

The Lotus Project

Introduction and Overview

The Lotus Project represents a partnership of agencies, each of whom contributes unique expertise and perspective. The agencies are the Center for Health Training, a private, non-profit training firm and WORLD, an education, support and advocacy organization by and for women living with HIV/AIDS.

The goal of the Lotus Project is to:

...expand the number and enhance the effectiveness of HIV peer educators. We believe that peer educators are key to empowering and assisting HIV infected women to enter and stay in care, adhere to treatment protocols and improve the quality of their health status.

We chose the name The Lotus Project to represent the beauty and power that can emerge from the most dismal of environments and situations, like an HIV diagnosis. A lotus grows from a muddy swamp into a beautiful flower.

The partnership is achieving this goal by training women living with HIV as participants in multi-disciplinary teams of care providers. We are also training staff in AIDS services organizations to provide outreach, education and support to HIV positive women to engage in and maintain medical care. Health care providers receive training to improve their utilization of the peer educators in multidisciplinary teams to provide better access, retention, and adherence to medical care for HIV women.

This manual contains the one-week training design we used to train peer educators so that women living with HIV in communities everywhere can benefit from this powerful type of intervention.

We believe that participants should be in partnership with the trainers, which means that everyone learns and everyone teaches. Through interactive exercises, participants learn from one another and realize how much they themselves contribute to the learning environment. This naturally results in empowerment and an increased sense of confidence, essential for peer educators.

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Theoretical Base for the Development of the Training

The following theories and models of behavior change are of particular relevance for peer education and specifically for this training.

*Social Learning Theory*¹ states that people learn

- Through direct experience
- Indirectly, by observing and modeling the behaviors of others with who the person identifies
- Through training that leads to confidence in being able to carry out behaviors (i.e. self efficacy).

This theory is incorporated into this training in several ways. We have included interactive experimental learning activities, role-playing scenarios, game show quizzes, case studies, small group discussions, and brain-storming activities and we have also used facilitators who are either peer educators themselves or who are community-level health educators so they can impact training participants to be influential teachers and role models.

Stages of Change

James Prochaska and Carlo DiClemente's Stages of Change model has also been incorporated into the development of this training. The trainees will be taught that change has to occur over time as the Stages of Change model depicts. Behavior change does not happen in one step but rather, people tend to progress through different stages on their way to successful change. Also that each individual progresses through the stages at their own rate. We have specifically incorporated role plays and case studies which incorporate this philosophy to help the trainees understand this model.

Accelerated Learning (AL) techniques are also incorporated throughout the training to make the best use of time and ensure the training has the most impact. Accelerated Learning is an umbrella term for a practical approach to learning that's drawn from a range of disciplines including: research on brain functioning, theories of human attention and motivation, the psychology of optimal performance and the theory of multiple intelligences.²

The Guiding Principles of Accelerated Learning include³:

- 1. Learning Involves the Whole Mind and Body.** Learning is not all merely "head" learning (conscious, rational, "left-brained," and verbal) but involves the whole body/mind with all its emotions, senses, and receptors.
- 2. Learning is Creation, Not Consumption.** Knowledge is not something a learner absorbs, but something a learner creates. Learning happens when a learner integrates new knowledge and skill into his or her existing structure of self. Learning is literally a matter

¹ Bandura, A. (1977). *Social Learning Theory*. New York: General Learning Press.

² *The Accelerated Learning Handbook*, McGraw-Hill, 2000, Dave Meier²

³ The Center for Accelerated Learning, **Error! Main Document Only**, <http://www.alcenter.com>³

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of creating new meanings, new neural networks, and new patterns of electro/chemical interactions within one's total brain/body system.

3. Collaboration Aids Learning. All good learning has a social base. We often learn more by interacting with peers than we learn by any other means. Competition between learners slows learning. Cooperation among learners speeds it. A genuine learning community is always better for learning than a collection of isolated individuals.

