" Physical Accessibility-Infrastructure Training-Facilitator Guide "

Prepared by:

humanity &inclusion

Supported by:

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GENERAL INFORMATION

The Disability Action Council (DAC):

The Disability Action Council (DAC) was established by Royal Kram No. NS/RKAM/0709/010, dated 3 July 2009, promulgating the Law on the Protection and Promotion of the Rights of Persons with Disabilities. , The DAC acts as the national coordination and advisory body on disability and rehabilitation and is a cross-sectoral body composed of ministries, institutions, representatives of the private sector, NGOs and representatives of persons with disabilities. The Disability Action Council has municipal and provincial representatives. :

The General Secretariat of the Disability Action Council (DAC-SG) is a public institution established by Sub-Decree No. 216 ANKr.BK dated 2 May 2013, with the responsibilities to provide technical advice on disability issues; develop the National Disability Strategic Plan; promote the implementation of policies, laws, strategic plans, legal documents and international instruments related to disability issues; monitor their implementation communicate with national and international communities to exchange experiences and mobilize resources; develop reports on the implementation of the CRPD, organize national and international events for persons with disabilities. Presently, DAC-SG is located in building 788 on Monivong Blvd., within the Ministry of Social Affairs, Veterans and Youth Rehabilitation compound.

The Disability Action Council – at Ministry/Institution level (DAC-MI) is a working group established across ministries and institutions to act as focal points and responsible for disability-related works within the sectors and jurisdictions framework of those ministries and institutions.

The Disability Action Council – at Municipal/Provincial level (DAC-MP) refers to groups of DAC representatives at the municipal/provincial level, established by each authority. Each group is a diverse body made of civil society, local authority, representative of private sectors, NGOs, and the representative of persons with disabilities. The Deputy Governor acts as the head of the inter-sector works related to disability issues within the jurisdiction of his/her administrative area.

Handicap International - Humanity & Inclusion (HI)

HI, founded in 1982, is an independent and impartial aid organization working in situations of poverty and exclusion, conflict and disaster. HI works alongside people with disabilities and vulnerable populations, taking action and bearing witness to respond to their essential needs, improve their living conditions, and promote respect for their dignity and fundamental rights.

In 2018, Handicap International's global movement became Humanity & Inclusion. The Federation, which runs projects in around sixty countries, is now working under the operating names of "Humanity & Inclusion", "Handicap International" or "Atlas Logistique". Any document with the letterhead "Humanity & Inclusion" applies de facto to Atlas Logistique and Handicap International teams.

The Accessibility training toolkit has been developed with the involvement of the following persons:

The General Secretariat of the Disability Action Council		Handicap International – Humanity & Inclusion (HI)	
1. H.E. **Em Chan Makara**	Secretary of state of MoSVY	1. Ms. **Edith van Wijngaarden**	Country Manager
2. H.E. **Ung Sambath**	Deputy General Secretariat of DAC	2. Mr. **Chor Rada**	Technical Support Manager
3. Mr. **Chhorn Akhra**	Director of Development Disability Services	3. Ms. **Erika TRABUCCO**	Accessibility Specialist

Acronyms

CDRP	Commune Disability Resource Person
CIP	Commune Investment Program
CRPD	Convention of the Rights of Persons with Disabilities
DAC	Disability Action Council
DPOs	Disabilities People's Organizations
DVN	Disability Village Network
ICT	Information Communication Technology
LAs	Local Authorities
NGO	Non-Governmental Organization
NTAA	Non-Technical Accessibility Assessment
PPT	PowerPoint
PWDs	Persons with disabilities
RECU	Reach Enter Circulate Use
SDGs	Sustainable Development Goals
STD	Sexual Transmitted Disease
ToT	Training of Trainer
UN	United Nations
UNCRPD	United Nations Convention for the Rights of Persons with Disabilities
WHO	World Health Organization

SECTION 1: Foreword

1.1   Why this facilitator guide?

This accessibility facilitator guide has been designed to guide the accessibility master trainers during their training of other stakeholders on the use and principles of "physical accessibility". It promotes the use of participatory methods and active learning techniques. However, capacity strengthening efforts should include much more than just the training. Therefore the materials of this guide can serve not only as a basis for training but also for various follow-up activities such as on-the-job coaching, tailor-made workshops and/or advocacy activities.

1.2   Relation with the technical standards on physical accessibility-infrastructure

This "physical accessibility training – facilitator guide" explains the concept of accessibility in general and provides more understanding on the "PHYSICAL ACCESSIBILITY-INFRASTRUCTURE TRAINING MANUAL" and how to apply them in the accessibility audit report. This guide can provide a clear picture to the master trainers on how to rollout the accessibility trainings and it helps master trainers to promote the technical standards on physical accessibility–infrastructure for persons with disabilities.

1.3   How to use this facilitator guide

This facilitator guide is composed of four sections:

SECTION 1: Foreword

- **Instruction section** on this facilitator guide, about its structure and the sections it is composed of. It also clarifies the relation with the "technical standards on physical accessibility–infrastructure for persons with disabilities" and how to use this facilitator guide.

SECTION 2: Training modules, master trainer's note and exercise instructions

- **Introduction session:** welcoming and introduction session of the training, the example of an exercise to allow participants to know each other, establishing ground rules, introduction to the training and its agenda, identifying participants' expectations and warm up on the experiences exchange.

- **Training modules and facilitators' notes:** describes some sessions of the physical accessibility-infrastructure training manual. You must read it before starting the training to be able to facilitate the sessions and exercises and to adjust them when needed, especially when time is running short. You will find background information and the instruction on how to facilitate all sessions. Trainers and co-trainer have to read the facilitators' notes to be able to implement the training, as it will allow them to better understand the content of the training and will give them the knowledge to answer the questions the participants may have.

The training modules developed includes:

- ➢ Introduction of disability and impairment (keys concepts of disability),
- ➢ Introduction to accessibility-framework, definitions and approaches,
- ➢ Assessing accessibility- barriers of accessibility, how to promote accessibility, the principle of accessibility – theoretical session
- ➢ Non- Technical Accessibility Assessment (NTAA)- practical session,
- ➢ Improving accessibility in urban areas

- • Exercise instructions: you will find step-by-step explanations on how to facilitate the exercises in the training modules.

SECTION 3: Training Handouts

- • You will find the hand-outs to be read before the training. They can be disseminated to the participants.

SECTION 4: Adult learning skills:

- • To train adults to learn effectively, the trainers need to master some specific techniques and principles. This section offers a variety of frameworks/structures in consideration of time, resources, exercises, role-plays, and including adult learning skills.

1.4   Who should use this facilitator guide

It is recommended that only trained master trainers on accessibility conduct these sessions. Master trainers are highly encouraged to invite persons with disabilities, especially Disabled People's Organization leaders to their training sessions so that they can serve as resource persons during the training and in the Non-Technical Accessibility Assessment.

1.5   Methodology

Each training module has a different time frame designed realistically and training contents taken from the "Physical Accessibility-Infrastructure Training Manual". Each training module has a general objective related to accessibility and disability concepts. The training modules include details on the sessions, the topic of each session and its specific objectives, materials needed and approximate duration. All master trainers should have good training and facilitation skills. They can of course adapt the training methodology to deliver the content.

The activities suggested will help the master trainer to adapt to the various learning capacities of their participants. Master trainers are encouraged to use this guide with flexibility, in response to their participants' needs, interests and pre-existing level of knowledge and experiences. Therefore, although this facilitator guide suggests order and approximate timings for the sessions, it is not expected that every master trainer implements every session in the same way as presented in this facilitator guide. Also, the time needed for each session will depend on the size of the group, the questions they ask, the discussions they engage and the time needed for energizer games. Activities will for example take longer with a large group, if you are working with a translator or a sign language interpreter or if you are working with participants who have absolutely no pre-existing knowledge of the concepts of disability and accessibility... Etc. Master trainers are encouraged to be reflective practitioners; which means looking back at how they facilitated a session or explained a particular topic, and thinking critically about how well it went and what they could do to improve next time. They are encouraged to make use of training evaluation activities to help to measure participants' views of the topics and methodology of training. This facilitator guide should be a dynamic document which need to be reviewed and improved as part of an ongoing discussion for inclusive practice. Master trainers, with the support from the HI, are urged to review the training modules before they roll-out the accessibility training.

SECTION 2: Training modules, facilitator's note and exercise instructions

The Introduction to accessibility training can be given as a 2 days training by the master trainers. It is advisable that participants first include the training on the basics of disability and impairment on the first day of the roll-out training. The facilitator's notes are provided to guide all sessions step by step including exercises and energizer games. These master trainer notes can be adapted by the master trainers to the context and the level of the participants' knowledge.

TABLE 1: TRAINING MODULES AND SESSIONS

The table below highlights the different sessions of each training module:

TRAINING MODULES	SESSIONS	Timing	
		Minimum (min)	Maximum (min)
MODULE ONE: **Introduction session. Key Concepts of Disability**	1. Introduction session 2. Define the meaning of impairment and disability 3. Risk factors leading to impairment 4. Communication and Appropriate language 5. Disability models	90 100	100 120
MODULE TWO: Introduction to accessibility and Legal Framework	1. What is accessibility? 2. Why is accessibility important? 3. Accessibility into International and National framework 4. How to promote accessibility?	200	210
MODULE THREE: Accessibility-Principle	1. The RECU principle 2. Universal design and Reasonable Accommodation	150	160

MODULE FOUR: Assessing Accessibility	1. Accessibility barriers 2. Responses to reduce accessibility barriers 3. Accessibility Assessment Tool and practical session	210	220
MODULE FIVE: Improving Accessibility in Built Environment (From National Guideline)	1. Improving accessibility in Urban Areas 2. Improving accessibility in Buildings Assessing a ramp, toilet, and design	180	190

Additional Sessions:	
Daily Recap	10 minutes
Morning Review	30 minutes
Energizer game	10 minutes
Evaluation and Close	30 minutes

Figure 1: A trainer explains the training modules to participants

Full Training Agenda

DAY 1	Sessions	DAY 2	Sessions
Morning Shift		**Morning Shift**	
7:30-8:00	Registration of participants	8:00-8:15	Recap day 1
8:00-8:15	Welcome Speech	8:15-9:15	• Session 3.1: RECU principle
8:15-9:45	Session 1.1: Introduction sessions, expectation and Pre-test	9:15-10:00	• Session 3.2:Universal design and Reasonable Accommodation
9:45-10:00	**Coffee break**	**10:00-10:15**	**Coffee break**

10:00-12:00	Session 1.2: Key Concepts of Disability • Session 1.2.1: Define the meaning of impairment and disability • Session 1.2.2: Risk factors leading to different impairment Session 1.2.3: Communication and Appropriate language	10:15-11:00	• Session 3.2:Universal design Reasonable Accommodation (continue)
		11:00-12:00	• Session 4.1: Barriers to Accessibility Session 4.2: Responses to reduce accessibility barriers
12:00-13:00	**Lunch**	**12:00-13:00**	**Lunch**
13:00-13:15	Energizer Game	13:00-13:15	Energizer Game
13:15-14:15	• Session 1.2.4: Disability models	13:15-14:15	• Session 4.3: Non-Technical Accessibility Assessment Tool
14:15-15:15	• Session 2.1: Define the meaning of accessibility Session 2.2: Why is accessibility important?	14:15-15:00	• Session 4.3: Non-Technical Accessibility (Continue)
15:15-15:30	**Coffee break**	**15:00-15:15**	**Coffee break**
15:30-16:00	• Session 2.3: Accessibility Legal Frameworks	15:15-16:30	• Session 5.1: Improving accessibility in Urban Areas • Session 5.2: Improving accessibility in Buildings
16:00-17:00	• Session 2.4: How to promote accessibility?	16:30-17:00	**CLOSURE** • Post-test and evaluation • 1Closure remark
End of Day 1		**End of Day 2**	

Module One: Introduction session and Key Concepts of Disability (270 min)

Session 1.1: Introduction session (90 min)

Activity 1: Welcome	Welcome
Objective	✓ To welcome everyone to the training.
Time	15 minutes
Material	None
ACTIVITY 2: **Introducing each other**	**Introduction**
Objectives	✓ To allow everybody to know each other's names and the main interest in their work ✓ To develop a creative and open atmosphere
Time	15 minutes
Method	Icebreaker Game: Welcome
Material	Paper cards, pen or markers
ACTIVITY 3: **Establishing ground rules**	**Agree on the ground rules of the training**
Objective	✓ To ensure the group is aware of how to work jointly
Time	10 minutes
Method	Discussions in the group and make a final decision
Material	Flipchart
Activity 4: Introduction to training and schedule	**Orientation on the training and schedule of the days**
Objective	✓ To allow participants to understand the objectives of the training and to familiarize them with the schedule of the coming days.
Time	10 minutes

Method	PowerPoint presentation # 1
Material	Laptop and LCD; handout on the training schedule
Activity 5: Expectations	**Identify expectations of participants**
Objectives	✓ To ensure that everybody is conscious about their expectations ✓ To identify the expectations that will not be addressed and explain to the trainees
Time	10 minutes
Method	Give everybody an index card and ask them to write down three major expectations they have from the training and posts them on the wall
Material	Index cards, sticky tape
Activity 6: Pre-Test	**Writing-test, checking the pre-existing knowledge of the participants**
Objective	✓ To check the understanding of the participants on disability, impairment, principles and concepts of accessibility
Time	30 minutes
Method	Individual and Plenary roundup
Material	Printed versions of the disability and accessibility Pre-Test

ACTIVITY 1:   Welcome (15 min)

Process:

STEP 1:   Welcome the participants

STEP 2:   Ask two or three people to share their experiences in traveling to the training venue.

