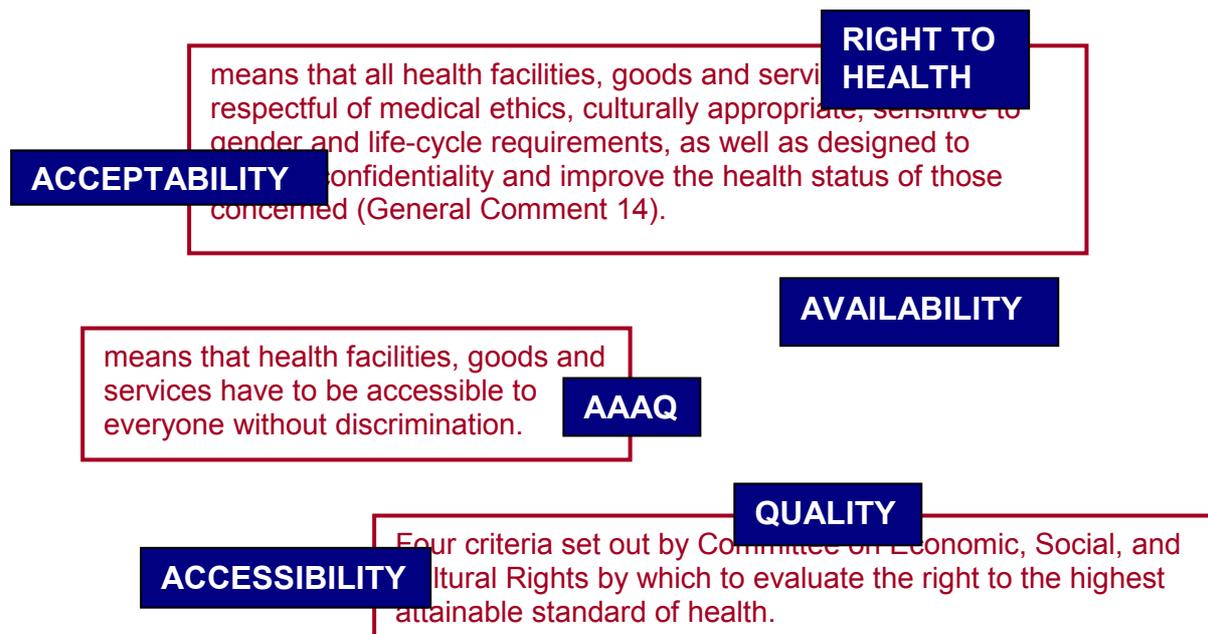


## Training Session Plan

### Definition Game

#### Introducing participants and the subject



## **The International Federation of Health and Human Rights Organisations (IFHHRO)**

*IFHHRO forms a unique network of active organisations committed to the protection and promotion of health related human rights. Members and observers are human rights groups which address health-related rights violations, medical associations involved in human rights work, and organisations that have been created specifically to mobilize health workers for human rights protection.*

*For more information visit our website: [www.ifhbro.org](http://www.ifhbro.org)*

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Copies of the session plan in a different format can be requested.  
More information: [ifhbro@ifhbro.org](mailto:ifhbro@ifhbro.org)



### Learning Objectives

- To introduce participants and facilitators to one another
- To make participants familiar with definitions of issues addressed during the training
- To introduce the programme



### Target Group

Participants and facilitators of the training or workshop



### Duration

90 minutes, including introduction of the programme



### Materials

- Definitions related to the topic of the training  
Calculate the number of definitions needed with the following formula:  
number of participants + facilitators + others who need an introduction divided by 2
- Flipchart papers
- Markers
- Masking tape



### Training Aids

1. Definition set for a general health and human rights training addressing the role of health workers



### Session Plan

*During this exercise participants and the training programme are introduced in one session. More sessions for compiling a training on health and human rights for health workers can be found online in the IFHHRO Training Manual 'Human Rights for Health Workers' at [www.ifhro-training-manual.org](http://www.ifhro-training-manual.org)*

### Preparation

Print enough definitions. Cut the term from the definition, shuffle all pieces of paper and put them in a bag. Write the programme on a couple of flipcharts using one sheet of flipchart paper for each day with only the headings of the sessions. Hang these on the wall, visible to all, before the training starts.

### Step 1 Introduction and explanation (5 minutes)

Welcome all participants to the training and invite all persons, including facilitators, technician and/or translator, to participate in an activity to get to know each other. Walk around the room and ask everyone to take one piece of paper out of the bag.

Explain that everyone has either a term or a definition. Everyone has to look for the matching piece. When a match is found participants should introduce themselves to each other. Together they should have a look at the programme and decide to which session they think their definition applies.

