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Title: Formative process evaluation of the REFUGIUM Peer-health promotion program for refugees: a multimethod case study

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Abstract

Objective
The objective of this study was to develop and establish a professional program management of the REFUGIUM health awareness program for refugees.

Background
REFUGIUM provides health promotion for refugees following participatory action research approach with a vulnerable target group. Therefore, the program undergoes constant process changes as well as team member fluctuation. In the period from February until July 2017 program management and implementation were highly time consuming due to lack of effective program management tools.

Methods
Formative process evaluation was conducted in form of a multi-method case study. Participatory observation was conducted during organisational preparation and conduction of peer facilitator trainings for two generations. At 2 timepoints in total 28 open-ended formative process evaluation questionnaires were distributed to the program staff.

Result
Program management tools were developed and validated consisting of a framework with steps from A to M. It requires monitoring, documentation, and the involvement of the REFUGIUM team and program coordinator. This includes a formative evaluation questionnaire and 9 categories of the program management tool. The tools were developed by identifying constituent activities, barriers, resources and solutions of each task of the 4 units. For each task the necessary resources (documents, materials) were developed and incorporated systematically in the electronic platform EMIL HAW Flüchtlingsgesundheit 2017 (resources) and materials were stored systematically in university rooms N5.29 and N2.09. Consequently, the steps were organised into a logical sequence. 4 management tools with corresponding detailed instructions for each process step of program management (units 1-4) were developed and 77 ressources were created and uploaded: induction phase for new REFUGIUM Team members (unit 1), peer facilitator training (PFT) (unit 2), didactical peer facilitator training (DPFT) (unit 3), and Applied peer facilitator training (APFT) (unit 4). Lastly the assessment of REFUGIUM programs managerial complexity elements were developed using the MODeST framework (Maylor, 2010, p.38) and an
induction phase document for unit 1 was developed. Tools were developed and validated during peer facilitator training of in total 32 refugees, which were trained by peer facilitator trainers and staff of university in 56 training sessions as well as 54 workshops in refugee accommodations and at university in Arabic, Dari/Farsi, English and German.

Outlook

The study contributes to public health research knowledge regarding the processes and instruments needed to organise and evaluate a health promotion program following a participatory action research approach with a vulnerable group effectively and efficiently. The instruments comprise of the formative evaluation questionnaire and management tools with corresponding resources (instructions, documents, materials), which can be used and adapted in future studies on program management in health promotion programs.

Key words

REFUGIUM program, Multimethod case study evaluation, Formative process evaluation, Development of program management, Participatory action research, Health promotion, Peer to peer approach, Vulnerable target group, Refugees
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<tbody>
<tr>
<td><strong>APFT</strong></td>
<td>Applied peer facilitator training</td>
</tr>
<tr>
<td><strong>BAMF</strong></td>
<td>Bundesamt für Migration und Flüchtlinge (Federal Office for Migration and Refugees)</td>
</tr>
<tr>
<td><strong>CF</strong></td>
<td>Prof. Dr. Christine Färber</td>
</tr>
<tr>
<td><strong>DPFT</strong></td>
<td>Didactical peer facilitator training</td>
</tr>
<tr>
<td><strong>HAW</strong></td>
<td>Hochschule für Angewandte Wissenschaften</td>
</tr>
<tr>
<td><strong>PAR</strong></td>
<td>Participatory research action</td>
</tr>
<tr>
<td><strong>PFT</strong></td>
<td>Peer facilitator training</td>
</tr>
<tr>
<td><strong>PMBOK®</strong></td>
<td>Project Management Body of Knowledge</td>
</tr>
<tr>
<td><strong>REFUGIUM</strong></td>
<td>Rat mit Erfahrung: Flucht Und Gesundheit - Information Und Multiplikation (Advice through Experience: Refuge and Health - Information and Multiplikation)</td>
</tr>
<tr>
<td><strong>WHO</strong></td>
<td>World Health Organization</td>
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1. Introduction

Public health research, among other things, aims at improving the health of the population (WHO, 2005). The World Health organization defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 2005). According to the World Health Organization the emergence of health and disease is dependent on the interplay of many factors such as genetic predisposition, behavior, as well as socio-economic status and environmental conditions (WHO, 2005; Blättner and Waller, 2011, p.86). That means health and disease are multifactorial and the risks and resources have to be investigated epidemiologically (WHO, 2005; Blättner und Waller, 2011, S.86). The epidemiological data gives evidence on health needs as well as problems and in result of that health promotion and prevention programmes can be developed and implemented. "What will be achieved with this intervention?" and "How will it be achieved?" these questions have to be answered by every program manager who wishes to design, develop and implement a health promotion intervention in the form of a program (EU Health programme, 2011, p.10). Health promotion programs are planned and implemented by health promotion practitioners and aim to achieve their intended goals (EU Health programme, 2011, p.10). Although many health promotion programs are planned sufficiently, they fail to reach their goals in real world context (EU Health programme, 2011, p.10). The reason is that health promotion programs consist of two components, the expected outcomes (goals and objectives), and the involved strategies (processes and activities) and both have to be researched and focused on parallely (Kolip et al., 1994, p.16; Durlak et al., 2008, p. 327; Santos et al., 2014, p.1085). In the public health research the evaluation of a health promotion program focuses mainly on assessing outcomes (summative evaluation), not the process of conducting the program in a effective/ efficient way (formative process evaluation) (Durlak et al., 2008, p. 327; Santos et al., 2014, p.1085). In order to achieve success in such a program researching the process of conducting the program in an efficient/ effective way is important (Santos et al., 2014, p.1085). More precisely it is important to identify which strategies are used in achieving successful implementation of an intervention (Santos et al., 2014, p.1085; Owen, 2007, p.22; Federal Centre for Health Education, 1999, p. 27). Hence, the identification of effective key components of the health promotion program can lead to improvement and sustainability (Federal Centre for Health Education, 1999, p. 27).
In empirical methodology the preferred method is called formative process evaluation (Stockmann and Meyer, 2011, p.17). Research suggests that program management and its evaluation ensure the effectiveness and sustainability of a health promotion program (Santos et al., 2014, p.1085; Owen, 20017, p.1; Payne et al., 2011,p. 5). The object of this study is a health promotion program for refugees health called REFUGIUM, which follows a participatory action research approach and was developed at the University of Applied Sciences Hamburg (HAW). The first implementation of the REFUGIUM program was conducted from April to June 2016. In the period from February 2017 till June 2017 it was the responsibility of the REFUGIUM team members, under supervision of the program coordinator Prof. Dr. Christine Färber, to organise, implement and evaluate the REFUGIUM program for the upcoming second and third generation. Even though the program was implemented for the first generation it had no program management plan in which information was given about what has to be done, how, when, by whom, and which resources were needed to carry out the program (Maylor, 2010, p.6). Therefore the implementation of the REFUGIUM programs units were highly challenging and time consuming. In order to decrease the preparation time and be efficient the REFUGIUM program was in need of a strategy. More precisely the program was in need of a formative process evaluation to identify/assess the challenges and resources faced in the implementation process of each unit during the time point of second and third generations, In order to develop solutions for optimizing the processes and build up a solid structure. According to Ottoson (2003) success of a health promotion program, which follows a participatory action approach, requires organisational structure and defined processes (Ottoson, 2003, p.87). They have to be assessed and documented in a low threshold way so that the program team is able to implement the program without any challenges (Maylor, 2010, p.106). Professional program-management has to be developed in a participatory process to enable ownership (Ottoson, 2003, p.87; (Maylor, 2010, p.106). Research findings confirm that "only by actively taking part inside ongoing processes in organisations enables the researcher to gain a deeper understanding of the complexity of management and teamwork" (Ottoson, 2003, p.87).

In light of these findings the research question was “How to organise and implement the REFUGIUM health promotion program for refugees effectively and efficiently?”
The answering of the research question covers several chapters in this thesis. It is divided into background, methods, results, discussion and conclusion. The first chapter provides background information on the following topics health of refugees in Germany, the REFUGIUM Program, health promotion and project management. This is followed by the chapters methodology and results, which are structured according to the public health action cycle. The chapter methodology comprises of the description of formative process evaluation in the context of a case study, data collection, data analysis, development and implementation and finally the evaluation. Subsequently, in the fourth chapter the results are presented according to the public health action cycle: Assessment of needs, Development of the Program Management tool, Implementation of the strategy, and the Evaluation. In the fifth chapter the development of a document for the first unit is elaborated. In chapter six the discussion of the results and methods are presented. The thesis is concluded with the Conclusion.

1.1 Research Question and Objectives

“How to organise and implement the REFUGIUM health promotion program for refugees effectively and efficiently”?

**General objective:**
- Program-management: optimizing processes and the structure of the REFUGIUM program.

**Specific objectives:**
- Identify activities, barriers and resources in implementation of the REFUGIUM program
- Develop solutions
  - document program processes systematically
  - develop documents and materials
  - organise materials/documents in systematic order
  - develop program-management tools (electronic/paper) as resources
2. Background

2.1 Refugees in Hamburg Germany

In the year 2015, there was a dramatic increase in the total number of refugees and asylum seekers worldwide (Federal Agency of Migration and Refugees, 2017). According to the UN Refugee Agency, around 65 million people migrated or left their home country at the end of 2015 (The UN Refugee Agency, 2017). Recently, European countries are the main receiving countries of immigrants as refugees and asylum seekers especially from Syria, Kosovo, Serbia, Albania, Iraq, Afghanistan, Eritrea, Nigeria, Macedonia and Pakistan (Federal Agency of Migration and Refugees, 2017). The statistics concerning refugee and asylum seekers shows that nearly 1.1 million refugees came to Germany in 2015 (Federal Agency of Migration and Refugees, 2017). Most live in initial reception centres and temporary secondary accommodations in Hamburg. The current data of Hamburg in 2017 shows that 4098 people live in initial reception centres and 30,000 in temporary secondary accommodations (Hamburg Zentraler Koodinierungsstab Flüchtlinge, 2018, p.12-14).

2.2 Refugees health

Refugees are groups of people who not only represent people from various ethnic backgrounds, cultures, religions, ideologies, attitudes towards health, and philosophies of life, but also a group of people who have experienced abuse, oppression and persecution due to war and political conflicts (Federal Agency of Migration and Refugees, 2016; , 2011, p.959).

Concerning the health of refugees, they experienced a threefold impact on their health and well-being, firstly psychiatric disorders triggered by the refugee experience, and secondly infectious and parasitic diseases endemic to the countries of origin, and thirdly chronic diseases endemic to the host countries ( , 2011, p.960). Among diseases, mental health issues were the serious ones and occurred frequently among refugees characterized by flight, social dislocation, social and cultural displacement ( , 2011, p.961). According to the study by the federal chamber of psychotherapists every second refugee suffers from post-traumatic stress disorder or depression (Bundespsychotherapeutenkammer, 2015). Many studies are being published, which explore the resources and and risks in regard to the refugee’s health. Recent research indicates that uncertainty about the
future and the asylum process (long asylum seeking process, detention and temporary permits, separation from family members) have the most adverse effect on refugees mental health (Kirmayer et al., 2011, p.959; WHO, 2012, p. 5; Betancourt, et.al., 2013; Bozorgmehr et al., 2017, p.592; Neuhaus et al., 2017). Whereas protective factors were identified as social support, health promotion structures in the camps, opportunities for study/ work, integration and health care facilities (WHO, 2012, p. 5; Lindert, 2016; Lambert et al., 2015; Carta et al., 2015; Sleijpen et al., 2015; Neuhaus et al., 2017; Bozorgmehr et al., 2017, p.592).

2.3 Importance of REFUGIUM Program

Refugees as a vulnerable group need specific attention in health promotion to maintain and regain their health (Nakkash et al., 2012; Razum and Bozorgmehr, 2016,p.1-4; Aboelyazeid, and Faerber, 2017; Neuhaus et al., 2017). Many refugees suffer due to conditions and trauma in the receiving country (Bozorgmehr, 2016,p.1-4). Hence, the process of asylum seeking is stressful and exhausting (Nakkash et al., 2012; Razum and Bozorgmehr, 2016,p.1-4; Aboelyazeid, and Faerber, 2017; Neuhaus et al., 2017). Their health can be improved, on the one hand through structural prevention (state support, speedy asylum procedure, work, education, housing, sanitation), and on the other by behavioral prevention (Bozorgmehr et al., 2017, p.592; Razum and Bozorgmehr, 2016,p.1-4; Aboelyazeid, and Faerber, 2017; Neuhaus et al., 2017). Self-help groups, discussion groups and low-threshold contact offers as well as peer-to-peer health promotion programs have proven beneficial (Aboelyazeid, and Faerber, 2017). Moreover, research has shown that effective health promotion in settings should be participatory, empowering, low-threshold and gender- and culture sensitive (Tempel and Kolip, 2011, p.35; Aboelyazeid, and Faerber, 2017; Neuhaus et al., 2017). Health promotion and prevention in the field of physical activity, nutrition, and stress management leads to maintenance of health and can decrease the chances of developing mental health disorders (Aboelyazeid, and Faerber, 2017; Neuhaus et al., 2017).

2.4 REFUGIUM programme

The REFUGIUM program was launched in 2015 at the Department of Health Sciences in the Faculty of Life Sciences at the Hamburg University of Applied
Sciences as a peer-to-peer health awareness program following a participatory action approach (Färber, 2016, p. 1). The REFUGIUM program was developed from September 2015 to June 2016 at HAW Hamburg by Prof. Dr. Christine Färber in the course "Refugee Health" together with Nita Kama, a graduate from the department, who herself has refugee background (Färber, 2016, p. 1). Students with migration and refugee backgrounds as well as three asylum seekers, Sammy Ojo, Allaeldin Hasan and Zeinab Behroozian, were included in development as part of the HAW program "Sharing Knowledge and Experiences" (Färber, 2016, p. 1). More than 40 refugees participated in the completion of the flyers and concepts as part of the training (first generation) (Färber, 2016, p. 3). The main strategy is to share health related knowledge and experiences among refugees. The training focuses on six topics: Nutrition, physical activity, hygiene, oral health, health care and mental health. Six thematic flyers with evidence-based and relevant information were compiled and refugees were trained to become peer facilitators (Färber, 2016, p. 3). Manuals for workshops in each topic were developed, which enable peer facilitators to conduct participatory workshops in refugee accommodations with other refugees (Färber, 2016, p. 3). The main Instruments are flyers and manuals, which are used to conduct trainings and workshops (Färber, 2016, p. 3). By taking part in REFUGIUM program they are qualified as health peer facilitators using peer-to-peer approach (Färber, 2016, p. 2). The peer facilitator training for refugees at HAW Hamburg, enables them to train other refugees on health topics in the accommodation camps in different languages (Färber, 2016, p. 2). The program involves refugees who are interested in health promotion in their refugee accommodations. Peer facilitators are key players in the field of health promotion in the REFUGIUM program (Färber, 2016, p. 3). The term peer facilitator refers to men and women with refugee background who are trained at the university (Färber, 2016, p. 3). Peer facilitators who successfully complete the training are awarded with REFUGIUM peer facilitator certificates (Färber, 2016, p. 2). The languages offered by the program are: Albanian, Arabic, Bulgarian, Dari/Farsi, English, German, Russian, and Turkish (Färber, 2016, p. 3). Urdu is currently being developed alongside French and Spanish. The partner Budrich publishers publish flyers and manuals of the REFUGIUM program as freeware on the homepage www.refugium.agency, so that everybody has free access to this material.
2.4.1 Aims of the REFUGIUM program

The Refugium program aims to activate refugee’s health resources in a comprehensive and holistic approach (Neuhaus et al., 2017, p. 3). The Program aims to support refugees to cope with the living conditions in Germany by providing a platform (Neuhaus et al., 2017, p. 3). The intention of the REFUGIUM program is to address inequality by giving voice to individuals who may be excluded. It promotes the full participation of vulnerable individuals and group in developing and conducting the program’s following participatory action research approach.

2.4.2 Implementation of the REFUGIUM program 1st, 2nd, 3rd generation

First generation

The concept of training for the first generation comprised of one stage namely unit 2. Refugees had to accomplish the Peer facilitator training (unit 2) of the REFUGIUM program to become health peer facilitators and be rewarded with certificates. The training of the first generation took place in four events on the 2nd, 9th and 30th of May 2016 at HAW Hamburg. In 16 teaching hours, 36 refugees were trained by students and guest students of HAW Hamburg under scientific supervision of the health scientist Prof. Dr. Christine Färber and Nita Kama and supported by Dr. Omar Aboelyazeid, a dentist and master’s student intern of the program (Aboelyazeid and Faerber, 2017). During the first generation the concept of training was collaboratively adapted, flyers were validated and translated and manuals for workshops drafted (Aboelyazeid and Faerber, 2017).

Second and third generation

In the second and third generation the concept of the qualification of peer facilitator included, besides the peer facilitator training (unit 2), also both unit 3 and unit 4. In order to become Health peer facilitators the refugees had to accomplish 3 stages from now on: the Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3) and Applied peer facilitator training (APFT) (unit 4). After taking part actively in these three stages they were qualified as peer facilitators and were awarded with certificates. The additional two stages Didactical peer facilitator training (DPFT) and Applied peer facilitator training (APFT) were taken into consideration during the training program, as it was the goal to support, train and empower the participants better as in the first generation. Only few of the graduated
peer facilitators of first generation were in contact with the REFUGIUM program. From nearly 36 graduates only 2 to 3 were available, when they were contacted for support for second and third generation training (observation protocol, p.192). The additional support and training should help the participants to be selfconfident, while conducting the workshops in real life scenario.

The Peer facilitator training (PFT) of the second generation was conducted on the 22.02.2017, 28.02.2017, 01.03.2017 and 08.03.2017 from 16-18 pm; 14-18 pm the place was HAW Hamburg - Campus Berliner Tor (Berliner Tor 5 20099 Hamburg). The Didactical peer facilitator training (DPFT) was held on 21.03.2017, 28.03.2017 16-18 pm at HAW Hamburg - Campus Bergedorf. The Applied peer facilitator training (APFT) was held on 20.04.2017, 24.04.2017 from 14-16 pm and was held in the initial reception centre in Hamburg - Schnackenburgallee.

The Peer facilitator training (PFT) of the third generation was conducted on the 24.04.2017, 08.05.2017, 15.05.2017 from 16-20 pm and place was HAW Hamburg - Campus Bergedorf. The Didactical peer facilitator training (DPFT) was on 22.035.2017 from 16-18 pm and the conduct of Applied peer facilitator training (APFT) was on 23.05.2017, 12.06.2017 from 14-16pm.

2.5 Health Promotion
"Health promotion is the process of enabling people to increase control over, and to improve their health" (WHO, 1986). According to the World health organisation it aims to improve equity in health, reduce health risks, promote healthy lifestyles and settings, and respond to the underlying determinants of health (WHO, 2017). In regard to health promotion goals it is stated that:“Health promotion refers to planned actions, which aim to empower people to control their own health by gaining control over its determinants through effective public involvement and participation using different methods and approaches such as legislation and fiscal measures, organisational change, and community development” (cf. WHO,1994).

2.6 Project Management
Project management literature is complex and extenuous, therefore in this study literature is used from the Project Management Institute (2013) and Maylor (2010). These are valid references regarding professional project management (Payne et al.,
The Project Management Institute (2013) defines, in their guide to project management body of knowledge: PMBOK® guide (PMBOK), project management as the "application of knowledge, skills, tools, techniques to project activities to meet the project requirements" (Project Management Institute, 2013, p.4). Further the PMBOK® guide explains that project management is accomplished through the appropriate application of five process groups (initiating, planning, executing, controlling and monitoring, and closing), and nine knowledge areas of management (integration, scope, time, cost, quality, resources, communication, risk, and procurement). These are used across the life cycle of a project (Project Management Institute, 2013, p.4).

2.6.1 Common Project Management Process Interactions

The five process groups are dependent on each other and and many processes are repeated during the project (Project Management Institute, 2013, p. 49). For example, the planning process group provides the executing process group with the project management plan and project documents (Project Management Institute, 2013, p. 50). When the project is implemented knowledge is gained from this firsthand practical experience (Project Management Institute, 2013, p.27). As a result of this the project management plan and the project documents are updated to the latest needs by team members (Project Management Institute, 2013, p. 52).
2.6.2 The four phases of project management

According to Maylor (2010) Project management consist of four main activities i.e. planning, organising, directing and controlling activities (Maylor, 2010, p. 33). Beside these, project management also focus on motivating the project team (Maylor, 2010, p.33). The planning activities involve mostly pre-project tasks like preparing materials and documents, justifying resources for the project, evaluating options even if it is not ensured if it should be included in the project/ depending on the project (Maylor, 2010, p.33). Maylor structures project management in four identifiable phases which are described briefly below (Maylor, 2010, p.33).