ACTIVITY 2: Introducing each other (15 min)

Process:

STEP 1:   Participants are invited to take a paper and pen and draw a picture to describe themselves (name, work, favourite things, where they come from…)

STEP 2:   Ask them to fold the paper and not show anyone

STEP 3:   Collect the papers and put them in a pile in the middle of the room or on the table

STEP 4:   Invite each participant to take one paper and find the owner (change if you take your own)

STEP 5:   Ask them to discuss with the owner of the drawing and try to understand the meaning of it and to get to know their pair (including name, work, where they are coming from, favourite things…)

STEP 6:   Finally, ask each participant to introduce their pair to the big group

ACTIVITY 3: Establishing ground rules (10 min)

Process:

STEP 1:   Split the big group into two smaller groups

STEP 2:   Ask the groups to exchange on what are the major disturbances that hamper their learning in a group (each group shares the "best story of their worst group experience")

STEP 3:   Agree to note down three major group rules, suggested way of monitoring them and sanctions (which have worked in the past to ensure a great learning and group atmosphere)

STEP 4:   Brief the group on the rules that were agreed together

ACTIVITY 4: Introduction to training and schedule (10 min)

Process:

STEP 1:   Introduction on the background of the training

STEP 2:   Briefly mention the topics that will be addressed.

ACTIVITY 5: Expectations (10 min)

Process:

STEP 1:   Share cards to all participants and ask them to write down three expectations of the two days training.

STEP 2:   After the expectations have been posted on the wall, comment on the expectations that can't be fulfilled

ACTIVITY 6: Pre-Test (30 min)

Process:

STEP 1:   Explain, while handing out the Pre-Test that they have 30 minutes to fill out the test

STEP 2:   The remaining 10 minutes can be used to discuss the answer together and to clarify if needed.

Session 1.2: Key Concepts of Disability (180 min)

Session 1.2.1: Define the meaning of impairment and disability **Session 1.2.2: Risk factors leading to different impairment** **Session 1.2.3: Communication and Appropriate language**	
Objectives	✓ To identify the definition of impairment and disability. ✓ To consider different impairments, causes and the effect of these impairments. ✓ To understand how to communicate with persons with disabilities and to use appropriate language.
Time	120 minutes
Method	Exercise 1.2.1: Pictures and Labelling and PowerPoint # 2 - Reflection on pictures - Group Discussion - Brainstorming, PowerPoint presentation, and Question & Answers
Materials	Pictures of people with different type of impairments, pictures explaining the difference between impairment and disability (figure 2 below), flipchart, markers, small cards, PowerPoint # 2 with the definition of disability and impairment, handout 1.2.1, handout 1.2.2, and handout 1.2.3

Session 1.2.4: Disability models	
Objective	✓ To identify models of disability
Time	60 minutes
Method	Presentation by using PowerPoint #3, exercise, group discussion
Materials	PowerPoint #3, handout 1.2.4, cards, flipcharts, markers, training manual, master trainer's note

Session 1.2.1: Define the meaning of impairment and disability (60 min)

Session 1.2.2: Risk factors leading to different impairments (30 min)

EXERCISE 1.2.1: Pictures and Labelling

Process:

STEP 1: Divides participants into groups with a maximum of 5-6 members

STEP 2: Place the picture of people with different types of impairments and people without any identifiable impairment on a large table.

Ask each group to choose one picture and ask them to discuss the following points:

✓ What type of impairment they think is shown in the picture

✓ What kind of aptitude may be affected by the impairment and in which situation?

✓ What may be the cause of the impairment?

TIP: Make sure you choose pictures that may lead to confusion so that they will have to engage in discussion.

Example: physical impairment/difficulty to walk/the person cannot stand for long in the rice field/ the person cannot reach the health center because of the stair.

STEP 3: Ask the groups to reach a consensus for all questions. Ask the spokesperson of each group to present the impairment and its main causes they identified and share it with the big group. Record the agreed wording on a flip chart.

STEP 4: Use the pictures to summarize the main causes of the impairment and the difficulties people may face.

STEP 5: Share the definitions of impairment and type of impairments by showing PowerPoint #2 and PowerPoint #3, and give specific examples and the correct language of impairments. Share handouts 1.2.1 and 1.2.2

TIP: Remind that not all impairments are visible!

STEP 6: Finish the session of impairment and then ask participants to express ideas on disability by asking this question; what comes to your mind when you see or hear the word disability? Take note of the keywords on small cards (one card = one keyword) and stick them on the flip chart (these cards will be used again in the next session).

STEP 7: After the presentation, give the stage to participants for questions

STEP 8: Discuss the difference between disability and impairment with participants using the illustrations below by using PowerPoint #2. Make sure you verbally explain what is in the picture if you have participants with visual impairment. Explain to them that the first picture reflects a disabling situation of a woman using a wheelchair. Her environment is inaccessible and the boy on her right is not too helpful and absorbed in his work. The second picture shows the lady has a mobility impairment, but as we can see she is a doctor and can work and participate fully in life and so face very little disability. She sits down where she can help the boy; her environment is also adapted to her needs.
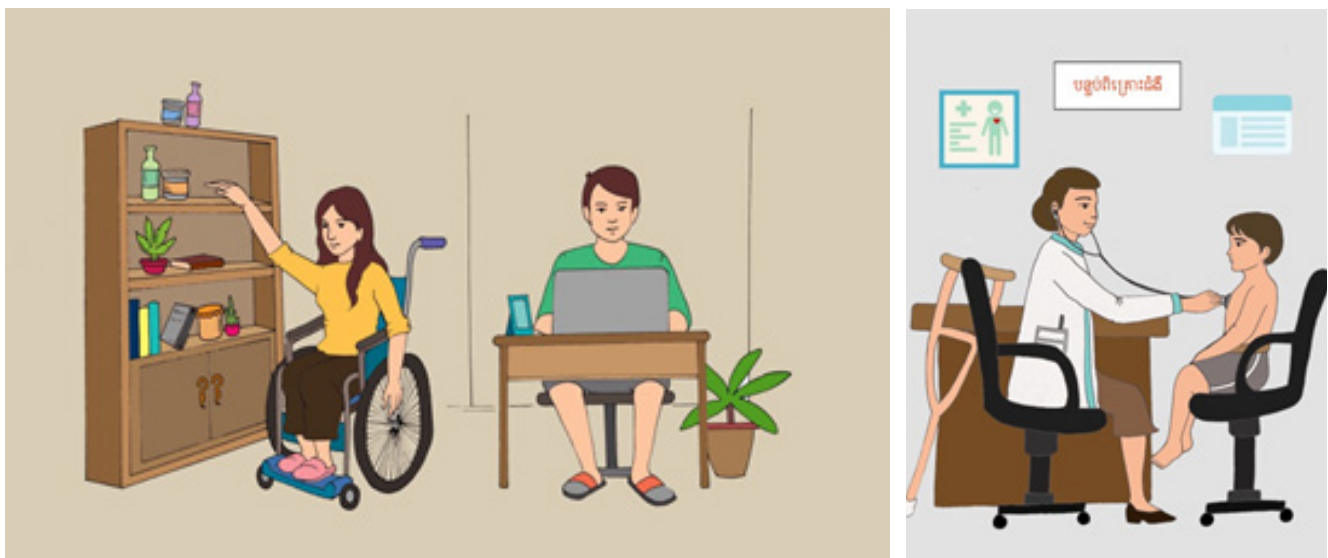
Figure 2: Difference between Disability and Impairment

TIP: Every one of us can face a disabling situation at some point in our lives.

STEP 9: Read the below sentence one by one and ask the big group if it concerns a disability or enabling situation

- Visual impairment/difficulty to see / a child has problems studying in class and cannot read the text lessons without Braille = disabling situation

- Hearing impairment / difficulty to hear /a person cannot access to information shared during community meetings = disabling situation

- Physical impairment/difficulty to carry weight/a woman cannot get married because her family says she will not be able to take care of her home and children = disabling situation

- A child who is blind is included in school where he received support from the teacher and use special equipment such as abacus = enabling situation

- A man who has an intellectual impairment works in a restaurant where he has been appointed to simple tasks and where he is supervised by a peer who can help him by reminding him how to perform the task, managing his time, etc. = enabling situation

- A man is using a wheelchair following an accident. Before the accident, he used to sell vegetables at the market. The market is located on the other side of the village and is on the first floor = disabling situation

- An old woman got a stroke and following her stroke has difficulties in moving. She used to go regularly to the local garden before. Her son has a motorbike and now brings her to the garden every day. The local garden is easy to access as there are no steps The local authority provided many resting places with armchairs along the pathway of the garden and she can take a rest and sit on it to see the view and sports activities in the garden = enabling situation

Session 1.2.3: Communication and Appropriate language (30 min)

Process:

"GOSSIP" Game

STEP 1: Ask participants to stand/sit in a row/circle.

STEP 2: Tell a short story of 3-4 sentences to the first person in the row.

STEP 3: Have them whisper the story to the next person and so on down the line.

STEP 4: The last person tells the story s/he heard out loud and evaluate with the group if it has changed much. Summarize the feedback from the game

STEP 5: To communicate about and with persons with disabilities it is important to use the appropriate language. See handout 1.2.3 and present PowerPoint #4

STEP 6: After the presentation, distribute yellow cards with the inscription "Persons first…" Ask participants to issue the yellow card (like in football) if one of the participants or the master trainer uses disability inappropriate language during the workshop. ……..

STEP 7: After this session on appropriate language and how to communicate with persons with disabilities, you may discuss the yellow cards issued. Why did they issue it, was the inappropriate language used, and what should have been the correct way of communication. Mention also that in this training, we are all learning together and want to help each other be more conscious of our language choices.

TIP: Stress that this resource is not about judgment, it is to help us all learn together.

Session 1.2.4: Disability models (60 min)

In preparation for this activity, you need a handout 1.2.4 with information on models of disability.

Process:

STEP 1: Use the information in this handout to start the session by explaining the history of the disability movement; how disability was perceived and explained how it evolved, following the handout. Present PowerPoint #3 and then explain the different models of disability e.g. the charity, medical and social models and their differences, in a participatory way.

STEP 2: Ask participants how disability is perceived in our community and why. Indicate to participants that they will be given handouts later so that they concentrate more on participation.

STEP 3: Ask each group (same groups as in exercise 1.2.1) to put the cards (The information cards generated during STEP 6 in exercise 1.2.1 (cards with information on what comes to their mind when they see or hear the word disability) under the heading medical, charity, social model and rights base model on the flip chart, as they see fit. Each group should explain to the big group why they have placed their cards under a particular heading. Encourage participants to question the other groups on the choices they made.

STEP 4:   Emphasis on the social model of disability and the rights-based approach. Discuss more in-depth the questions from each group and identify the barriers faced by persons with disabilities, according to the social model of disability. Collect the responses of participants about barriers and classify them into three groups i.e. physical/environmental, attitudinal, and institutional.

Explanation of barriers for persons with disabilities:

✓ **Environmental barriers (Physical):** inaccessible buildings, structures, and/or information/communication systems. E.g. Inaccessible schools, public toilets, restrooms, health centers, lack of signage and accessible information, etc.

Figure 3: A woman using a wheelchair cannot access the commune because there is no ramp

✓ **Social and cultural barriers:** prejudice, discrimination and stigma cause the biggest problems for persons with disabilities, who are assumed to be incapable, need to be cured, dependent, and have low intelligence. Eg. Negative behaviors from neighbors, the community, local authorities/service providers are leading to exclusion and discrimination.
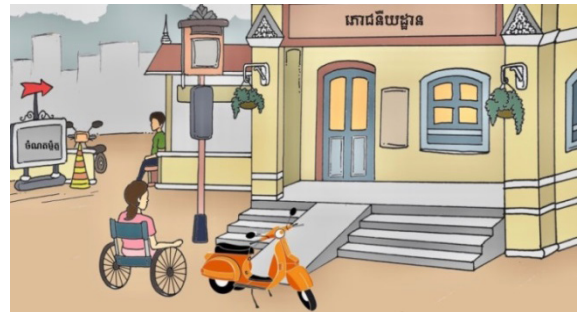
Figure 4: A motor parked by other people in front of the ramp blocked a woman using wheelchair access to the restaurant

✓ **Institutional barriers:** legal, policies, processes, cultural and social organizational practices and systems or implementation of policies do not ensure equal rights of persons with disabilities.

