Participant Manual
Version 3.0

Pre-Exposure Prophylaxis (PrEP)
Training of Trainers

PEPFAR

ICAP
Empowering Health
Columbia University
Mailman School of Public Health

Recommended Citation

FOREWORD

Despite remarkable progress in HIV treatment, annual new infections have hovered close to 2 million globally for several years, with an estimated 1.8 million new HIV infections in 2017. Thus, large numbers of individuals remain at substantial risk for acquisition of HIV infection. Key populations at substantial risk include sex workers (SW), men who have sex with men (MSM), transgender persons (TG), and people who inject drugs (PWID), as well as other priority populations such as sexually active adolescent girls and young women in southern Africa. These realities compel the need for continued efforts to expand access to effective HIV prevention interventions while at the same time continuing the scale-up of access to HIV treatment programs for individuals living with HIV.

PrEP is an efficacious HIV prevention intervention. It involves the use of antiretroviral drugs (ARVs) by HIV-negative persons to prevent acquisition of HIV. Several clinical trials have demonstrated the efficacy of PrEP in MSM and transgender women, serodiscordant couples, heterosexual men and women, and PWIDs. PrEP is provided as a component of a package of HIV prevention interventions, including regular HIV testing, promotion and provision of condoms, screening and management of sexually transmitted infections (STIs), risk reduction counseling, and harm reduction interventions. There is global consensus that PrEP is an important tool in the package and that it should be offered to people at substantial risk of HIV infection as part of a combination HIV prevention approach.

Health care providers, and HIV service providers in particular, are important gatekeepers of PrEP and play a crucial role in creating HIV prevention programs that are effective and that reach individuals who would benefit from PrEP the most. The goal of ICAP's PrEP training package is to equip clinical providers with the skills to provide PrEP in a safe, effective manner. The training provides information on the evidence for PrEP effectiveness, on PrEP procedures, and on monitoring and evaluation of PrEP service delivery. PrEP offers a unique opportunity to confront the HIV epidemic, prevent HIV acquisition by individuals at risk for HIV, and reach global targets.

This training of trainers (TOT) was developed specifically to complement ICAP's *Pre-Exposure Prophylaxis (PrEP) Training for Providers in Clinical Settings.* (For simplicity, subsequent references to this training and its associated manuals will be to the *PrEP Training for Providers in Clinical Settings.*) This TOT's goals are to:

- Review key PrEP information and skills from the ICAP PrEP training with the individuals who will deliver the training to providers.
- Introduce those trainers to the concepts and principles behind effective training for adults and how they can be implemented.
- Give trainers practice in delivering various types of participatory training sessions from the ICAP PrEP training.

The TOT is intended for health care workers who are already familiar with the basics of HIV prevention care and treatment, and who, ideally, have at least some experience delivering training in clinical settings. It is anticipated that facilities will need to adapt this training to reflect specific local contexts and new research and experience in the use of PrEP.

ICAP at Columbia University
New York City, March 2019
Web: http://icap.columbia.edu

CONTENTS

Appendix

HOW TO USE THIS MANUAL

This participant manual is divided into 3 modules, each containing the learning objectives, all content to be delivered, scenarios, role-plays, and pair or small group activity instructions. You will use the manuals throughout the training. In some training sessions, you will close your manuals in order to attend to an interactive trainer presentation. In other sessions, you will have your manuals open in order to read content or follow activity instructions. You should retain your manuals after the training's end.

The appendix of this manual contains training tips and descriptions of trainer roles and responsibilities. You may use the appendix as a resource when preparing to deliver trainings yourself.

MODULE 1: REVIEW OF KEY PrEP TRAINING CONTENT

Module 1 is a review of key sessions from the *PrEP Training for Providers in Clinical Settings*. Your trainer will not deliver the entire *PrEP Training for Providers in Clinical Settings*. Instead, she or he will deliver key sessions to familiarize you with that content and allow you to experience a few of the sessions that you will eventually lead yourself as a trainer.

LEARNING OBJECTIVES

After completing Module 1, you will be able to:

- Identify key content from the *PrEP Training for Providers in Clinical Settings*.
- Experience sample PrEP training sessions that you will deliver as trainers.