1. **Define the Project**: Before conducting any project, the theme and idea of the project, project procedure, project necessity, resources for the project should be well determined and discussed. Possible problems and challenges which may occurs during project implementation should be also considered in defining [the] project (Maylor, 2010, p.33).

2. **Design the project process**: In this phase the needs of the project will be identified. Along with this, models are developed to clarify how needs of the project can be fulfilled. These models are to be evaluated to figure out the optimal process for the task and to reduce the risk (Maylor, 2010, p.33).

3. **Deliver the project**: "This is the phase where the project will carry out the models and plan, which was developed before designing the process" (Maylor, 2010, p.33).

4. **Develop the process**: The project process and products should be continuously improved after gaining the positive and negative experiences from the project staff (Maylor, 2010, p.33).

In each phase of project management, there are certain tasks to be performed and certain issues to be discussed. The key issues, which have been discussed the above mentioned r four phases of project management and the fundamental questions related to each phase are summarized below in table 1.1

<table>
<thead>
<tr>
<th>Phase</th>
<th>Key issues</th>
<th>Fundamental questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Define the project</td>
<td>Project and organisational strategy, goal definition.</td>
<td>What is to be done?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Why is it to be done?</td>
</tr>
<tr>
<td>Design the project pocess</td>
<td>Modelling and planning.</td>
<td>How will it be done?</td>
</tr>
</tbody>
</table>
estimating, resource analysis, conflict resolution and justification.

<table>
<thead>
<tr>
<th>Stage in project lifecycle</th>
<th>Activity</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Define the project</td>
<td>Conceptualisation</td>
<td>Generate explicit statement of needs.</td>
</tr>
<tr>
<td></td>
<td>Analysis</td>
<td>Identify what has to be provided to meet those needs. Is it likely to be feasible?</td>
</tr>
<tr>
<td>Design the process</td>
<td>Proposal</td>
<td>Show how those needs will be met through the project activities.</td>
</tr>
<tr>
<td></td>
<td>Justification</td>
<td>Prepare and evaluate financial costs and benefits from the project.</td>
</tr>
<tr>
<td></td>
<td>Agreement</td>
<td>Point at which go-ahead is agreed by project sponsor.</td>
</tr>
<tr>
<td>Deliver the project (Do it)</td>
<td>Start-up</td>
<td>Gather resources, assemble project teams.</td>
</tr>
<tr>
<td></td>
<td>Execution</td>
<td>Carry out defined activities.</td>
</tr>
<tr>
<td></td>
<td>Completion</td>
<td>Time/money constraints reached or activity series completed.</td>
</tr>
</tbody>
</table>

Table 1: The four phases of project management (Maylor, 2010, p.33)
<table>
<thead>
<tr>
<th>Element of complexity</th>
<th>Examples of issues that make management complex</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mission</strong></td>
<td>• Lack of clarity of requirements&lt;br&gt;• Large scale, high value, high importance, high urgency&lt;br&gt;• Large number of constraints – legal, health and safety, security&lt;br&gt;• High level of interaction and interdependency with other projects&lt;br&gt;• High level of uncertainty – novelty, implications and side effect</td>
</tr>
<tr>
<td><strong>Organisation</strong></td>
<td>• Multiple time zones project team members operating in Lack of collocation of project team&lt;br&gt;• Linguistic differences between team members&lt;br&gt;• Lack of appropriate organisational structure used in the project&lt;br&gt;• High level of change that the project produces in the organisation</td>
</tr>
<tr>
<td><strong>Delivery</strong></td>
<td>• Lack of common or appropriate project management method&lt;br&gt;• Inappropriate human, financial or other resources&lt;br&gt;• Problematic communications in the project team&lt;br&gt;• Lack of clear or timely decision-making&lt;br&gt;• Lack of flexibility for the project manager to respond to change</td>
</tr>
</tbody>
</table>

Table 2: Development of the project lifecycle (Maylor, 2010, p.35)

2.7 Describing the project management challenge: managerial complexity the MODeST framework

Every project functions in a unique way; in order to understand the function of management a classification of the complexity has to be applied (Maylor, 2010, p.38). “One framework to assess the complexity of a project is the MODeST framework” (Maylor, 2010, p.38). According to Maylor (2010) the level of structural complexity of an activity is a function of five elements: Mission, Organisation, Delivery Stakeholders and team (Maylor, 2010, p.38). This framework is beneficial to plan and form a project (Maylor, 2010, p.38). It can identify challenges and can formulate responses (Maylor, 2010, p.38).
### Stakeholders
- Large number of stakeholders with differing requirements
- Lack of commitment to the project by key stakeholders
- Interference in the project by key stakeholders
- Problematic inter-relations between stakeholders

### Team
- Lack of leadership shown by project manager
- Cultural and other differences between team members
- Low level of motivation of team
- Lack of project, technical and business experience in the team
- Lack of appropriate training for team members

Figure 2: the MODeST framework (Maylor, 2010, p.38)

#### 2.9 Project management in health promotion practice

A resource for project management in health promotion is the website of quint-essenz which guides health promotion practitioners in regard to quality and project management systems for projects and programs (Quint-essenz, 2017). The literature review on the topic of project management in public health research (2014) indicates that the research in regards to project success factors in public health projects is limited (Santos et al., 2014, p.1085). According to research, the process of managing programs in health promotion practice is not the focus of health promotion practitioners (Santos et al., 2014, p.1081). In the paper from 2014 Santos et al., assessed successful factors of public health projects and grouped them into four groups and built a framework that allows the evaluation of a project (Santos et al., 2014, p.1084).

| Project manager | - Ability to delegate authority;  
|                 | - Ability to make choices;  
|                 | - Ability to coordinate;  
|                 | - Perception of their role and responsibilities;  
|                 | - Commitment.  
| Organization   | - Support from top management;  
|               | - Project organizational structure;  
|               | - Support from functional managers;  
|               | - Project "champion".  
| Project       | - Size and value;  
|               | - Uniqueness of project activities (versus standard activities);  

22
Density of network design;  
- Project life cycle;  
- Urgency of results.

| External environment | Political context;  
| Economic context;  
| Social context;  
| Technological context;  
| Client;  
| Competition;  
| Sub-contracts. |

Figure 3: Groups of project success factors (Santos et al., 2014, p.1084)

3. Methodology

3.1 Case study research as the primary evaluation method

The design of this study is a formative process evaluation in the context of a multimethod case study. The case study concerns the REFUGIUM program and the main target group is the program staffs (federal volunteer workers, 3 internees) who deliver services.

Yin (2014 ) defines case study:

"A Case study is an empirical inquiry that investigates a contemporary phenomenon (the case) in depth and within its real-life context, especially when the boundaries between phenomenon and context may not be clearly evident" (Yin, 2014, p. 16).

The case study approach was chosen in this study, because models and variables were not available for assessing how the implementation of the program can be more effective. As the main research question of this study is a ‘how’ question it is an additional reason to use the case study approach (Yin, 2014, p. 2).

In order to answer the research question an evaluation of the implementation process had to be conducted. Yin (2014) suggests that "case study evaluation captures the complexity of a case, including relevant changes over time , and attend fully to contextual conditions, including those that potentially interact with the case" (Yin, 2014, p. 220). Therefore case study research is used as a method for conducting process or implementation evaluations (Yin, 2014, p. 222). Moreover, "the case study evaluation can track the implementation process with fieldwork conducted throughout the implementation period" (Yin, 2014, p. 222). It is also the case that, according to Yin, “the evaluation data can come from open-ended queries of
interviewees and the retrieval of documents that retrospectively cover earlier time periods, so that the case study can cover a calendar period that exceeds the elapsed time devoted to any fieldwork” (Yin, 2014, p. 222). It is important to understand that a case study evaluation plays a formative role thus revealing critical findings; that a case study evaluation is best completed from the inauguration of a project (Yin, 2014, p.222-223). The case study affords focus on the REFUGIUM program’s real-world perspective of the organizational and managerial processes of the program (Yin, 2014, p. 4). As the REFUGIUM program follows a participatory action approach the structure of the program underlies a constant change due to the participation of a highly vulnerable group leading to unstructured and unpredictable processes (Aldridge, 2015, p. 22). The intent of the case study is to learn about the emerging processes and unusual situations for the REFUGIUM team members, which represents an intrinsic case (Creswell, 2013,p. 101).

3.2 Mixed methods designs: Mixing case studies with other methods
The aim of a case study is to gain in depth knowledge about the REFUGIUM program (case), but in order to get a complete overview it was demanded to use more than one method. The benefit of mixed method research is that a holistic evidence is gathered, with which the previous data can be validated. Therefore the present study represents an embedded case study (Yin, 2014, p. 222)

3.3 Theoretical Paradigms and Perspectives
In the constructionist tradition this study incorporated the theoretical paradigm assumptions of an emerging design, a context dependent inquiry, and a deductive and inductive data analysis (Cresswell, 2013, p. 403; Creswell, 2013, p.47). According to Creswell the emergent design is chosen when the research process does not remain the same or constant (Creswell, 2013, p.47). For example when change and modification is possible, regarding the research question, data collection, individuals and sites during the process of conducting the study (Creswell, 2013, p.47). As the REFUGIUM program follows a participatory action approach the structure of the program underlies a constant change due to the participation of a high vulnerable group which leads to unstructured and unpredictable processes (Aldridge, 2015, p. 22), therefore an emerging design was chosen.
3.5 Evaluation

Evaluation is defined as follows: "[e]valuation is the systematic appraisal of the success and quality of a project by application of social health science methods." (EU Health programme, 2011, p.22; Kromrey, 2011,p.107). In this context, the evaluation enables, for example: the evaluation of implemented measures, the optimization of processes and an assessment of cost-effectiveness (Töppich & Linden, 2011, p.69). The purpose of evaluation is to examine the effectiveness of interventions by examining the intervention goals and the achievement of the goals (Töppich & Linden, 2011, p.69). Moreover the aim of program evaluation is to ensure quality assurance in the process of planning and implementation of interventions (Töppich and Linden, 2008, p.71). However, this is only possible when the required data has been collected from surveys, measurements, observation and documentation (Spiegel, 2013, p.37). The collected data and information is represented in the results, which are subsequently evaluated. It checks whether, and to what extent, a program has achieved its set goals and where there may be room for improvement (Spiegel, 2013, p.36). Thus, the evaluation is "criteria-based" with regard to the intended goals or using professionally legitimized standards (quality criteria or standards) (Spiegel, 2013, p.37). The peculiarity of the evaluation research is that it does not represent an independent method of empirical social research (Töppich and Linden, 2010, p.69). Rather, it uses all available qualitative and quantitative empirical methods with the intention of gaining knowledge about the subject of the evaluation (Töppich and Linden, 2010. p.70). The nature of these outcomes and processes ultimately determines how one answers the question of what works in health promotion and how it might best be conducted (WHO, 2001, p.9).

3.5.1 Formative evaluation

Formative evaluation aims to assess the whole process of a project (EU Health programme, 2011, p.30). The formative evaluation supports the program continuously through feedbacks (EU Health programme, 2011, p.30). Through formative evaluation the program design can be improved further (Hurrelmann & Razum, 2012, p.1124). One important aspect of formative evaluation is that the project team itself assesses the barriers and resources as well as develops recommendations. In result of these mid stream modifications immediate
improvement and refinement of the service or product is achieved (Theofanos et al., 2005, p. 31).

3.5.2 Process evaluation

Process evaluation examines if the strategies are appropriate for the target group, the acceptance of the intervention, the desired state, and the actual state of the program execution, organization, scheduling and the participating rate in the intervention (Töppich & Linden, 2011, S.70). Process evaluation is also a kind of monitoring or observation of implementations of interventions (Töppich & Linden, 2011, S.70). Process evaluation is conducted after one month as intervention is implemented (Töppich & Linden, 2011, S.70).

3.4 Quality of health promotion program

The quality of a program is assessed by evaluation. The American professor of public health Avedis Donabedian was one of the first to apply the concept of quality to the field of health (Donabedian, 1966). According to Donabedian, three dimensions are distinguished for health care quality: structure quality, process quality and quality of results (Donabedian, 1966). These were complemented by a fourth dimension, the planning / concept / assessment quality (Ruckstuhl et al. 2001). According to this classical distinction, which goes back to Donabedian, interventions such as health promotion programs and medical therapies in both the medicine and health science fields are evaluated (Stockmann, 2008; (Donabedian, 1966, Ruckstuhl et al 2011, Kolip et al 2012.). According to the German cooperation network ‘Equity in Health’ (2015) quality improvement has to focus on these dimensions. In order to evaluate the REFUGIUM program it is important to understand the intricacies of these quality dimensions. Thus, the evaluation of the REFUGIUM program is based on the differentiation of the four quality dimensions relevant to health promotion: “planning: developing the concept and project plan, and planning the implementation steps involved based on a (participative) needs analysis and existing scientific evidence; structures: resourcing an intervention with the necessary finances, personnel, facilities and equipment; processes: the methods used to carry out the intervention; and finally results: the effects achieved in relation to the set objectives” (German Cooperation Network ‘Equity in Health’ (2015, p. 44-50). This means that the questions of the evaluation relates to the process of planning, as well as the
structure, implementation and outcome of the intervention.

3.6 Criteria for Good Practice in Health Promotion Addressing Social Determinants

The goal of the formative process evaluation in the REFUGIUM Peer-health promotion program for refugees in the context of multimethod case study is to bring conformity with the following twelve criteria for good practice in health promotion developed by the German cooperation network ‘Equity in Health’. These criteria represent a framework for planning and implementing health promotion interventions addressing the social determinants of health (Tempel and Kolip, 2011, p.35). They guide the program manager and subsequently the team of health promotion projects working with vulnerable groups during the planning, execution and evaluation of the project (Tempel and Kolip, 2011, p.35).

1. The project should have a project plan which serves as a guideline for shaping and assessing day-to-day work (criterion: Concept and Project Planning)
   (German Cooperation Network ‘Equity in Health’ (2015, p. 7-10)

2. The target group should be clearly defined and refer to the "socially disadvantaged" (criterion: Target Group Orientation)
   German Cooperation Network ‘Equity in Health’ (2015, p.11-14)

3. The measures of the project are based on groups of persons and structures within a setting (eg school, Operation, district) (criterion: Settings Approach).
   (German Cooperation Network ‘Equity in Health’,2015, p.15-18)

4. In the project the peer to peer approach is integrated (criterion: Integrating Intermediaries).
   German Cooperation Network ‘Equity in Health’ (2015, p.19-22)

5. The project involves new approaches or ideas and is geared towards long-term implementation (criterion: Sustainability).
   (German Cooperation Network ‘Equity in Health’, 2015, p.23- 26)

6. The project provides for a low-threshold approach (criterion: Low-Threshold Methodology) (German Cooperation Network ‘Equity in Health’, 2015,p. 27- 30)
7. The target group is heavily involved in the design, implementation and / or evaluation of the project (Criterion: Participation).
(German Cooperation Network ‘Equity in Health’, 2015, p. 31-34)

8. The interventions enable and strengthen individuals or groups, personal and social resources in regard to their own health (criterion: Empowerment).
(German Cooperation Network ‘Equity in Health’, 2015, p. 35-38)

9. The project is characterized by intersectoral cooperation. The cooperation partners are involved in the implementation of the concept (criterion: Integrated Action/Networking).
(German Cooperation Network ‘Equity in Health’, 2015, p. 39-42)

10. The project provides for a continuous improvement process in the sense of the Public Health Action Cycle (p.7) (criterion: Quality Management).
(German Cooperation Network ‘Equity in Health’, 2015, p. 43-46)

11. The project work is documented and evaluated (criterion: Documentation and Evaluation).
(German Cooperation Network ‘Equity in Health’, 2015, p. 44-50)

12. The cost of the project is in proportion to the benefit (Capturing Cost-Effectiveness)(German Cooperation Network ‘Equity in Health’, 2015, p.51-54).

3.6 Positionality - The Researcher as a Multicultural Subject

According to Creswell (2013), the first phase of the research process describes the researcher as a multicultural subject (Creswell, 2013, p. 15-17). The researcher requires information about conceptions of self and those who are being researched (Creswell, 2013, p. 15-17). Research is created by the researcher and is not the reality (Creswell, 2013, p. 15-17). Therefore the positioning of the researcher is crucial in order to understand how influential the researcher is in gathering the research (Creswell, 2013, p.20). The benefit to being a member of the group one is studying is acceptance (Dwyer et al., 2009). The researcher of this study is a student of the Master degree in the major of health science and was born in Hamburg of Pakistani heritage. In the REFUGIUM program she worked in a team with team members and the program coordinator as a professor who originates from a different
country or of different ethnicities, belief systems, and cultures i.e. Nepal, Syria, Kenya and Germany.

REFUGIUM team members are of different nations, ethical values, cultures, mentalities, educational backgrounds, religions and hold various statuses of residence, but additionally each one member belonged to a vulnerable group for example: Monica an african black woman from Kenya who is an international health sciences master’s student; Sameer a graduated refugee living in Germany; Soni another international health sciences master’s student; finally the researcher a german national with migration background, experience of asylum procedures and a woman who wears a headscarf. The teamwork undertaken between various team members with cultural and linguistic differences can become complex (Maylor, 2010, p.38). Due to these differences we were not peers of each other, but became peers by working as the REFUGIUM team together to achieve the same goal. In a complex and emerging program the team work needed a leader in the REFUGIUM team. My multicultural background was of benefit and I was accepted and seen as a team leader, because I was aware of both the German and migrant culture/attitude very well. Everyone had to be treated depending on his or her needs and a clear communication was required for successful team work. As the program follows participatory research the assessment of barriers and resources documents were made in collaboration with all team members. Of special importance were the ideas and contribution of team members with refugee background. This led to constant support and empowerment by enabling them to work successfully. According to my own experiences as foreigner, and yet also local in Germany I was able to understand and research a project management concept in regards to program participatory research.

According to research being black, a woman, wearing a headscarf, being a refugee are the most disadvantaged groups in the German labour market and society (Hipp, 2016, p.1). The German labour market perceives migrants, individuals with migration background, and refugees as members of vulnerable groups (Hipp, 2016, p.1). As the REFUGIUM team we had to work in a German university work environment as responsible workers with which no one was familiar. We were all members of a vulnerable group and mostly underrepresented in the German labour market especially in research at universities. All other staff members of the department of health sciences who were working there were mostly of German ethnicity and only
a few were migrants. In such a setting each one of us had to prove him and herself as a professional and hard-working team member. For us as a multicultural and migrant group the huge responsibility was a chance to prove that members of vulnerable groups can also work efficiently, hard and responsibly. It was perceived from all of us as an honour that a white German professor, program coordinator, and head of the department (Prof. Dr. Christine Färber) trusted us and gave us the responsibility under her supervision to plan, conduct, research and evaluate the REFUGIUM program. For the first time being of different physical appearance (skin colour, head scarf, hair colour), speaking another language, having a non-German name, having experienced asylum procedure, and being a refugee was a resource and an important advantage for the workplace. Normally all these factors lead to exclusion from the German labour market (Hipp, 2016, p.2), but in the case of the REFUGIUM program people with such requirements were needed. In the REFUGIUM program we as REFUGIUM team members functioned as gatekeepers for the participating refugees. The refugee participants saw us as persons in charge and workers in the REFUGIUM program and were able to build trust, because we looked, spoke and experienced migration similarly. We were peers of the participating refugees, even though not all of us were refugees. Thus Prof. Dr Färber empowered us very often by appreciating each one of us and emphasizing how important we are for the success of REFUGIUM program. The respect and appreciation of a German professor and head of department lead to empowerment and the ambition to work at our best.

3.7 Assessment of needs (First phase of public health action cycle)
To answer the research question study procedures were applied and structured along the public health action cycle, which comprises of four steps as the assessment of needs, development of strategy, implementation of strategy and evaluation. Each step will be described in the following:
3.7.1 Data collection in case study research

3.7.1.1 Sample

The target group was the program staff (federal volunteer workers and 3 internees) who delivered services. As the REFUGIUM Team was responsible for implementing the program and all members were working with each other confidence of the REFUGIUM team members was gained by mutual collaboration (Creswell, 2013, p. 148).

3.7.1.2 Ethical consideration

The team members were aware and agreed that the researcher as a team member operates participatory research and documents all processes. This was so that team members could not be identified personally and synonyms were used instead (Sameer, Sami, Soni, Monica). Also in the observation field notes the real names were defaced.