Figure 5: Picture representing legal frameworks

STEP 5: Explain the differences between the models of disability to the participants as this will affect their way of understanding disability and their way of advocating for disability inclusion in development processes. They should understand that the principles of the Convention of the Rights of Persons with Disabilities (CRPD) are based on the social model of disability.

Point to remember - It is important to share with participants that it sometimes may be difficult to separate the different disability models and approaches. For instance, the need for a 'wheelchair' might be viewed as a medical approach as it focuses on the person with a disability and his/her "inability" to walk. However, it could also refer to the social model approach if it relates to the breaking of environmental barriers by empowering a person to move from point A to B and thus increasing participation. Therefore, encourage participants to think about the meanings behind the words, while at the same time, not drawn into unproductive arguments.

In development processes, the social model means taking the issues and wishes of persons with disabilities into account at all stages of the project cycle. It is a cross-cutting issue that is relevant to all private and public development stakeholders. To enhance the position of persons with disabilities in society, mainstreaming, awareness-raising and lobbying are key strategies.

End of module one!

Module Two: Introduction to Accessibility, definition and Legal Framework (120min)	
Session 2.1: Define the meaning of accessibility	
Objective	By the end of the training session participants will be able : ✓ To understand the meaning of accessibility
Time	30 minutes
Method	Plenary, Exercise 2.1: The Definition Ball and presentation
Material	✓ Accessibility training manual –facilitator's notes, handout 2.1 ✓ Ball ✓ PowerPoints #4 with definition and key information
Session 2.2: Why is accessibility important?	
Objective	By the end of the training session participants will be able : ✓ To know why accessibility is important and why is it essential to provide vulnerable groups, and especially persons with disabilities, with a fully accessible built environment.
Time	30 minutes
Method	Group work and plenary discussion, questions and answers
Material	PowerPoint #4, handouts2.3, training manual
Session 2.3: Accessibility Legal Frameworks	
Objective	By the end of the training session participants will be able : ✓ To know the national and international framework related to accessibility and it must promote and be enforced.
Time	45 minutes
Method	Plenary and presentation, Group discussion on some questionnaires
Material	✓ ACCESSIBILITY Training Manual ✓ Copies of the summary of the content of the accessibility chapter in the Cambodia Disability law (2009 law) ✓ Copies of the summary of the content of accessibility chapter in the UNCRDP, SDGs, Incheon strategy (2012) ✓ Box, PowerPoint #5 presentation, handout 2.3 ✓ Prepared question cards, Flip Chart, and Markers

Session 2.4:	How to promote accessibility?
Objective	By the end of the training session participants will be able : ✓ To promote accessibility through different actions.
Time	45 minutes
Method	Plenary and presentation, Group discussion on some questionnaires
Material	✓ ACCESSIBILITY Training Manual ✓ Box, exercise 2.3 and handout 2.3, PowerPoint #5 ✓ Prepared question cards, Flip Chart, and Markers

Session 2.1: Define the meaning of accessibility (30min)

Use exercise 2.1 and handout 2.1 to facilitate this session and explain the meaning of accessibility.

EXERCISE 2.1: The Definition Ball

Process:

STEP 1: Explain-before we run into details that it is important to know what accessibility means.

STEP 2: Ask participants to stand in a circle and take the ball. Throw it to one of them and ask him/her one of the following questions: What is accessibility? How would you define accessibility? Where does it apply? Who can benefit from accessibility?

You can of course add as many questions as you want

STEP 3: After the person answers the question, s/he throws the ball to another participant who has to give concrete examples illustrating the answer. After this, take the ball back, and throw it to another person for the next question

STEP 4: Invite a participant to write the keywords mentioned in step 2 on a flipchart/ board.

STEP 5: Re-cap with the group the outcomes

STEP 6: Define accessibility (what is it for, what it does include, where does it apply, and who it applies to) and then show the definition of accessibility by PowerPoint #4 and share the handout 2.1.

Session 2.2: Why is accessibility important? (30min)

Process:

STEP 1:   Brainstorming with participants about questions below:

- Why is it essential to provide vulnerable groups, and especially persons with disabilities with a fully accessible built environment?
- What can be done to improve the accessibility of the built environment?

STEP 2:   Note all keywords on the flip chart and then show PowerPoint # 4

Session 2.3: Accessibility Legal Frameworks (45min)
Session 2.4: How to promote accessibility? (45min)

Use handout 2.3 and exercise 2.3 to facilitate this session.

EXERCISE 2.2: The Questions Box

TIP: Keep it short and to the point! 5 minutes maximum per question, keep it fast and fun!

STEP 1:   Prepare some questions and put them in a box

Example of questions:

1. Do you know any international laws/regulations mentioning accessibility? What do they mention about accessibility?
2. What are the tools adopted in Cambodia to promote and implement accessibility?
3. Why is accessibility important?
4. Why is it essential to provide vulnerable groups, and especially persons with disabilities, with a fully accessible built environment?
5. How to promote accessibility more effectively?

STEP 2:   Go around with the box and ask one of the participants to take out one question.

STEP 3:   Ask the participant to read out the question (if s/he is not able to read, ask his/her neighbor to help) and answer.

STEP 4:   If the participant does not know the answer s/he can give the question-card to one of the other participants

STEP 5: Invite another participant, to write the keywords of each answer on a flip chart

STEP 6: Re-cap the keywords given by the participants

STEP 7: Mention briefly the articles on accessibility by using handout 2.3 and PowerPoint # 5

> ➢ Sustainable Development Goal (SDG) Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

> ➢ Cambodian Law: Chapter 5

> ➢ UNCRPD: Article 9 for accessibility,

> ➢ Incheon strategy (Goal 3: Enhance access to the physical environment, public transportation, knowledge, information, and communication),

> ➢ The "technical standards on the physical accessibility – infrastructure for persons with disabilities" and other sub-degrees related.

STEP 8: Presentation of the 6 steps on how to promote accessibility, using PowerPoint # 5 (1/ Active participation of persons with disabilities 2/ Information and awareness-raising 3/ Planning 4/ Training 5/ Communication 6/ Monitoring.

Ask participants to give concrete examples of how they could implement each of the 6 steps.

End of module two!

Module Three: Accessibility-Principle (150 min)	
Session 3.1: RECU principle	
Objective	By the end of the training session participants will be able : ✓ To understand the chain of movement principle ✓ To understand the concrete meaning of the RECU principle ✓ To identify accessible and un-accessible settings
Time	60 minutes
Method	Plenary, Exercise 3.1: RECU principle and presentation and handout 3.1
Material	✓ Pictures of different situations, people, villages/cities, linked to accessibility and addressing several steps of the RECU principle (Reach, Enter, Circulate make Use), Flipchart, marker, and tape ✓ PowerPoint #6 , LCD ✓ Video animations illustrating common accessibility problems related to Reach, Enter, Circulate, USE and show how technical standards of physical accessibility specification work to make the design more inclusive.

Session 3.2: Universal design and Reasonable Accommodation	
Objective	By the end of the training session participants will be able: ✓ To explain the key principles of Universal Design. ✓ To understand the meaning of reasonable accommodation and how to apply it in the working environment.
Time	90 minutes
Method	Plenary presentation and discussion, Group work, Exercise 3.2 Reasonable Accommodation and Universal Design,
Material	ACCESSIBILITY Training Manual PowerPoint #6 presentation, handouts of exercise 3.2, training manual, Copies of circular 005[1] : Reasonable Accommodation in the workplace. Flip Chart, Markers, Audio, boxes, pictures of universal design, and LCD

Session 3.1: RECU principle (60 min)

Exercice 3.1: The RECU principle

Process:

STEP 1:   Show PowerPoint # 6 on the RECU principle and explain the unbroken chain of movement principle.

STEP 2:   Spread the pictures of different steps of the RECU principle, illustrating situations of full accessibility, limited accessibility and no accessibility, on a table or the floor

STEP 3:   Divide the group into trios (3 people per group)

STEP 4:   Give each trio about 10 minutes to select 2 pictures showing something accessible and two other pictures showing something that is not accessible and then allow all groups to explain which step of the RECU principle these pictures represent

STEP 5:   Ask the spokesperson from each trio to explain in a few minutes to the whole group why they selected these specific pictures.

STEP 6:   Make notes on a flip chart of the main points, write down the keywords

STEP 7:   Plays the videos animation showing common accessibility problems related to the 4 steps of RECU.

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[1]   Inter-ministerial Circular on Reasonable Accommodation on Employment of Persons with Disabilities

This video came from the U.S. Access Board

Video #1:   Manoeuvrings at Doors
Video #2:   Protruding Objects
Video #3:   Sales and Service Counters
Video #4:   Accessible Toilet Rooms

STEP 8:   Makes a summary with reflection in the big group links to the national technical standards on physical accessibility- infrastructure for persons with disabilities

Note: 1 inch = 2.54cm

Session 3.2: Universal design and Reasonable Accommodation (90 min)

Process:

STEP 1:   Brainstorm with the big group on universal design: what do you know about it? What does it mean? Write down the keywords on the flip charts.

STEP 2:   Use the three pictures below; the first representing a bad example, the second one reasonable accommodation, and the third one to Universal Design. Ask participants what they think of these pictures and identify which one represents which principle.

OLD DESIGN   **REASONABLE ACCOMODATION**   **UNIVERSAL DESIGN**

STEP 3:   Give more time to the group to debate about this.

STEP 4:   Use PowerPoint #6 to present the 3 pictures above and explain the differences between them. Also, explain the 7 principles of Universal Design.

STEP 5:   Places some pictures of people with different impairments on the big table and ask 7 volunteers to choose one picture and explain to the big group which of the 7 principles their picture represents. Debate if necessary.

Physical Accessibility-Infrastructure Training-Facilitator Guide

EXERCISE 3.2: Universal design and Reasonable Accommodation.

Process:

STEP 1: PowerPoint #6 presentation. The master trainer presents the slides describing reasonable accommodation and universal design. And Orientation to the inter-ministries-circular No 005 in 2012 on: "Reasonable Accommodation in the workplace for persons with disabilities [2]" but do not show many examples.

STEP 2: Give a situation to the big group: A child goes to school with his/her father who has a physical disability and he always accompanies his child to school every week.

STEP 3: Ask participants to work in pairs. Ask them by the questions below:

What could be done by the school to accommodate the child? What kind of reasonable accommodation?

STEP 4: After 10 minutes the master trainer asks participants to share their answers – ask the first pair the answer to the first question; do the other participants agree? Give the right answer and explain why

TIP: Encourage debate if people have different ideas

End of module three!

Module Four: Assessing Accessibility (210 min)	
Session 4.1: Barriers to Accessibility **Session 4.2: Responses to reduce accessibility barriers**	
Objective	By the end of the training session participants will be able: ✓ To describe key barriers/obstacles that can hinder the full participation of persons with different kinds of impairments in the built environment.
Time	90 minutes
Method	Roleplay on exercise 4.1, Reflection and Presentation
Material	- Wheelchair, Blur glasses, white cane, blind folder, crutches, scarf (to bound arms or legs) - Flipchart, empty cards, tape, markers, PowerPoint #7

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[2] Inter-ministerial Circular on Reasonable Accommodation on Employment of Persons with Disabilities

Session 4.3:	Non-Technical Accessibility Assessment Tool
Objective	By the end of the training session participants will be able: ✓ To know how to thoroughly assess the accessibility of a building. ✓ To identify common obstacles or existing barriers. ✓ To knowhow to propose recommendations. ✓ To know how to assess specific building components.
Time	120 minutes
Method	Plenary, Site audit, Group work
Material	Copies of Non-Technical Accessibility Assessment checklist (NTAA checklist), measure meters, pen, wheelchair, Cameras, PowerPoint #8

Session 4.1: Barriers to Accessibility (45 min)
Session 4.2: Responses to reduce accessibility barriers (45 min)

Exercise 4.1: Experiment and identify the barriers role play

Process:

STEP 1:   Divide the participants into 5-6 smaller groups.

STEP 2:   Ask for one volunteer of each group to undergo a simulation exercise.

STEP 3:   Provide the volunteers with blindfolds, blur glasses, a wheelchair, crutches, or a scarf to bound arm or leg to the body.

STEP 4:   Ask the volunteers of each group to be in the given condition or situation for the duration of the exercise. Ask them to go to a particular spot in and/or outside the workshop venue e.g. another building close by and ask them to make use of the building (access the stair, the toilets, the yard, the elevator, resting place, etc.).

STEP 5:   Once the assigned (eg. 30 minutes) time is over ask them to reassemble in the training venue and share their experience and feelings. Ask them if they tried to explore other alternatives to maximize their potentials.

STEP 6:   Discuss in sub-groups possible options/solutions to overcome the barriers/problems

STEP 7:   Hand out empty cards and markers to each sub-group

STEP 8:   Ask each sub-group, to list the difficulties identified and write them on the cards (one problem per card)

STEP 9:   Animate a reflection on the role-play, by asking them:

✓ What do you think about the role play?