SESSION CONTENT

Key sessions from the *PrEP Training for Providers in Clinical Settings* to be reviewed during Module 1 include:

PrEP Module 1

- Session 1.3. Introduction to Pre-Exposure Prophylaxis.
- Session 1.4. Evidence That PrEP Works.
- Session 1.5. PrEP Regimens, Side Effects, Drug-Resistant HIV, and Sexually Transmitted Infections.

PrEP Module 2

- Session 2.2. Eligibility Criteria—Substantial Risk of HIV Infection.
- Session 2.4. The Pre-Exposure Prophylaxis (PrEP) Screening for Substantial Risk and Eligibility Form.

PrEP Module 3

- Session 3.3. Integrated Next Step Counseling.

PrEP Module 4

- Session 4.1. Managing Creatinine Elevation, Seroconversion, and Special Situations.
- Session 4.2. Minimizing Stigma.

Training of Trainers

MODULE 2: PARTICIPATORY TRAINING PRINCIPLES AND TECHNIQUES

LEARNING OBJECTIVES

After completing Module 2, you will be able to:

- Describe an effective training experience you had as an adult.
- Name key characteristics and components of effective training.
- Describe what a discussion is and give tips on leading one.
- Name the main principles of adult learning.
- Give examples of how trainers can put principles of adult learning into practice when delivering trainings.
- Describe what a brainstorm is and give tips on leading one.
- Identify examples of how principles of adult learning have been put into practice during a particular training.
- Demonstrate how to give constructive feedback to a colleague.
- Describe what a role-play is and give tips on leading one.
- Describe what a scenario is and how it may be used in participatory training.

MODULE CONTENT

INTRODUCTION TO PARTICIPATORY TRAINING

Most providers become trainers because they are highly experienced in the subject matter to be delivered—for example, HIV diagnosis and treatment. But they may not have had as much exposure to adult learning principles and participatory teaching methodologies.

Module 2 introduces the main concepts and principles behind effective participatory training for adults and how you can implement them when you deliver the PrEP training or any other participatory training.

ADULT LEARNING PRINCIPLES

A large body of research and writing exists on adult learning, and there are various theories about how adults learn best. Most academics and practitioners, however, agree that certain basic principles should guide the design and implementation of any adult learning experience.[1]

Respect—Adult learners must feel respected and feel like equals.

Affirmation—Adult learners need constructive feedback and praise.

Experience—Adult students learn best by drawing on their own knowledge and experience.

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[1] Section adapted from Partners in Health. *Household Development Agents and Human Rights Facilitator Manual: A Unit from the Household Development Agent Training Series.* Boston, MA: Partners in Health; 2011.

Relevance—Learning must meet adults' real-life needs.

Dialogue—Trainers and learners must enter into dialogue and learn from one another.

Engagement—Adult learners must engage with the material to be learned through dialogue, discussion, and learning from peers.

Immediacy—Adult learners must be able to apply the new learning immediately.

20–40–80 Rule—Adult learners typically remember 20% of what they hear, 40% of what they hear and see, and 80% of what they hear, see, and do.

Thinking, Feeling, and Acting—Teaching is more effective when learners think, feel (emotions), and act (do something with new knowledge).

Safety and Comfort—Adult learners need to feel safe and comfortable in order to participate and learn. They need to know that their ideas and contributions will not be ignored or belittled.

PRINCIPLES OF ADULT LEARNING IN PRACTICE[2]

Respect—Adult learners must feel respected and feel like equals.

- ❑ Create and follow ground rules.
- ❑ Do not judge, interrupt, or scold participants.
- ❑ Take participants' questions seriously and respond promptly.
- ❑ Arrive on time and keep track of time during the training.
- ❑ Ask participants to introduce themselves at the beginning of the training.
- ❑ Prepare for the training in advance so that you use the time effectively.
- ❑ Treat all people equally, regardless of gender.
- ❑ Other ideas?

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Affirmation—Adult learners need constructive feedback and praise.

- ❑ Thank participants for their ideas.
- ❑ Incorporate participants' ideas into the body of knowledge they will take away from the training.
- ❑ Point out what participants already know and are skilled at.
- ❑ Other ideas?

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[2] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual*.

Experience—Adult students learn best by drawing on their own knowledge and experience.