3.7.1.3 Participatory Observation

The REFUGIUM program was chosen as the case for the study. The REFUGIUM program is structured in four units, namely the induction phase for new REFUGIUM Team members (unit 1), Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3), and Applied peer facilitator training (APFT) (unit 4).
According to Creswell (2013) the data collection in case study research comprises of multiple sources of information. Yin (2014) suggests using six types of information: documents, archival records, interviews, direct observations, participant observation, and physical artifacts (Creswell, 2013, p. 100). The collected information should be recorded through the use of field notes and observational protocols (Creswell, 2013, p. 149). In this study data was collected by participatory observation, while working as a person of response through all units of peer facilitator training during second and third generations from February till June 2017. Participatory observation was conducted before, during and after implementation of the units 1 to 4: induction as a new REFUGIUM team member (unit 1), of Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3) and Applied peer facilitator training (APFT) (unit 4) during second and third generations. Participatory observation also included analysis of processes and the retrieval of documents (Yin, 2014,p. 222) like existent documents/materials on the electronic platform "Flüchtlingsgesundheit W 17" and the office N.5.29 of the REFUGIUM program and room N.2.09 cupboards 1 and 10. This information and participatory observation field notes were used to write an observation protocol (Creswell, 2013, p.169). The observational protocol is divided into descriptive notes and reflective notes. Descriptive notes describe the activities, which flow in chronology (Creswell, 2013, p.169). It is useful information for developing a chronology of the activities during the units (Creswell, 2013, p.169). Reflective notes are notes about the process, reflections on the activities, and summary of conclusions about activities for later theme development (Creswell, 2013, p.169) (See appendix 2). In order to complement the observation protocol with the ideas and observations of the other 3 REFUGIUM team members a survey was developed and conducted. The Results of survey were used to validate and complement the observation protocol written by researcher of this study (see figure 6).

3.7.1.4 Survey: the development of a Formative process evaluation Questionnaire
In order to collect a richer and "stronger array of evidence" (Yin, 2014, p.66) in the REFUGIUM program a survey was conducted. For questionnaire development literature research was conducted concerning the implementation of formative process evaluation in a participatory action research based health promotion program working with highly vulnerable target group in data sources like pubmed,
Key terms were used such as "process evaluation", "formative evaluation", "project management", "project management in health promotion", "process evaluation in project", and "vulnerable target group in health promotion project".

According to the results of the literature research and participatory observation, the formative process evaluation questionnaire was developed with 20 open-ended questions with specific REFUGIUM program processes related questions. The purpose was to detect what occurs in steps and which resources and barriers exist and which solutions are needed to overcome the challenges. The main questions:

1) What is the current situation
2) What is functioning (what resources exist)?
8) What are the challenges and barriers in the process of implementation?
13) What can be changed so that an improvement is achieved?

3.7.1.5 Data collection by survey

The evaluation data comes from an open-ended formative process evaluation questionnaire, which was distributed while working through all 4 units to three REFUGIUM team members at two timepoints. Timepoint 1 was the second generation and timepoint 2 was the third generation. First of all, participatory observation was conducted and after that the first survey (second generation) was held retrospectively on 5.04.2017, because during the second generation the questionnaire did not exist. The team members had to remember and give information regarding units 1 to 4: induction phase as a new REFUGIUM team member (unit 1) (20.02.17), Peer facilitator training (PFT) (unit 2) (01.03.17), Didactical peer facilitator training (DPFT) (unit 3) (10.03.17), and Applied peer facilitator training (APFT) (unit 4) (21.04.17). The survey of timepoint 2 (third generation) was conducted parallel to the implementation and team members were asked to provide information during working through units 1 to 4: induction phase as a new REFUGIUM team member (unit 1) (08.04.17), Peer facilitator training (PFT) (unit 2) (09.05.17), Didactical peer facilitator training (DPFT) (unit 3) (23.05.17), Applied peer facilitator training (APFT) (unit 4) (24.05.17). This formative process evaluation questionnaire was filled out by 4 REFUGIUM team members during the implementation of 4 units of each generation and was collected after each timepoint.
The team members were asked to fill them out in Microsoft word and provide the researcher with this computer file.

<table>
<thead>
<tr>
<th>Timepoint (2 generation)</th>
<th>Date</th>
<th>number of formative process eval. questionnaires collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Induction phase as a new REFUGIUM team member</td>
<td>20.02.17</td>
<td>3</td>
</tr>
<tr>
<td>Peer facilitator training (PFT)</td>
<td>01.03.17</td>
<td>3</td>
</tr>
<tr>
<td>Didactical peer facilitator training (DPFT)</td>
<td>10.03.17</td>
<td>3</td>
</tr>
<tr>
<td>Applied peer facilitator training (APFT)</td>
<td>21.04.17</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 3: data collection dates of timepoint 1 (2 generation)

<table>
<thead>
<tr>
<th>Timepoint (3 generation)</th>
<th>Date</th>
<th>number of formative process eval. questionnaires collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Induction phase as a new REFUGIUM team member</td>
<td>08.04.17</td>
<td>3</td>
</tr>
<tr>
<td>Peer facilitator training (PFT)</td>
<td>09.05.17</td>
<td>3</td>
</tr>
<tr>
<td>Didactical peer facilitator training (DPFT)</td>
<td>23.05.17</td>
<td>3</td>
</tr>
<tr>
<td>Applied peer facilitator training (APFT)</td>
<td>24.05.17</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 4: data collection dates of timepoint 2 (3 generation)

Figure 5: data collection of research study
3.7.2 Data analysis in case study research

3.7.2.1 Data analysis in case study research: Participatory Observation

The data analysis process for the case study approach was conducted according to the case study literature of Yin and Creswell (Creswell, 2013, p.105; Yin, 2014, p.222; (Creswell, 2013, pp. 190-191). At an early stage in the data analysis process the observation notes were scanned and were saved as image photographs. In the next step computer files were created and multiple sources as participatory observation field notes and team meeting documentations were organized by typing all the hand-written notes into a Microsoft word file. Some notes were in German, some in English, so the notes in German were translated to English. All data were converted into appropriate text units as full sentences (Creswell, 2013, p. 182). After organizing the data, it was important to get an overview and understanding of the database, therefore the data was read multiple times. Following reading the data, the next step involved describing, classifying, and interpreting the data into categories and themes (Creswell, 2013, p.190-191). The data which was collected during second and third generations was aggregated deductively into 4 themes as the induction phase for new REFUGIUM Team members (unit 1), Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3), Applied peer facilitator training (APFT) (unit 4). In each theme 4 subthemes were developed inductively out of the data, which derived from process management literature (Rank and Neumann, 2017, p 38, p.16): current situation, resources, barriers and solutions for each theme. Thus, basic aspirations were organized along for all units.

In order to explore the content memos were written in the margin of the field notes and team meeting documentations. These memos were to the four themes: induction phase for new REFUGIUM tTeam members (unit 1), Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3), Applied peer facilitator training (APFT) (unit 4) and four subthemes such as the current situation, resources, barriers and solutions, distinguishing between second generation and third generation for comparison. These informations and participatory observation field notes were used to write an observation protocol (see appendix 2). The observation protocol was written regarding the four themes. In order to complement the
observation protocol with the ideas and observations of the other 3 REFUGIUM team members the results of the survey were used. The Results of the survey were used to validate and complement the observation protocol written by researcher of this study (see figure 6). The observation protocol was used as raw data to write the case study evaluation. The case study evaluation starts "by capturing the complexity noting" (Yin, 2014, p. 222) the REFUGIUM program and the units as well as the REFUGIUM team carrying out the program. Further to the 4 themes another 4 subthemes were explained. The current situation of the subtheme explains the how and why of the implementation process, which comprises of the actions that occur in chronological order. In the next step insights about the subthemes ressources, barriers and solutions are provided (yin, p 222).

The intepretation included direct interpretation and from lessons learned from each unit program processes tools for each unit were developed. (Creswell, 2013, Page 179 ff.)

3.7.2.2 Data analysis of survey: formative process evaluation questionnaire

In the first step of the data analysis process, 24 formative process evaluation questionnaires were downloaded. They were already available as word files. In order to get an overview and understanding of the database the 24 questionnaires were read multiple times. A file was created in which all answers were listed from 3 team members. The results of the formative process evaluation questionnaire for each unit were used to complement the observation protocol, description of case study, precisely 4 themes and 4 subthemes. From the questionnaire the chronology of activities derived for the program management tools.

In the final phase of the data analysis, the data is represented in the figure 7 illustrated below. The illustration (see figure 7) shows deductive analysis that begins with the raw data consisting of multiple sources of information and then is categorized into to several specific themes and subthemes. Resulting in products namely the program management tools and belonging instructions for each unit (Creswell, 2013, p.18).
Figure 6: Convergent Parallel Mixed Method design after Cresswell (2014, p.220)

<table>
<thead>
<tr>
<th>Products</th>
<th>REFUGIUM Manual Program Management tool unit 1 Induction phase as a new REFUGIUM team member &amp; Instruction</th>
<th>REFUGIUM Manual Program Management Tool Unit 2 Peer facilitator training (PFT) &amp; Instruction</th>
<th>REFUGIUM Manual Program Management Tool Unit 3 Didactical peer facilitator training (DPFT) &amp; Instruction</th>
<th>REFUGIUM Manual Program Management Tool Unit 4 Applied peer facilitator training (APFT) &amp; Instruction</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Themes</th>
<th>unit 1 Induction phase as a new REFUGIUM team member</th>
<th>Unit 2 Peer facilitator training (PFT) &amp; Instruction</th>
<th>Unit 3 Didactical peer facilitator training (DPFT) &amp; Instruction</th>
<th>Unit 4 Applied peer facilitator training (APFT) &amp; Instruction</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3.7.3 Development and implementation of strategy (Second and third phase of Public health action cycle)

Findings of the formative process evaluation in the context of a multimethod case study research identified the current situation, resources, barriers and solutions for each task of each unit of program. Therefore, the needed strategy was developed in the form of program process tools (See figure 10). In the third step the tools were applied. For this process the following method from the project management literature (Project management Institute, 2013; Maylor, 2010) was used:

"an ongoing work effort is generally a repetitive process that follows an organization’s existing procedures" (Project Management Institute 2013, p.3). A basic part of project management is to break down large activities into manageable units (Project management institute 2013, p.3; Maylor, 2010, p.106). These are called work breakdown structures and they give a first overview of the project process (Project management institute 2013, p.3; Maylor, 2010, p.106). In the next step further details in regards to the processes and their interaction are added and that process constructs a process map (Project management institute 2013, p.3; Maylor, 2010, p.106). Thus, project management is established by converting the broad outline of the program into a process map (Project management institute 2013, p.3.; Maylor, 2010, p.106). The process map (Maylor, 2010, 106) is developed by identifying constituent activities and organizing them into a logical sequences of tasks (see figure 9) (Project management institute 2013, p.3; Maylor, 2010, p.106). Each task is organised in regard to its needed resources (documents, materials) and responsibilities (team members) that will be used to carry out the task (Maylor, 2010, p.106; Maylor, 2010, p.116; Project management institute 2013, p.3). This process requires consultation and approval of all team members to refine the plan (Maylor, 2010, p.106; Maylor, 2010, p.116; Project management institute 2013, p.3).

In project management practice the ICOMs model is used to illustrate how the planning process is analyzed by considering the inputs, controls, outputs and
mechanisms (ICOMs) (see figure 8) (Maylor, 2010, p. 29). The input in this case is the project brief; in this study it is the observation protocol and will be used to develop the output. The output is the project plan, more precisely the project management tool. The controls provide the activation, constraints and the quality standards for the planning process (Maylor, 2010, p. 29). The mechanisms represent the resources by which the process can be conducted (Maylor, 2010 p. 29).

**Controls**

<table>
<thead>
<tr>
<th>Input</th>
<th>Outputs</th>
</tr>
</thead>
<tbody>
<tr>
<td>project brief</td>
<td>project plan</td>
</tr>
<tr>
<td>tools and techniques</td>
<td>standards/procedures</td>
</tr>
</tbody>
</table>

**Mechanisms**

Figure 8: Activity model using ICOMs (Maylor, 2010, p. 106)

- Determine logical sequence of activities
- identify constituent activities
- present the plan in a readily intelligible format
- prepare estimates of time and resources required to complete project

Figure 9: The project planning process (Maylor, 2010, p. 106)
Figure 10: Data collection and development of project management tool
3.7.4 Evaluation (Fourth phase of Public health action cycle)
In the last step the implemented strategy is evaluated by an assessment of useability of unit 1-4 program processes tools by users with a questionnaire.

4. Results

4.1 Results: Assessment of needs (first phase of public health action cycle)

4.1.1 REFUGIUM program work themes
The REFUGIUM program is structured in 8 main work themes:
1. Concept, management, and evaluation
2. Participatory development, translation and validation of flyers and manuals in relevant languages for refugees
3. Publication of flyers and manuals in cooperation with Budrich publishers as freeware on the homepage www.refugium.agency.
4. Fundraising, purchase and provision of materials, which are needed for trainings and workshops
5. Conduction and formative evaluation of REFUGIUM peer facilitator training
6. Organisation and implementation of workshops in refugee accommodations by communicating with Peer Facilitators and social management workers
7. Establishment of a functioning network with practice partners (social management of refugee accommodations and health administrations, health care providers, NGO's).
8. Establishment of a structure in which Peer Facilitators are empowered with the support of the researcher and team members (including personal, bureaucratic, and emotional support) to become part of the REFUGIUM team as volunteer workers (BUFDI) or guest lecturers at university and work successfully.

4.1.2 REFUGIUM units
The REFUGIUM program is structured in 4 units and the settings of these units are HAW and specific refugee accommodations. The first unit is the induction phase for new REFUGIUM team members which comprises of the introduction and is a step to get familiar with the content of the program and integrate oneself into the program for
new REFUGIUM team members. The unit 2, unit 3 and unit 4 are the three stages, which have to be accomplished by participants to be qualified as a peer facilitator. The second unit is the Peer facilitator training (PFT) unit in which refugees are trained in 6 health topics. From an organisational point of view the second unit comprises of the following three parts: kick-off meeting, peer facilitator training and a farewell party. The third unit is the Didactical peer facilitator training (DPFT) in which peer facilitators (PF) are trained about theory on how to conduct workshops and is an opportunity to conduct exercises in didactics. The fourth unit is the Applied peer facilitator training (APFT) in the form of the production of accompanied workshops by peer facilitators, trainers and HAW staff in refugee accommodation.

1- Induction phase for new REFUGIUM Team members
2- Theory on 6 topics
3- Theory and exercise on didactics
4- Applied training - workshops in refugee accommodation

<table>
<thead>
<tr>
<th>Unit</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Themes</strong></td>
<td>Induction phase for new REFUGIUM Team members</td>
<td>Peer facilitator training (PFT)</td>
<td>Didactical peer facilitator training (DPFT)</td>
<td>Applied peer facilitator training (APFT)</td>
</tr>
<tr>
<td><strong>Setting</strong></td>
<td>HAW</td>
<td>HAW</td>
<td>HAW</td>
<td>Refugee accommodation</td>
</tr>
<tr>
<td><strong>Contents</strong></td>
<td>Introduction and getting familiar with REFUGIUM program for team members</td>
<td>Refugees are trained in 6 health topics - theory on topics</td>
<td>Peer facilitator (PF) are trained how to conduct workshop - theory and exercise on</td>
<td>Peer facilitator, trainer, HAW staff conduct workshop in refugee accommodation</td>
</tr>
</tbody>
</table>
4.1.3 REFUGIUM team

In the period from February 2017 till June 2017 the REFUGIUM program coordinator Prof. Dr. Färber, delegated the responsibility to plan, implement and evaluate the upcoming second and third generation to 4 REFUGIUM team members (Sameer, Soni, Monica, Montaha). Synonyms for the 3 REFUGIUM team members were used to save their identity. Monica (internee and master of health science studies at HAW), and Sameer (refugee and health peer facilitator of first generation, federal volunteer (BUFDI)) were REFUGIUM team members for as long as four months prior to Soni (internee and master of health science studies at HAW) and me (internee and master of health science studies at HAW and researcher of this study). Additionally, those of us studying health science as master’s students (Monica, Soni and Montaha) acted as participant observants and researchers.

The REFUGIUM team included two health peer facilitator trainers: Sameer, a federal volunteer worker in the field of refugee health, and Sami, a guest lecturer and a peer facilitator trainer. Team members from the university were: Soni, Monica and myself and we acted as persons responsible for the the workshops and trainings, as student facilitators and researchers. Additionally, Dr. Omar Aboelyazied supported the training of both generations and the undertaking of workshops in various refugee accomodations in the role of a lecturer of the module "Evaluation im Gesunheitswesen". The students and lecturer of the module were involved in evaluating the workshops and peer facilitator training at the university of both generations.

4.1.4 Assessment of current situation: Need of this study

Even though the program was implemented for the first generation it had no program management tool in which information was given about what must be done, how,
when, by whom, and which resources are needed to carry out the program (Maylor, 1999, p.6). The situation of the REFUGIUM program was as followed: there was a lack of funding, program-management, project coordination, there was no programme management tool in which the program processes of each unit were documented. As we were all new team members, who were inexperienced in this field the project coordinator held regular team meeting and gave us oral instructions. But the missing project management tool lead to a higher dependency on the project coordinator. As the project coordinator was head of department and professor for many students her time was limited and that was a challenge for the team. The REFUGIUM team members had to cope with structural and organisational barriers. Some resources existed but many resources as materials and documents were not available or developed. Thus the implementation of all units especially during the second generation were highly challenging and time consuming. For example, it took 19 hours for 4 team members to prepare for one training day during the second generation. In order to decrease the preparation time and be efficient the REFUGIUM program was in need of a strategy. More precisely the Program was in need of formative process evaluation to identify/assess the challenges and resources faced in the implementation process of each unit during timepoint of second and third generation. The aim was to establish project mangement and make implementation efficient for the third generation as well as future generations. To answer this question it was important to recognise the program processes, meaning the common action that cuts across program activities, observed interactions and program content (Patton, 2002, p. 474).

4.1.5 Assessment of main resources, challenges, solutions
The identification of resources, challenges and solution of the program are required to develop the project management tool. The analysis of data shall identify which material and documents have to be developed and organised systematically for each unit. A solution was suggested to develop a program processes tool for unit 1, 2, 3, and 4. Material and documents were organised systematically for each unit individually.
In table 3 it is shown in a comprised way.
<table>
<thead>
<tr>
<th>2. Existent resources</th>
<th>3. Challenges</th>
<th>4. Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>publication and background about REFUGIUM program</td>
<td>undocumented program processes unit 1-4</td>
<td>material and documents have to be developed and organised systematically for each unit and program processes tool for unit 1,2,3,4 have to be developed</td>
</tr>
<tr>
<td>multilingual flyers and manuals health guideline hardcopy</td>
<td>missing electronic and hardcopy documents for unit 1-4</td>
<td></td>
</tr>
<tr>
<td>electronic plattform EMIL HAW Flüchtlingsgesundheit W 17</td>
<td>unmaintained electronic plattform EMIL HAW Flüchtlingsgesundheit W 17 for unit 1-4</td>
<td></td>
</tr>
<tr>
<td>materials in rooms N5.29 (cupboard 10) and 2.09</td>
<td>not organised in systematic order materials in rooms N5.29 (cupboard 10) and 2.09 - bags for workshop</td>
<td></td>
</tr>
<tr>
<td>mobile phone for sending SMS, whatsapp messages to PF</td>
<td>not functioning mobile phone</td>
<td></td>
</tr>
</tbody>
</table>

Figure 11: Assessment main resources, challenges, solutions
4.2 Results: Development of Program Management tool (Second phase of public health action cycle)

![Figure 12: developed strategy for REFUGIUM program](image)

4.2.1 Development of Program Management tool concept
This concept visualizes the second step of the public health action cycle. The developed strategy was applying program management tools for unit 1, 2, 3, and 4 by using developed and existent resources of REFUGIUM program. The tool is used for implementation of the 4 units in the REFUGIUM program in order to make implementation effective, less time consuming and sustainable. The aim of the tool is to provide information about what has to be done, how, by using which resources, when and by whom. As a result of this the new REFUGIUM team members are able to conduct and implement the processes successfully.