✓ Was it difficult to find the way, to identify the rooms, to see all information, sign-boards, sign...? How did you feel about the stair, elevators, toilets, height of the table/receptionist desk...?

✓ What was difficult to do and what was easy?

✓ How did you feel when you were wheeling to the building or toilet or meeting room?

✓ How do you feel when you cannot talk to the receptionist and express what you need?

STEP 10: Note all keywords on a flip chart.

STEP 11: Ask a volunteer to classify the keywords of STEP 10 according to the three different types of barriers mentions in handout 4.1. (Environmental; Social- Attitudes; Communication)

STEP 12: Present PowerPoint #7 to show the different types of barriers to accessibility and possible responses to reduce those barriers.

Note: Barriers can become master trainers once they have been removed and help persons with disabilities to be included and participate in society (For example: If you build a ramp to overcome the steps to enter a building).

Session 4.3: Non-Technical Accessibility Assessment Tool

Exercise 4.3: Non-Technical Accessibility Assessment (NTAA)

Process:

STEP 1: Brainstorm to participants about the NTAA tool by asking them several questions as below:

✓ What is NTAA?

✓ Why do you do it?

✓ When do you do it?

✓ How do you do it?

STEP 2: Give good answers to the questions above and discuss them if needed

STEP 2: Show PowerPoint #8 on the NTAA Tool and explain all steps. Then, shares the hard copies of the NTAA checklist

STEP 3: After clarifying any concerns related to the checklist, divide the participants into groups of max 4 people. Give each group all needed materials such as the hard copies of the NTAA checklist, measurement meter, pen to note. Also, check if each group has a smartphone to take photos. If not, remix the groups.

STEP 4: In each sub-group, you must include persons with disabilities and persons without disabilities or ask members of the groups to volunteers to put themselves in a disabling situation, as in exercise 4.1.

STEP 5: Ask each group to go to a particular spot in and/or outside the workshop venue e.g. another building nearby and ask them to make use of the building (access the stair, the toilets, the yard, the elevator, etc.). Ask them to fill the non-technical accessibility assessment checklist (NTAA checklist) for the facilities the designated person with disabilities tries to use.

STEP 6: All groups come back to the training room and roundup with some questions:

✓ What do you think about this tool?
✓ Are there any parts unclear to you?
✓ What would be your difficulties in using it?
✓ Did you ever use other tools for accessibility assessments?

Exercise 4.3: NTAA 1-Group Discussion about findings and what to include in the assessment report

STEP 7: Keep the same groups as during the NTAA exercise and ask them to discuss how to produce an assessment report and what they think should be included in it?

STEP 8: Record all keywords on the flipchart and compare it to a prepared PowerPoint #8 and agree on the assessment reporting format.

End of module four!

Module Five: Improving Accessibility in the Built Environment (140 min)	
Session 5.1: Improving accessibility in Urban Areas **Session 5.2: Improving accessibility in Buildings**	
Objectives	By the end of the training session participants will be able: ✓ To understand the accessibility standards ✓ To make recommendations to improve the accessibility of buildings.
Time	80 minutes
Method	Reflection, and Presentation PowerPoint #9 and PowerPoint #9.1, Question & Answers
Material	- Flipchart, empty cards, tape, markers, PowerPoint
Session 5.3: Designing an accessible toilet and ramp	
Objectives	By the end of the training session participants will be able: ✓ To identify infrastructure gaps and good habits. ✓ To identify possible solutions to design an accessible toilet and ramp.
Time	60 minutes

Method	Plenary, Group work, Exercises, Presentation of solutions and debate
Material	Exercise 5.3: Ramp and Toilet exercise, PowerPoint #10, handout 5.3, pens with different colors, candies

Session 5.1: Improving accessibility in Urban Areas (40 min)
Session 5.2: Improving accessibility in Buildings (40 min)

Process: This session aims at offering a wide variety of general suggestions, applicable to different aspects of the built environment with minor adaptations.

STEP 1: Brainstorm about the UNBROKEN CHAIN OF MOVEMENT; the RECU principle. Ask participants if they remember the 4 steps.

STEP 2: Explain to them that ensuring the accessibility of the physical environment for people with different kinds of impairments is about facilitating their movement through the RECU steps.

STEP 3: Before starting the presentation, explain that the objective of this session

STEP 4: Presentation of PowerPoint #9 on improving accessibility in Urban Areas and Power-Point #9.1 on improving accessibility in buildings. Finish with a question and answer session.

Session 5.3: Designing an accessible toilet and ramp (60 min)

EXERCISE 5.3.1: Designing and accessible TOILET

Process:

STEP 1: Divide participants into 5 groups and share the drawing of the toilet floor plan with each group.
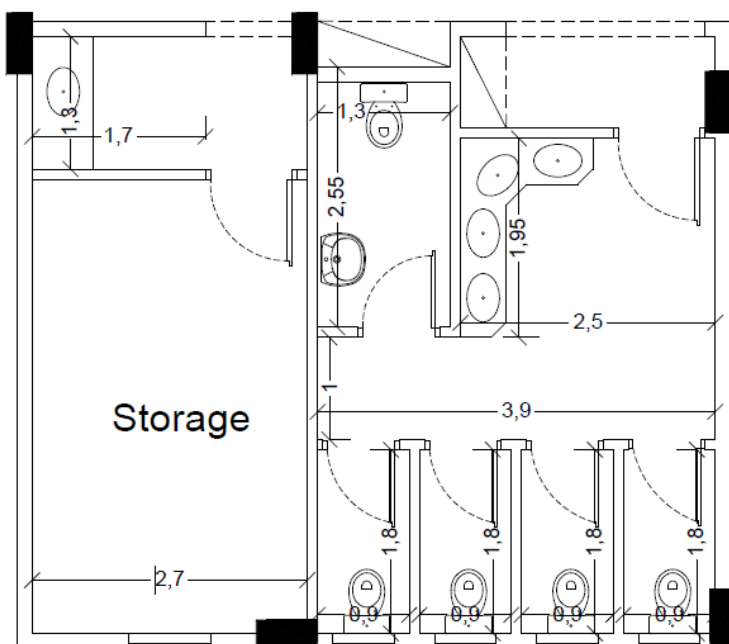
Figure 6: Toilet plan

STEP 2: Give 15 minutes to the groups to revise this drawing and to draft the plan of an accessible toilet, including its facilities. Both toilets and facilities should be easy to use by people with different kinds of impairments. Modifications should be limited to minimize the costs.

STEP 3: Ask one representative from each group to present their ideas of revising this drawing to the big group. Debate and identify the best solution.

STEP 4: Show the possible options/solutions by using PowerPoint #10.

EXERCISE 5.3.2: Designing and accessible ramp

Process:

STEP 1: Show picture 7 of a ramp by using PowerPoint #10 and ask the participants what they think of this ramp.

Figure 7: Existing situation of concrete ramp access to toilet

STEP 2: Show the formula to calculate the minimum length of a ramp by using PowerPoint #10 (see the picture below)

Example #1

Slope(%)

Lenght
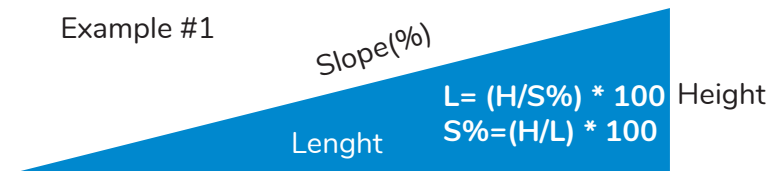
$L= (H/S\%) * 100$ Height
$S\% = (H/L) * 100$

Figure 8: Example #1 of ramp's formula

STEP 3: Show the exercise of Example 2: in PowerPoint #10 and ask the participants to calculate the percentage of the slope (%S) individually. The person with the fastest correct answer will get candy.

Example #2

S%

35Cm

$L= (H/S\%) * 100$
$S\% = (0,35/4,3) * 100 = 8,13\%$

4,3m
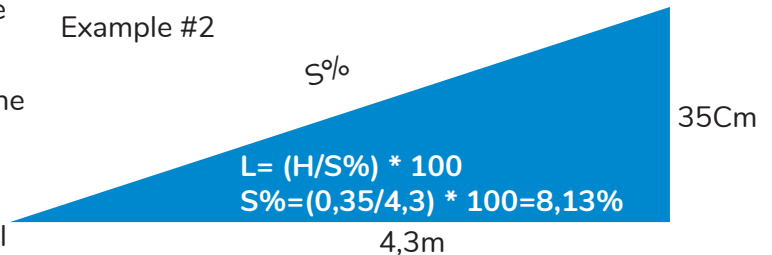
Figure 9: Exercise #2 and answer the percentage of the slop

STEP 4: Show the exercise of Example #3: in PowerPoint #10 and ask the participants to calculate the length of this ramp below:

Example #3

10%

85Cm

$L= (H/S\%) * 100$
$S\% = (0,85/10) * 100 = 8,13\%$

Lenght
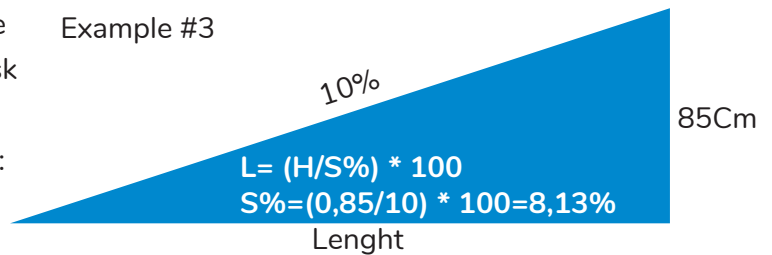
Figure 10: Example #3 and the correct answer of the ramp lengths

Note: the height of a level difference affects how long a ramp should be, as the maximum percentage of a slope can't be more than 5% to remain accessible. The below picture shows a standard percentage of the ramp that could be affected by people who use wheelchairs.

| Ideal situation | < 4% / < 1:25 Passable ramp | < 5% / < 1:20 Accessible ramp | < 8% / < 1:12 Help needed | < 12% / < 1:08 Danger |
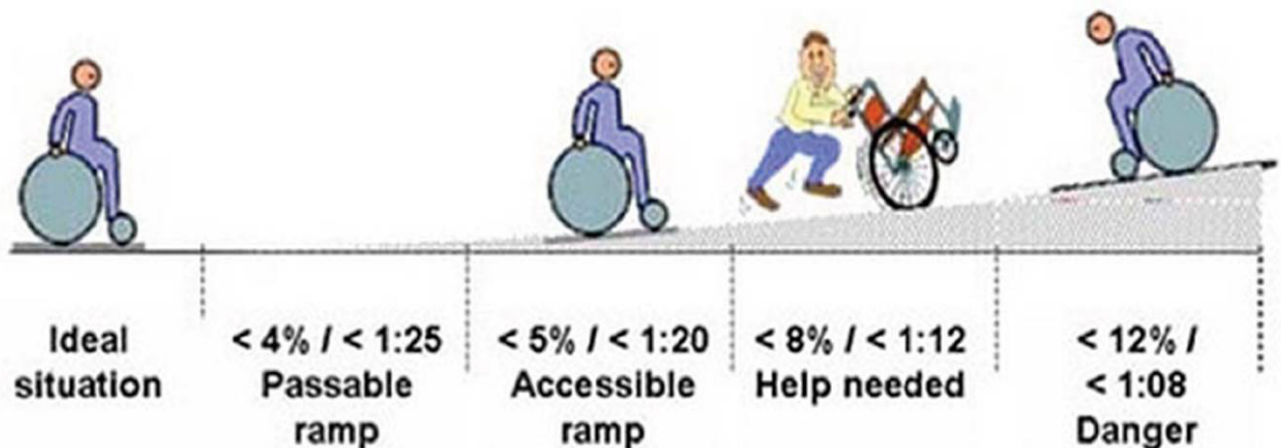
Figure 11: Percentage slop of ramp

STEP 5:   Divide the participants into 5 groups again and share the drawing of the plan of a building (below):

