

**Training Toolkit 9: Self-Assessment Questions**

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**Training for Trainers Self-Assessment Questions**

The aim of the Training Toolkits is to provide a framework for understanding the background to global health diplomacy and advocacy. It is designed so that you can skip over some points with which you are already familiar or conversely can go into more detail in some fields using the links provided. The materials reflect my personal perspective and experience, as a UK/European consultant working in international health reforms and some aspects of global health. You will need to bring your own perspective, for example you may be more interested in specific areas of health equity or the impact of policies in relation to specific types of mental or physical illness. As a trainer you need to be aware of your own bias and of the particular interests of those participating in the training.

While the Training Toolkits contain a lot of facts and figures, the aim is not to fill people’s heads with dates and statistics, it does not matter exactly when and where diplomatic agreements, health and trade deals and International organisations were established. It is more important that you explain as examples: that developments in international diplomacy most often followed in the aftermath of major conflicts, that trade and health interests have often pulled in different directions and that international organisations often reflect the dominant ideas of the most powerful states that established them and have difficulty in evolving as the world changes.

To test the understanding, rather than the retention of facts by the group you are training , I suggest you see if they can answer the following basic questions to their own satisfaction in a group discussion (alternatively you may wish to get their written answers which you could assess):

1. Try thinking about a range of diseases and conditions affecting health in different countries, nearly all will have some aspects that could be called “international” that is they are affected by the national health systems and conditions and some that are “global” requiring international agreement and action. Can you distinguish these aspects?

a. Task: Using Type 2 Diabetes as an example prepare a short statement on the international and global health issues affecting this condition in your country.

2. Can you describe how awareness of global health issues developed in your country?

a. Task: Produce a time-line for your country showing responses to global health issues.

3. Why is health a product of politics, in your country and globally?

a. Task: List the ways in which political decisions have helped or hindered health and equity.

4. How will you develop the skills and knowledge to become a better global health diplomat?

a. Task: Prepare a personal development chart setting out on one axis the skills you have and need and on the other the fields, you have or hope to gain experience.

5. If most people and countries agree that health and wellbeing are human rights, why do we still have so far to go in developing global health governance?

a. Task: List your proposals for the reform of the global health system.

6. Why is cohesion amongst actors at national and international levels such an important prerequisite for successful action on global health?

a. Task: Describe how public sector/private sector/civil society work together or are in conflict on a global health issue ( choose one issue: obesity, alcohol harm, smoking, public health strengthening, access to medicines).

7. How do international agreements on what countries and agencies should do affect what they actually do?

a. Task: Provide 3 examples of the gap between agreement and action on global health.

8. Think of a negotiation with which you are familiar and describe the stages it went through?

a. Task: Set out the stages in a (perhaps never ending) time line.

9. Can you assess the power and interests of SfGH and the agencies you are trying to influence?

a. Task: Propose ways to increase the power of SfGH in relation to negotiations on a global health issue.

10. Why is a policy position a good start but not enough?

a. Task: Take an issue on which SfGH has a clear policy position and list the steps you need to take to achieve progress towards your aims.

You may wish to test your group understanding through discussion and debate. As a starting point let me take you to a field in East Africa. You are standing with a group of poor farmers in a green valley, with fertile soil but failing water supply (recently climate change has reduced river flows). Overhead a jumbo jet passes carrying tourists and health professionals, in first class there are politicians and bankers and in business class there are executives from global companies, including pharmaceuticals, IT and tobacco, happy meals and drinks.

List the potential impacts for the health and prosperity of the farmers and their families (many of whom live and work in a nearby town) represented by this jumbo jet and its occupants.

What would your group suggest should be done to maximise the benefits and reduce the harm?

How would you go about achieving agreement to the steps you recommend?