The results of the case study regarding each phase explains the "how and why of the implementation process- tracking that actions that occur over time as well as providing insights into the likely strength, timing, and fidelity of the initiative" (Yin, 2011, p.). The complex activities of the REFUGIUM program were broken down into manageable chunks (Maylor, 1999, p.61) to determine a logical sequence of tasks. In basic project management literature, it is stated that breaking down of large activities into manageable units is a fundamental part of project management (Maylor, 2010, p.116; Project Management Institute, 2013, p.4).

The program management tools of the REFUGIUM program gives information, which tasks have to be conducted in which chronology and provide resources required for the task. The program management tool is dependent on 2 components and has to
be used respectively. Firstly all identified documents and materials for each unit were developed. In the second step, documents were incorporated systematically in EMIL HAW Flüchtlingsgesundheit W 2017 (electronic ressources) and the developed materials were stored in systematic order in room N5.29 and N2.09. The tool is used with the ressource platfform EMIL HAW and material ressources in room N5.29 and N2.09. Constant maintainance of documents and materials is needed.

4.2.2 Development of program management tool categories

According to Maylor (2010) program management tools (working plans) are constructed with various information fields, for example team members, the logical steps of an activity, and the standards that apply for each task (Maylor, 2010, p.116). From the formative process evaluation questionnaire 9 categories derived for the program management tool of each unit. The first category states the steps of the task, the second the time frame it will take place such as the start, during, or after. The third category names the task, the fourth “FROM WHERE OR WHOM TO GET” gives information from where or from whom the needed document or material is to be retrieved to perform the task. In the fifth category the electronic or hardcopy document is listed with the exact name the document has in EMIL HAW Flüchtlingsgesundheit W 17 or in the office N5.29 or room N2.09. In the sixth category HOW/ Material it is stated which material is needed and the detailed description about how to perform the task. In the seventh WHO (number team members) it is stated how many members are needed to carry out the task. In the eight category there is space for a comment about the task or a precaution. Lastly in the ninth section “What should be coplemented?” the users are asked how to complement this task or what is still missing.

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/ Material</th>
<th>WHO number team members</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
</table>

Table 6: 9 categories of the program management tools
4.2.3 Detailed description how to develop program management tools

The process for developing program management tools involves many steps in a chronological order. Therefore a framework with steps in the chronology from A to M was built for illustration (see figure 13). The process requires constant monitoring and documentation and the involvement of the REFUGIUM team and program coordinator. That requires the assessment of the current situation, resources, barriers and development of solutions for each task of each unit (induction phase for new REFUGIUM Team members (unit 1), peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3), Applied peer facilitator training (APFT) (unit 4)) of the program. Hence, identification of barriers and resources happens parallel to the implementation of the strategy. The development of needed documents and materials for each task of all units requires planning and discussing, approval with both team and project coordinators in a team meeting. The REFUGIUM team members work as a team through each task of each unit of the program. Whilst working through the units the chronology of steps, the barriers and resources are identified. In a team meeting the REFUGIUM team members discuss the identified barriers and develop solution proposals in regard to needed material and documents. In the next step the barriers and developed solution proposals are presented to the program coordinator in a meeting in order to discuss and consult. As a result of this the discussed solutions (documents & materials) are developed under supervision of the program coordinator and are presented again to the program coordinator for approval. Hence, needed material and documents are developed for each task of each unit by the REFUGIUM Team. Thus, participatory development and validation are ensured. In the next step documents are incorporated systematically in EMIL HAW Flüchtlingsgesundheit W 2017 (electronic resources) and the developed materials are stored in systematic order in room N5.29 & N2.09. Throughout the implementation phase these steps are documented in an observational protocol and a survey is conducted with team members. The written observational protocol is complemented with the results of survey. In order to create tools a table in word with 9 categories is designed. In the last step, tasks are listed in chronolgy with indication of required resources (documents & material). The chronology of tasks derived of the observation protocol and findings of questionnaires. Thus program management tool for unit 1, 2, 3, and 4 and corresponding instructions are created. For establishment of sustainability it is required to constantly update and improve the documents and
materials according to latest state of program needs; moreover, the update of program management tools regarding new steps.
Documentation of A to G necessary for writing the observational protocol

Distributing the formative evaluation questionnaire (survey) to team members throughout implementation phase

H. complementation of written observational protocol with results of survey
I. creating tools in form of tables in word with 9 categories
J. Listing tasks in chronology with indication of required resources in tool of units 1 to 4
K. Result: REFUGIUM program management tools for unit 1, 2, 3, 4 and instructions
L. Sustainability: constant update and improvement of documents and materials according to latest state of program needs
M. Sustainability: constant update of program management tools regarding new steps and resources

Figure 13: Framework of the process of development of program management tools in the REFUGIUM program
4.3 Results: Implementation of strategy (Third phase of public health action cycle)

4.3.1 Unit 1 Induction phase for new REFUGIUM Team members
In unit 1 REFUGIUM team members go through 6 activities/processes to conclude the unit. In the following each activity will be elaborated.

<table>
<thead>
<tr>
<th>Current situation unit 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
</tbody>
</table>

Table 7: current situation unit 1

1. Facilitate initial organisation

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>-access to electronic platform</td>
<td>experienced team members and coordinator</td>
<td>-listing steps with information</td>
</tr>
<tr>
<td></td>
<td>physical room</td>
<td></td>
<td>-key contract link was searched and provided as ressource</td>
</tr>
<tr>
<td></td>
<td>-emitting contracts</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-confusion</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-time consuming</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-dependency on experienced team members and coordinator</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-key contract existed not as electronic resource</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current situation

In the initial organisation phase the new REFUGIUM team member should be familiar with the REFUGIUM program and many steps have to be accomplished. There are tasks regarding organising oneself such as accessing the electronic plattform HAW EMIL Flüchtlingsgesundheit 17 and, getting access to rooms by filling out the key contract signed by CF, getting the key by emitting key contract to facility manager and internship contract to the faculty office to receive payment for the internship.
Barrier
Going through these step is both confusing and time consuming for new REFUGIUM team members, because the knowledge about responsible persons and places was not documented and new team members were dependent on the knowledge given by other team members or coordinator. The needed key contract link did not exist as a resource in electronic platform.

Ressource
The support of prior team members and CF.

Solution
By listing all of these steps providing information regarding the standards that apply for each task. The link for the key contract was searched and the information was documented in the program management tool. As a result time and resources can be saved.

2. Emotional preparation

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>-responsibility to work with vulnerable group -conflicts and challenges are faced</td>
<td>-emotional challenge -feeling lost -no support tool -publication not uploaded -complexity of program</td>
<td>REFUGIUM programme publications</td>
<td>-emotional preparation with coordinator in meeting -documents developed and uploaded: a) -Content of meeting before working as a REFUGIUM team member by Montaha Neuhaus.pdf b) REFUGIUM ethical guidelines</td>
</tr>
</tbody>
</table>

Current situation
REFUGIUM team member is assigned to work as a responsible person and conducts research in a health promotion program with a vulnerable group like refugees or team members with refugee background. Lack of motivation is observed in team members. Conflicts occur in the team while working through the units.

Barrier
The new REFUGIUM team member have the responsibility of working in a complex program and is not aware of the related challenges and resources for working with a
vulnerable group. Moreover, conflicts occur in the team, because team members are of different status and culture and are often not aware of their role in the programme (observation protocol, p.189). To work in a multicultural setting with a vulnerable group is emotionally challenging. My Memos showed that team members felt lost, because no information was provided about what their responsibility would be and which ressources exist that would help them out (observation protocol, p.189). The program coordinator held no meeting to prepare new REFUGIUM team members emotionally and motivate them to work in a complex program and demanding setting. There were no documents provided, which inform them about how to work with a vulnerable group or with team members like ethical values in the REFUGIUM program.

**Ressource**

Publications about the REFUGIUM program existed, but was not uploaded.

**Solution**

The emotional preparation is a process and new team members require support of project coordinator and provision of publications and developed documents. The REFUGIUM team members who are interested in working in the program need to be sentisised and intrinsically motivated to work in a setting and target group which might be demanding. Information needs to be provided in a meeting that enlightens and motivates new team member to work in REFUGIUM programme. There are several of elements, which make the REFUGIUM program complex (observation protocol, p.). The complexity elements of the REFUGIUM program determines the success and failure of the work in the REFUGIUM program, therefore they need to be discussed with new REFUGIUM team members. For this purpose, a document entitled "content of meeting before working as a REFUGIUM team member by Montaha Neuhaus.pdf" in regard to the themes: REFUGIUM program, its aim, the role of REFUGIUM team members, considerations about working with vulnerable group and requirements was developed by the researcher in the context of this research (chapter 5). The themes in the document represent recommended solution to the identified conflicts and challenges while working through two generations. It is the responsibility of the program coordinator, by using this document as reference, to prepare new team members emotionally to work with a vulnerable group. Additionally, the document’s ethical guidelines of the REFUGIUM program was developed by Sameer, the volunteer worker, which informs new team members
about the ethical values in the REFUGIUM program. Sameer, being a responsible REFUGIUM team member was also member of a vulnerable group and it was decided as REFUGIUM team and project coordinator that the ethical values should be of his point of view.

Furthermore, the new team members should have read through ethical guidelines and studied regarding the risks and resources influencing mental health of refugees in Hamburg of Neuhaus et al, 2016. The three documents:

The REFUGIUM ethical guidelines, content of meeting before working as a REFUGIUM team member by Montaha Neuhaus.pdf, and publications of the REFUGIUM program were uploaded.

3. Theoretical preparation

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>- reading through background</td>
<td>-documents not uploaded in platform</td>
<td>REFUGIUM background documents,</td>
<td>-documents uploaded</td>
</tr>
<tr>
<td>- research on participatory research</td>
<td>- research is demanding</td>
<td></td>
<td>-provision of study</td>
</tr>
</tbody>
</table>

**Current situation**

New REFUGIUM team members are provided with the documents regarding the background of the REFUGIUM program and were asked to be read through. Secondly, they should conduct a literature research on the method of participatory action research to inform themselves.

**Barrier**

The REFUGIUM background documents were not uploaded in the electronic platform EMIL HAW Flüchtlingsgesundheit W17.

The literature research about participatory research is both sophisticated and time consuming.

**Solution**

Existent REFUGIUM background documents and study about participatory research was searched and uploaded in EMIL HAW Flüchtlingsgesundheit W17.

4. familiarization with resources

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>get familiar with</td>
<td>-documents not uploaded</td>
<td>manuals, flyers</td>
<td></td>
</tr>
</tbody>
</table>
Current situation
It is important to become familiar with resources such as the program flyer, manuals, the electronic platform HAW EMIL Flüchtlingsgesundheit W17 and materials in the rooms 2.09 and 5.29.

Barrier
It was observed that the platform was not maintained according to the current status of the program, so that documents can be found and incorporated in systematic order. The sections were missing and flyers as well as manuals were not uploaded in EMIL HAW Flüchtlingsgesundheit W2017. As new team member knowledge regarding the setting and resources is not provided.

Ressource
Manuals and flyers existed.

Solution
The platform EMIL HAW Flüchtlingsgesundheit W2017 needs to be organised according to the latest status of the program so that it can be used by new team members. Sections were named and documents such as flyers and manuals were incorporated accordingly: organisation, invitation and advertisement poster, manuale 2017, flyer 2017, refugium training/ workshop material, project management Bergedorf, project management Berliner tor, Werkverträge, publication about REFUGIUM Program, health guideline, unit 1, unit 2, unit 3, unit 4 (Picture 1). As shown below.
5. prearrangement for work

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>responsibility of organisational tasks</td>
<td>no preparation documents got lost</td>
<td>manuals, flyers</td>
<td>file with manuals &amp; flyers file for documents</td>
</tr>
</tbody>
</table>

**Current situation**

The team members receive the responsibility to be a person in charge and conduct training, workshops, and for organisational tasks. They need to carry manuals and flyers to the training sessions and workshops.

**Barrier**
REFUGIUM team members forgot manuals and flyers to take to the trainings and workshops. Important documents got lost, because they were not filed.

**Ressource**

Manuals and flyers existed

**Solution**

It is recommended to make one’s own file with the flyers and manuals and a file in the office to file all important documents regarding the internship and the REFUGIUM program. As shown below.

![Image](image.jpg)

**Figure 15: file for flyers and manuals**

### 6. Evaluation

In order to improve the program in each phase evaluation has to be performed. At the end of the unit the new team member fills out the formative process evaluation questionnaire and uploads it in the file of unit one in EMIL HAW Flüchtlingsgesundheit W 2017.

<table>
<thead>
<tr>
<th>No</th>
<th>Unit</th>
<th>Document electronic</th>
<th>Tool</th>
<th>In total</th>
</tr>
</thead>
</table>
| 1  | Induction phase for new REFUGIUM Team members | - Refugium Background (6 existent documents)  
- Induction document for new REFUGIUM team members by Montaha Shafiq. N.pdf (Appendix 5)  
- Publication about REFUGIUM program (Appendix 6-7) | REFUGIUM Manual Program management tool unit 1 Induction phase for new REFUGIUM Team members | 12 |
Table 8: Summary of uploaded documents in EMIL HAW for unit 1 Induction phase for new REFUGIUM Team members

4.3.1.1 Instruction of REFUGIUM Program Management tool unit 1

**Instruction of REFUGIUM Program Management tool unit 1 Induction phase for new REFUGIUM Team members**

The REFUGIUM Manual Program Management tool unit 1 Induction phase for new REFUGIUM Team members comprises of 5 steps and 3 pages.

**Content** - Unit 1 represents the phase whereby one becomes familiar with the content of program and integrates oneself into the program.

**Aim** - The accomplishment of unit 1 should enable new REFUGIUM team members to work successfully in the program by being emotionally and theoretically prepared resulting in highly motivated team members.

**Resources** - The resources (documents) required for this unit are found in the section of EMIL HAW Flüchtlingsgesundheit W2017: Unit 1 Induction phase for new REFUGIUM Team members.

**Structure** - Unit 1 comprises of one part.

**Sustainability** - Constant update regarding new steps and resources (documents and materials), according to the latest state of the program is needed. REFUGIUM team members consult about needed changes with program coordinator. Responsible person for facilitating changes is the program coordinator.

1 - 1.3 - Facilitate initial organisation

These steps provide knowledge in regard to organising oneself into the program, like getting access to the electronic platform Emil HAW and to the rooms N5.29 and N.09 and emitting internship contract to faculty office in order to get paid for the work.

2 - 2.2 - Emotional preparation

These steps shall enable the new team member to be sensitized to work and conduct research in a health promotion program with a vulnerable group like
refugees, of which many prejudices still exists. In a meeting the program coordinator discusses with the new team members the document "Induction document for new REFUGIUM team members by Montaha Shafiq. N.pdf". The document lists facts which will intrinsically motivate new team members to work in a setting and target group, which might be demanding. The coordinator enlightens new team members about the aims of the REFUGIUM program and which role they will play and which importance their work will have in achieving these aims. The REFUGIUM program gives voice to individuals who may be marginalised or excluded. It promotes the full participation of vulnerable individuals and groups in developing and by conducting the program. As a REFUGIUM team member they will be part and creator of such a setting in which refugees are being welcomed appreciated and empowered, where psychosocial development and self-determination particularly among vulnerable individuals will be promoted. They will be working for a higher cause, besides promoting refugees health also promoting the integration of migrants into German society resulting in peaceful coexistent. In order to achieve these goals organizational tasks and character traits like patience, courage, open-mindedness, and creativity are important for the REFUGIUM team members. REFUGIUM team members should be aware of these traits, because they will be demanded from time to time during work (precondition). Aims of this meeting are to prepare new team members emotionally and motivate them to work in the REFUGIUM program with refugees and REFUGIUM team members. Additionally, new team members should read through the REFUGIUM ethical guidelines (2.1) and the publication study regarding the risks and resources influencing mental health of refugees in Hamburg of Neuhaus et al, 2016. For this to work, the knowledge regarding the target groups current situation, problems and needs is essential. This publication will inform them about refugees as people who are healthy people, but who have fears and hopes due to their vulnerable circumstance. In result they will be able to overcome possible pre-existing "dangerous images" and prejudices regarding refugees.

3 - 3.1 - Theoretical preparation

New REFUGIUM team members read through the REFUGIUM background, which represents an introduction into the content and progress of the program. Reading through the study about the participatory action research will help members to understand the used study design of REFUGIUM program and informs how to research, work, observe and behave in such a program.
4 - 4.5 - Familiarization with resources and setting
Moreover, they will become familiar with manuals, flyers, electronic platforms, and the room N5.29, materials in room 2.09 Cupboard 1, materials in room 2.09, Cupboard 10, and finally the printing room.

5 - 5.1 Prearrangement for work
As REFUGIUM team member one is responsible for conducting the training and workshops and therefore it is beneficial to prepare a file with manuals and flyer for themselves and prepare a file in office with one’s name to file all important documents regarding their internship or work.

6 Evaluation
In order to further improvement the program evaluation is performed and documented. In the end of unit 1 the formative process evaluation questionnaire is filled out and uploaded in HAW Emil Flüchtlingsgesundheit W17.

UNIT 1 Induction phase for new REFUGIUM Team members

4.3.1.2 REFUGIUM Program Management tool unit 1 Induction phase for new REFUGIUM Team members
# REFUGIUM Program Management tool unit 1 phase for new REFUGIUM Team members

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team members</th>
<th>Comment</th>
<th>What should be complented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>start</td>
<td>Get access to electronic resource EMIL HAW Flüchtlingsgesundheit 2017 and email account: <a href="mailto:Refugium_Info@haw-hamburg.de">Refugium_Info@haw-hamburg.de</a></td>
<td>Frau Prof. Dr Christine Färber Program coordinator of REFUGIUM program Abbreviated in this document with CF</td>
<td>Ask CF for key in EMIL HAW and password of email account</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1</td>
<td>start</td>
<td>Get access to rooms N5.29 and N2.09 by signing the key contract</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: Unit 1 <a href="https://www.haw-hamburg.de/?id=27525">https://www.haw-hamburg.de/?id=27525</a></td>
<td>key contract/ Schlueselausgabe.pdf Key contract has to be signed by CF</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2</td>
<td>start</td>
<td>Give signed key contract to facility manager and get key</td>
<td>Gebäude Ulmenliet 20 Hausmeisterei, EG, Room 0.50 key contract/ Schlueselausgabe.pdf</td>
<td>Make a copy for your file</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3</td>
<td>start</td>
<td>Give internship contract (Hilfskraftvertrag) for payment to Fakultätservicebüro discuss workplan with CF</td>
<td>Verwaltung Fakultätservicebüro Ulmenliet 20 21033 Hamburg Rooms 0.12, 0.14 CF</td>
<td>contract has to be signed by CF</td>
<td>1 Internship contract you get from head of department at HAW</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>start</td>
<td>Visit Meeting with program coordinator</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: Unit 1</td>
<td>Induction document for new REFUGIUM team members by Montaha Shafiq. N.pdf The document has to be discussed</td>
<td>2 The goal of this meeting is to motivate and inform new team members about work in REFUGIUM program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1</td>
<td>start</td>
<td>Read trough REFUGIUM ethical guidelines</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 1</td>
<td>ethical guidelines</td>
<td>1 A draft is available, new version is in process</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/ paper)</td>
<td>HOW/Material</td>
<td>WHO number of team members</td>
<td>Comment</td>
<td>What should be complemented?</td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>------</td>
<td>---------------------------</td>
<td>-----------------------------</td>
<td>--------------</td>
<td>--------------------------</td>
<td>---------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>2.2</td>
<td>start</td>
<td>Read trough REFUGIUM publications</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 1</td>
<td>-POSTER mental health of refugees (Neuhaus, Sainju, Günsche, Färber) 2016.pdf -Refugee Health Awareness and Empowerment Program in Hamburg, Germany.REFUGIUM. Christine Faerber-2.pdf</td>
<td>1</td>
<td>introduction into the program content and progress</td>
<td>Documents need to be translated into english</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>start</td>
<td>Read trough REFUGIUM Background</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 1 File: REFUGIUM Background/ Hintergrund</td>
<td>Arbeitsb-.pdf CFP_2017_pdf Faerber-.pdf Präsentation.pdf REFUGIUM.pdf REFUGIUM.pdf Steckbrief.pdf</td>
<td>1</td>
<td>Understanding and knowledge about REFUGIUM programm is compulsory</td>
<td>Documents need to be translated into english and uploaded into this file</td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>start</td>
<td>Get informed about participatory action research</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 1</td>
<td>Baum, F., MacDougall, C., &amp; Smith, D. (2006). Participatory action research...pdf</td>
<td>1</td>
<td>Informs about study design and how to work and behave in such a program</td>
<td>Further readings can be added by CF</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>start</td>
<td>Read through manuals and flyers</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: Manuale 2017 Section: Flyers 2017</td>
<td>File: English, Deutsch, Arabisch, Farsi, Russisch, Albanisch, Turkish File: Flyer internet</td>
<td>1</td>
<td>knowledge about all sections and documents is compulsory to work in REFUGIUM program</td>
<td>Urdu, Spanish, French is in process</td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>start</td>
<td>Go through all sections in EMIL HAW Flüchtlingsgesundheit 2017</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
REFUGIUM Program Management tool unit 1 phase for new REFUGIUM Team members

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team members</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2</td>
<td>start</td>
<td>Become familiar with material in room N5.29 Cupboard &amp; shelf</td>
<td>office N5.29</td>
<td>- Flyers Thermos - Water bottles - Health guide - 7 Files</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.3</td>
<td>start</td>
<td>Become familiar with material in room 2.09 Cupboard 1</td>
<td>Key is in the office N5.29</td>
<td>- posters materials</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.4</td>
<td></td>
<td>Become familiar with material in room 2.09 Cupboard 10</td>
<td>Key is in the office N5.29</td>
<td>workshop bag child care materials</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.5</td>
<td>start</td>
<td>Become familiar with printing room</td>
<td>Key is in the office N5.29</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>start</td>
<td>Prepare a file with manuals and flyer for yourself</td>
<td>Manuals and flyer in room N 5.29 File from Dekanat</td>
<td></td>
<td>1</td>
<td>Carry your own file to training and workshops</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1</td>
<td>start</td>
<td>Prepare a file in office with your name</td>
<td>File from Dekanat</td>
<td>file all documents regarding internship</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>End of unit 1</td>
<td>Fill out the formative process evaluation questionnaire</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 1 File: evaluation formative process evaluation questionnaire.pdf</td>
<td>1.fill out 2.upload in file</td>
<td>1</td>
<td>In order to improve the program (perform evaluation)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

63
4.3.2 Unit 2 Peer Facilitator Training (PFT)

In unit 2 REFUGIUM team members go through 28 activities/processes to conclude the unit. In the following each activity will be elaborated regarding the subthemes, the current situation, barriers, resources and solutions.