Example #4
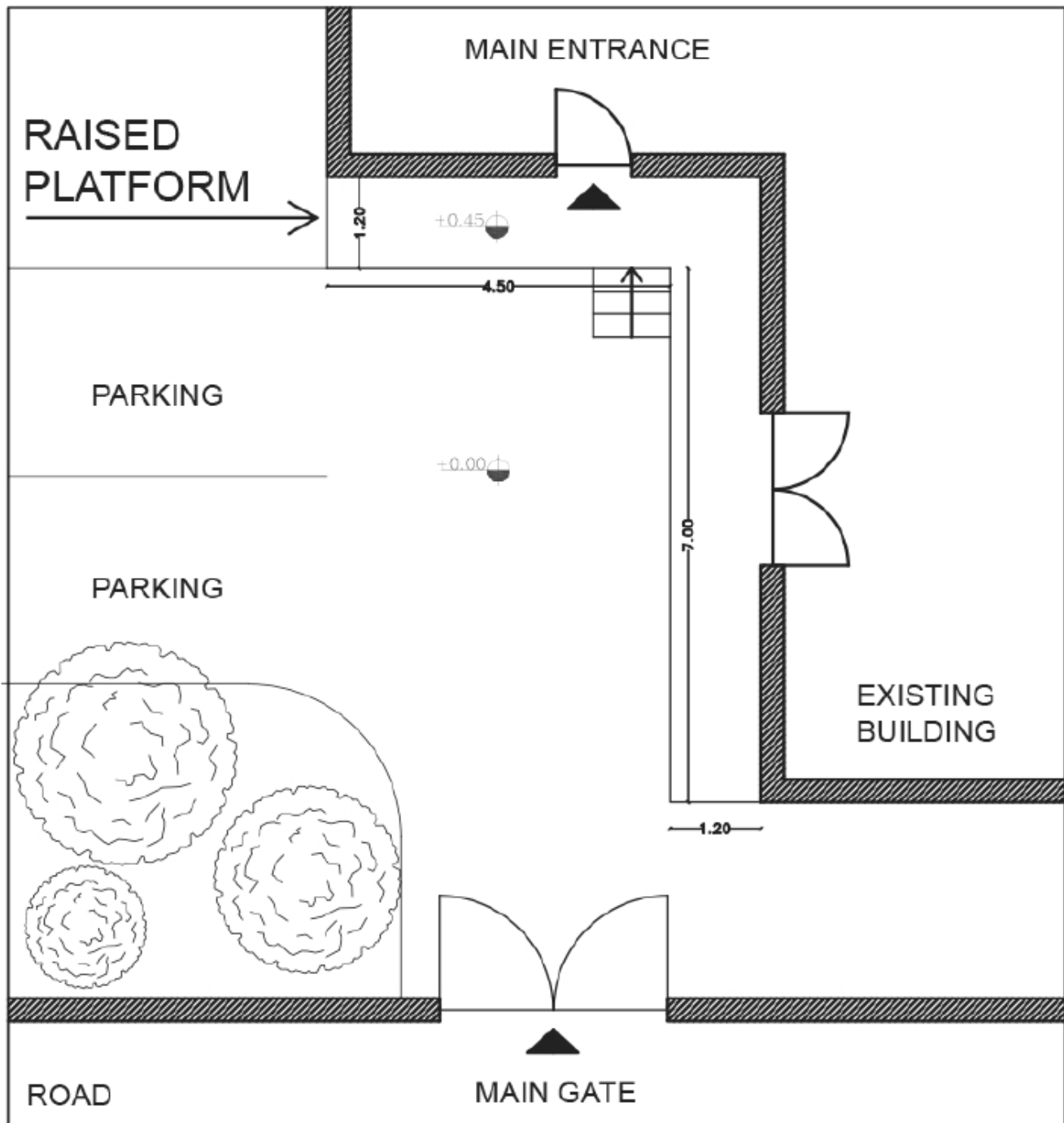
Figure 12: Example #4 of a building plan

STEP 6:   Work in groups to integrate an accessible ramp in this drawing, at a suitable place allowing persons with reduced mobility to enter this building without facing barriers.

STEP 7:   Ask one representative from each group to present their ideas of revising this drawing to the big group. Debate and identify the best solution.

STEP 8: Show the possible option/solution by using PowerPoint #10 and explain why

End of module five!

Closure exercise

After the last day of the training, it is important to evaluate it. This evaluation helps you to assess if your methodology was clear and if the general organization of the sessions was appreciated by the participants. This evaluation does not aim at measuring the understanding of the participants regarding the content of the training. This element is measured through the pre/post-tests.

Below are a few friendly methods that you can use to evaluate the sessions.

The Targets:

Process:

**STEP 1:** Draw a target (the sections you want to evaluate) on a flip chart as the picture below:

STEP 2: Divide it into several sections: quality of the facilitation, quality of the organization, timeframe, expectations fulfilling, etc.

STEP 3: Ask each participant to indicate their level of satisfaction within each section by drawing across. The closer a participant puts the cross to the center of the target the more satisfied s/he is, the closer s/he puts it from the border the least satisfied s/he is.

The Ball:

Process:

STEP 1: Ask the participants to make a circle.

STEP 2: Throw a ball to one of the participants and ask him/her to say what sessions did s/he enjoyed the most during the training Then this person sends the ball to another participant who says what s/he enjoyed the least during the session.

STEP 3: Continue until each participant had the chance to say what he enjoyed the most/the least

The Corners:

This method is easier to use in a closed room. If you use it outside, create 4 corners by putting 4 chairs or other objects in places that you will name corners.

Process:

STEP 1:   Explain to the participant what each corner represents: very satisfied, satisfied, not satisfied, not satisfied at all.

STEP 2:   Ask all participants to stand in the middle of the space chosen for the exercise.

STEP 3:   Enounce the area you want to measure (Accessibility of the training area, Duration of the training, Facilitation: games, exercises, Content of the training, Logistics of the training (food, dormitory, etc).

STEP 4:   Ask the participants to move to the corner that best reflects their level of satisfaction concerning this area.

STEP 5:   Count and note the number of participants in each corner and enounce another area.

STEP 6:   Ask the participants to move according to their level of satisfaction regarding this second area. If they feel the same, they do not move.

TIP: If some participants have mobility difficulties, make sure you give them enough time to move from one corner to another or that they receive some help.

Agree or disagree:

Trainers can use the same principle as for the corners but each corner has a different meaning: strongly agree/agree/disagree/strongly disagree. In this case, enounce the statement instead of the area.

Process:

TIP: Make sure the place where the training takes place is accessible and quite enough.
In case some participants have mobility problems you can adjust the method and I only consider agreeing and disagree.

STEP 1:   Give participants a blue card=agree and a red card=disagree.

STEP 2:   Announce the statements and ask the participants to raise the blue or the red card to agree/disagree.

Using the evaluation form:

Trainers can use the evaluation form to evaluate the whole training by using the evaluation form below. Gives enough time to the participants to complete the form and collect it back.

Evaluation Form

Disability and Accessibility Training Evaluation Form

We kindly request you to complete this evaluation form so that we can get feedback about the training you got this week.

ASPECT	Excellent	Good	Neutral	Bad
Objectives of the training				
Relevance				
Value for time				
Language/words used				
Group activities				
Training Methods				
Spacing of sessions				
Ice breakers				
Please write down 4 important things you have learned from this training				
What was the most useful session? Please give reasons for your answer				
What can you say about the master trainer(s)?				
What did you like most about this training?				
What did you not like about this training?				
Please write any other comments you might have that relate to this training				

SECTION 3: Training Handouts

Sample of disability and accessibility- test

Disability Test		
2) What is a disability?		
Is the result of a situation in which personal factors interact negatively with the environment.	YES	NO
Is a degree of physical, intellectual, mental, or sensorial restriction of an individual that has a long-term impact.	YES	NO
Can affect people of all ages and can be permanent or transitory	YES	NO
Is a situation that can change by improving personal and/or environmental factors.	YES	NO
2) What is an impairment?		
A problem in body function or body structure such as a significant deviation or loss.	YES	NO
An impairment can be temporary or permanent; progressive, regressive, or static; intermittent or continuous.	YES	NO
Persons with impairments often experience barriers to their participation in education, health, employment, political, and public life.	YES	NO
All impairments can be seen	YES	NO
4) When you meet a person with a disability, is it appropriate to shake their hand?	**YES**	**NO**
6) How do you or might you attract a deaf person's attention?		
Speak louder to them	YES	NO
Tap them on the shoulder	YES	NO
Wave your hands	YES	NO
7) When you wish to talk to a person with a hearing impairment, what do you do?		
You speak to their sign language interpreter	YES	NO
You speak directly to the person	YES	NO
You speak to the person's caregiver	YES	NO

8) What do you do if you are speaking with a person with a disability and you don't understand what they are saying to you?	YES	NO
You nod your head and pretend to understand so you don't upset them	YES	NO
You ask succinct questions that invite succinct answers	YES	NO
You smile	YES	NO
Accessibility Test		
1) Accessibility means ensuring that infrastructure can be accessed by:		
Persons with disabilities only	YES	NO
Persons with disabilities and children only	YES	NO
Persons with disabilities and pregnant women only	YES	NO
Persons with disabilities and people with injuries only	YES	NO
All people whatever their age and condition	YES	NO
2) Barriers faced by persons with disabilities can be		
Social and political/Institutional	YES	NO
Related to people's behavior/attitude	YES	NO
Horizontal, vertical, communication-related	YES	NO
Environmental	YES	NO
3) What does the RECU approach mean?		
Read, Educate, Communicate, Use	YES	NO
Reach, Enter, Circulate, Use	YES	NO
Rare, Elegant, Cautious, Unique	YES	NO
Right, Education, Communication, Uniform	YES	NO
4) Physical accessibility in the Asia context:		
Is too difficult to achieve due to the lack of materials and technologies	YES	NO
Can be improved also with the use of alternative and local solutions and materials	YES	NO
Is not important as there are other priorities	YES	NO

Should be promoted by all stakeholders with the active participation of persons with disabilities	YES	NO
Accessibility must be considered as soon as possible when building new infrastructure or rehabilitating a building	YES	NO
5) Accessibility is COMPLETELY achieved in a building if:		
A ramp is built at the entrance of a building, no matter how it is designed	YES	NO
An accessible elevator is put in place	YES	NO
Handrails are provided in a toilet	YES	NO
Information panels are provided in a building, no matter if they include symbols or not	YES	NO
It is fully equipped with accessible facilities	YES	NO
6) While working in the adaptation or construction of accessible facilities we should involve:		
Engineers and accessibility experts only	YES	NO
Persons using wheelchairs only	YES	NO
Doctors, therapists, and disability experts only	YES	NO
All stakeholder, experts, managers, and users group including persons with disabilities	YES	NO
7) Accessibility is a pre-condition to:		
Using public services like schools and hospitals	YES	NO
Realizing rights like voting, accessing work opportunities, having access to water	YES	NO
Having access to leisure and recreational activities (using a playground, attending a pubic show, going to the beach, etc.)	YES	NO
8) To improve accessibility it is important to:		
Improve the accessibility of buildings 'entrance	YES	NO
Improve the accessibility of public and private transportation	YES	NO
Think about the position and design of urban equipment and furniture	YES	NO
Ensure that documents are easily readable when they are printed	YES	NO

Ensure that the chain of movement from home to services is not broken		YES	NO
Consider the needs of persons with disabilities when organizing an event		YES	NO
9) Accessibility improvements of the built environment:			
Should be reduced to the minimum because they are very expensive (ramps, handrails, accessible bathrooms, etc.)		YES	NO
Are more effective if included in the early design stages of a building		YES	NO
Cannot be provided to an existing building		YES	NO
Does not include written information, fonts size, and color, graphic communication, use of light		YES	NO
Can be provided to an existing building but the final result is subject to a lot of constraints (availability of space, building's layout, building's position, etc.)		YES	NO
10) Reasonable Accommodation meaning is:			
The flexibility to implement specific modifications to meet the needs of a person with a disability to ensure their participation and inclusion.		YES	NO
Refers to the marketing of products and services for persons with disabilities.		YES	NO
Organizing meetings in places that can be easily reached by people with mobility problems or close to their home		YES	NO
11) What is Universal Design?			
Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user's body size, posture or mobility is one principle of universal design.		YES	NO
Refers to the design of products, environments, programs, and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design.		YES	NO
Intends to simplify life for everyone by making products, communications, and the built environment more usable by as many people as possible at little or no extra cost.		YES	NO
Shall include assistive devices for particular groups of persons with disabilities where this is needed.		YES	NO

The correct answers to the pre/post-test are:

1. The definition of disability:

- Is the result of a situation in which personal factors interact negatively with the environment. Disability can affect people of all ages and can be permanent or transitory.
- Disability is consequently a situation that can change by improving personal factors, or environment, and generally both.

2. Impairment

- A problem in body function or body structure such as a significant deviation or loss. Persons with impairments often experience barriers to their participation in education, health, employment, political, and public life. Persons with impairments often experience barriers to their participation in education, health, employment, political, and public life.

Always place and consider the person before their impairment

3. When you meet a person with a disability, is it appropriate to shake their hand?

- YES

Even if the person cannot shake your hand because of their impairment, it is important to greet them and show your respect using a culturally shared gesture.

4. How do you or might you attract a deaf person's attention?

- Wave your hands

Do not penetrate someone's personal space just because it is easier for you. Imagine people taping your shoulder all the time. As a general rule, rely upon the senses that "work" to communicate (speech for a person with a visual impairment, sight for a person with a hearing impairment, etc.).

5. When you wish to talk to a person with a hearing impairment, what do you do?

- Speak to the person directly

You can communicate with a person who has a hearing impairment. Even if they are accompanied by a sign language interpreter or caregiver/carer, you should address the person directly, as it is important to maintain visual contact so that communication may be balanced and reciprocal.