**Step 2      *Puzzling (10 minutes)***

Ask everyone to stand up and walk around to look for the other half of their definition introduce themselves to the other person by mentioning their name, organisation and position and discuss where to place their definition in the programme.

**Step 3      *Introduction in pairs (time depends on number of pairs)***

After about 10 minutes each member of a pair introduces the other to the rest of the group, followed by sharing their definition. Ask the other participants if they think the match created is correct. If everyone agrees ask the pair where they see it connected to the programme. If their suggestion is correct paste the definition in the programme, if another session is more appropriate explain why and place it there. Definitions that are relevant to a whole day can be pasted on top of that day sheet and any definitions that are relevant to all sessions can be pasted on a separate sheet.

When everyone has been introduced thank the participants for their contributions and ask them to sit down again.

**Step 4      *Introduction of the programme (10 minutes)***

End the session with a brief introduction of the programme and briefly explain the structure in more detail.

## Training Aid 1 – Set of Definitions

The following definitions are suitable for the introduction session of a training programme which addresses health and human rights in general and the role of health workers in particular.

For a training on a specific health issue use definitions that are related to the sessions included in the training. The definitions used should apply to the context of the training programme. Make sure the definitions are spread throughout the programme to avoid that all definitions will end up in one session only.

Print the number of definitions needed (number of participants + facilitators + others who need an introduction divided by 2) on coloured paper and separate the term from the definition. Shuffle all pieces of paper and put them in a bag to be used during the first step of the exercise.

The definitions used in this training aid are mainly from the 'Health and Human Rights: a Resource Guide' available online at: <http://equalpartners.info/index.html>. This guide was created by OSF's Law and Health Initiative and [Equitas](#) as a user-friendly, multipurpose resource for health care providers, human rights professionals, and advocates.

The guide covers basic concepts and resources in health and human rights, with a focus on seven priority areas:

Chapter 1: Human rights in patient care

Chapter 2: HIV/AIDS and human rights

Chapter 3: Harm reduction and human rights

Chapter 4: Palliative care and human rights

Chapter 5: Sexual health and human rights

Chapter 6: Health and human rights in minority communities

Chapter 7: Mental health and human rights

In all chapters contain a glossary which can be used to collect definitions.

# Essential medicines



Medicines that satisfy the priority health-care needs of the population. Essential medicines are intended to be available at all times in adequate amounts, in the appropriate dosage forms, with assured quality, and at a price the individual and the community can afford.

# Health



A state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity. (WHO)

# Right to health



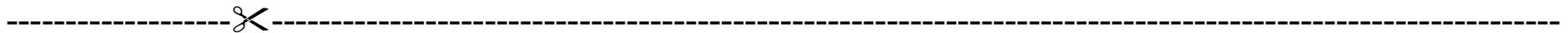
Right to the enjoyment of a variety of facilities, goods, services, and conditions necessary for the realization of the highest attainable standard of health.

# Health Workers



Physicians, nurses, dentists, or  
other health care providers.

# Health care system



The organized provision of health care services.

# Dual loyalty



Role conflict between professional duties to a patient and obligations—express or implied, real or perceived—to the interests of a third party such as an employer, insurer, or the state.

# Informed consent

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A process by which a patient participates in health care choices. A patient must be provided with adequate and understandable information on matters such as the treatment's purpose, alternative treatments, risks, and side-effects.

# Patient autonomy



The right of patients to make decisions about their medical care. Providers can educate and inform patients, but cannot make decisions for them.

# Human dignity



There is no agreement on a definition, but most people have their own ideas of what it means. It is a central component of all human rights.

# Medical ethics



A system of moral principles and rules that are used as standards for professional conduct. Many hospitals and other health care facilities have ethics committees that can help doctors, other healthcare providers, patients, and family members in making difficult decisions regarding medical care. This may vary with religious and cultural backgrounds.

# Underlying determinants of health

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Conditions necessary for good health, including safe and potable water, adequate food, housing, healthy occupational and environmental conditions, health-related education, non-discrimination, etc. This includes both social and economic and civil and political rights.

# Concluding observations

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Recommendations by a treaty's monitoring mechanism on the actions a state should take in ensuring compliance with the treaty's obligations. This generally follows both submission of a state's ***country report*** and a constructive dialogue with state representatives.

# General comments / recommendations

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Interpretive texts issues by a treaty's monitoring mechanism on the content of particular rights. Although these are not legally binding, they are widely regarded as authoritative and have significant legal weight.

# Monitoring/ fact finding/ investigation

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Terms often used interchangeably,  
generally intended to mean the tracking  
and/or gathering of information about  
government practices and actions  
related to human rights.

# Patient confidentiality



Doctrine that holds that the physician has the duty to maintain patient confidences. This is to allow patients to make full and frank disclosure to their physician, enabling appropriate treatment and diagnosis.