<table>
<thead>
<tr>
<th>Current situation unit 2 Peer Facilitator Training (PFT)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisation of kick off event</strong></td>
</tr>
<tr>
<td>No.</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>

**Organisation of peer facilitator training (PFT)**

<table>
<thead>
<tr>
<th>No.</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Facilitating advertisement electronically</td>
</tr>
<tr>
<td>12</td>
<td>Preparation of workshop bags, materials &amp; resources for training</td>
</tr>
<tr>
<td>13</td>
<td>Contact participants and trainers</td>
</tr>
<tr>
<td>14</td>
<td>Organisation of catering</td>
</tr>
<tr>
<td>15</td>
<td>Updating and printing of needed documents</td>
</tr>
</tbody>
</table>
Table 9: current situation of unit 2

1. Determination of dates, place and staff
2. Arrangement of staff and place

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>CF decides dates, place and staff</td>
<td>-participant list missing</td>
<td>Coordinator</td>
<td>-listing steps with Information</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>-upload of participant lists</td>
</tr>
<tr>
<td>Arrangement of childcare, HPF &amp; rooms</td>
<td>-knowledge not provided</td>
<td>HPF of 1 generation, CF</td>
<td>Provision of knowledge</td>
</tr>
<tr>
<td></td>
<td>-participant list missing</td>
<td>-pencils, balls</td>
<td>Upload of participant lists</td>
</tr>
<tr>
<td></td>
<td>-no child care bag</td>
<td></td>
<td>-child care equipment</td>
</tr>
</tbody>
</table>

**Current situation**

The project coordinator announces the dates of kick off event, training, and farewell event and asks REFUGIUM team members to organise the kick off event.

The REFUGIUM team asks project coordinator what to do in order to organise the event and the main processes are explained to them. Project coordinator explains
that they have to book rooms and arrange childcare and health peer facilitator as trainers.

**Barrier**

Team member are not aware of processes, because they are not documented. The only one who conducted and organised before was Dr. Omar Aboelyazeid, but he was not available. The team felt like they were thrown into cold water, because no one was aware of how to handle the situation (observation protocol, p.190). In order to determine and hire trainers the participant the list of the first generation is needed, but did not exist. The booking of rooms and arranging a childcare person is challenging, because the information of corresponding contact is not provided sufficiently.

**Resource**

The team is dependent on the project coordinator and health peer facilitators of first the generation, who have contact with the program.

**Solution**

The steps have to be listed with corresponding contacts and resources. For both steps the participant lists for both generations is developed and uploaded. In prior generation there was no person recruited for childcare, so one bachelor student of health science was recruited as childcare helper. As equipment a child care bag was developed with printed out colouring mandalas without copyright issues from the internet, pencils and balls were gathered in both rooms and were put into that bag.

![Figure 17: child care resource](image)

3. updating and documentation of invitation

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>-complement invitation draft</td>
<td>poster is not uploaded</td>
<td>poster</td>
<td>search and provision of knowledge</td>
</tr>
<tr>
<td>-get approval</td>
<td>knowledge not provided</td>
<td>CF</td>
<td></td>
</tr>
</tbody>
</table>

66
Current situation
The invitation is needed to advertise for the second and third generations and to recruit participants. The program coordinator asked the REFUGIUM team to update the existent invitation document. Hence, the existent invitation draft is complemented with date, time, place, rooms and names of conducters. This information has to be in four different languages (German, English, Arabic and Farsi). These are made with the help of farsi and Arabic speaking REFUGIUM team members. In the end the invitations are sent to the CF for corrections and approval.

Barrier
The invitation poster is not uploaded electronically and knowlege regarding the change of keyboard language is not provided. A lot if time is invested in this task.

Ressource
Poster is provided.

Solution
The poster is complemented and uploaded electronically. The knowlege for developing invitations in different languages is gathered and documented in the management tool.

4. facilitating advertisement electronically & physically in camps

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>sending invitation electronically &amp; distributing in camps</td>
<td>- no mail drafts</td>
<td>- mail drafts</td>
<td>- mail drafts</td>
</tr>
<tr>
<td></td>
<td>- no contact lists</td>
<td>- contact lists</td>
<td>- contact lists</td>
</tr>
<tr>
<td></td>
<td>- no list of cooperating partners</td>
<td>- list of cooperating partners</td>
<td>- list of cooperating partners</td>
</tr>
<tr>
<td></td>
<td>- time consuming</td>
<td>- documents uploaded</td>
<td>- documents uploaded</td>
</tr>
</tbody>
</table>

Current situation
After approval the invitations were ready to be sent to all important contacts.
Invitations had to be sent electronically to all important practice partners and stakeholders. The team were asked to send emails to each one of them by addressing the people by their last names. Each email should include the four invitations in pdf version in all languages, an advertisement text, and the email addresses of needed parties.
Besides addressing the social managements, it was important to recruit the target group. In order to recruit the adequate participants for peer health facilitator training the REFUGIUM invitation letters were distributed in different refugee accommodations of “Fördern und Wohnen” in the team. The Procedure was as follows: first we visited the office of the social management and asked for permission and asked if we were allowed to stick the invitation letters to the entrances of each apartment/house, after which we enacted the following action of sticking said letters to the entrances of each apartment/house.

**Barrier**

This task seemed to be easy, because for the first generation the former REFUGIUM team also sent emails to contacts for advertisement. Therefore it was expected that a contact list with addresses and draft of email would exist as a resource for further generations. When searched for in the REFUGIUM info mail and “Flüchtlingsgesundheit 17”, these resources were not found. The REFUGIUM team was in need of a contact list because it was very time consuming to search each email address one by one of organisations or people related to refugees. Moreover, an email draft for advertisement and a list about the practice partners who cooperated with with REFUGIUM program had to be developed.

**Solution**

The REFUGIUM program was provided, by Montaha, with a contact list in pdf format and one in word of all important contacts (social management, refugee health organisations, researchers). Secondly an advertisement text was developed by Monica and Montaha under supervision of the project coordinator. Thirdly a document was made in which all practice partners were listed who already cooperated with the REFUGIUM program. The three documents: advertisement text as word, contact lists as word and pdf, practice partners who cooperated with us (social management) contact data.docx were uploaded in EMIL HAW.

5 The preparation of theoretical content

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>preparation of presentation, flyers</td>
<td>flyers not uploaded no file</td>
<td>ppt flyers</td>
<td>upload file for AWO</td>
</tr>
</tbody>
</table>
Current situation
Rooms were booked, the program was advertised, now the theoretical content had to be prepared. In a team meeting it was asked and discussed what we will be needed for the kick off meeting. The CF told us what was needed: the info-presentation about REFUGIUM in different languages, Refugium flyers for displaying and distributing in 8 languages and AWO flyers and organisation of drinks and food. The info presentation had to be updated with latest changes so the old version, which was found in “Flüchtlingsgesundheit 17” and was sent to CF and she complemented it. The arabic and farsi translations were complemented by sameer and sami. Refugium flyers existed and were systematically ordered in 6 topics and in 8 languages at the office; of each language and topic 30 flyers were prepared by the team.

Barrier
The REFUGIUM flyers were not uploaded and AWO flyers were not filed. The processes are not documented; thus a lot of time is invested.

Ressource
ppt and flyer existed as resources.

Solution
The corrected version was uploaded as a resource on the electronic platform. For the AWO flyers a file was made. All processes with its corresponding resources are documented in the tool.

6 Organisation of catering

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>organisation of money, drinks and food</td>
<td>- no information</td>
<td>CF</td>
<td>provision of knowledge</td>
</tr>
<tr>
<td></td>
<td>- no thermos</td>
<td></td>
<td>purchase of thermos</td>
</tr>
</tbody>
</table>

Current situation
it was decided that catering had to be organised for participants like healthy snacks, such as nuts and drinks, such as water and tea. First of all we checked in the office what was available already. According to that a list was made in which everything that had to be purchased was noted. In the team the responsibility to purchase snacks and cutlery, paper plates, napkins, and tea was distributed. REFUGIUM team members, who had enough cash available, spent the money. For drinks water in glass bottles, tea, sugar, hot water in thermos were organized. Four glass bottle and sugar already existed as resources in the office, but no thermos. Afterwards the snacks were purchased and stored in office. For the nuts walnuts, almonds,
cranberrys, raisins, peanuts, hazelnuts, and cashews were purchased. For the snacks, plastic cutlery, paper plates, and napkins were bought.

**Barrier**

The purchase had to be financed by one REFUGIUM team member. Therefore, the task could only be allocated to someone who could spend money and would not get in trouble for the remaining time, until the CF would return. This made effective teamwork very difficult and it emerged that money is needed of REFUGIUM program project coordinator prior to purchasing. The organisation of thermos with hot water was difficult therefore the REFUGIUM program needed its own thermos flasks.

**Solution**

In the process tool it was suggested that money be organized prior to the project coordinator purchasing the refreshment. As thermos flasks did not exist they were purchased and stored in the office as a future resource.

![Thermos in Room 5.29](image)

*Figure 18: thermos in room 5.29*

7. Updating, printing, documentation of needed documents

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>asking for needed documents</td>
<td>no nametags, arrows, participant list draft, apology letter</td>
<td>CF</td>
<td>developed &amp; uploaded: nametags, arrows, participant list draft, apology letter</td>
</tr>
</tbody>
</table>

**Current situation/Barrier**

The REFUGIUM team asked the project coordinator for documents, which were important for conducting the training. The needed documents did not exist, therefore the team was asked to develop nametags, arrows, participant list drafts, apology letter. Nametags had to be carried by each team member so that they were recognised as REFUGIUM team members and of which status (student, BUFDI, project coordinator). The arrows showing in different directions with which room and time shall help participants to find the way to the room. The apology letter is for participants who miss their German classes or other appointments for the training.
Participant lists are important to register all participants. All documents have to be printed out and put in transparent foil.

**Resource**
The program coordinator was aware of which documents were missing. The developed documents are supervised, approved and corrected by the program coordinator.

**Solution**
The four documents were developed and printed out for the training purpose. The printed nametags were put into plastic badges, which were in office 5.29. The participant list was created and had to be complemented with participants who registrered through email. Apology letters and the arrows showing in different directions with room and time were created. The four documents: nametags, arrows and participant list draft, apology letter was uploaded in EMIL HAW.

8 Organisation shortly before kick off event

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>- stick arrows</td>
<td>- no guideline</td>
<td>- catering</td>
<td>documentation of steps</td>
</tr>
<tr>
<td>- preparation of room,</td>
<td></td>
<td>- presentation</td>
<td></td>
</tr>
<tr>
<td>presentation, catering</td>
<td></td>
<td>- child care bag</td>
<td></td>
</tr>
<tr>
<td>- welcome participants</td>
<td></td>
<td>- arrows</td>
<td></td>
</tr>
</tbody>
</table>

**Current Situation**
Shortly before the kick off event each team member takes one responsibility for one task. One stuck arrows from the trainstation SBAHN Bergedorf all the way to the room. The others took the key from dekanat and opened the room. The child care space is prepared and child care bag is provided. The info-presentation was put in an extra file on the desctop so that it would be easy to find when needed. The laptop from the office is connected to the projector and presentation was begun. Additionally, one table was prepared with snacks and drinks and the second table for displaying flyers and workshop material like rope and cards. On one table snacks were decorated on plates. Drinks are placed on the same table. For drinks hot water is filled in thermos flasks and water in glass bottles in the office. On the second table flyers and workshop materials like rope and shampoo was displayed. One team member stays at the entrance and welcomes participants and accompanys them to the room.
Barrier
The team is not aware of the organisation shortly before the kick off event. The steps need to be documented with information about resources.

Ressource
As ressources for these steps are the already available documents such as presentation, arrows, flyers, manuals, and the I child care bag, thermos, glass bottles etc.

Solution
Documentation of steps

9 Organisation during kick off event

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>distribution of flyers</td>
<td>not aware of steps</td>
<td>flyers</td>
<td>documentation of steps</td>
</tr>
<tr>
<td>filling out participant list</td>
<td></td>
<td>participant list</td>
<td></td>
</tr>
</tbody>
</table>

Current situation
During kick off event one team member distributes flyers to participants, after the presentation one team member asks the participants to fill out the participant list with their contact data.

Barrier
The team is not aware of the organisation shortly during the kick off event. The steps need to be documented with information about resources.

Ressource
As ressource for the steps the already available flyers and participant list were used.

Solution
documentation of steps

10 Organisation after kick off event

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Ressource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>cleaning room</td>
<td>not aware of steps</td>
<td>CF</td>
<td>documentation of steps</td>
</tr>
<tr>
<td>removal of arrows</td>
<td></td>
<td>participant list</td>
<td></td>
</tr>
<tr>
<td>uploading participant list</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Current situation**
The organisation after the event is as followed: the room has to be checked and made sure that it is clean, arrows which are pasted on the wall have to be removed, key has to be given back to Dekanat. Back in the office the registered participants have to be added to the participant list and the participant’s list has to be documented electronically.

**Barrier**
The team is not aware of the organisation shortly after the kick off event. The steps need to be documented with information about resources.

**Resource**
Participant list and the electronic resources.

**Solution**
Documentation of steps.

**Peer Facilitator Training (PFT)**

<table>
<thead>
<tr>
<th>Peer Facilitator Training (PFT)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>facilitating advertisement electronically</td>
</tr>
<tr>
<td>12</td>
<td>preparation of workshop bags, materials &amp; resources for training</td>
</tr>
<tr>
<td>13</td>
<td>contact participants and trainers</td>
</tr>
<tr>
<td>14</td>
<td>organisation of catering</td>
</tr>
<tr>
<td>15</td>
<td>Updating and printing of needed documents</td>
</tr>
<tr>
<td>16</td>
<td>organisation shortly before training</td>
</tr>
<tr>
<td>17</td>
<td>organisation during training</td>
</tr>
<tr>
<td>18</td>
<td>organisation after training</td>
</tr>
</tbody>
</table>

11. facilitating advertisement electronically

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>send emails to contacts</td>
<td>no</td>
<td>- mail draft - contact list - list of partners - participant lists</td>
<td></td>
</tr>
</tbody>
</table>
Current situation
The kick off event was conducted successfully and the first step to prepare the theoretical Training for the health peer facilitator is to send emails again to all contacts in order to recruit participants.

Barrier
No barrier exists, because the needed documents are uploaded in EMIL HAW.

Resource
As resources the emil platform systematically organised the documents mail draft, contact list, and list of cooperating partners and participant lists. Time could be saved.

12. preparation of workshop bags, materials & resources for training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>preparation for workshop bags, materials &amp; resources</td>
<td>no workshop bag</td>
<td>-flyers</td>
<td>developed, uploaded &amp; stored:</td>
</tr>
<tr>
<td>for training</td>
<td>no inventar</td>
<td>-manuals</td>
<td>- 18 workshop bags</td>
</tr>
<tr>
<td></td>
<td>no back up file</td>
<td>-materials</td>
<td>- 18 inventar list</td>
</tr>
<tr>
<td></td>
<td>material not organised</td>
<td>-tip doc</td>
<td>- health guideline in pdf</td>
</tr>
<tr>
<td></td>
<td>material missing</td>
<td>-hardcopy</td>
<td>- back up file</td>
</tr>
<tr>
<td></td>
<td>time-consuming</td>
<td>health guide</td>
<td>- purchase of materials</td>
</tr>
<tr>
<td></td>
<td>-no health guideline in pdf</td>
<td></td>
<td>- tip doc file</td>
</tr>
<tr>
<td></td>
<td>-no tip doc file</td>
<td></td>
<td>- manuals file</td>
</tr>
<tr>
<td></td>
<td>-no manuals file</td>
<td></td>
<td>- BUFDI file</td>
</tr>
<tr>
<td></td>
<td>- no BUFDI file</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current situation
It was the task of the REFUGIUM team members to prepare each training day, but the team was not aware how to organise the training days. In a meeting they asked the CF and she replied and gave information in regard to what is needed for each training day which is stated in the manuals according to topic. They were informed that needed materials and documents for the workshops bags would be found in the rooms N5.29 and N2.09.

Barrier
Even though the training was conducted for the first generation already. No guide existed who could explain the processes or an inventory list giving information about what was needed. First of all, the cupboard 10 in room N2.09 and the room N5.29 were inspected in order to get an overview and estimate what exactly was there as
ressources already. The REFUGIUM team observed that the materials and documents existed, but they were not organised systematically in both rooms. No workshop bags existed with inventory lists or a backup file. Moreover, it is observed that documents as manuals, flyers, tip docs and health guideline are uploaded or filed in a file as a ressource. Therefore, it was very time consuming and exhausting to find existing materials and documents. As well as printing out manuals for each topic and finding health guideline.

**Solution**

The solution was to develop workshop bags with the inventory lists and a belonging back up file. Moreover, organizing printed out manuals of each topic and language into files in office on shelf N5.29. The process of developing workshop bags included choosing one topic and studying the manual for needed documents and material. The mentioned documents and material for each topic were noted down on a list and were searched for in both rooms 2.09 and 5.29. What was found was put on a table and what was missing was marked in order to ask the CF about the missing materials. The found material and documents for each topic were put into three bags. The 18 bags were purchased from woolworth in Bergedorf. Inventory documents were made in English and German, uploaded electronically and laminated in hardcopy for each topic and for each bag. In total 18 workshop bags were made with 18 inventory documents (4). Moreover, to the workshop bags an back up file in N5.29 (3) was made, which documented each material or document as resource. In the end all processes with its corresponding resources were documented in the tool.

**Nutrition bag**

For the topic of nutrition: tape, marker, scale, DGE-Nutrition circle, moderation points, chips bag (laminated), sugar cubes, cola bottle, measuring cylinder, and fresh fruit were needed. Some material was missing like the measuring cylinder, because it was not returned to the REFUGIUM program of students of the last generation. For conducting this topic also fresh fruits were needed such as apples, bananas, strawberries, grapes, oranges etc.) had to be purchased on the day of training.

**Physical activity bag**

In the same manner documents and material were searched for the physical activity workshop. For the physical activity workshop items that were needed were for example: tape, marker, ball, cards (sports), and skipping rope. There are material
which are compulsory, but not inside the bag for example: poster motivation, poster with exercises, poster 5.

Hygiene bag
For Hygiene the following items were needed: tape, marker, glitter, hand cream, shampoo, shaving cream, toothbrush, hair brush, lice comb, soap, refugee manual, and a hygiene intern.

