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MIG-HEALTH APPS
Mobile Health Apps for Migrants

**MIGRANTS HEALTH APPS:
TRAINING MIGRANTS IN THE USE OF HEALTH APPS**

(ref.: 2022-1-ES01-KA220-ADU-000089591)

EXPECTED RESULT ACTIVITY 2.3

TRAINER'S GUIDE

Με σχόλια [1]: I have contributed content-wise but I have not made suggestions for spelling and punctuation throughout the Guide. This should be done at the very final stage.



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1 INTRODUCTION

Digital Health Applications (Health Apps) covers a broad range of applications that may connect to medical devices or sensors (e.g., bracelets or watches) as well as personal guidance systems, health information and medication reminders (WHO, 2012). Health Apps facilitates patients managing their own conditions or healthy citizens benefiting from prevention measures. Citizens can monitor their health, adapt their lifestyle and even interact with their doctors, careers or supports receiving and providing feedback. Health Apps supports migrants' well-being, empowerment and self-affirmation and can specifically contribute to improving their health status and even integration in the host country. *Additionally, health apps can make in the long run an important contribution to stabilising and financing the national European healthcare systems.*

“MIG-HEALTH APPS” is launched with the aim of **increasing the competences of Migrants for using Health Apps**, within a health self-management approach.

According to that, “MIG-HEALTH APPS” **project** will develop the following main results:

- An **Experiential Training Methodology** for-increasing the awareness and competences of Migrants for using Health Apps.
- A set of **Training Resources**, including **Training Materials for Migrants and a Trainer's Guide**, for enhancing the adoption of Health Apps by Migrants through the implementation of the training methodology adapted to the learning processes and interests of Migrants.
- An **e-Training Platform supported by an App Training Tool**, for supporting the implementation of the training methodology, including the access to the training resources and automatized search of applicable existing Health Apps.

This “**Trainer's Guide**” aims to:

- Explain to the Trainers the basis of the Experiential Training Methodology to be implemented.
- Detail to the Trainers the step-by-step actions to be done and resources to be used within the different Experiential Training Activities (ETAs)
- Give to the Trainers recommendations and tips for adapting the Experiential Training Methodology to the characteristics of specific training groups and how they can build on previous backgrounds, like the MIG-DHL project (www.mig-dhl.com)
- Transfer to the Trainers additional technical information not available in the Training Materials developed in WP3, to better understand the application of Health Apps for Migrants.

This “**Trainer's Guide**” is based on the assumptions made on the Grant Agreement, complemented by the additional information collected in the Expected Result 2.1 “**Co-Designed Specifications**” and Expected Result 2.2 “**Scheme of the Experiential Training Methodology**”.



2 LEARNING OBJECTIVES, TARGET GROUP AND LEARNING OUTCOMES

An innovative “Experiential Training Methodology” was developed for **increasing the adoption of Health Apps by Migrants, within a self-management approach.**

2.1 Target

MIG-HEALTH APPS is mainly addressed to **Migrants** including the following specific targets:

- **Newcomer Migrants**; Migrant persons recently introduced in an EU country.
- **Migrants Peers**; Migrants already established and integrated in the country that could support newcomer migrants in their local communities, often belonging to local associations supporting Migrants. This could also include local persons supporting Migrants.

The Training Program will address a broad representation of Migrants, including the participation of women, as well as representation of different age ranges and countries of origin.

MIG-HEALTH APPS will also address the **Supports of Migrants**, being mainly **professionals working in social services and/or non-for-profit organizations**. For instance, we can mention the **Community Health Educator**, as a qualified and trained mediator who promotes access to the Community Center and to local health services among people at high risk of social exclusion within a migrant community.

Με σχόλια [2]: This seems to be a profession linked to migrants and other social groups, right? I don't know this profession and maybe it is not available in all countries. So either identify it as a Spanish example or include a national example in the translations.

3.2 Learning Outcomes

3.2.1 Newcomer Migrants:

As a result of the implementation of the training methodology, the Newcomer Migrants will be able to:

- Understand the relevance of health self-management.
- Assess the health status of themselves and their main social network, e.g. their family.
- Understand the concept of Health Apps and how they can be used for enhancing health self-management.
- Know about existing Health Apps in the health fields of main relevance for them.
- Select, test and apply, at least, one Health app in the health field of main relevance for them.