4. Learning Takes Place on Many Levels Simultaneously. Learning is not a matter of absorbing one little thing at a time in linear fashion, but absorbing many things at once. Good learning engages people on many levels simultaneously (conscious and paraconscious, mental and physical) and uses all the receptors and senses and paths it can into a person's total brain/body system. The brain, after all, is not a sequential, but a parallel processor and thrives when it is challenged to do many things at once.

5. Learning Comes From Doing the Work Itself (With Feedback). People learn best in context. Things learned in isolation are hard to remember and quick to evaporate. We learn how to swim by swimming, how to manage by managing, how to sing by singing, how to sell by selling, and how to care for customers by caring for customers. The real and the concrete are far better teachers than the hypothetical and the abstract - provided there is time for total immersion, feedback, reflection, and reimmersion.

6. Positive Emotions Greatly Improve Learning. Feelings determine both the quality and quantity of one's learning. Negative feelings inhibit learning. Positive feelings accelerate it. Learning that is stressful, painful, and dreary can't hold a candle to learning that is joyful, relaxed, and engaging.

7. The Image Brain Absorbs Information Instantly and Automatically. The human nervous system is more of an image processor than a word processor. Concrete images are much easier to grasp and retain than are verbal abstractions. Translating verbal abstractions into concrete images of all kinds will make those verbal abstractions faster to learn and easier to remember.

The Lotus project builds on AL principles by including a variety of training methods so that all four types of learning are addressed.

SAVI

Somatic learning through tactile, kinesthetic, hands-on learning,

Auditory learning by talking and hearing,

Visual learning by observing and picturing, and

Intellectual learning by problem-solving.

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In addition, we encourage trainers to address **The Four P's**:

Preparation – by learners is just as important as preparation by trainers. *Arouse* their interest by . . . raising curiosity, creating a positive physical environment, providing clear and meaningful goals, calming people's fears, removing learning barriers, making positive suggestions.

Presentation - of your material in ways that appeal to all learning styles accelerates learning. Incorporate . . . collaborative pretests and knowledge sharing, whole-brain, whole-body involvement, interaction, colorful props, partner- and team-based learning, problem-solving.

Practice - helps learners integrate and incorporate new knowledge or skills. Let them . . . learn through games, teach one another what they've just learned, try out a new skill, reflect individually.

Performance - happens back on the job, so prepare your learners to take their new skills and knowledge back through . . . action planning, finding a coach, peer support.

Getting Started

Target Audience

While this manual was developed to train peer educators, much of the material is appropriate for anyone working with or providing services to HIV + individuals. Each Module is designed to stand alone, so that a trainer can choose to do as few or as many of the modules as needed by any particular group. *However*, in order to fully prepare peer educators for their role as advocates for women living with HIV on multidisciplinary teams, we recommend the completion of all modules.

You can conduct all modules in a one-week training class, or you can break it up over a longer period of time, for example, once-a-week classes that take place over a few weeks period.

Most of the modules should take about 1 hour to complete, and we encourage you to be flexible, spending more or less time on specific activities, depending on the needs of your group.

We recommend groups no larger than 18-20 participants.

Learning Environment

Breaks: The modules do not contain specified times for breaks so that the trainers can be flexible and take breaks as needed by the group. Much of the content may stimulate emotional responses in participants, so you may need to take more frequent breaks than in other kinds of training.

Room setup: The training room should be set up so that participants can work in small groups, so tables for 4-6 people are ideal. Many of the activities ask participants to work on flipchart paper and post those on the walls, so make sure you can affix things to the walls. These wall hangings

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are an excellent, ongoing reminder to learners about their contributions to the training and help them stay focused on the agenda.

Materials and audiovisual needs: Since participant interaction is so critical, lectures are kept to a minimum; essential equipment needed is an easel and flipchart. If you have access to a laptop and LCD project, we have included sample powerpoint slides that can be used, however these are included in the handouts, so the LCD and computer are optional.