Oral health bag
In the oral health manual was stated: tape, marker, mouth model with toothbrush, toothpaste, dental floss, dry pea, interdental brush, rice, salt.

Missing materials like dental floss, dry pea, interdental brush, rice, salt had to be purchased, because they did not exist.

Health care bag
Similarly, for the topic of health care important documents were needed like, tip doc, health insurance aok card (laminated), health care guidelines.

Mental health bag
For mental health: tape, marker, moderation points, cards (feelings).

Preparation of Documents
The health guideline was an existent ressource in the office and was systematically ordered in shelf according to language. Additionally, it was searched for as a pdf version and was uploaded to the electronic plattform EMIL HAW Flüchtlingsgesundheit W 17 as a ressource, due to supply shortages according to the Federal Office of Migration and Refugees (BAMF). Furthermore 7 files (9) in hardcopys were made with the heading of what documents are filed in: 1) Material backup; 2) contacts for advertisements; 3) invitations 2017; 4) BUFDI (Federal worker); 5) Tip docs; 6) REFUGIUM participant list; 7) projects about refugee’s health (AWO). All of these files were made as a resource in the office in case the electronic platform was not working. The documents, which were filed into 7 files, were stored unorganized in office 5.29 or were printed out and by organizing them hours of searching were saved.
Preparation of manuals and flyers

Manuals and flyers were uploaded on the platform and manuals of six topics were printed out in various languages and were filed in a file as a resource. The flyers for these topics were taken out of the shelf in 5.29 and were organised for each topic in all languages.

Figure 19: workshop bag nutrition

Figure 20: 18 workshop bags in room 2.09, cupboard 1

Figure 21: Material back up file

Figure 22: files of manuals in room 5.29
13. contact participants and trainers

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>sending emails, sms, whatsapp messages to participants &amp; trainers</td>
<td>the mobile phone does not function</td>
<td>mobile phone participant list</td>
<td>The repair of said mobile phone</td>
</tr>
</tbody>
</table>

Current situation

The material and documents for training were prepared, now all registered participants had to be reminded about upcoming training. First of all emails, sms, whatsapp messages with a reminder about the upcoming training with date, time, place to to the registered participants and trainers were sent. The text was developed in english and was translated into arabic and farsi and was sent with team members private mobile phone.
Barrier
The REFUGIUM intern mobile phone existed as a resource but did not function. The participant list existed as a resource on the platform.

Solution
REFUGIUM intern mobile phone was given to the CF for repair.

14. organisation of catering

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>organisation of money,</td>
<td>no</td>
<td>money of the CF and</td>
<td></td>
</tr>
<tr>
<td>drinks and food</td>
<td></td>
<td>thermost flasks</td>
<td></td>
</tr>
</tbody>
</table>

Current situation
Prior to purchasing refreshments, the program coordinator was asked for money. A REFUGIUM team member purchased the refreshments.
For drinks the following items were provided: water in glass bottles, tea, sugar, and hot water in thermost flasks was organized. Four glass bottles, sugar, 4 thermos flasks already existed as ressources in the office. Afterwards the snacks were purchased and stored in office. Nuts were also purchased suc as: walnuts, almonds, cranberrys, raisins, peanuts, hazelnuts, and cashews. For snacks, plastic cutlery, paper plates and napkins were bought.

Resource
As money was provided prior to organizing the catering effective teamwork was possible, because the responsibility of purchasing refreshment could be allocated to any REFUGIUM team member. Furthermore thermos flasks existed as a resource in the office. As a result time could be saved.

15. Printing, the using of needed documents

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printing, using of</td>
<td>no interim report</td>
<td>The CF, nametags, arrows, participant list draft, apology letter</td>
<td>developed &amp; uploaded: interim report</td>
</tr>
<tr>
<td>needed documents</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Current situation
All documents as nametags, arrows, participant list draft, apology letter, which were important for conducting the training, were printed out and stored in transparent foil. Participants asked for an interim report, which is a certificate of their attendance and a brief description of the thus far achieved training.

Barrier
The interim report has to be developed and uploaded.

Resource
in EMIL HAW Flüchtlingsgesundheit W17 the four documents the nametags, arrows, participant list draft, and apology letter are found systematically organised. The developed interim report is supervised, approved and corrected by the program coordinator.

Solution
The interim report was developed, uploaded in EMIL HAW, and thus printed out for the training.

16. organisation shortly before training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>- stick arrows</td>
<td></td>
<td>- arrows</td>
<td></td>
</tr>
<tr>
<td>- preparation of room,</td>
<td></td>
<td>- manual, flyer</td>
<td></td>
</tr>
<tr>
<td>manual, flyer, catering</td>
<td></td>
<td>- child care bag</td>
<td></td>
</tr>
<tr>
<td>- welcome participants</td>
<td></td>
<td>- thermos flasks</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- glass bottles</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- documentation</td>
<td></td>
</tr>
</tbody>
</table>

Current Situation
Shortly before the training each team member takes the responsibility for one task. One stuck arrows from the SBAHN Bergedorf till the room. The others get the key of rooms from the and opened them. The responsible person for keys and a team member opened the room and started to move the tables aside in order to make a circle with chairs. The child care space was prepared and child care bags were provided. Additionally, one table was prepared with snacks and drinks. On one table snacks were decorated on plates. Drinks are placed on the same table. for drinks hot water is filled in thermos flasks and water in glass bottles in the office; on the second table the manuals and flyers are arranged. The posters were displayed on the
blackboard. One team member stayed at the entrance and welcomed participants and accompanied them to the room.

**Resource**

As resources for these steps were the already available documents such as arrows, flyers, manuals, and as material child care bag, thermos flasks, glass bottles. The steps are documented with information about resources in the process tool, therefore the team is aware of them.

17 organisation during training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>arranging groups</td>
<td>-not aware specific steps</td>
<td>-manuals in</td>
<td>documentation of</td>
</tr>
<tr>
<td>distribution of manuals</td>
<td>of training</td>
<td>hardcopy</td>
<td>additional steps</td>
</tr>
<tr>
<td>filling out participant list</td>
<td></td>
<td>-participant list</td>
<td></td>
</tr>
<tr>
<td>asking for feedback</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**

In the beginning of training participants are asked to sit in groups according to the language they understand (Arabic, Farsi, English, Russian etc.). Each group is provided with a workshop bag in one of the topics. Then the training is conducted. The manuals were distributed in all needed languages and topics to participants. Moreover the participant list was filled in by asking each one their numbers, email, name, address. Asking participants about their feedback concludes the training. For the feedback on one paper of the flipchart a minus and plus sign were written. Participants were asked to paste moderation points to state if they liked or disliked.

**Barrier**

The team may not be aware of the specific steps during the training, because it differs from the kick off event. The steps need to be documented with information about resources.

**Resource**

As resources there exist manuals on the platform, printed out manuals organised in files, and the participant list electronically saved in EMIL HAW.

**Solution**

The additional steps were documented in the tool.
18 Organisation after training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>cleaning room</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>removal of arrows</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>uploading participant list</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>steps are documented</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**

The organisation after the event is as follows: the room has to be checked if it is clean, arrows which are pasted on the wall have to be removed, key has to be given back to. Back in the office the registered participants have to be added in the participant list and participant lists have to be documented and uploaded electronically.

**Barrier**

The team is aware of the organisation shortly after the training. The steps are documented with information about resources in the program processes tool.

**Organisation of farewell party**

<table>
<thead>
<tr>
<th>Organisation of farewell party</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
</tr>
<tr>
<td>20</td>
</tr>
<tr>
<td>21</td>
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<tr>
<td>22</td>
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<td>23</td>
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<td>24</td>
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<td>25</td>
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<tr>
<td>26</td>
</tr>
<tr>
<td>27</td>
</tr>
<tr>
<td>28</td>
</tr>
</tbody>
</table>
19 Invitation of all involved persons and partners

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>send emails to contacts</td>
<td>press office data not uploaded</td>
<td>mobile phone</td>
<td>provision and upload of:</td>
</tr>
<tr>
<td></td>
<td>email template missing</td>
<td>contact list</td>
<td>press office data</td>
</tr>
<tr>
<td></td>
<td>time consuming</td>
<td>list of partners</td>
<td>email template</td>
</tr>
<tr>
<td></td>
<td></td>
<td>participant lists</td>
<td></td>
</tr>
</tbody>
</table>

Current situation
The first step to prepare the farewell party is to invite all important contacts. In order to invite peer facilitators SMS or whatsapp messages were sent with intern mobile phone to them. Moreover, emails were sent to the press office, program partners, supporters and students.

Barrier
The text for invitation does not exist as a ressource and has to be written by team members. This task can only be distributed to team members, who are aware of the German language. Moreover, the press office contact data is not provided. It is also time consuming.

Resource
Already existing resources included the repaired mobile phone and on the EMIL plattform systematically organised the documents as contact list, list of cooperating partners and participant list. Time could therefore be saved.

Solution
To save time and enable every team member to do this task on his or her own the email template and press office data for invitation to the farewell party was uploaded as a resource.

20. Creation and documentation of graduates list and certificates

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creation and documentation of graduates list and certificates</td>
<td>no graduates list uploaded</td>
<td>certificate of 1st generation</td>
<td>created and uploaded:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>graduates list of 2nd and 3rd generation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>certificates of 2nd and 3rd generation</td>
</tr>
</tbody>
</table>
**Current situation**

In the second step the graduates list is created. In this list participants are listed who participated in training and who conducted workshops in refugee accommodations. By using this list as resource, certificates are made. The certificate template is complemented with names of peer facilitator and dates of training and workshops.

**Barrier**

No graduates list of 1\textsuperscript{st} generation is uploaded.

**Resource**

As a resource the certificates of the first generation existed, this was used as a template to make certificates of the second and third generations.

**Solution**

The graduates list and certificates of 2\textsuperscript{nd} and 3\textsuperscript{rd} generation were created and uploaded in EMIL HAW Flüchtlingsgesundheit W17 under the section UNIT 2.

21 Calculation and documentation of reimbursement

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creation of calculation of reimbursement - documentation</td>
<td>-no reimbursement document uploaded</td>
<td>created and uploaded: reimbursement of 2 and 3 generation</td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**

The Health peer facilitators who conducted workshops in refugee accommodation get 10 Euro for each Workshop. Therefore, the reimbursement of each HPF of the second and third generation had to be calculated.

**Barrier**

No reimbursement document of 1\textsuperscript{st} generation existed.

**Solution**

The reimbursement list of 2\textsuperscript{nd} and 3\textsuperscript{rd} generations were created and uploaded in EMIL HAW Flüchtlingsgesundheit W17 under the section UNIT 2. The future REFUGIUM team can complement names & participation of HPF by using provided excel sheet as a template.
22 Preparation of reimbursement envelopes and gifts

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>organisation of envelopes with money, cards, and HAW bottles</td>
<td>- not aware of specific steps and resources</td>
<td>reimbursement list</td>
<td>documentation of steps with resources</td>
</tr>
</tbody>
</table>

Current situation
The REFUGIUM team discusses with the program coordinator what must be given to the health peer facilitators during the graduation ceremony. It is determined to provide the HPF’s with envelopes with money, cards, roses and HAW bottles. First of all, money is organised by the program coordinator. By using the reimbursement list as a resource the envelopes with money are prepared for each HPF. Cards are purchased and thank you messages written in them. HAW bottles are ordered from Fachschaftsrat GW (FSR) and collected from their Room 0.85.

Barrier
The team is not aware of the specific steps, because the first generation did not get any gifts or reimbursement. The steps need to be documented with information about resources.

Resource
The reimbursement list of 2nd and 3rd generations existed.

Solution
Documentation of the steps with information about resources.

23 Organisation of catering and decoration

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>- order drinks and food - buy roses, decoration materials</td>
<td>no drinks list no account list - new steps</td>
<td>money of the CF</td>
<td>created and uploaded: drinks list account list - buying roses, girlands - documentation of new steps</td>
</tr>
</tbody>
</table>

Current situation
For the catering of the farewell party cake, coffee and tea were ordered from the campus mensa. Drinks were ordered from the Rewe online shop. REFUGIUM team
members purchased plastic cutlery and paper plate but also napkins, roses, decoration materials.

**Resource**
Money was provided prior to organizing the catering.

**Barrier**
The procedure to organizes the catering for the farewell party differs from the usual procedure. The steps need to be documented with information about resources. For ordering the drinks from rewe online shop a list is needed in which all drinks are listed. Moreover registration information of the REFUGIUM program are needed to log in.

**Solution**
The list of drinks and REFUGIUM program accounts is created and uploaded.

24 Printing of needed documents

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>printing of arrows,</td>
<td>-new steps</td>
<td>arrows, graduation list, certificates</td>
<td>-documentation of new steps with resources</td>
</tr>
<tr>
<td>graduation list, certificates</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**
The graduates list, certificates and arrows are printed out.

**Barrier**
The procedure differs from the usual procedure. The steps need to be documented with information about resources.

**Resource**
Arrows, graduation list and certificates existed as resource in the electronic platform EMIL HAW Flüchtlingsgesundheit W17.

**Solution**
The steps are documented with information about resources in the process tool.

25 Organisation shortly before party

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>-stick arrows</td>
<td>new steps</td>
<td>-arrows</td>
<td>documentation of new steps with resources</td>
</tr>
<tr>
<td>-preparation of room,</td>
<td></td>
<td>-child care bag</td>
<td></td>
</tr>
<tr>
<td>catering</td>
<td></td>
<td>-cards</td>
<td></td>
</tr>
<tr>
<td>-decoration</td>
<td></td>
<td>-water bottles</td>
<td></td>
</tr>
<tr>
<td>-welcome participants</td>
<td></td>
<td>-graduation list</td>
<td></td>
</tr>
</tbody>
</table>
Current Situation

Shortly before the farewell party each team member takes one responsibility for one task. One stuck arrows from the SBAHN Bergedorf till the room. The others got the key of rooms from the and opened them. The responsible person for the key and a team member opened the room. The child care space is prepared and child care bags are provided. Additionally, one table was prepared with snacks and drinks. On the second table the vase with roses, gifts, water bottles, graduation list, certificates are placed. The room is decorated with garland and flowers. On the whiteboard “Welcome” is written in various languages. One team member stays at the entrance and welcomes participants and accompanys them to the room.

Barrier

The organisation shortly before the farewell party differs from the usual procedure. The steps need to be documented with information about resources.

Resource

Already existing resources for these steps include documents such as arrows, graduation list, certificates and as material child care bag, cards, water bottles and roses.

Solution

The steps are documented with information about resources in the process tool.

26 Organisation during the farewell party

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Ressource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>announce graduates</td>
<td>- not aware of the specific</td>
<td>- cards</td>
<td>documentation of</td>
</tr>
<tr>
<td>award graduates</td>
<td>steps of training</td>
<td>- water bottles</td>
<td>additional steps</td>
</tr>
<tr>
<td>make photos</td>
<td></td>
<td>- graduation lists</td>
<td></td>
</tr>
<tr>
<td>filling out participant list</td>
<td></td>
<td>- certificates</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- roses</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- participant list</td>
<td></td>
</tr>
</tbody>
</table>

Current situation

The names are announced of the graduates by using the graduates list. Each participant is asked to come to the front and receive the certificate, rose, water bottle
and envelope. One team member makes photos, when the HPFs shake the hand with program coordinator. Afterwards a group photo is awarded to the HPFs, REFUGIUM team members, and program coordinator. Moreover, the participant list was filled out.

**Barrier**
The team is not aware of the specific steps during the farewell party, because it differs from the usual procedure. The steps need to be documented with information about resources.

**Resource**
As resources cards, water bottles, roses and printed out graduation list, participant list and certificates existed.

**Solution**
The additional steps were documented in the tool.

27. Organisation after the farewell party

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>cleaning room</td>
<td></td>
<td>steps are</td>
<td></td>
</tr>
<tr>
<td>removal of arrows</td>
<td></td>
<td>documented</td>
<td></td>
</tr>
<tr>
<td>uploading participant list</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**
The organisation after the party is as follows: the room has to be checked if it is clean, arrows which are posted on the wall have to be removed, the key has to be given back to the dean. Back in the office the registered participants have to be added in the participant list and participant lists have to be documented and uploaded electronically.

**Barrier**
The team is not aware of the organisation shortly after the party. The steps are documented with information about resources in the program processes tool.

28. Evaluation
In order to improve the program, in each phase the evaluation has to be performed. In the end of unit the REFUGIUM team member fills out the formative process evaluation questionnaire and uploads it in the file of unit one in EMIL HAW Flüchtlingsgesundheit W2017.
<table>
<thead>
<tr>
<th>No</th>
<th>Unit</th>
<th>Setting</th>
<th>Document electronic</th>
<th>Document paper</th>
<th>material</th>
<th>Tool</th>
<th>In total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Peer Facilitator Training (PFT)</td>
<td>HAW</td>
<td>- Inventar documents (Appendix 8)</td>
<td>- Inventar laminated</td>
<td>-18 workshop bags</td>
<td>Program Management Tool Unit 2 Peer Facilitator Training (PFT)</td>
<td>62</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Manuals &amp; flyer</td>
<td>- Manuals printed</td>
<td>- Thermos</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Invitation email &amp; contacts (Appendix 9)</td>
<td>- Name tags</td>
<td>- Child care bag</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Appendix 10)</td>
<td>- 7 files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Draft of participant list (Appendix 11)</td>
<td>- Back up file in N5.29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Arrows (Appendix 12)</td>
<td>- Health guideline</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Interim report (Appendix 13)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Apology letter (Appendix 14)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Health guideline in pdf</td>
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<td></td>
<td></td>
<td></td>
<td>- List of practice partners (Appendix 15)</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- REFUGIUM program accounts and details</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Certificates of 2 &amp; 3 generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Participant list of 2 &amp; 3 generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Graduates list of 2 &amp; 3 generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Reimbursement details</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 &amp; 3 generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Press office data</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Appendix 16)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Invitation email template for fare well party (Appendix 17)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Table 10: summary of uploaded documents in EMIL HAW and developed material for unit 2
4.3.2.1 Instruction of the REFUGIUM program management tool Unit 2

Instruction of REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

The REFUGIUM program management tool unit 2 peer facilitator training (PFT) comprises of 23 pages and 28 steps.

**Content**- The second unit is the peer facilitator training (PFT) in which refugees are trained in 6 health topics. It is the main stage of the implementation phase of the REFUGIUM program.

**Aim**- The use of this tool shall enable new REFUGIUM team members to organize, conduct and evaluate the unit 2 independently.

**Ressources**- The electronic resources (documents) required for Program Management Tool Unit 2 Peer Facilitator Training are found in the electronic platform EMIL HAW Flüchtlingsgesundheit W17 in the sections: Organisation, Invitation & advertisement Poster, Manuale 2017, Flyer 2017, REFUGIUM Training/ workshop material, and Unit 2 Peer Facilitator Training. The needed material and documents in hardcopy are found in room N.2.09 (Cupboard 1 and 10) and room N5.29.

**Structure**- Unit 2 comprises of 3 parts:

1- Firstly the organisation of the kick off event, which is described from page 1 to 8 (Step 1 to Step 10).

2- Second the organisation of Peer Facilitator Training (PFT) from page 9 to 16 (from step 11 to step 18).

3 - Thirdly the organisation of the farewell party from page 17 to 23 (from step 19 to step 28).

**Sustainability**- Constant update regarding new steps and resources (documents and materials) according to latest state of the program is needed. REFUGIUM team member consults about needed changes with program coordinator. The person responsible for facilitating changes is the program coordinator.

1- organisation of kick off event (Step 1 to Step 10)

**Steps 1- 1.2 - Determination of dates, place and staff**
The organisation of the kick off event requires planning and discussion with the project coordinator in a meeting. In this meeting the dates, place, and staff of three events such as the kick off event, peer facilitator training and the farewell party are determined.

**Steps 2 - 2.2 - Arrangement of staff and place**

In the second step rooms (2 rooms for the PF training and 1 room for kick-off & farewell parties) are booked at the faculty office (Fakultätsservicebüro) for the three events. Further the peer facilitator trainer and child care person are arranged by using the participant list of previous generations.

**Steps 3-3.4 - Updating and documentation of invitation**

In order to recruit participants for the training the existent invitation draft is complemented with date, time, place, rooms and names of conductor in the required languages (German, English, Arabic and Farsi). Then the invitations are sent to the project coordinator (CF) for corrections and approval. In the end the invitation poster is documented in EMIL HAW Flüchtlingsgesundheit W 2017.