3.2.2 Migrants Peers:

As a result of the implementation of the training methodology, the Migrants Peers will be able to:

- Transfer knowledge to and support Newcomer Migrants in the adoption of Health Apps, within a health self-management approach.
- Understand the relevance of health self-management.



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- Assess the health status of themselves and their main network.
- Understand the concept of Health Apps and how they can be used for enhancing health self-management.
- Select, test and apply, at least, one Health App in the health field of main relevance for them.

3.2.3 Supports:

As a result of the implementation of the training methodology, the Supports will be able to:

- Transfer knowledge to and support Newcomer Migrants in the adoption of Health Apps, within a health self-management approach.
- Understand the concept of Health Apps and how they can be used for enhancing health self-management.
- Know about existing Health Apps in the health fields of main relevance for them.



3 TRAINING CONTENTS OR TOPICS

The implementation of the Experiential Training Methodology will need the acquisition of knowledge covering the following areas of training contents or topics:

TOPIC 1. Self-Management and Empowerment; How to be empowered and self-manage my health status; Main health areas to take care; What roles can the relatives, migrants peers and health & care professionals play?

TOPIC 2. What are Health Apps? Health Apps: what is it? benefits, application, barriers and facilitators; Application of Health Apps to Migrants: best practices; What roles can the relatives, migrant's peers and health & care professionals play?

TOPIC 3. Health APPs for Migrants; Structured collection of Health APPs, divided into the main health care areas affecting Migrants, including;

- Prevention and diagnosis
- Monitoring and tracking the health status
- Healthier lifestyles
- Communication with health professionals or caregivers
- Specific health areas: Nutrition; Pregnancy; Mental Health, newborn care.



4 APPROACH OF THE TRAINING METHODOLOGY

The training methodology will be based on a “learning by doing” approach, where they will be involved in self-management situations and will use real Health Apps and apply them to their own personal conditions, in order to get familiar with these processes and technologies in a friendly and supported environment, before they could use them in their real-life situations.

The Training Program will be structured into a set of “Experiential Training Activities” divided into the following sessions:

- **Teaching session:** A session will be held in which the main related training contents will be introduced by the Trainer to the learners. This could be done “face2face” or supported by e-learning tools. The session will include the following Group Dynamics:
 - ❖ Why this health care area is relevant and best practices
 - ❖ How health Apps can support self-management within this health care area
- **Experiential training session:** The learners will be invited to select, at least, one Health App in the related health area. Then, they will be supported by the trainer in the process of testing and applying the Health App to their own health/life situation. When applicable, health data and/or experiences will be shared with other people, like relatives, peers, health & care professionals, etc. or other trainees.
- **Self-learning supported by online training tools:** The trainees will be invited to complete and assess their knowledge through complementary readings and practical activities to be implemented with the support of e-learning tools and punctual support of the trainer.
- **Closing session:** A session will be held in which the trainees will be invited to share their experiences related with the use of Health App. This will be helpful in order to identify best and bad practices and spread the knowledge about applicable Health Apps and their drivers and barriers.

The Training Program will be **flexible and modular**. This will allow the trainers and trainees to implement the whole Training Program or select those Experiential Training Activities which will be more relevant for them.

The Training Program will also be **prepared for enhancing a full self-learning experience**, without the participation of a trainer, when this would be the option selected by the trainees.

The implementation of the Experiential Training Methodology will be supported by the following main resources.

A set of **Training Materials**, including theoretical contents, assignments and practical activities will be developed as part of the WP3 of the project. Training Materials will be developed mainly in written materials (MSN Word, PDF, PowerPoints, case studies, best practices, assignments, etc.), although we foresee audiovisual format (videos, images, infographics, etc.) to facilitate the learning experience and overcome possible learning difficulties of participants.

An **e-Training Platform** and **App Training Tool** will be developed for supporting the implementation of the Experiential Training Methodology as part of the WP4 of the project. A Web e-Training Platform will be developed including the structured access to the Training

Με σχόλια [3]: all "trainees" should be substituted by "learners" as agreed

Με σχόλια [4]: This means that all the Eta materials will be available on the online training platform and anyone can complete all the modules without a trainer.

Με σχόλια [5]: We should consider developing some videos on health applications. Suggestion: record a video for each of the etas we have developed explaining the use of one of the apps.