6. What do you do if you are speaking with a person with a disability and you don't understand what they are saying to you?

- Ask succinct questions that invite succinct answers

Never pretend that you understand when you do not. If you did not understand, repeat what you

said and ask a different, shorter question. A person with an impairment is not a "victim" and should not be described as such because of their impairment. The person may have been the "victim" of an accident. However, in this case, we are referring to the cause of the impairment, not to the person.

7. **Persons with disabilities must be included in the social, economic, cultural, religious life of their community:**

- Because it is their right

- Because they are part of the community

- Because Persons with disabilities are very demanding

- Especially to facilitate other people's everyday life

- Because they can actively contribute to the development of the community

ANSWERS of Accessibility-Test

1. **Accessibility means ensuring that infrastructure can be accessed by:**
   - Persons with disabilities but also children
   - Persons with disabilities but also pregnant women
   - Persons with disabilities but also people with injuries
   - All people whatever their age and condition

2. **Barriers faced by persons with disabilities can be:**
   - Social and political/Institutional
   - Related to people's behavior/attitude
   - Horizontal, vertical, communication-related
   - Environmental

3. **What does the RECU approach mean?**
   - Reach, Enter, Circulate, Use

4. **Physical accessibility in the Asia context:**
   - Can be improved also with the use of alternative and local solutions and materials
   - Should be promoted by all stakeholders with the active participation of persons with disabilities
   - Accessibility must be considered as soon as possible when building new infrastructure or rehabilitating a building

5. **Accessibility is COMPLETELY achieved in a building if:**
   - Public service is fully equipped with accessible facilities

6. **While working in the adaptation or construction of accessible facilities we should involve:**
   - All stakeholder, experts, managers, and users group including persons with disabilities

7. **Accessibility is a pre-condition to:**
   - Using public services like schools and hospitals
   - Realizing rights like voting, accessing work opportunities, having access to water
   - Having access to leisure and recreational activities (using a playground, attending a pubic show, going to the beach, etc.)

8. **To improve accessibility it is important to:**
   - Improve also the accessibility of public and private transportation
   - Ensure that the chain of movement from home to services is not broken or else the entire chain will be rendered inaccessible
   - Consider the needs of persons with disabilities when organizing an event

9. **Accessibility improvements of the built environment:**
   - Are more effective if included in the early design stages of a building
   - Can be provided to an existing building but the final result is subject to a lot of constraints (availability of space, building's layout, building's position, etc.**)**

10 **Reasonable Accommodation means:**
   - Organizations have the flexibility to implement specific modifications to meet the needs of a person with a disability to ensure their participation and inclusion.
   - Organizing meetings in places that can be easily reached by people with mobility problems or close to their home is a reasonable accommodation

11. **What is Universal Design?**
   - Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user's body size, posture or mobility is one principle of universal design.
   - "Universal design" refers to the design of products, environments, programs, and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design.
   - "Universal design" intends to simplify life for everyone by making products, communications, and the built environment more usable by as many people as possible at little or no extra cost.
   - Shall include assistive devices for particular groups of persons with disabilities where this is needed.

Handout 1.2.1: Definition of impairment and disability

Impairment - Problems in body function [mental functions, sensory functions, voice and speech functions] or body structure (Nervous, Musculoskeletal, and Cardiovascular system) such as a significant deviation or loss (i.e. Amputation, club foot, paraplegia, cerebral palsy). Impairments can be temporary or permanent; progressive, regressive, or static; intermittent or continuous. Persons with impairments often experience barriers to their participation in education, health, employment, political, and public life.

Disability - is socially constructed as a result of the limitations imposed on persons who have impairments by attitudinal, institutional, or environmental barriers, making them unable to meaningfully participate in societal activities.

Persons with disabilities – According to the UN Convention on the Rights of Persons with Disabilities, "Persons with disabilities comprise those who have long-term physical, mental, intellectual or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". This definition means that impairments can become a disability when a person has to face an environmental situation that is not designed to be accessible to him/her. In other terms, a more accessible environment enables persons with impairments to enjoy their rights on an equal basis with others. Impairment-based discrimination has a particularly severe effect on housing, transport, cultural life, and access to public places and services. (Point to Remember - It is helpful to separate 'disability' (social issue) from 'impairment' (medical issue). To separate the two issues enables one to take specific actions and approaches towards focused solutions.

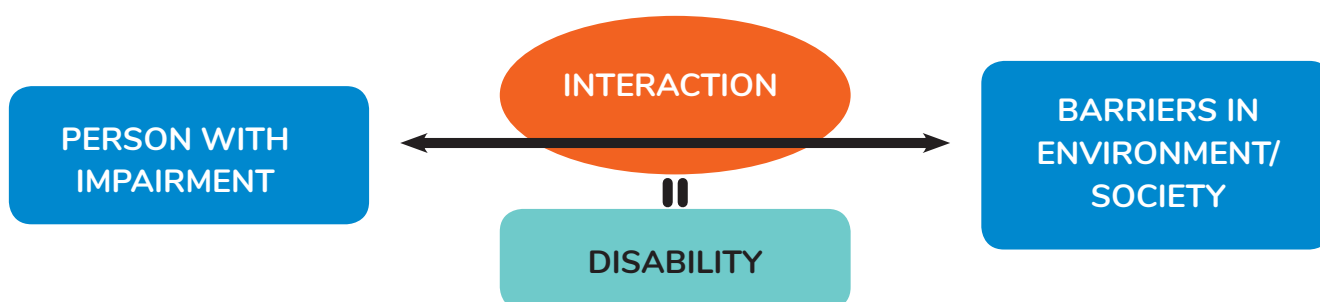This is a summary of the disability creation process.

Figure 13: Disability creation process

Handout 1.2.2: The effects of impairments and correct terminology

1) **Physical impairment -** affects a person's body movement and/or appearance.

2) **Sensory impairment -** affects a person's sight, hearing, speech, smell, taste, sensation/feeling, and/or physical balance.

3) **Intellectual impairment -** significantly affects a person's intellectual and cognitive functioning and adaptive behavior. The impairment has to originate before the age of 18. It can also be referred to as a learning disability. An individual with a learning disability has difficulties with the messages to the brain becoming jumbled, thus making it difficult for the individual to learn in one or more of the academic areas. People with learning disabilities do not have "mental retardation" nor are they "slow learners". Learning disability is just a generic term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities due to neurologic dysfunction.

4) **Mental illness or psychiatric impairment -** effects and profoundly disrupt a person's thinking, moods, ability to relate to others, and capacity for coping with the demands of life. Mental illness includes disorders such as schizophrenia and major depressive disorder. It can affect persons of any age, race, religion, or income and are not the result of personal weakness, lack of character, or poor upbringing.

5) **Multi-impairments -** a person with more than one impairment

E.g.: A person with Down's syndrome (learning disability) may also have a hearing and/or visual impairment. Or a person who has cerebral palsy may have difficulty walking, speaking, and learning. Or a person may be deaf and blind.

Impairment	Correct terminology
Physical impairment	A person with a physical disability A person with a physical impairment A person with a mobility disability A person who uses mobility aids (such as wheelchairs)
Visual impairment	A person who is blind A person with low vision A person with visual impairments
Hearing impairment	A deaf person A person who is hard of hearing A Person with a hearing impairment
Intellectual impairment	A person with an intellectual disability A person with a cognitive disability A person with a learning disability A person with a learning difficulty
Mental impairment	A person with a mental health problem A person with mental health needs

This section provides basics for participants to follow when interacting with persons with disabilities.

If you are unsure how to approach persons with disabilities, just ask her or him!

- **Be Yourself**

Treat persons with disabilities with the same respect you have for everyone else. Focus on the individual and the issue at hand, not her/his impairment.

- **Be Helping**

Ask before you help. Do not automatically assist. If your offer for help is accepted, listen or ask for instructions. Allow a person dignity to do what she or he wants to do for her or himself.

- **Language**

Do not use outdated degrading terms like "invalid", "handicapped", "crippled" or "the disabled". If you are not sure what words to use, please do not hesitate to ASK!

- **Communication**

Speak directly to the person with disabilities, not just to the ones accompanying her or him like caregivers or translators. Never ridicule persons with disabilities are immediately visible.

- **Touching**

Be sensitive about physical contact. Identify yourself before you make physical contact with a visually impaired or blind person. Persons with disabilities consider their equipment part of their personal space. Respect their assistive devices such as a wheelchair, cane, or crutches.

- **Do not make assumptions**

Persons with disabilities, like all people, are experts on themselves: They know best what they do and do not like, and what they can and cannot do. Do not make decisions for them.

- **Accessibility**

Promote accessibility at your place: Include your policies and process. For example, when planning a meeting or event, anticipate or ask for specific accommodations persons with disabilities will need. Use easy to read font in your written communication. If a barrier cannot be avoided, let the person know ahead of time.

ASK

PERSONS

FIRST!

Key Messages:
- A person with disabilities is a person first.
- Persons with disabilities are not a homogenous group – every person is unique.
- Persons with disabilities have abilities, just like any other person.
- Persons with disabilities have the same basic needs as everybody else does.
- Some persons with disabilities have specific needs (assistive device, caregiver, etc.) mostly due to environmental barriers they face; is not only because of their impairment.
- Disability is not only a health issue but mostly a social and rights issue.

Handout 1.2.4: Models of Disability

Introduction and history

Historically, disability was largely understood in mythological or religious terms, e.g. persons with disabilities were considered to be possessed by devils or spirits; disability was also often seen as a punishment for past wrongdoing. These views are still present today in many traditional societies.

In the nineteenth and twentieth centuries, developments in science and medicine helped to create an understanding that disability has a biological or medical basis. This medical model views disability as a problem of the individual and is primarily focused on cure and the provision of medical care by professionals. Later, in the 1960s and 1970s, the individual and medical views of disability were challenged by the social model of disability. The social model focused on the social barriers and discrimination those persons with disabilities face. Disability was redefined as a societal problem rather than an individual problem and solutions became focused on removing barriers and social change, not just a medical cure.

The CRPD emphasizes the need for mainstreaming gender and disability issues in daily activities. There are several approaches to disability. In this handout, we outline the medical and charity model (individual models) that focus on barriers to participation being with people with disabilities.

Disability Models: There are different ways of seeing disability

1) **Medical Model of Disability (Individual Model):** The medical model believes that because you have an impairment, the problem is with you and that we can fix you so that the problem goes away. This model often fails when people do not need to be fixed or cannot be fixed and the problem is not their impairment only but exclusion from society.

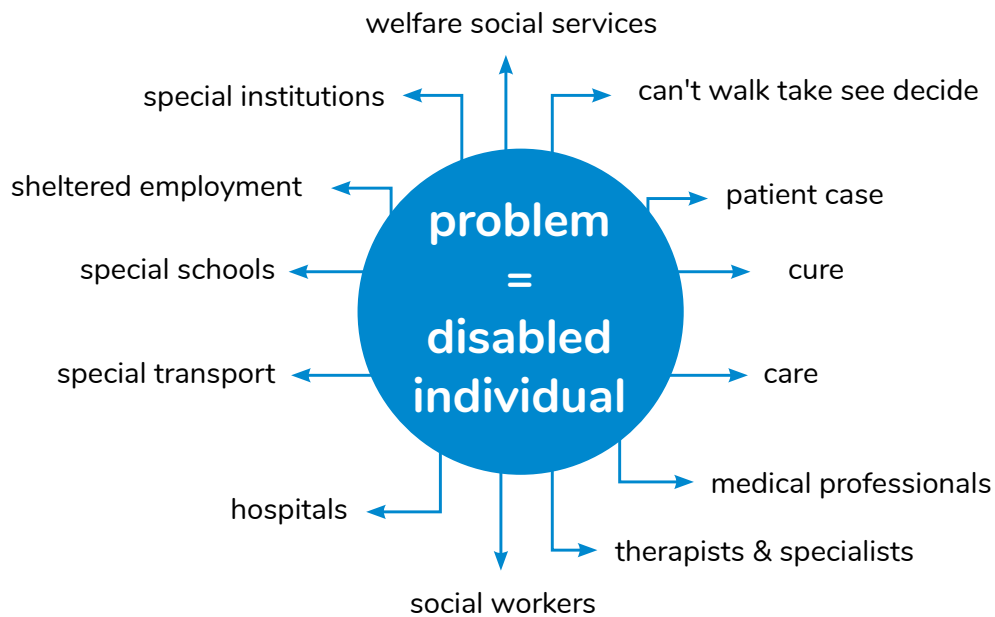**"There is something WRONG WITH YOU... let us fix you"**

Figure 14: Medical Model of Disability

NOTE: This is a more visual representation of what the medical model creates and how limited its impact can be if it focuses only on producing people (professionals), or places that will fix the impairment and ignores the bigger part of the problem.