- ❑ Find out what experience participants have with the topic (e.g., study registration forms, talk with participants before the training and during breaks and lunch).
- ❑ Ask questions that elicit participants' experiences.
- ❑ Ask more experienced participants to share their knowledge when appropriate (by demonstrating a role-play or sharing how they would handle a case).
- ❑ Other ideas?

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Relevance—Learning must meet adults' real-life needs.

- ❑ Find out what participants will need to know and do on the job and tailor training activities accordingly.
- ❑ Give participants practice with processes and tasks they will need to do on the job.
- ❑ Adapt scenarios, case studies, or role-play activities to reflect participants' specific contexts.
- ❑ Ask how participants will implement what they have learned and what challenges they will face when doing so.
- ❑ Other ideas?

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Dialogue—Trainers and learners must enter into dialogue and learn from one another.

- ❑ Ask open-ended discussion questions that do not require a single correct answer.
- ❑ Give participants many opportunities to ask questions of you and of one another.
- ❑ Respond to participants' questions by asking other participants how they would answer or what they know about the topic.
- ❑ Encourage participants to answer each other's questions.
- ❑ Arrange chairs so that participants are facing one another.
- ❑ Encourage participation from everyone.
- ❑ Other ideas?

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Engagement—Adult learners must engage with the material to be learned through dialogue, discussion, and learning from peers.

- ❑ Incorporate a variety of activities that promote engagement—for example, discussion, case studies, and role-plays.
- ❑ Use small group activities to increase engagement.
- ❑ Ask participants what questions or comments they have about what has been presented.
- ❑ Other ideas?

Immediacy—Adult learners must be able to apply the new learning immediately.

- ❑ Give participants practice with processes and tasks they will implement on the job.
- ❑ At the training's end, ask participants to name ways in which they will implement what they have learned.
- ❑ After the training, follow up with participants, if possible, to find out how they are using what they learned.
- ❑ Other ideas?

20–40–80 Rule—Adult learners typically remember 20% of what they hear, 40% of what they hear and see, and 80% of what they hear, see, and do.

- ❑ Give participants practice with processes and tasks they will implement on the job.
- ❑ Use visuals if appropriate.
- ❑ Incorporate a variety of activities where participants must do something with what they have learned (e.g., analyze a case study, perform a role-play, or discuss challenges and strategies).
- ❑ Other ideas?

Thinking, Feeling, and Acting—Teaching is more effective when learners think, feel (emotions), and act (do something with new knowledge).

- ❑ Incorporate a variety of activities where participants must think about and do something with what they have learned (e.g., analyze a case study, perform a role-play, or discuss challenges and strategies).
- ❑ Ask participants to name challenges they may face when implementing what they have learned, and strategies for addressing those challenges.
- ❑ Other ideas?

Safety and Comfort—Adult learners need to feel safe and comfortable in order to participate and learn. They need to know that their ideas and contributions will not be ignored or belittled.

- ❑ Create and follow ground rules.
- ❑ Do not judge, interrupt, or scold participants.
- ❑ Review logistics at the beginning of the training (i.e., break times, bathroom locations, food to be provided).
- ❑ Provide timely morning, afternoon, and lunch breaks.
- ❑ Provide comfortable seating and a place to write, a comfortable room, drinks and food, pens and notebooks, and name tags.
- ❑ Use open, friendly body language.
- ❑ Observe participants carefully. If attention or energy is flagging, or participants seem confused, address the situation as appropriate.
- ❑ Agree to keep confidential all delicate information, client information, and stories that participants share.
- ❑ Other ideas?

▶ *Some items in the Principles of Adult Learning in Practice appear more than once, as they support more than one principle of adult learning.*

CONSTRUCTIVE FEEDBACK

What Is Constructive Feedback?

Constructive feedback means giving a person concrete observations and advice about how he or she has performed—observations and advice that the person can use to construct an improved performance the next time around. Constructive feedback is given in a positive way that is not overly critical. [3]

Why Give Constructive Feedback?

Giving concrete observations and advice that help someone improve her or his performance, in a positive tone, is part of creating an effective learning environment. Constructive feedback upholds the principles of adult learning—by affirming and respecting participants, encouraging dialogue, using participants' own experiences, and creating a safe and comfortable environment for learning.