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Materials (WP3), including: Supporting e-Learning Tools; Exhibitor of training content and materials to provide participants, information, resources, support materials; Meeting point for all participants, not only to monitor the contents of the trainings but also as a place of debate and social network through the use of forums, chat, mail and messaging, among others; Working space in which the participants as well as access to resources and documentation, can also perform and deliver tasks and assignments; Area of collaborative work, with the possibility to create and organize working groups; Self-Assessment Tool and links to existing applicable Health Apps in the areas of following main health care areas for Migrants. The MIG-HEALTH APPS Mobile Application will be developed for Android mobile devices. The user will be able to download and have direct access to selected parts of the MIG-HEALTH APPS material hosted by the e-Training Platform. The purpose is to facilitate the access to the MIG-DHL material by migrants and refugees since they exclusively use smartphones for accessing information via the Internet. The mobile app will serve as a dissemination tool, as well, e.g., download the MIG-DHL application to learn how to better protect your health.

Trainers are invited to identify and use other additional resources, especially trying to make the learning experience more customized to the trainees, considering their specific interests, origin, age, health conditions, etc.

Με σχόλια [6]: Are we considering this??

Με σχόλια [7R6]: Yes, this was announced by Pantelis in the Florence meeting.



5 IMPLEMENTATION OF EXPERIENTIAL TRAINING ACTIVITIES (ETAs)

The following Experiential Training Activities (ETAs) will be implemented;

- ❖ ETA1; General awareness on the relevance of self-management and Health Apps
- ❖ ETA2. How to search and select Health Apps
- ❖ ETA3. Health Apps for Physical Activity
- ❖ ETA4. Health Apps for Rest Routines
- ❖ ETA5. Health Apps for Substances Use
- ❖ ETA6. Health Apps for Nutrition
- ❖ ETA7. Health Apps Women's Health
- ❖ ETA8. Health Apps for Children's Care
- ❖ ETA9. Health Apps for Elderly
- ❖ ETA10. Health Apps for Mental Health Problems
- ❖ ETA11. Apps for Healthcare Services



5.1 ETA1: General awareness on the relevance of self-management and Health apps

Με σχόλια [8]: Following decisions taken in our Florence meeting maybe we have to adapt the ETAs with the Training Materials.

Objective:

The main objective of this module is to raise awareness of the relevance of self-managed healthcare for migrants and how this can help them to improve their health through the use of health apps in their daily lives. This will be done by delving into the main health areas of relevance for migrants by seeking an understanding of the main concepts related to health apps and how they can be useful for migrants and for each individual. It will also seek to motivate learners to engage in the next phases of the project and to develop the basic digital competences to operate in the "Health Apps" environment.

Participants and roles:

- Newcomer migrants; trainees
- Migrants Peers; trainees or trainers after being trained as trainers. When they will attend as trainees, they could play a role of supporting the Newcomer Migrants along the training process, including support in overcoming language barriers
- Supports: trainees or trainers after being trained as trainers. When they will attend as trainees, they could play a role of supporting the Newcomer Migrants along the training process, including support in overcoming language barriers

Learning outcomes:

- Trainees will be able to identify the health areas more relevant for them.
- Trainees will be able to identify the main areas where their health self-management can be reinforced
- Trainees will know what a Health App is and how they can be useful for migrants and for each individual person

Training Contents:

- Health Self-Management
- Main healthcare areas
- What is a Health App and examples
- How Health Apps can support the Health Self-Management
- Basic Digital Skills

Estimated Duration: 6 hours

- Teaching session: 3 hours
- Self-learning supported by online training tools: 1 hours
- Experiential training session: 1:30 hours
- Closing session: 30 min

Resources:

- Training materials: ppt. for Teaching Session with 30-40 slides



- Training Materials: assignments, quizzes
- e-Training Platform and App Training Tool
- Health Apps: Examples of Health Apps covering different areas and functions
- Other: Complementary readings, videos (“youtube”) contents and tools from existing projects.

