGSAW;
- the game “WILDFIRE”, team work
- JIGSAW

- to do such a training in open air (in the summer);
- JIGSAW
- the 1st methodology –ways of transmission classification; JIGSAW
- JIGSAW
- training methods –team work;
- discussions, the medical expert;
- the games
- I liked the test that Mrs. Silvia has made, due to which we understood more about HIV/ADIS

18. What topics/issues would make this training program more meaningful:

- this training should be done more often and with different categories of people;
- more seminars of such kind. After you get such information there is need of some time to realize how important it is, and during the next seminar to get answers to the questions that will appear.
- video materials
- much more information through psychological way
- thank you very much, you are supper!
- how to give more efficient the information to other persons?
- guests whom we could ask more questions;
- I have nothing to add, everything was good!
- different kinds of games according the topic;
- the training was good, but it is more easy to remember the information through games;
- team work in different cases;
- I think this is enough so how it is now;
- It is too less time to remember and to learn everything about virus;
- to invite infected persons
- more video materials

19. Additional comments:

- This course is very useful because there are a lot of things which are not known and the population should be informed as fast as it is possible, that means that such trainings must be done more often
- It would be interested to do a training with the presence of an infected person. I think it is necessary to treat this illness in comparison with other dangerous ones and which can be prevented, that could diminish fear when you find out that a person is infected. It also could be a good to pay attention to the infected persons' attitude towards the society;
- the training is very efficient
- no comments;
- more such kind of trainings on different topics which provoke risks;
- I suggest to use music during the game "WILDFIRE", this will help the person to really be in that role;
- Everything was great. Thank you!
- I wish such trainings to be done more often in which more people could participate;
- Everything was interesting. I found out a lot of new information
- There should be organized more trainings of this kind.