How to Give Constructive Feedback

- First, tell the person what she or he did well. (This will make the person more receptive to hearing what she or he needs to do in order to improve.)
- Next, tell the person what she or he can do to improve.
- Be brief.
- Be specific.
- Be positive and encouraging.
- Be honest.
- Be respectful.

How to Receive Constructive Feedback

- Do not defend or explain your performance; simply listen and accept the feedback.
- If you do not understand a suggestion, ask for clarification.
- Ask for specific suggestions for improvement.
- Reflect on the feedback, and use relevant suggestions to improve your performance going forward.

CONSTRUCTIVE FEEDBACK ROLE-PLAY PRACTICE
Constructive Feedback Role-Play Scenarios

Trainer

You have just led a training session where participants have practiced role-playing provider–client counseling. A pair of participants has demonstrated their role-play in front of the whole group, and you have debriefed their role-play with the group. Participants have been very polite and have offered only positive, very general comments such as, "You did very well." You feel that the participant playing the provider in the

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[3] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual*.

role-play was too harsh, scolding and lecturing the client and telling the client what to do. Give the participant constructive feedback on that performance.

Participant
You have just participated in a training session where you and other participants practiced role-playing provider–client counseling. You and your pair partner have just demonstrated your role-play in front of the whole group. You feel that you have done very well. In particular, you are proud of having identified specific problem behaviors, clearly explained why the behavior is undesirable, and given the client comprehensive education on how to correct the behaviors. During the role-play debrief, other participants tell you that you have done very well. The trainer will give you constructive feedback on your performance.

PARTICIPATORY TRAINING TECHNIQUES

Discussion
A discussion is a dialogue between participants and the trainer, with participants responding to discussion questions and one another's ideas, and the new questions that surface. In leading a large group discussion, trainers must keep participants focused, actively elicit responses, and limit participants who like to talk a lot. Participants having small group discussions must take on these roles themselves.[4]

To Facilitate a Discussion
- Set a time limit and keep track of time.
- Explain that participants who want to speak should raise their hands.
- Keep the discussion on target and moving along.
- Encourage everyone to participate and call on everyone who raises a hand.
- Limit participants who like to talk a lot.
- Ask questions to encourage more responses to a question—for example: "What else?" and "What other ideas do you have?"
- Wrap up the discussion by repeating and summarizing main points.

Benefits of Using Discussion During Training
- Small groups

    - Many people feel more comfortable speaking in small groups than in a large group, so small groups tend to elicit participation from everyone and more ideas.
    - When the topics are sensitive, participants may share ideas in a small group that they would be reluctant to share in a large group.

- Large groups

    - Participants hear everyone else's ideas.
    - Hearing more ideas can stimulate further discussion.

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[4] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual*.

- Participants who do not feel comfortable speaking in a large group can participate by listening.

Challenges of Using Discussion During Training
- Small groups
  - Effective small group discussion depends on group members facilitating and participating well, and some small groups may do this better than others.

- Large groups
  - Participants who are more talkative or more assertive may dominate large group discussions.
  - Shy or less experienced participants may not feel comfortable speaking in a large group.

- Both small and large groups: Discussions may go off track if there are many competing ideas or if the discussion is not managed well.

Brainstorm

In brainstorms, the trainer asks a question or poses a problem and asks participants to respond with as many ideas as they can think of. Brainstorming may be used with both large and small groups. The purpose is to produce as many ideas as possible.[5]

To Facilitate a Brainstorm
- Explain that the goal is not to arrive at a single correct answer but to produce as many responses as possible.
- Take a single idea at a time. Make sure all participants share ideas.
- Keep the pace lively.
- Encourage all participants to give ideas—do not rely on a few participants to do all the talking.
- After the brainstorming, review, organize, and prioritize responses with participants.
- If participants brainstorm in small groups, ask groups to keep the points above in mind as they work.

Benefits of Using Brainstorms During Training
- Participants can generate many ideas quickly.
- Brainstorming energizes and engages participants.
- Because there is no single correct answer, most participants feel comfortable giving ideas.

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[5] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual*.

Challenges of Using Brainstorms During Training
- Some participants may offer ideas that are not appropriate.
- More talkative participants may dominate.
- Brainstorming may get off track if there are many competing ideas or if the brainstorm is not managed well.