Teaching Session

Step and duration	Content
<p>1. Introduction to health-self management for migrants</p> <p>30 minutes</p>	<p>The trainer will shortly introduce the Health Apps project to the learners and then will highlight the relevance of the health-self management for migrants</p> <p>This introduction will highlight the following aspects:</p> <ul style="list-style-type: none"> • Health Apps project short introduction • Icebreaker Activity • The importance of health-self management and how it can help prevent or manage some health problems • <u>Activity</u>: short answer questions will be provided. <p>Resources: PPT</p>
<p>2. Main concepts on Health Apps and Mig-Health Apps programme</p> <p>30 minutes</p>	<p>The trainer will provide to learners’ the concept of health apps and the different types of applications covered by the programme. The trainer will show the Mig-Health Apps training programme and all the possibilities and ETAs contained in it.</p> <p>The session will cover the following topics:</p> <ul style="list-style-type: none"> • Identify and categorise health apps • Identifying health apps that can be useful • <u>Activity</u>: The trainer will show the Mig-Health Apps training programme and learners will be able to discuss it and express their doubts or questions. <p>Resources: PPT</p>
<p>3. Real Life Integrations</p> <p>30 minutes</p>	<p>The trainer will provide to learners’ several real-life scenarios and situations of how health apps have helped individuals’ health in general.</p> <p>Components of the real-life integrations’ session can be found here:</p>

Με σχόλια [9]: This short introduction to the project should be in every ETA? 3 slides.



	<ul style="list-style-type: none"> • Presentation of different real-life scenarios where health apps could be beneficial (some of the apps of the ETAs of the project will be presented) • <u>Group activity</u>: participants will be divided into small groups and different health apps and scenarios that can help improve their health will be provided to them. Participants will then brainstorm and discuss what aspects of their health matter most to them and how apps can help them. <p>Resources: PPT</p>
<p>4. Navigating Health Apps 30 minutes</p>	<p>The participants will have the opportunity to navigate to different health apps choosing from any of the ETAs developed in the project. More specifically, participants will:</p> <ul style="list-style-type: none"> • Go through different health apps. • Navigate through app interfaces, exploring core features and settings. • <u>Activity</u>: Participants will discuss and critically evaluate in pairs each health app they used. <p>Resources: PPT</p>
<p>5. Action Planning and goal setting for your Health 30 minutes</p>	<p>The trainer in this session will highlight the importance of action planning and goal setting in using apps for maintaining or improving migrant's health.</p> <p>Specifically, the topics to be addressed will be:</p> <ul style="list-style-type: none"> • How and why to action plan and setting goals (what? how? Which activity? where? when? duration? intensity? volume? App?). • Benefits of action planning and goal setting. • <u>Activity</u>: participants will set health goals. Participants then will create their own action plan based on the material that was presented. Each participant will then have 5 minutes to present their own action plan. <p>Resources: PPT</p>
<p>6. Discussions, Evaluations and Closure 30 minutes</p>	<p>The trainer will organise a panel discussion for participants to discuss the use of Mig-Health Apps programme, its benefits, challenges, application features, integration into everyday life and future considerations. Evaluation questionnaires will also be given out and the trainer will then thank everyone for attending the session.</p>



Experiential training session

Step and duration	Content
<p>1.2.1. Interactive Health Activity Challenge 1: 30 hour</p>	<p>The trainer will ask the learners to engage in a health challenge using one of the health applications offered in Mig-Health Apps. For example, using a health app for a week to improve emotional control.</p> <p>This activity will be performed as follows:</p> <ul style="list-style-type: none"> • The trainer will upload information about the activity on the online training platform so that participants can do this activity asynchronously. • Trainer will provide different health challenges according to the interests expressed by the learners (ETAs) and each participant will choose one. • After participants have chosen the challenge, they will then need to use a health app and execute the challenge. • After participants complete their challenge, they will share their experience and lessons learned through uploading a short video or comment on the online training platform. <p>The trainer will check the completion of the above activity and will respond to each challenge.</p> <p>Resources:</p> <ul style="list-style-type: none"> • Online Training Platform • PPT

Self-learning supported by online training tools

Step and duration	Content
<p>1.3.1. Self-Assessment 1 hours</p>	<p>The trainer will ask the learners to complete a Quiz in the e-Training Platform. The Quiz will help the learners in assessing:</p> <ul style="list-style-type: none"> • Importance of health-self management for migrants • What a Health App is and how they can be useful for migrants • Integration of health apps in daily life • Action Planning <p>The trainers will check the completion of the multiple choice and will support each learner depending on their main gaps.</p> <p>Resources:</p> <ul style="list-style-type: none"> • Quiz. Online Training Platform



Closure session

Step and duration	Content
10.4. Closing 30 min	<p>This part includes a summary of main lessons learned from the training. Trainers facilitate a discussion based on individual experiences during self-learning and experiential training sessions to draw conclusions on perceived benefits of health apps for mental health.</p> <p>Resources:</p> <ul style="list-style-type: none">• PPT• Online Training Platform• Communication tools available in the e-Training Platform

This section will contain the rest of the ETAs when they are all revised and in their final versions.