**Steps 4- 4.4 - Facilitating advertisement electronically & physically in camps**

Using the existent mail draft, attaching the invitation posters and sending to contacts by using the existent contact list creates the advertisement email. For physical advertisement the invitation posters are printed out and are stuck by REFUGIUM team members in refugee accomodations before getting approval of the social management worker.

**Steps 5- 5.1- Preparation of theoretical content**

Project coordinator complements the existent introduction presentation and REFUGIUM team members arrange flyers and material for displaying and distribution.

**Steps 6- 6.2- Organisation of catering**

The organisation of catering requires organising money from project coordinator prior to purchasing drinks and snacks.

**Steps 7- 7.6 Updating, printing, and the documentation of needed documents**

The existing documents such as nametags, arrows, participant list draft, apology letter are both updated and printed out. Additionally, the updated documents are documented electronically. Nametags have to be carried by staff so that they are recognised as REFUGIUM team members indicating their status (Student, BUFDI, Project coordinator). The arrows showing in different directions shall help participants to find the way to the room. The apology letter is for participants who miss their
German classes or other appointments for the training. Participant list is important to register all participants.

8- 8.5 Organisation shortly before kick off event
On the day of kick off event each team member takes one responsibility for one task. One sticks arrows from the SBAHN Bergedorf till the room. The others get the key from the dean and open the rooms. In the room child care space is prepared and the child care bags are provided. The laptop from office is connected to the projector and the info-presentation is opened. Additionally, one table is prepared with snacks and drinks and the second table for displaying flyers and workshop material. One team member stays at the entrance and welcomes participants and accompanies them to the room.

9- 9.2- Organisation during kick off event
After introducing the REFUGIUM team and oral presentation by the programcoordinator one team member distributes flyers to participants. The guests are allocated in groups according to their language so that questions can be answered. Inbetween this one team member asks the participants to fill out the participant list with their contact data.

10- 10.5 Organisation after kick off event
In the end the room must be checked to see if it is clean, arrows that are posted on the wall have to be removed, key has to be given back to the dean. Back in the office the registered participants have to be transferred in an electronic participants list.

2- Organisation of Peer Facilitator Training (PFT) (from step 11 to step 18)

11- 11.1- Facilitating advertisement electronically
Immediately after the kick off event advertisement emails are created and sent again to all contacts in order to recruit participants.

12- 12.5 Preparation of workshop bags, materials & resources for training
The peer facilitator training comprises of six topics (Physical activity, Hygiene, Oral health, Health care, Mental health, and Nutrition) in which participants are trained in various languages with the help of resources as manuals, flyers, poster, materials and 18 workshop bags (3 bags for each topic). In order to prepare the training and workshop first of all the 18 workshop bags in room N2.09 are checked with the help
of an inventory list. If something is missing it is complemented with the help of the back-up file, which documents each material or document as resource, and tip doc file in office N5.29. The belonging poster and material are taken from room N2.09. For the topic of healthcare the health guideline has to be printed out. For the six topics manuals and flyers exist in more than 8 languages, they are printed out or are taken from files in office N5.29.

13- 13.2 Contact participants and trainers
All registered participants and trainers are reminded about date, time and place of training and upcoming training by telephone, messages in whatsapp/SMS and emails. The messages are created in the necessary languages and multilingual REFUGIUM team members reach participants.

14- 14.2 organisation of catering
The organisation of catering requires organising money from the project coordinator prior to purchasing drinks and snacks.

15- 15.3 Updating and printing of needed documents
All needed documents such as nametags, arrows, participant list draft, apology letters, and the interim report are updated and printed out and put in transparent foil. The interim report is a certificate about participant's attendance and a brief description of the training achieved thus far which is issued when participation is a minimum of 2 meetings.

16 - 16.5 organisation shortly before training
Shortly before the training each team member takes one responsibility for one task. For drinks hot water is filled in thermos flasks and water in glass bottles in office N5.29. One sticks arrows from the SBAHN Bergedorf till the room. The others get the key of rooms from the dean and open it. In the room the tables are put aside and the chairs are arranged in a circle. The child care space is prepared and child care bag is provided. Additionally, one table is prepared with snacks and drinks. On one table snacks are decorated on plates. Drinks are placed on the same table. On the second table the manuals and flyers are arranged. The posters are displayed on the blackboard or flip chart. One team member stays at the entrance and welcomes participants and accompanies them to room.

17- 17.4 organisation during training
In the beginning of training participants are asked to sit in groups according to the language they understand (Arabic, Farsi, English, Russian etc.). Each group is provided with workshop bags in one of the topics. Then the training is conducted. The manuals are distributed in all necessary languages and topics to participants. At the end each one is asked for their numbers, email, name and address to fill in the participant list. Asking participants about their feedback concludes the training. For this on one paper of the flipchart a minus and plus sign are written. Participants are asked to paste moderation points to state if they liked or disliked.

18- 18.5 Organisation after training
The organisation after the training compromises: the room has to be checked if it is clean, arrows which are pasted on the wall have to be removed, key has to be given back to the dean. Back in the office the registered participants have to be added to the participant list and the participant list has to be documented and uploaded electronically.

3 - Organisation of farewell party (from steps 19 to steps 28)

19- Invitation of all involved persons and partners
The farewell party is the last step of organising the unit 2 Peer Facilitator training. The first step to prepare the farewell party is to invite all important contacts. In order to invite Peer facilitators SMS or whatsapp messages were sent with the intern mobile phone to them. Moreover, invitation emails were sent to the press office, program partners, supporters and students.

20- 20.2 -Creation and documentation of graduates list and certificates
The participants who conclude the peer facilitator training (unit 3, unit 4) successfully become Peer Facilitators by being awarded with certificates at the farewell party. For that the graduates list is created by using the existent draft. In this list participants are listed who participated in training (unit 2) and (didactical training (unit 3), who conducted workshops in refugee accommodations (unit 4)). By using this list as resource, certificates are made. The certificate template is complemented with names of peer facilitator and dates of training and (workshops).

21- 21.1 -Calculation and documentation of reimbursement
The Health peer facilitators who conducted workshops in refugee accomodation get 10 Euro for each workshop. Therefore, the reimbursement of each PF must be calculated. As a template the reimbursement list (excel sheet) already existed of the
2nd and 3rd generation, which can be complemented with names and participation of the PF. The new reimbursement excel sheet should be documented electronically.

22- 22.2 Preparation of reimbursement envelopes and gifts
During the graduation ceremony peer facilitators are gifted with envelopes with money, cards, roses and HAW bottles. First of all, the money is organised by the program coordinator. By using the reimbursement list as a resource, the envelopes with money are prepared for each PF. Cards are purchased and ‘thank you’ messages are written in them. HAW bottles are ordered from Fachschaftsrat GW (FSR) and collected from their Room 0.85.

23- 23.2 Organisation of catering and roses
For the catering of the farewell party cake, coffee and tea are ordered from the campus Mensa. Drinks are ordered from the Rewe online shop. REFUGIUM team member purchases plastic cutlery, paper plates, and napkins, roses, decoration materials.

24- 24.1 - Printing of needed documents
The graduates list, certificates and arrows are printed out.

25- 25.6 Organisation shortly before party
Shortly before the farewell party each team member takes one responsibility for one task. One sticks arrows from the SBAHN Bergedorf till the room. The others get the keys of rooms from the dean and open them. The child care space is prepared and child care bag is provided. The catering is collected from "Student affairs cafeteria". Additionally, one table is prepared with snacks and drinks. On the second table the vase with roses, gifts, water bottles, graduation lists, and certificates are placed. The room is decorated with garland and flowers. On the whiteboard “Welcome” is written in various languages. One team member stays at the entrance and welcomes participants and accompanies them to the room.

26- 26.3 Organisation during party
The names are announced of the graduates by using the graduate’s list. Each participant is asked to come to the front and receive the certificate, a rose, the water bottle and envelope. One team member takes a photo, whilst the PF shakes hands with the program coordinator. Afterwards a group photo of all awarded PFs, REFUGIUM team members and the program coordinator is made. Moreover, the participant list is filled in.

27- 27.3 organisation of the after party
The organisation after the party is as followed: the room has to be checked if it is clean, arrows which are posted on the wall have to be removed, the key has to be given back to the deant. Back in the office the registered participants have to be added to the participant list and the participant list has to be documented and uploaded electronically.

28 Evaluation

In order to improve the program, in each phase an evaluation has to be performed. At the end of the unit the REFUGIUM team member fills out the formative process evaluation questionnaire and uploads it in the file of unit 2 in EMIL HAW Flüchtlingsgesundheit W 2017.
Figure 26: EMIL HAW Flüchtlingsgesundheit W17 section Invitation & advertisement Poster

Manuale 2017
- Deutsch
- English
- Arabisch
- Farsi
- Russisch
- Türkisch
- Bulgarisch
- Albanisch
- Urdu

Figure 27: EMIL HAW Flüchtlingsgesundheit W17 section Manuale 2017

Flyer 2017
- Flyer Internet
- Flyer Druck Bewegung
- Flyer Urdu (word version)

Figure 28: EMIL HAW Flüchtlingsgesundheit W17 section Flyer 2017

Refugium training/ workshop Material
- Refugium Inventar workshop bags
- Workshopmaterial intern

Figure 29: EMIL HAW Flüchtlingsgesundheit W17 section workshop Material
UNIT 2 Peer Facilitator Training (PFT)

- Participant list of 2 and 3 generation
- Reimbursement details 2 and 3 generation/ Auszahlung
- Certificates 2 and 3 generation
- Graduates list
- Farewell party/ Abschlussveranstaltung organisation
- Contacts of refugee camps
- Press office contact data
  45.2KB
- Invitation email template for fare well party
  48.4KB
- Interim report/ Zwischenzeugnis
  30.2KB
- Evaluation

Figure 30: Unit 2 Peer Facilitator Training (PFT) in EMIL HAW Flüchtlingsgesundheit W17
### Organisation of kick off event from page 1 to 8 (Step 1 to Step 10)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
</table>
| 1    | start | Meeting | Prof. Dr Christine Färber  
Program coordinator of  
REFUGIUM program  
Christine.faerber@haw-hamburg.de  
Abbreviated in this document with CF | - Calender pinned on the door  
- Book room N5.32 by writing name and time  
on the calender with pencil | Refugium team & CF | | | |
| 1.1  | start | Decide with CF whom to ask for support as HPF trainer | EMIL HAW  
Flüchtlingsgesundheit W 17  
Section: unit 2  
File: Participant list of 2nd and 3rd generation | REFUGIUM program 2nd generation Participant list. doxc  
REFUGIUM program Participant list 3rd Generation.doxc | Go trough participant list of 2 and 3 generation peer facilitators (HPF) | Refugium team & CF | | 1. column about potential trainers: language, experience, attendance |
| 1.2  | before | Determine Kick-off event & training & workshop & Farewell dates | Frau Prof. Dr Christine Färber  
Program coordinator of  
REFUGIUM program | | Team, PF and CF decides for date, place, timing and room | Refugium team & CF & PF | | |
| 2    | before | Arrange a person for child care | Gunnar Paetzelt  
Room N 5.33  
T +49.40.428 75-6311 | Contract/Werkvertrag | Student with a Werkvertrag for all dates | | 1 | |
| 2.1  | before | Arrange HPF trainer for needed languages for all dates | EMIL HAW  
Flüchtlingsgesundheit W 17  
Section: unit 2  
File: Participant list of 2nd and 3rd generation | REFUGIUM program 2nd generation Participant list. doxc  
REFUGIUM program Participant list 3rd Generation.doxc | Write, text & whatsapp messages, emails and call them | | 2 | |
## REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM? TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemente d?</th>
</tr>
</thead>
</table>
| 2.2  | before | Book 2 rooms for training & 1 room for Kick-off & Farewell event | Verwaltung Fakultätservicebüro Ulmenliet 20 21033 Hamburg Room 0.14 e-mail: raumvergabe_lifesciences( @)haw-hamburg.de | https://www.haw-hamburg.de/fakultaeten-und-departments/fs/fakultaetserviceburo.html | a) Visit "fakultaetserviceburo personally  
b) ask CF for approval | 1 | Advise: Rooms N4.11 and N4.12 are practical as the office N5.29 is above |
| 3    | before | update latest version of Invitation in all languages | EMIL HAW Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster  File: Invitation 3 generation | Poster-Einladung Arabic 3 g new pptx  
Poster-Einladung Farsi 3 g new pptx  
Etc. | a) Consult arabic and farsi speaking team members  
b) date, place, timing and rooms have to be changed in all versions | 2-3 | English and German can be changed by any team member |
| 3.1  | before | Change keyboard language | https://support.office.com/en-us/article/Enable-or-change-a-keyboard-layout-language-1c2242c0-fe15-4bc3-99bc-535de64f258 | | To do this press left ALT+SHIFT in windows | 1 |
| 3.2  | before | Final check of Invitations in all languages | EMIL HAW Flüchtlingsgesundheit W 17 Section: Invitation and advertisement Poster  File: Invitation 3 generation | Poster-Einladung ? language g new pptx | 1.Send to CF  
2. Arabic & Farsi checked by PF  
3. get CF approval | 1 |
| 3.3  | before | Create pdf of Invitation ppt | Poster-Einladung ? language g new pdf | 1.Open ppt  
2. save as  
3. format: pdf | 1 |
<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
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<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4</td>
<td>before</td>
<td>Upload invitation poster as an electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: Invitation and advertisement Poster File: Invitation ? generation</td>
<td>Poster-Einladung ? language g new pdf</td>
<td>a) Create a new file: Invitation? generation b) upload</td>
<td>1</td>
<td>Inform CF about change in Flüchtlingsgesundheit W17</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>before</td>
<td>Create advertisement Email</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster File: Text for advertisement draft Shelf in office N5.29</td>
<td>Mail-AushangEinladung.docx Hardcopy file: Important contacts for advertisement</td>
<td>a) Copy the text and paste into mail b) Attach all Posters in pdf to Email</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>before</td>
<td>Add contacts for advertisement to email &amp; send email</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster File: Important contacts for advertisement Shelf in office N5.29</td>
<td>Adressliste aus Doku.pdf Mailadressen.docx Hardcopy file: Important contacts for advertisement</td>
<td>Write email to each contact separately by addressing them by their last name</td>
<td>1-2</td>
<td>Adressliste aus Doku. Pdf contains names and email adress Mailadress.docx is for circular email</td>
<td></td>
</tr>
<tr>
<td>4.3</td>
<td>before</td>
<td>Do advertisement: visit refugee accommodation</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 2 File: contacts of refugee camps</td>
<td>practice partners who cooperate with us (social management) contact data.docx refugee accommodation contact list.docx</td>
<td>1.Ask permission of social management 2. stick on entrances</td>
<td>3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM? TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be coplemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.4</td>
<td>before</td>
<td>Reply to emails about registration</td>
<td>Email account: <a href="mailto:refugium_info@haw-hamburg.de">refugium_info@haw-hamburg.de</a></td>
<td>Team members are responsible to reply</td>
<td>1-2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>before</td>
<td>Prepare introduction ppt for kick off event</td>
<td>EML HAW Flüchtlingsgesundheit W17 Section: organisation File: Introduction PPT Einführungs PPT Einführungfolien-Introduction2017-2-22-1.pptx</td>
<td>1. send to CF to complement 2. save corrected version on desktop</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1</td>
<td>before</td>
<td>Arrange Refugium flyers for displaying and distributing</td>
<td>Cupboard in the office N5.29 Shelf in the office N5.29 (AWO flyer)</td>
<td>Flyer topic: Hygiene, Nutrition, Physical activity, Health care, mental health and oral health AWO flyer in File: projects about refugee health</td>
<td>-sort 30 Refugium flyer of each topic and language out - 5 flyers of AWO</td>
<td>1</td>
<td>AWO flyers are needed</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>before</td>
<td>Organise money from program coordinator</td>
<td>Prof. Dr Christine Färber (Program coordinator)</td>
<td>-ask for money -save bills -copy bills -calculate expenses -show CF proof</td>
<td>1</td>
<td>In order to buy what is needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.1</td>
<td>before</td>
<td>Arrange snacks</td>
<td>Penny Bergedorf Alte Holstenstraße 23-25, 21031 Hamburg</td>
<td>-Nuts: walnuts, almonds, cranberries, raisins, peanuts, cashews -fruits: bananas, strawberries, paper plates, napkins</td>
<td>1</td>
<td>take bills and store at safe place</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

<table>
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<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
</table>
| 6.2  | before | Arrange drinks | Penny Bergedorf  
Alte Holstenstraße 23-25, 21031 Hamburg  
In office N5.29:  
Water: 4 water bottles in cupboard are filled by waterdispenser at HAW  
Tea: water boiler & 4 thermost flasks | REFUGIUM PROGRAM participants list 01.03-1.docx | -water, tea, instant coffee, milk, sugar, -plastic tea and coffee glasses, plastic spoons -hot water in thermost flasks | 2 | Take bills and store at save place |         |
| 7    | before | Print out participant list | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation  
File: participant list draft | Name tag_MSN_2102.pptx  
Nameplates  
Nameplates are in Office’s N5.29 cupboard | 1. complement name & role  
2. print out 3.cut and put in nameplates | 1 | If nameplates are not in office then ask the Dekanat | If PDF version has to be deleted |
| 7.2  | before | Create and print out name tags document | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation  
File: Name tags | Name tag_????.pptx  
Nameplates |         |         |         | |
| 7.3  | before | Upload name tags as an electronic re-source | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation  
File: Name tags | Name tag_????.pptx |         |         |         | |
| 7.4  | before | -Print out apology letter  
-Get it signed by CF | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation  
File: Letter of Apology / Entschuldigungsbrief | Entschuldigungsbrief-10.05.2017.docx  
Entschuldigungsbrief.docx neu.docx |         |         |         | |
<table>
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<th>What should be completed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.5</td>
<td>before</td>
<td>Create and print out arrows with exact date, time, room and place</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link .docx Etc.</td>
<td>1.complement date, time, room and place 2. print out</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.6</td>
<td>before</td>
<td>Upload as electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link .docx Etc.</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>On kick-off event day</td>
<td>Stick from SBAHN Bergedorf till the room</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link .docx Etc.</td>
<td>- Tape &amp; Foil - paste arrows showing direction to the room</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.1</td>
<td>On kick-off event day</td>
<td>Get the key of rooms and open</td>
<td>Take key of Dekanat secretariat office.</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.1</td>
<td>On kick-off event day</td>
<td>Arrange Rooms and child care space</td>
<td>In Room 2.09, cupboard 1 is a file with Mandalas and pencils for childcare</td>
<td></td>
<td>check if: - projector is working - arrange childcare space</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2</td>
<td>On kick-off event day</td>
<td>Arrange presentation in room</td>
<td>Laptop from office with latest introduction presentation of CF Projector in room</td>
<td></td>
<td>1.Laptop from office has to be connected with projector 2.open ppt</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