Role-Play

A role-play is a brief informal performance where participants act out roles in order to practice handling a particular problem or situation and to experience what it is like to be in those roles. Role-playing is informal; participants do not need to memorize dialogue or perform perfectly—the point is to experience the situation and learn from that experience.[6]

To Facilitate a Role-Play
- Give clear instructions for the role-play (using the instructions included in the training session steps).
- Set a time limit for role-play practice and performance, and manage the time well.
- Remind participants that role-playing does not require a perfect performance but rather gives them an opportunity to practice handling real-life situations. It is fine to make mistakes during role-play.
- Debrief the role-play with a large group discussion (using the debriefing questions included in the training session steps).

Benefits of Using Role-Play During Training
- Role-play is active, engages participants, and gives them the opportunity to think, feel, and act.
- Role-play gives participants a chance to practice skills in a safe setting and get feedback.
- Role-play can help to identify potential challenges to implementing a process or procedure.

Challenges of Using Role-Play During Training
- Role-plays take time.
- Some participants may be uncomfortable performing in front of others.
- Participants may not have experience with role-play.

Scenarios

A scenario is a brief description of a realistic situation that participants discuss and analyze. Scenarios give participants the opportunity to apply newly acquired knowledge to a particular problem or situation and to generate possible solutions to challenges presented in the scenario. Scenarios may be used to create role-plays, or simply to discuss and analyze a particular situation.[7]

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[6] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual.*

[7] Section adapted from Partners in Health, *Household Development Agents and Human Rights Facilitator Manual*

To Use Scenarios Effectively
- If participants will use the scenario in small groups or pairs, give clear instructions (using the instructions included in the training session steps).
- If you write your own scenarios, make them simple and brief. Use realistic situations similar to those that participants routinely face. Give essential information and leave out unnecessary details.
- Provide questions to guide participants in analyzing the scenario and a list of essential points to be covered in discussion for yourself and co-trainers.

Benefits of Using Scenarios During Training
- Scenarios give participants the opportunity to apply information that they have learned to a realistic situation.
- Scenarios give participants the opportunity to practice handling problems that they might encounter on the job.

Challenges of Using Scenarios During Training
- Scenario discussions may require more time than traditional presentations.
- Participants with limited literacy skills may need help reading longer scenarios.

MODULE 3: PRACTICE DELIVERING PARTICIPATORY TRAINING

LEARNING OBJECTIVES

After completing Module 3, you will be able to:

- Prepare to deliver a participatory training session with a co-trainer.
- Deliver a practice training session using participatory techniques that uphold the principles of adult learning.
- Give constructive feedback to colleagues on their training delivery.
- Name potential challenges to delivering the *PrEP Training for Providers in Clinical Settings* at your facilities, and describe strategies for addressing the challenges.

SESSIONS FOR TRAINING DELIVERY PRACTICE

PrEP Training for Providers in Clinical Sessions Trainer Manual

Session 2.2. Eligibility Criteria—Substantial Risk of HIV Infection
- You will have 20 minutes to deliver this session.
- You will deliver Steps 1–11.
- During your delivery, give small groups about 7 minutes to brainstorm the screening questions.
- Materials: Slides for Session 2.2.
- This is a brainstorm. (Brainstorming will be reviewed in detail on Day 2.)

Session 2.4. The Pre-Exposure Prophylaxis (PrEP) Screening for Substantial Risk and Eligibility Form
- You will have 20 minutes to deliver this session.
- You will deliver Steps 3–11.
- During your delivery, give small groups about 7 minutes to discuss the scenarios.
- Be sure to complete Step 9. You may not have time for Steps 10 and 11.
- Materials:
  - Slides for Session 2.4.
  - Photocopies of the Pre-Exposure Prophylaxis (PrEP) Screening for Substantial Risk and Eligibility form from the PrEP M&E Tool Package, 1 per participant.
  - Session 2.4 clinical scenarios from the *PrEP Training for Providers in Clinical Settings* participant manual.
- This is a scenario discussion. (Scenarios will be reviewed in detail on Day 2.)

Session 2.5. PrEP Screening Tool Practice
- You will have 20 minutes to deliver this session.
- You will deliver either Part 1 (Steps 1–4) or Part 2 (Steps 5–11 only).