6 PLANNING

This planning of Mig-Health Apps course is flexible and adaptable to each group of learners; the whole program can be used but also the modules can be used separately according to the needs of the learners.

Mig-Health Apps course planning		
Week 1	ETA 1 General awareness on the relevance of self-management and Health Apps	<ul style="list-style-type: none"> ➤ Teaching session: 4 hours ➤ Self-learning supported by online training tools: 2 hours ➤ Experiential training session: 1:30 hours ➤ Closing session: 1 hour
Week 2	ETA 2 How to search and select Health Apps	
Week 3	ETA3. Health Apps for Physical Activity	
Week 4	ETA4. Health Apps for Rest Routines	
Week 5	ETA5. Health Apps for Substances Use	
Week 6	ETA6. Health Apps for Nutrition	
Week 7	ETA7. Health Apps Women's Health	



Week 8	ETA8. Health Apps for Children's Care	<ul style="list-style-type: none"> ➤ Teaching session: 3:00 hours ➤ Self-learning supported by online training tools: 1:30 hours ➤ Experiential training session: 2:30 hours ➤ Closure session: 30 min
Week 9	ETA9. Health Apps for Elderly	
Week 10	ETA10. Health Apps for Mental Health Problems	<ul style="list-style-type: none"> ➤ Teaching sessions: 3:00 hours ➤ Self-study supported by e-learning tools: 2 hours ➤ Experiential training session: 1 30 hours ➤ Closure session: 30 min
Week 11	ETA11. Health Apps for Healthcare Services	<ul style="list-style-type: none"> ➤ Teaching session: 2 hours (1 break recommended) ➤ Experiential training session: 2 hours (2 breaks recommended) ➤ Self-learning supported by online training tools: 30 minutes ➤ Closing session: 1 hour ➤

7 BASES OF THE ASSESSMENT METHODOLOGY

The methodology to be used to evaluate the contents of the Mig-Health Apps training program is structured in two parts corresponding to the main key aspects: Evaluation of the training modules and Evaluation of the e-learning platform and Mobile App. The evaluation methodology is intended to be carried out during the validation of the materials with end users, in order to detect possible areas of improvement in the materials and the e-learning platform.

1) Evaluation of the training modules. Questions have been developed to review and evaluate the content (quality, usefulness and relevance for the target group) and the training and



evaluation methodology. A set of questions has been developed to evaluate each of the 11 Experiential Training Activities.

2) Evaluation of the e-learning platform. Questions have been developed on the content and usability, as well as on the design, functioning and accessibility of the e-learning platform and the Mobile App.

The following measures have been designed for each of them:

1. EVALUATION OF THE TRAINING MODULES

**The following questions will be the same for each of the 11 Experiential Training Activities.*

Module evaluating (select option):

- ETA1; General awareness on the relevance of self-management and Health Apps
- ETA2. How to search and select Health Apps
- ETA3. Health Apps for Physical Activity
- ETA4. Health Apps for Rest Routines
- ETA5. Health Apps for Substances Use
- ETA6. Health Apps for Nutrition
- ETA7. Health Apps Women's Health
- ETA8. Health Apps for Children's Care
- ETA9. Health Apps for Elderly
- ETA10. Health Apps for Mental Health Problems
- ETA11. Apps for Healthcare Services

We would like to know your opinion about the **training module**. Please, tell us if you agree or not with the following statements.