The following describes the medical model:

- **Impairment is the problem**
- A traditional understanding of disability
- Focuses on a person's impairment as the obstacle
- Seeks to 'cure' or 'improve' individuals to 'fit' them into society
- Defines the disabled person only as a patient with medical needs
- Segregates disabled people from the others
- Offers only medical help, carried out by specialists
- Expensive tends to benefit relatively few persons with disabilities

2) **Charity Model:** The charity model comes from faith-based groups who feel that bad luck or fortune fell upon persons with disabilities and that they do not need to suffer alone and need to be given financial, clothing, food support to ease their suffering. It sees them as powerless and as needing charity.

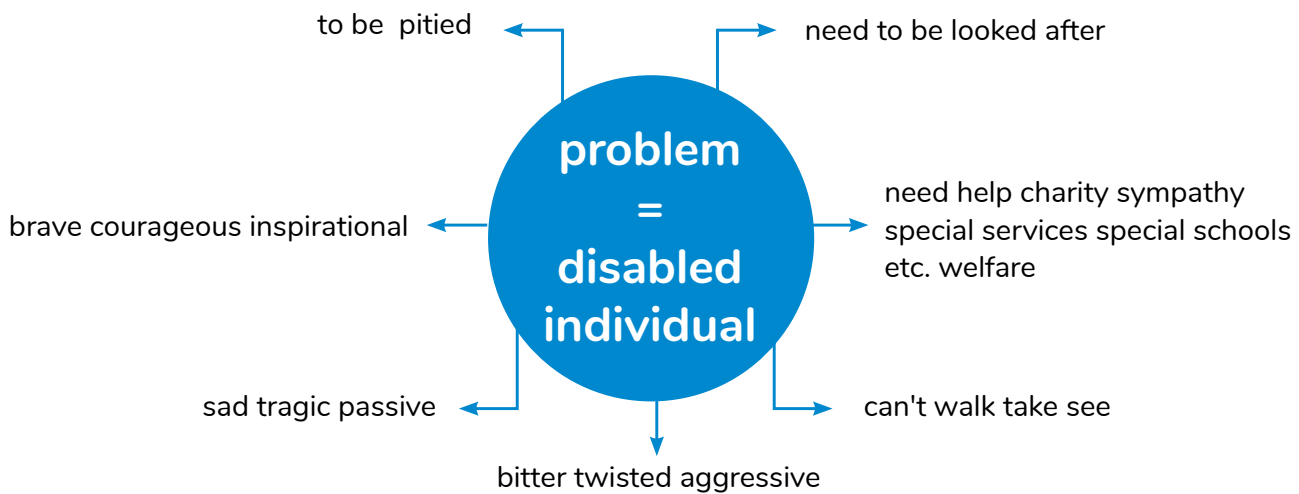**"We feel SORRY FOR YOU... let us give you something"**

Figure 15: Charity Model of Disability

NOTE: This is a more visual representation of what the charity model creates and how limited its impact can be if it focuses on negatively perceiving people and focusing on their neediness and disabilities, which disempowers them.

Activities 'help' persons with disabilities who are helpless and outside the 'normal' society. This model is characterized by the following:

- Disability is a problem in the person
- They are seen as 'unfortunate', 'dependent' or 'helpless'
- They are regarded as people who need pity and charity
- Assumes people with impairments cannot contribute to society or support themselves
- Provides them largely with money or gifts, such as food or clothing
- Persons with disabilities become long-term recipients of welfare and support
- Aid provided by specialist organizations and not mainstream development
- Persons with disabilities are viewed and kept as a separate group

3) Social Model: The social model recognizes the reason people have difficulties is mainly due to exclusion by the society which causes poverty and that if society changed then the lives of persons with disabilities would improve.

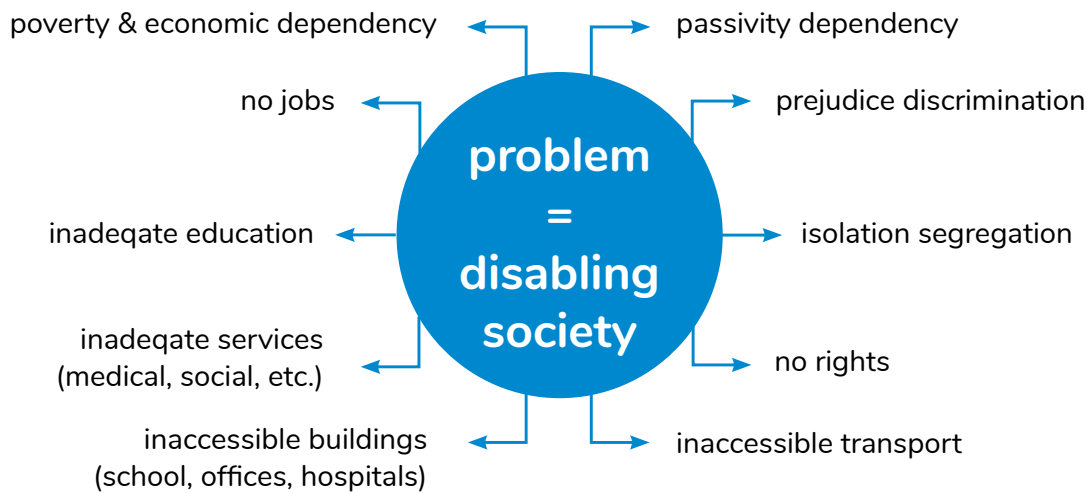**"There is something WRONG WITH SOCIETY... let the society be more inclusive"**

Figure 16: Social Model of Disability

NOTE: This is a more visual representation of what the medical model creates and how limited its impact can be if it focuses only on producing people (professionals), or places that will fix the disabled and ignores the bigger part of the problem.

Activities focus on inclusive practices and this approach sees persons with disabilities as part of the wider society. The social model operated under the following:

- Focuses on society, not persons with disabilities, as the problem
- Regards persons with disabilities as part of society, rather than separate
- People are disabled by society denying their rights and opportunities
- Sees disability as the social consequences of impairment
- Persons with disabilities' needs and rights are the same as non-disabled people's – e.g. belonging, health, love, education, employment
- Activities focus on identifying and removing attitudinal, environmental, and institutional barriers that block inclusion

4) **Rights-Based Model:** Right based model goes one step further than the social model and not only feels society is the source of the problem, but that the solution is a human right issue, not a nice economic 'when we have time we will address it' issue.

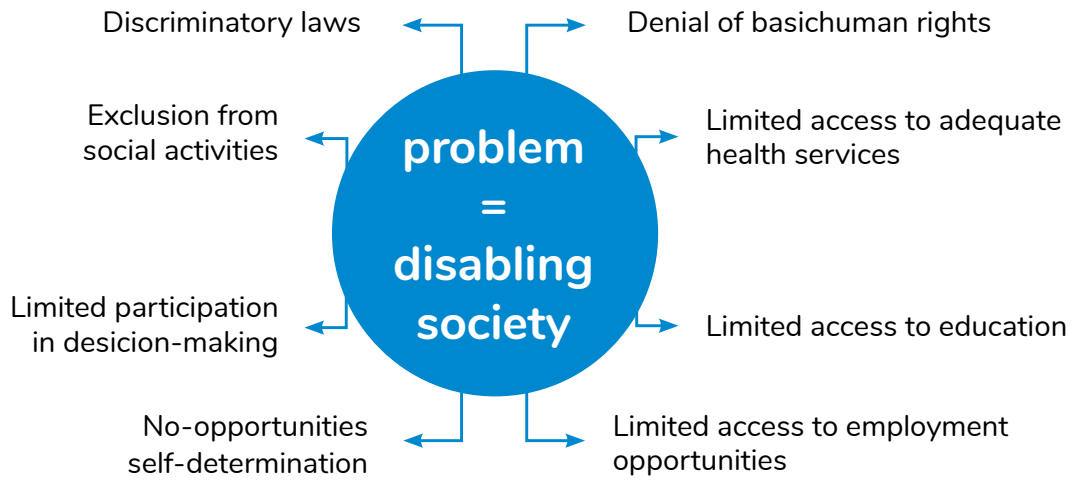**"The problem is a human rights issue ... we MUST find ways to ADDRESS IT"**

Figure 17: Rights-Based Model of Disability

NOTE: This is a more visual representation of the right based model looking at laws and procedures that discriminate and using that as a framework for change.

Handout 2.1: Definition of accessibility

For the national Technical Standards on Physical Accessibility- Infrastructure for Persons with Disabilities, an accessible environment must allow for free and safe movement function and access for all, regardless of age, sex, or condition. It is a space or a set of services that can be accessed by all, without obstacles, with dignity, and with as much autonomy as possible.

Without access to the physical environment, to transportation, to information and communication, including information and communications technologies and systems, and other facilities and services open or provided to the public, persons with disabilities would not have equal opportunities for participation in their respective societies.

A barrier-free environment is a space or a set of services that can be accessed by all, without obstacles, with dignity, and with as much autonomy as possible. It does not just refer to making a building accessible with a ramp; it includes making the whole area, including buildings, pathways, transport, services, and facilities easily accessible by all people. A barrier-free environment does not only involve making changes to the built environment but also involves a change in attitude by community members, service providers, and policymakers so that they accept that all people have the right to move around freely. This means that persons with disabilities should feel welcome by all members of the community, services, and institutions. In Cambodia, most of the public infrastructures are not accessible and mobility options are very limited for persons with disabilities which impact strongly their access to services and socioeconomic opportunities.

Possible answers to the prepared questions:

1. Do you know any international and national laws/regulations mentioning accessibility? What do they mention about accessibility?

   - SDGs of Agenda 2030–Goal 11: Make cities and human settlements inclusive, safe, resilient, and sustainable

   - UNCRPD- Article 9 for accessibility: It recognizes accessibility as an enabler to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and other facilities and services open or provided to the public, both in urban and in rural areas.

   - Incheon strategy (Goal 3: Enhance access to the physical environment, public transportation, knowledge, information, and communication)

   - Cambodia 2009 Law on disability (Law is currently being revised) mentions briefly the articles on accessibility in chapter 5.

   - Concerning accessibility, the national law applies to public places only. If a person built his own house, the accessibility guidelines do not have to be applied.

2. What are the tools adopted in Cambodia to promote and implement accessibility?

   - The CRPD signed and ratified in December 2012

   - Law on the Protection and the Promotion of the Rights of Persons with Disabilities, July 2009 (this law is currently being revised)

   - National Disability Strategic Plan (this plan will be revised every 5 years)

   - Inter-ministerial Prakas on the Technical Standards on Physical Accessibility- Infrastructure for Persons with Disability, No. 248 SMB.BrK, 28th November 2018

   - Technical standards on physical accessibility-infrastructure for persons with disabilities, 2018. etc.

3. Why is accessibility important?

   - Inaccessibility (Physical Barriers) is an environmental factor that restricts the participation of persons with disabilities. Increased physical accessibility is the basis for increased participation for persons with disabilities and ensures their equal access with others.

   - Because it is a fundamental right and principle. Accessibility is both a human rights issue and a development concern.

   - Accessibility bridges the gap between the special needs of persons with disabilities and the realization of social, economic, cultural, and political inclusion.

4. Why is it essential to provide vulnerable groups, and especially persons with disabilities, with a fully accessible built environment?

- Because being able to freely access and use the environment with no need for external help is the only way to reach a satisfactory level of autonomy from others, which is crucial for self-esteem, self-determination, and the development of independent living skills.
- Because it is their RIGHT

5. How to promote accessibility more effectively?

Regarding accessibility, the enforcement of the law is very limited in Cambodia and most public places are not accessible. New constructions do not include accessibility. Accessibility can be promoted in different ways:

- Active participation of persons with disabilities (possible actions: consultations and dialogue with persons with disabilities allowing them to express their needs, their opinion, their advice in the process of adopting policies, implement and monitor all accessibility policies, involve persons with disabilities to join project planning and to monitor constructions and projects information,
- Information and awareness-raising (possible actions: dissemination of the national technical standards on the physical accessibility-infrastructure for persons with disabilities, inform authorities and stakeholders responsible for improving public places (pathways, parking, playground, constructions), inform persons with disabilities about accessibility so that they can claim for more accessible buildings and information, inform/aware general population about accessibility and the need to, avoid creating obstacles as well as support accessibility investments that can benefit all...etc.)
- Planning (possible actions: includes accessibility from the planning or design stages, plan to address accessibility issues as soon as you start preparing an event, a construction, involve persons with disabilities to join project planning, to monitor constructions and projects information)
- Training (possible actions: train architects, construction workers, and community development workers on disability issues and accessible design, sensitize staff within all service how to assist and include persons with disabilities, encourage specific initiatives to develop 'standard norms', capacity building of master trainers at the national and subnational level in charge of public constructions or public places management, train persons with disabilities and DPOs to support master trainers, authorities and organizations to assess the barriers by using the accessibility assessment tool ...)
- Communication (possible actions: disseminate information through multiple and accessible mediums; large print, loudspeakers/microphones, simple language, using pictures...)
- Monitoring (possible actions: satisfaction survey on the use of services by persons with disabilities, report on the implementation of national and international legislation addressing accessibility...)