- During your delivery, for Part 2, give pairs a maximum of 10 minutes to practice role-playing.
- Materials:
  - Slides for Session 2.5.
  - Photocopies of the Pre-Exposure Prophylaxis (PrEP) Screening for Substantial Risk and Eligibility form from the PrEP M&E Tool Package, 1 per participant.
  - Session 2.5 Screening Role-Play Scenarios from the *PrEP Training for Providers in Clinical Settings* participant manual.
- This is a role-play. (Role-play will be reviewed in detail on Day 2.)

Session 3.2. Initial Counseling—Adherence Support
- You will have 20 minutes to deliver this session.
- You will deliver Steps 1–6.
- During your delivery, give small groups about 7 minutes to brainstorm.
- Materials: Slides for Session 3.2
- This is a brainstorm. (Brainstorming will be reviewed in detail on Day 2.)

Session 3.3. Integrated Next Step Counseling
- You will have 20 minutes to deliver this session.
- You will deliver Part 2 (Steps 20–24) or Part 3 (Steps 25–31 only).
- During your delivery, for Part 3, give pairs a maximum of 10 minutes to practice role-playing.
- Materials:
  - Slides for Session 3.3.
  - iNSC Role-Play Scenarios and the table of iNSC steps, components, and examples from the *PrEP Training for Providers in Clinical Sessions* participant manual.
- This is a role-play. (Role-play will be reviewed in detail on Day 2.)

Session 3.4. PrEP Follow-Up Visits
- You will have 20 minutes to deliver this session.
- You will deliver Steps 1–10 and Steps 16–17.
- During your delivery, leave at least 7 minutes for Steps 16–17.
- Materials: Slides for Session 3.4.
- This is a brief trainer presentation and case study discussion. (Trainer presentations and case studies will be reviewed in detail on Day 2.)

Session 3.5. PrEP Challenges and Strategies
- You will have 20 minutes to deliver this session.
- You will deliver Steps 1–8.
- During your delivery, give small groups about 7 minutes to brainstorm.
- Materials: Slides for Session 3.5.
- This is a brainstorm. (Brainstorming will be reviewed in detail on Day 2.)

Session 4.2. Minimizing Stigma

- You will have 20 minutes to deliver this session.
- You will deliver Steps 1–9.
- During your delivery, give small groups about 7 minutes to brainstorm. Groups need write only a few strategies on their flip chart sheets.
- Materials:
    - Slides for Session 4.2.
    - 1 sheet of flip chart paper and 1 marker per small group.
    - Tape for posting flip chart sheets on the walls.
- This is a brainstorm and gallery walk. A gallery walk is when participants walk around the room looking at one another's work. (Gallery walks are explained in PrEP Session 4.2, Minimizing Stigma. Brainstorming will be reviewed in detail later on Day 2.)

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Appendix
TRAINER ROLES AND RESPONSIBILITIES AND TRAINING TIPS

Roles and Responsibilities of the Trainer

Trainers Set the Standards for the Discussion—As the trainer, you must stay focused, alert, and interested in the discussion and learning that is taking place. You create the standards of communication by looking around the room at all participants, listening closely, and encouraging contributions from everyone.

Trainers Make the Training Environment a Priority—You are in charge of deciding everything, from how the tables and chairs are set up to where small group exercises will take place, and all other logistical issues. You are also responsible for judging how the physical environment of the training affects participants' engagement and learning and for making any necessary changes.

Trainers Keep Track of Time—It is easy to overschedule activities and not incorporate enough down time for participants. Always allow for activities to take longer than expected.

Trainers Explain the Purpose of Each Learning Activity and its Significance to Participants—Additionally, tell participants how much time you expect to spend on each activity.

Trainers Keep the Discussion Moving—They do this using various techniques and tools when tension arises or discussion slows. You must be prepared with strategies to keep participants engaged and learning.

Trainers Pay Attention to Participants' Behavior—You should observe verbal and nonverbal cues from participants and take appropriate actions to meet both spoken and unspoken needs.