Content			
1.	Theoretical content (sessions and topics) of the Experiential Training Activity are appropriate and adapted to migrants needs	Yes	No



2.	Theoretical training content (sessions and topics) are useful for migrants	Yes	No
3.	Learning objectives are clearly defined	Yes	No
4.	The training content (both theoretical and practical) match with the learning objectives	Yes	No
5.	The amount of the theoretical training content (sessions and topics) is appropriate	Yes	No
6.	The amount of the practical training content (activities) is appropriate	Yes	No
7.	There is a balance between theoretical and practical content	Yes	No
8.	The theoretical training content (sessions and topics) is clear	Yes	No
9.	The theoretical training content (sessions and topics) is easy to understand	Yes	No
10.	The practical training content (activities) is clear	Yes	No
11.	The practical training content (activities) is easy to understand	Yes	No
12.	The theoretical content (units and topics) is relevant and good in terms of quality	Yes	No
13.	The practical content (activities) is relevant and good in terms of quality	Yes	No
Methodology			
14.	Training methodology is appropriate to meet the learning objectives	Yes	No
15.	Training methodology is attractive for trainers	Yes	No
16.	Training methodology is clear and easy to follow for trainers	Yes	No
17.	Assessment methodologies (true/false, multiple choice, matrix sorting, fill in the blanks) of the module are appropriate to measure the acquired learning	Yes	No

Με σχόλια [10]: Isn't that redundant?

Με σχόλια [11]: Isn't that redundant?

Με σχόλια [12]: The same here...

Με σχόλια [13]: The same here...

Με σχόλια [14]: This might be a difficult question: What is quality? I suggest explaining the term "quality" in this context or deleting the question because actually, we ask about the quality in all the earlier questions.

18. What did you like the most about this training module? *open question*

19. What did you like the least about this training module? *open question*

20. Would you like to add anything else? *open question*

2. EVALUATION OF THE E-LEARNING PLATFORM



We would like to know your opinion about the **e-learning platform** which was presented. Please, tell us if you agree or not with the following statements.

Content and usefulness			
1.	The content of the e-learning platform is adequate	Yes	No
2.	The content of the e-learning platform is interesting for migrants	Yes	No
3.	The content of the e-learning platform is important for migrants	Yes	No
4.	The e-learning platform is useful for migrants	Yes	No
5.	The e-learning platform could be useful for other people apart from migrants	Yes	No
Design, functioning and accessibility			
6.	I really like graphics, images and colours of the e-learning platform	Yes	No
7.	Multimedia resources are good in terms of quality	Yes	No
8.	The e-learning platform is attractive	Yes	No
9.	The e-learning platform is motivating for migrants	Yes	No
10.	Organization/structure of the training materials on the e-learning platform is adequate	Yes	No
11.	Registration process (or access) is easy	Yes	No
12.	The e-learning platform is easy to use for a wide range of people	Yes	No
13.	It is easy and intuitive to navigate in the e-learning platform	Yes	No
14.	I would recommend the e-learning platform to migrants	Yes	No

15. What do you like the most about the e-learning platform? *Open question*

16. What do you like the least about the e-learning platform? *Open question*

17. Would you like to add anything else about the e-learning platform? *Open question*



8 RECOMMENDATIONS AND TIPS FOR TRAINERS

Με σχόλια [15]: We should all contribute to this section with advice for trainers regarding all our ETAs, or general advice, such as the one described below

Ice-breaker activities, which appear in all ETAs, will be used at the trainer's discretion. If it is a group in which they already know each other, it is not necessary to do the activity. This activity is designed for group members to introduce themselves in a relaxed and dynamic way when they do not know each other.

Timekeeping: The keeping of time is important but the training might need a different time for different groups, especially if the groups are not homogeneous in terms of ethnic background, age and gender. Be aware that “time” might have a different meaning for different ethnic groups.

Gender sensitivity: It is easier to handle homogeneous groups on certain topics - not only because of interest but also because of opportunities to communicate openly in a trustful way. Consider respective group compositions.

Topic sensitivity: There are topics (e.g. mental health or sexuality) that need a sensitive approach. It is important to know how such issues are dealt with in the migrants' home countries but it is also important to communicate the handling of such issues in the host country. The focus should always be on health.



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TECHNICAL INFORMATION

9.1 HEALTH SELF-MANAGEMENT

9.2 HEALTHCARE AREAS FOR MIGRANTS

9.3 HEALTH APPS

Με σχόλια [16]: When the materials are finished in this part we have to include extra information for the trainers, we have to discuss if this part is going to be an annex (handbook).

Με σχόλια [17R16]: I am not sure what to include there.