(For more information, please read the training manual section 2.1)

<div style="background:#1a8fd0;color:white;padding:8px;font-weight:bold;">Handout 4.1: Barriers to accessibility</div>

Three different barriers to accessibility:

- **Environmental:** inaccessibility of places of the built environment, inaccessibility of public transportation systems, impossibility to use the equipment, public facilities, and furniture by people with physical impairments, barriers that prevent people with mobility limitations to easily circulate between areas of the urban and built environment which are on different levels, etc.

- **Social- Attitudes:** Barriers created by disrespectful behavior that does not take into account the needs of persons with disabilities, myths about disability, people misperception about persons with disabilities' abilities

- **Communicational:** Inaccessibility of information and communication, illegible (Small fonts, information too dense, no graphic or symbols), too many colors and decorations, no audio that creates barriers that prevent people with visual, mental, or intellectual impairments to easily access information and find their way in the urban and built environment

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3   https://sarahcordiner.com/the-8-fundamental-principles-of-adu/

SECTION 4: Adult Learning Skills

We often think that people know how to learn. After all, we all had to learn while in school but that can be a dangerous attitude to take when it comes to conducting training initiatives. School curricula are built on theories about how children and teenagers learn. Have you ever considered whether adults learn in the same way?

That's why Adult Learning skill comes into play a role in these issues when we are going to train adult people in the right way. Knowing how adults tend to learn is very important; you can tailor corporate training curricula to take advantage of qualities adult learners have-like their effort to learn relevant material, express their idea, their need to connect with experience, and their motivation to improve themselves.

This could help the trainers as the national accessibility focal point to be ready as the trainers who have enough skill before taking the role of rollout the accessibility training to other adult participants in the future.

1.1 Adult Learning Principle [3]

For adults to learn effectively, training needs to be designed in a way that meets the following core principles of adult learning:

1.1.1 Self-Directing

The first difference Knowles proposes is that adults are autonomous and self-directed, meaning that they live under a large degree of self-governance and to their laws, beliefs, and values. They need to know the benefits, values, and purposes of a learning program. They need to know why they are learning what they're learning. If they cannot appreciate the purpose or value, they will be reluctant to engage in the learning intervention.

1.1.2 Learn by doing

Adults learn through direct experience; therefore, their training and learning interventions must include active and practical participation and offer implementable techniques and methodologies that will immediately improve their everyday lives.

1.1.3 Relevance

The content of a training program must be meaningful and relevant to adult learners, their lives, and their business. They have to very clearly see why and how this is important to them personally and how it applies to their life.

The immediate use of the learning needs to be clearly understood by the learner. If they can't see how they can apply the learning to their own lives and roles, it is suggested that motivation towards the training intervention will be significantly reduced.

1.1.4 Experience

Adult learners need to be able to draw upon their past experiences to aid their learning. Training needs to be contextualized to use language that they are familiar with. We need to select case scenarios and examples that they can relate to, as well as refer to their direct past life, work, and social experiences to bring the meaning of the learning into their world as they understand it.

1.1.5 All of the Senses

Adult learners need multi-sensory learning and teaching methodologies. We must ensure that our learning interventions have appropriately proportioned delivery techniques that meet the needs of audio, visual, reading/writing, kinaesthetic, dependent, and independent learning preferences.

1.1.6 Practice

Adult learners are often engaged in learning because a problem needs to be solved. Practicing skills in a controlled environment allows them to grow self-efficacy in new tasks that prepare them to act autonomously outside of the learning environment. The more an adult learner can practice new skills, competencies or the application of knowledge, the more transformational impact the learning intervention will have.

1.1.7 Personal Development

The intrinsic, personal desires and ambitions of an adult learner need to be considered when planning and delivering adult learning programs. As learners get older, their cause for participation in learning programs often moves from external drivers (such as getting a promotion) to internal drivers, like simply learning out of pure pleasure or interest in learning something new.

1.1.8 Involvement

Effective adult learning programs have planned for learner feedback and consultation. Adults need to feel as though they have a sense of responsibility, control, and decision-making over their learning.

They need to be involved in the planning, evaluation, and consultation of their learning process to be fully on board with its successful execution.

1.2 Effective Facilitation and Presentation Skills [4]

Many people are not aware that learning sometimes does not take place during training. For learning to take place, the trainer/master trainer must possess effective facilitation and presentation skills, which is more than just standing in front of the class to share knowledge and experience.

1.2.1 Creating a Positive Learning Environment

For learning to be effective, we need to build and maintain rapport with our learners. Here are some tips for you to show empathy to your learners and to set the correct ambiance for learning.

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[4] Facilitate Adult Learning ©Singapore National Employers Federation, June 2014

Greet learners as they arrive

    ✓ Greet arriving learners whenever possible.

    ✓ Invite them to take a seat.

    ✓ During the first session, get to know them personally through attendance taking.

Use an opening activity to start your training

    ✓ Wherever possible, use activities that are related to the topics.

    ✓ If necessary, get learners to do a topic-related activity (such as a quiz) while waiting for others to come.

    ✓ Engage learners to help set expectations and ground rules.

Introduce yourself to establish creditability and trust

    ✓ Be specific – share only information learners need to know. Other relevant or additional information can be added during training delivery.

    ✓ Remember – creditability is established from your ability to train, not what you say about yourself.

Build a relationship using varied strategies

    ✓ Be approachable.

    ✓ Be culturally sensitive.

    ✓ Display a relaxed attitude.

    ✓ Give a personal anecdote about an experience as a learner.

    ✓ Use appropriate verbal and non-verbal communication techniques.

1.2.2 Improving Your Presence in the Classroom

As a master trainer, it is important to have high self-awareness of how you sound and move. This is because learners will infer about you based on what they hear and see – our tone, pitch, articulation, and body gestures.

1.2.3 Facilitation Process and Techniques

Being an effective master trainer means having the ability to make learning happen. Learning does not only happen with you doing the talking all the time. Research studies have found that the more opportunities you allow your learners to talk, the more they will learn.

To provide opportunities for learners to talk, the trainer/master trainer must have the following skills:

- **Questioning Skills**

Being able to ask questions is one of the most important tools an effective master trainer must possess. Questions when appropriately asked, can invite participation, stimulate discussion, and help monitor learning progress.

- **Active Listening Skills**

Active listening generally involves listening, attending (body language), paraphrasing, and summarising. Through active listening, a master trainer can convey interest in the learners which in turn can encourage active participation. Listening attentively can also lead to questioning which promotes further discussion.

- **Explaining / Giving Instructions**

This skill is also critical for learning to be effective. Learners are unable to participate effectively in learning activities if instructions are not clear or complete. Explicit instructions, preferably listed step-by-step, are required for learning activities to achieve their objectives. Instructions may be given verbally, but they should be made visible at all times during the activity so that learners can refer and check on the tasks along the way.

- **Motivational Skills**

An effective master trainer must be able to stimulate learners' interest and motivate participation. This can be done through:

- ✓ A clear explanation of objectives/outcomes, as well as benefits of the learning activity
- ✓ Trainer's enthusiasm;
- ✓ Sharing of personal feelings with learners;
- ✓ Showing confidence in learners

1.2.4 The Power of Games and Peer Teaching

Not all learners learn in the same way. Hence, it is important to ensure your training delivery incorporates different approaches and techniques to cater to the needs of different learners.

- **Using Games:** Besides the routine presentation, discussion, role-play, group activities such as case studies, etc., games may be used to make learning more fun and it is also particularly effective for learners who are kinaesthetic or tactile. In many instances, concepts can be taught more effectively through games, such as card games for negotiation skills and board games for financial concepts, just to name a few.
- **Peer Teaching:** The more opportunities that you allow your learners to talk, the more they will learn. Peer teaching is an excellent platform for learners to 'talk and learn'. Especially when learners have to do the teaching, learning will deepen tremendously.

Figure 18: Peer-training

1.2.5 Conducting Activities [5]

There is a five-step facilitation process that can be used for facilitating any structured activities effectively.

- **Step 1:** The Master trainer explains the purpose of the activity and gives directions and guidelines on how it is to be completed.

- **Step 2:** The master trainer ensures learners are involved as much as possible in the activity.

- **Step 3:** Master trainer helps learners to share experiences by asking appropriate process questions, such as:

  - ✓ What incident is the most/least significant for you?
  - ✓ How did you react to the incident?
  - ✓ What key learning points did you gather from that incident?

- **Step 4:** Master trainer elicits concepts from learners, not tell them the concepts.

- **Step 5:** The master trainer encourages learners to reflect on how they can apply the learning at their workplace. This can be done by asking questions such as:

  - ✓ How will you handle the situation the next time?
  - ✓ What are the consequences if you do or do not adopt this strategy?
  - ✓ How will you do this differently the next time?

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[5] Facilitate Adult Learning ©Singapore National Employers Federation, June 2014

Physical Accessibility-Infrastructure Training-Facilitator Guide

1.3　Facilitating Discussion, Case Study and Role Play

1.3.1　Discussions

To facilitate a discussion successfully, a master trainer needs to encourage everyone to contribute and share ideas. A technique to facilitate discussions effectively involves the following actions:

- Plan in advance:　Prepare some questions to initiate the discussion and to elicit information and opinions from the learners.

- Wait for learners to respond: After asking a question, give the learners some time to understand the question and think about the answers.

- Encourage contribution: Call on a learner by his/her name, or direct the question to a small group. Invite learners to share relevant and specific examples. Remember to provide opportunities for quiet learners to share too.

- Listen attentively:　Pay attention to all responses. Follow up immediately if they are not clear. Paraphrase or ask probing questions to clarify understanding. Link the comments if possible, but to do so requires you to remember 'who said what'.

- Record ideas:　Write down relevant responses on flip charts or whiteboards. Recording ideas help to facilitate debrief at the end of the activity.

- Review, reinforce, and repeat:　Invite a learner to summarize the discussion. Alternatively, direct questions for learners to identify the concepts discussed. Remember to ensure the transfer of learning to the workplace.

Figure 19: Group discussion

1.3.2 Case Studies

A case study typically provides a scenario (actual or made-up) that learners need to analyze and reflect, then apply the concepts and principles learned to solve some problems. Facilitating case studies is somewhat similar to facilitating discussions. The only difference is that sufficient time must be given for learners to read and examine the case. For more effective learning, the master trainer should explain the case after the learners have read it, before allowing them to work on the questions. Then, the case study is facilitated in the same manner as discussions.

Note: Case studies are useful for learners to discover new concepts that they can build on their experience. But case studies are time-consuming to facilitate, and they are effective only if the debriefing process is robust and well facilitated**.**

1.3.3 Role Plays

Role-plays are usually conducted for two purposes to allow the learners to practice the skills learned, or to understand and empathize with what others are going through. However, role-play has to be conducted with great care, as many adult learners are not comfortable doing it.

Facilitating role-plays effectively will require the master trainer to**:**

- Plan the **scenario** and prepare all the **props** required for the role play in advance,
- Ensure the training environment is **safe** to stage the role play,
- Allay fears or anxiety by referring to this activity as a **skills practice**,
- Ensure it is **not embarrassing** for the learners to act in front of the class,
- Provide an opportunity for learners to **rehearse** their roles if necessary,
- Provide **clear instructions** to the role-players (actors and actresses),
- Ensure there are **observers** to provide **feedback** on the skills practice,
- Give r**obust debriefing** at the end of the activity, which includes asking questions to promote reflection and learning.

> *I hear and I forget,*
>
> *I see and I remember,*
>
> *I do and I understand.*

1.3.4 Conducting Debrief

For a learning activity to achieve its learning outcomes, we must always conduct a debrief session after the activity. During debrief, the master trainer will help the learners to:

✓ Better understand the purpose of the activity;

✓ Learn from the experience;

✓ Transfer the learning back to their workplace

A simple way to conduct debrief is to ask three questions:

1) What happened?

- ✓ What did you see and hear?
- ✓ What did you do to respond to the situation?
- ✓ What went well and what didn't?

2) So what?

- ✓ What did you learn from the incident?
- ✓ What conclusions can you make about the incident?

3) Now what?

- ✓ How can I apply what I learned in my work?
- ✓ What are the consequences of applying / not applying the learning in my work?

1.3.5 Providing Feedback

Providing timely feedback is another important skill that a master trainer must possess to facilitate learning effectively. The objective of providing feedback during training is to encourage learners to learn and make continuous improvements to do things differently. Feedback allows learners to learn what to do from success and learn what not to do from mistakes or failures.

End of the training!
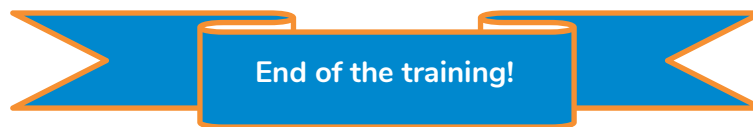
Annexes

1.   Annex one: Example of Pre-Test and Post-Test
2.   Annex two: List of PowerPoints Presentation