Trainers Are Responsible for Ensuring Confidentiality in the Learning Environment—During the training, participants may share clinical scenarios as well as stories of how they, their colleagues, and their managers have handled different scenarios in the workplace. They may also share stories about themselves or their friends—stories that are personal and not meant to be discussed outside the classroom. Typically, these stories are brought up to illustrate a lesson learned or to exemplify current practice. Encourage participants to feel safe sharing by explaining that all such information will remain confidential. Also, ensure that you serve as a role model in maintaining confidentiality.[8]

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[8] Section adapted from: Bonner Network Wiki [Internet]. Kinser L, ed. Facilitation 202: more techniques and strategies. *Bonner Training Modules (with Descriptions)*. San Mateo, CA: PBworks; [date unknown]. Available at: http://bonnernetwork.pbworks.com/w/page/13112080/Bonner-Training-Modules-(with-Descriptions). Accessed January 25, 2019.

Trainer Preparation Checklist

Trainer Checklist

✓	Before the Training Program
	Read the learning objectives, technical content, discussion questions, session steps, and any role-play scenarios or exercises.
	Prepare for each session by reading all session steps, scenarios, and exercise instructions.
	Obtain and organize the materials needed for the training.
	Review the PowerPoint slides and become familiar with their content. Practice using the computer and LCD projector (or any other type of presenting and training material) and presenting technical content using the slides.
	Consider how to explain group exercises or to draw responses from an audience. Be prepared by thinking ahead and developing strategies for moving the discussion forward. For complicated exercises or discussions, consider co-facilitation.
	Develop a plan and strategies for monitoring time and keeping to the schedule. For example, consider where you might shorten a discussion or role-play activity if needed.
	Familiarize yourself with participants' worksites, roles, responsibilities, skills, and experiences before and during the training.

Training as a Team

When planning a module presentation with another trainer or co-trainer, consider the following questions to help clarify your roles:

- How will you divide up training content with your colleague(s)?
- What is your teaching style? How does your teaching style differ from that of your colleague?
- How will you make transitions between presentations? Consider each needed transition.
- What challenges might arise? How can you and your colleague ensure that you will work well together?
- What signal will the two of you use to get one another's attention during a presentation?
- How will you handle staying on task?
- How will you field participant questions?
- How will you get participants back from breaks in a timely manner?

The Team Training Checklist *(below)* will help you to plan the key tasks you and your co-trainer need to accomplish before the training program starts.

Team Training Checklist

✓	**Preparation**
	Decide who will lead and teach each session of each module, including who will lead each exercise within each session.
	Decide on a plan for staying on schedule, including how you and your colleague will signal one another when time is up.
	Decide together how to arrange the room.
✓	**During the Training**
	Support your colleague while he or she is presenting by paying attention. Never correct your colleague in front of the group; if the information he or she is presenting is factually wrong, ask to speak to him or her privately for a moment and then redirect the group.
	Ask for help from your training colleague when you need it—for example, when you do not know the answer to a question or are not sure of something.
	Sit somewhere that gives the spotlight to your colleague yet allows you to make eye contact if needed.
✓	**After the Training**
	Review the completed Training Evaluation Forms and discuss what you thought went well and what could have been done better. Take notes so that you will remember your thoughts for the next training.
	Discuss ways to support one another during future trainings.

Set the Environment

You are responsible for creating an environment that supports learning by ensuring that participants feel safe, supported, and respected. Take the time to carefully plan and deliver the training in a way that creates a psychologically safe and supportive environment.

Strategies for making participants comfortable while fostering trust include:

- Arrange the seats so that participants can see one another as well as they can see the trainer.
- Establish rapport with participants by greeting them warmly and being pleasant, knowledgeable, and approachable.
- Ask participants to introduce themselves at the beginning of the training by stating their name, organization, and position.
- Encourage participants to share their expertise and answer one another's questions when appropriate.

Know Your Audience

It is important to learn about your audience. This means learning something about the individuals who will e participants in the training so you can tailor content and exercises. For example, you may want to learn the following about the participants of an upcoming training:

Participant Demographics—Knowing the age, sex, and other demographic information for each participant will help in planning logistics (i.e., training venue and timing) and in adapting scenarios and other exercises.

Education—Familiarity with participants' educational background can help you gauge the type of language to use and tailor it to their level of achievement and general knowledge.

Job or Position—Knowing participants' jobs or positions and place of employment will help you relate training competencies and content to their work.

Knowledge, Experience, and Skills in HIV Prevention, Care, and Treatment—Having this information about participants will help you determine the level at which content should be taught, the time and methods needed to teach the content, and the best types of scenarios and learning methods for the group. During small group work, consider inviting training participants with more experience to contribute to the discussion, model role-plays, and pair up with participants who have less experience. You can get some indication of participants' baseline knowledge, experience, and skill by finding out where participants work and asking about their job positions, how long they have been in those positions, and whether they currently see HIV-positive and HIV-negative clients.

Attitudes—Awareness of participant attitudes toward the training can give you a sense of issues that will need to be addressed. Try to find out how participants feel about the training. Are they looking forward to it? Or do they see it as a waste of time? What is their attitude toward the topics to be presented?

Ways to Learn About Your Audience

- Ask participants to complete a training registration form that includes questions on current job title, number of years in the position, educational background, length of time working in HIV, details on the type of programs they have been engaged in (e.g., pediatrics, adolescent and/or adult HIV services), and their expectations and concerns regarding the training.
- Have participants complete a pre-training assessment.
- As time allows, include an icebreaker that helps participants get to know one another. Suggestions for icebreakers may be found on the website of the Center for Innovation in Social Work & Health.[9]

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[9] Center for Innovation in Social Work & Health (CISWH). *Activities. Building Blocks to Peer Success: A Toolkit for Training HIV-Positive Peers.* Boston: Boston University School of Social Work; 2019. Available at: http://cahpp.org/wp-content/uploads/2016/05/HIV-peer-training-activities.pdf. Accessed January 25, 2019.

- Talk with participants before the start of the training, during breaks and meals, and at the end of the day.

Manage Time

1. **Know the Content to Be Taught**—Well in advance of the training, study the material to ensure that you understand it fully. If you need help, seek support from an expert or the resources listed in the introduction of the *PrEP Training for Providers in Clinical Settings.* Consider how the sessions can be shortened or lengthened, depending on participant learning needs. Consider how the timetable can be adjusted to create more time if it is needed. For example:

    - Shorten breaks or lunch.
    - Lengthen the day (e.g., start 30 minutes earlier or end 15 minutes later).
    - Shorten or skip presentations, exercises, or discussion questions in content areas that participants know well.

2. **Practice before the Training**—Out loud, practice presenting exercise introductions, general content, and instructions, using the material that will be used during the training. Practice co-facilitating technical content and exercises using the trainer manual and PowerPoint slides.

3. **Be Flexible but Follow the Agenda**—The agenda will let participants know how long modules are expected to last.

4. **Keep Time**—Place a clock or watch in a place where you can see it and where it will not distract participants. Use signs ("5 minutes," "1 minute," and "stop") to tell co-trainers and participants how much time they have left.

5. **Use a "Parking Lot"**—It is a good way to handle discussions that take too much time or are related, but not critical, to the topic under discussion.

> **The Parking Lot**
>
> The "parking lot" is a sheet of flip chart paper posted in the training room. Its purpose is to provide a place to document issues that are important but tangential. For example, when a discussion strays too far from a particular module's objectives or runs over time, you can use the parking lot to record the topic or question being discussed. The topic or question remains there until an agreed-on time, such as at the end of the training, during a break, or during an upcoming, relevant module. At this time, the group can revisit the topic or question and remove it from the parking lot.

Effective Training

Trainers should always keep the following guidelines in mind.

- Prepare in advance.
- Keep track of time and pace activities accordingly.
- Maintain good eye contact.
- Encourage participation and questions.
- Speak clearly and loudly enough.
- Explain instructions clearly and repeat them as needed.
- Summarize and emphasize key points at the end of each module.
- Write clearly and boldly.
- Give constructive and positive feedback.
- Be aware of the participants' body language.
- Keep the group focused on the task.
- When using visuals, stand facing the participants (not the visual).
- Do not assume that everyone has the same baseline knowledge.
- Do not assume that everyone can read and write at the same level.[10]

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[10] Section adapted from Colton T, Dillow A, Hainsworth G, Israel E, and Kane M. *Community Home-Based Care for People and Communities Affected by HIV/AIDS: A Comprehensive Training Course for Community Health Workers.* Watertown, MA: Pathfinder International; 2006.