<table>
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<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.3</td>
<td>On kick-off event day</td>
<td>Arrange drinks and snacks on table</td>
<td>drinks and snacks from office N5.29</td>
<td></td>
<td>1. put snacks on plates 2.put drinks on table</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.4</td>
<td>On kick-off event day</td>
<td>Arrange flyers on table</td>
<td>Flyers from N5.29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.5</td>
<td>On kick-off event day</td>
<td>team member stays at entrance and welcomes participants</td>
<td>HAW HAMBURG Entrance: Ulmenliet 20 Entrance: Lohbrügger kirchstrasse 69</td>
<td></td>
<td>1. accompany participant to room 2. second team member stays there</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>during</td>
<td>Distribute flyers to participants</td>
<td>Flyers from N5.29</td>
<td>Flyers</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.1</td>
<td>during</td>
<td>Conduct kick off event</td>
<td>CF &amp;REFUGIUM team &amp; HPF trainers</td>
<td>-introducing team  -oral presentation  -answer question</td>
<td></td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.2</td>
<td>during</td>
<td>fill out the participants list</td>
<td>Printed out participant list from office N5.29</td>
<td>ask participants for their contact data</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>after</td>
<td>Check room before leaving</td>
<td></td>
<td>- projector &amp; lights off  - windows closed</td>
<td></td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.1</td>
<td>after</td>
<td>Remove arrows on the wall</td>
<td></td>
<td>- carry to office</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/ paper)</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be completed?</td>
</tr>
<tr>
<td>------</td>
<td>--------</td>
<td>---------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------</td>
<td>---------------</td>
<td>--------------------------</td>
<td>---------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>10.2</td>
<td>after</td>
<td>Give the key back</td>
<td>Put into postbox of the Dekanat (right side behind the door)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.3</td>
<td>after</td>
<td>Prepare participant list create new file in unit 2</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td>REFUGIUM program Participant list? Generation.doxc</td>
<td>List participants of kick off meeting &amp; online registration</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.4</td>
<td>after</td>
<td>Upload as electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td></td>
<td>1. create new file 2. upload there</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.5</td>
<td>after</td>
<td>Print out as hardcopy</td>
<td>Office N5.29 File on shelf</td>
<td>File REFUGIUM 2017 Participant list</td>
<td>-File in</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Organisation of Peer Facilitator Training (PFT) from page 9 to 15 (from step 11 to step 18)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be completed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>direct after kick off event</td>
<td>Create advertisement Email</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster File: Text for advertisement draft Shelf in the office N5.29</td>
<td>Mail-AushangEinladung.doxc Hardcopy version in file</td>
<td>1. Copy the text and paste into mail 2. Attach all Posters in pdf to Email</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
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<td>Task</td>
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<td>DOCUMENT (Electronic/ paper)</td>
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<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemente d?</td>
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</tr>
<tr>
<td>11.1</td>
<td>direct after kick off event</td>
<td>Add contacts for advertisement to email &amp; send email</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster File: Important contacts for advertisement -Shelf in the office N5.29</td>
<td>Adressliste aus Doku.pdf Mailadressen.docx Hardcopy file: Important contacts for advertisement</td>
<td>Write email to each contact seperately by addressing them by their last name</td>
<td>1</td>
<td>-Adressliste aus Doku.pdf contains names and email adress -Mailadress.docx contains only emails for circular email</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>1 week before</td>
<td>Check each bag according to topic by using inventory documents</td>
<td>18 REFUGIUM bags in Room 2.09 in cupboard 1 EMIL HAW Flüchtlingsgesundheit W17 Section: Refugium training/workshop material File: Refugium inventory Key for Room 2.09</td>
<td>Refugium Inventar Health care Tasche Bag.docx etc. Laminated inventar list in each bag</td>
<td>- read inventar - note what is missing</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.1</td>
<td>1 week before</td>
<td>complement missing documents and materials in each bag</td>
<td>Office N5.29 shelf Materials in cupboard 10 and 1 (2.09) Key for Room 2.09</td>
<td>Material Back up File Tip docs File</td>
<td>- look into file in each topic section - If needed then copy the original and use duplicate</td>
<td>2</td>
<td>-Material Back up File is structured according to 6 topics</td>
<td></td>
</tr>
<tr>
<td>12.2</td>
<td>1 week before</td>
<td>Prepare Poster</td>
<td>Room 2.09 in cupboard 10 Key for Room 2.09</td>
<td>Poster physical activity Poster hygiene</td>
<td>- take to N 5.29</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)
<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>WHO number of team member</th>
<th>HOW/ Material</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>WHAT should be complemented of</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.3</td>
<td>1 week before</td>
<td>Prepare material</td>
<td>Room 2.09 in cupboard 10 Key for Room 2.09</td>
<td>1</td>
<td>rope, shampoo, comb, plastic, ball</td>
<td>Health Guideline English, pdf Health Guideline Arabic, pdf Health Guideline Deutsch, pdf</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.4</td>
<td>1 week before</td>
<td>If health care workshop: prepare flyers and manuals in all needed languages</td>
<td>EMIL HAW</td>
<td>1</td>
<td>Flüchtlingsgesundheit W17 Section: Health guideline/ Rategeber Gesundheit</td>
<td>Manuals &amp; Flyers in 6 topics</td>
<td>-organize manuals and flyers according to topic -number of expected HPF</td>
<td>2 if not enough then print out in office</td>
</tr>
<tr>
<td>12.5</td>
<td>1 week before</td>
<td>Prepare flyers and manuals in all needed languages and topics</td>
<td>EMIL HAW</td>
<td>2</td>
<td>Flüchtlingsgesundheit W17 Section: manuals 2017 Flüchtlingsgesundheit W17 Section: flyers 2017</td>
<td>participant list of Generation</td>
<td>-Intern Mobile Phone -multilingual reminder about date, time, place call</td>
<td>2</td>
</tr>
<tr>
<td>13</td>
<td>5 days before</td>
<td>Call all participants, child care person &amp; trainers</td>
<td>EMIL HAW</td>
<td>2</td>
<td>Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of Generation</td>
<td>participant list of Generation</td>
<td>-Intern Mobile Phone -multilingual reminder about date, time, place call</td>
<td>2</td>
</tr>
<tr>
<td>13.1</td>
<td>5 days before</td>
<td>Send messages in WhatsApp to participants &amp; trainers</td>
<td>EMIL HAW</td>
<td>2</td>
<td>Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of Generation</td>
<td>participant list of Generation</td>
<td>-Computers in N2.09, N5.29</td>
<td>2</td>
</tr>
<tr>
<td>13.2</td>
<td>5 days before</td>
<td>Send emails to all participants &amp; trainers</td>
<td>EMIL HAW</td>
<td>2</td>
<td>Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of Generation</td>
<td>participant list of Generation</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
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<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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</tr>
</tbody>
</table>
| 14   | 4 days before | Organise money of program coordinator | Prof. Dr Christine Färber (Program coordinator) | - save bills  
- copy bills  
- calculate expenses  
- show CF proof | 1 | In order to buy what is needed |
| 14.1 | 4 days before | Arrange snacks | Penny Bergedorf  
Alte Holstenstraße 23-25,  
21031 Hamburg | nuts: walnuts, almonds, cranberries, raisins, peanuts, cashews  
-fruits: bananas, strawberries, -paper plates, napkins | 2 | take bills and store at safe place |
| 14.2 | 4 days before | Arrange drinks | Penny Bergedorf  
Alte Holstenstraße 23-25,  
21031 Hamburg  
In office N5.29:  
Water: 4 water bottles in cupboard are filled by waterdispenser at HAW  
Tea: water boiler & 4 thermos | - water, tea, instant coffee, milk, sugar, -plastic tea and coffee glass, plastic spoon  
-hot water in thermos, | 2 | |
| 15.  | 2 days before | Print out participant list | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation | REFUGIUM PROGRAM participants list 01.03-1.docx | 1 | |
| 15.1 | 2 days before | Print out apology letter  
Get it signed by the CF | EMIL HAW  
Flüchtlingsgesundheit W17  
Section: organisation  
File: Letter of Apology | Entschuldigungsbrief - 10.05.2017.docx | 1 | |
<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.2</td>
<td>2 days before</td>
<td>Print out Interim report</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Interim report</td>
<td>Interim report/ Zwischenzeugnis.docx</td>
<td>- get signed by CF - issued when participation is 2 times</td>
<td>1</td>
<td>-certificate about their attendance, description of the achieved training</td>
<td></td>
</tr>
<tr>
<td>15.3</td>
<td>2 days before</td>
<td>Create and print out arrows with exact date, time, room and place</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link.docx Etc.</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Training day</td>
<td>Stick from the SBAHN Bergedorf till the room</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link.docx Etc.</td>
<td>-Tape &amp; Foil - paste arrows showing direction to the room</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.1</td>
<td>Training day</td>
<td>Get the key of the rooms</td>
<td>Take from key Dekanat secretariat office.</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.2</td>
<td>Training day</td>
<td>Arrange snacks and drinks on table</td>
<td>in office N5.29</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.3</td>
<td>Training day</td>
<td>Arrange Rooms and child care space</td>
<td>In Room 2.09 in cupboard 1</td>
<td>file with mandalas and pencils for childcare</td>
<td></td>
<td>2</td>
<td>- make a circle with chairs -arrange childcare space</td>
<td></td>
</tr>
<tr>
<td>16.4</td>
<td>Training day</td>
<td>Arrange manuals, flyers, material on table</td>
<td>in office N5.29</td>
<td></td>
<td></td>
<td>1</td>
<td>-according to languages&amp; topic</td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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</tr>
<tr>
<td>16.5</td>
<td>Training day</td>
<td>team member stays at entrance and welcomes participant</td>
<td>HAW HAMBURG Entrance: Ulmenliet 20 Entrance: Lohbrügger kirchstrasse 69</td>
<td>1.accompany participant to room 2. second team member stays</td>
<td>2-3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>during</td>
<td>arrange groups based on languages (arabic, farsi, english etc.)</td>
<td></td>
<td>-Ask participants to sit on chairs - provide each group with workshop bags</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.1</td>
<td>during</td>
<td>Conduct first, second, third training day</td>
<td>CF &amp;REFUGIUM team &amp; HPF trainers</td>
<td></td>
<td>all</td>
<td>on last training day start of unit 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.2</td>
<td>during</td>
<td>Distribute manuals to participant</td>
<td>Manuals from table</td>
<td>- after the workshop</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.3</td>
<td>during</td>
<td>In each group participant list has to be filled in</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation REFUGIUM PROGRAM participants list 01.03-1.docx</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.4</td>
<td>during</td>
<td>ask for feedback</td>
<td>flipchart in room moderation points</td>
<td>-write on poster - and +</td>
<td>all</td>
<td>HPF paste moderation points</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>after</td>
<td>Check room before leaving</td>
<td></td>
<td>- projector &amp; lights off - windows closed</td>
<td>all</td>
<td>Responsibility of all team members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.1</td>
<td>after</td>
<td>Remove arrow on the wall</td>
<td></td>
<td>- carry to office</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.2</td>
<td>after</td>
<td>Give the key back</td>
<td>Put into postbox of Dekanat (right side behind the door)</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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</tr>
<tr>
<td>18.3</td>
<td>after</td>
<td>Prepare participant list</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td>REFUGIUM program Participant list? Generation date, day.docx</td>
<td>List participants of 1st day, 2nd day 3rd day</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.4</td>
<td>after</td>
<td>Upload as electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td>REFUGIUM program Participant list? Generation date, day.docx</td>
<td>1.create new file 2. upload there</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.5</td>
<td>after</td>
<td>Print out as hardcopy</td>
<td>Office N5.29 File on shelf</td>
<td>File REFUGIUM 2017 Participant list</td>
<td>-File in</td>
<td>1</td>
<td></td>
<td></td>
</tr>
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</table>

Organisation of farewell party from page 16 to 21 (from step 19 to step 28)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
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<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>before</td>
<td>send Invitation to all generations, graduates, Press office, program partners, supporters, students</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Participant list of 2 and 3 generation File: Participant list of? generation Section: unit 2 File: contacts of refugee</td>
<td>REFUGIUM program 2 generation Participant list. docx REFUGIUM program 3 generation Participant list. docx REFUGIUM program? generation Participant list. docx practice partners who cooperate with us (social management) contact</td>
<td>- send emails to Press office, program partners, supporters, students -send SMS or whatsapp messages to HPF with intern</td>
<td>2</td>
<td>email template can be added?</td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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</tr>
<tr>
<td>20</td>
<td>before</td>
<td>Create participant list of graduates</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Graduates list</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Graduates list</td>
<td>-1 list who participated in training -2 list who conducted workshops in refugee accommodations</td>
<td>-1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.1</td>
<td>before</td>
<td>Make certificate for HPFs who participated in training &amp; conducted workshops in refugee accommodations</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Certificates of 2 and 3 generation</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Certificates of 2 and 3 generation</td>
<td>1.complement the names and dates by using the certificate document as a template</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.1.1</td>
<td>before</td>
<td>Upload graduates list and certificate as an electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2</td>
<td>REFUGIUM program ? generation graduates list. doxc Zertifikat ? Generation.docx</td>
<td>1.create new file 2. upload there</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
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</tr>
<tr>
<td>21</td>
<td>before</td>
<td>Calculate reimbursement of each HPF</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Reimbursement details 2 and 3 generation/Auszahlung</td>
<td>1 REIMBURSEMENT TOTAL Details 2 and 3 generation.xlsx 2 REIMBURSEMENT TOTAL 2 and 3 generation.xlsx</td>
<td>1.complement names &amp; participation of HPF by using excel sheet as a template</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21.1</td>
<td>before</td>
<td>Upload as an electronic resource</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Reimbursement details ? generation/Auszahlung</td>
<td>1 REIMBURSEMENT TOTAL Details ? generation.xlsx 2 REIMBURSEMENT TOTAL ? generation.xlsx</td>
<td>1. use existent as template 2.create new file 3. upload there</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>before</td>
<td>Organise money from program coordinator</td>
<td>Prof. Dr Christine Färber (Program coordinator)</td>
<td>-ask for money -save bills -copy bills -calculate expenses -show CF proof</td>
<td></td>
<td>1</td>
<td>In order to buy what is needed</td>
<td></td>
</tr>
<tr>
<td>22.1</td>
<td>before</td>
<td>Prepare envelope with money for participants</td>
<td>Envelope from dekanat</td>
<td>HPF get 10 Euro for each Workshop</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22.2</td>
<td>before</td>
<td>Organize gifts for participants - Order HAW water bottle</td>
<td>HAW bottles: Fachschaftsrat GW (FSR) Room 0.85 email: <a href="mailto:katinkamalena.mustelin@haw-hamburg.de">katinkamalena.mustelin@haw-hamburg.de</a></td>
<td>-get Haw bottle of FSR -Buy cards - write ‘thank you’ messages in the cards</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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<td>-------------------------------------------------------------------------------</td>
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</tr>
</tbody>
</table>
| 23   | before  | **Arrange food**                          | 1. Mensaleiter Marco Drevs T +49.40.721 763 3                                             | https://www.haw-hamburg.de/fakultaeten-und-departments/lis/services/mensa-bergedorf.html   | 1. order cake, coffee, tea  
2. buy plastic, glass, paper plates, plastic cutlery, napkin | 2                          | take bills and store at save place                      |                                |
|      |         |                                            | 2. Penny Bergedorf                                                                       |                                                                                              |                                                                               |                           |                                |                                |
| 23.1 | before  | **Arrange drinks**                        | EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2  
File: Farewell party/Abschlussveranstaltung organisation | REFUGIUM program accounts.docx  
Getränkeliste-2.png                                                                 | 1. register with information REFUGIUM program accounts  
2. order the drinks from rewe online shop                                  | 1                          | take bills and store at save place                      |                                |
|      |         |                                            |                                                                                          |                                                                                              |                                                                               |                           |                                |                                |
| 23.2 | before  | buy fresh Roses & manage vase and decoration materials |                                                                                          |                                                                                              |                                                                               | 1                          | color of roses: yellow, orange but not red, pink  
take vase  
decoration: garlands |                                |
| 24   | before  | **Print out the graduates list and certificates** | EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2  
File: graduation  
File: certificates                                                                 | REFUGIUM program? generation Participant list. docx  
Zertifikat? Generation.docx                                  | 1. complement date, time, room and place  
2. print out | 1                          |                                |                                |
| 24.1 | before  | **Create and print out arrows with exact date, time, room and place** | EMIL HAW Flüchtlingsgesundheit 17 Section: organisation  
File: Arrows / Pfeile                                                                 | REFUGIUM PROGRAM arrow link.docx                                                                 |                                                                               | 1                          |                                |                                |
<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemente d?</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td>on training day</td>
<td>Stick from SBAHN Bergedorf till the room</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link.docx</td>
<td>-Tape &amp; Foil - paste arrows showing direction to the room</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.1</td>
<td>on training day</td>
<td>team member stays at entrance and welcomes participants</td>
<td>HAW HAMBURG Entrance: Ulmenliet 20 Entrance: Lohbrügger kirchstrasse 69</td>
<td></td>
<td>1. accompany participant to room 2. second team member stays there</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.2</td>
<td>on training day</td>
<td>Get the key of rooms and open</td>
<td>Dekanat secretariat office</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.3</td>
<td>on training day</td>
<td>Decorate room with materials &amp; white board</td>
<td></td>
<td></td>
<td>write “Herzlich Willkommen” in various languages</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.4</td>
<td>on training day</td>
<td>Collect catering from “Student affairs cafeteria”</td>
<td></td>
<td></td>
<td><a href="https://www.haw-hamburg.de/fakultaeten-und-departments/ls/services/mensa-bergedorf.html">https://www.haw-hamburg.de/fakultaeten-und-departments/ls/services/mensa-bergedorf.html</a></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.5</td>
<td>on training day</td>
<td>Decorate snacks and food on table</td>
<td>-Drinks from Rewe -</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.6</td>
<td>on training day</td>
<td>Place materials on table</td>
<td>-water bottles, cards, roses, envelope from office N5.29</td>
<td></td>
<td>rose, gift, water bottles, envelope</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### REFUGIUM Program Management Tool Unit 2 Peer Facilitator Training (PFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member(s)?</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>during</td>
<td>Conduct farewell party</td>
<td>CF &amp; REFUGIUM team &amp; HPF trainers</td>
<td></td>
<td>Be very friendly and polite to participants</td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.1</td>
<td>during</td>
<td>announce the graduate’s name</td>
<td>graduation list &amp; certificate from office N5.29</td>
<td></td>
<td>- give certificate, rose, water bottle, envelope</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.2</td>
<td>during</td>
<td>make pictures</td>
<td>smartphone camera</td>
<td></td>
<td>- of individual</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.3</td>
<td>during</td>
<td>fill up the participants list</td>
<td>Printed out participant list from office N5.29</td>
<td></td>
<td>ask participants for their contact data</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>after</td>
<td>Check room before leaving</td>
<td></td>
<td></td>
<td>- lights off</td>
<td>all</td>
<td>Responsibility of all team members</td>
<td></td>
</tr>
<tr>
<td>27.1</td>
<td>after</td>
<td>Remove arrows which are pasted on the wall</td>
<td></td>
<td></td>
<td>- carry to office</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27.2</td>
<td>after</td>
<td>Give the key back</td>
<td>Put into postbox of Dekanat (right side behind the door)</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27.3</td>
<td>after</td>
<td>Prepare participant list and upload</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2</td>
<td></td>
<td>List participants</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>End of unit 2</td>
<td>Fill out the formative process evaluation questionnaire</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 2 File: evaluation</td>
<td>formative process evaluation questionnaire.pdf</td>
<td>1. fill out 2. upload in file</td>
<td>1</td>
<td>In order to improve the program (perform evaluation)</td>
<td></td>
</tr>
</tbody>
</table>
4.3.3 Unit 3 Didactical Peer Facilitator Training (DPFT)

In unit 3 REFUGIUM team members go through 11 activities/processes to conclude the unit. In the following each activity will be presented and analysed in regard to the subthemes of current situation, barriers, resources and solutions.

| Current situation, Unit 3 Didactical Peer Facilitator Training (DPFT) |
|-------------------------|-------------------------|-------------------------|-------------------------|
| 1 Determination of dates, place and staff |
| 2 Arrangement of staff and place |
| 3 Preparation of bags for the PF |
| 4 organisation of catering |
| 5 contact participants and trainers |
| 6 Printing, using of needed documents |
| 7 preparation of workshop material |
| 8 organisation shortly before training |
| 9 organisation during training |
| 10 organisation after training |
| 11 Evaluation |

Table 11: current situation of unit 3

1. Determination of dates, place and staff
2. Arrangement of staff and place

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determination of dates, place and staff</td>
<td>- not aware of specific steps</td>
<td>participant list</td>
<td>documentation of additional steps</td>
</tr>
<tr>
<td>Arrangement of childcare &amp; rooms</td>
<td>- not aware of specific steps</td>
<td>- PF of 1&lt;sup&gt;st&lt;/sup&gt; generation - knowledge provided - child care bag</td>
<td>documentation of additional steps</td>
</tr>
</tbody>
</table>
Current situation
On the last training day the participants were informed about the Unit 3 and are asked about possible dates and timings regarding training at the HAW. The REFUGIUM team and program coordinator decide with participants, dates and times are suitable. In the next step the REFUGIUM team and program coordinator determines the peer facilitator trainer, who will conduct DPFT. As a result result rooms can be booked and childcare person organised.

Barrier
The team is not aware of the additional specific steps in UNIT 3. The steps need to be documented with information about resources.

Resource
The documented steps of UNIT 2 existed as resources, child care bags, and participant list for example. In the team peer facilitators of the first generation, were asked to conduct the DPFT.

Solution
The additional steps were documented in the tool.

3 Preparation of bags for HPF

<table>
<thead>
<tr>
<th><strong>Current situation</strong></th>
<th><strong>Barrier</strong></th>
<th><strong>Resource</strong></th>
<th><strong>Solution</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Team prepares bags</td>
<td>-no equipment bag for PF exist</td>
<td>manuals flyer material money of CF</td>
<td>bags of HPF</td>
</tr>
</tbody>
</table>

Current Situation/
The Health peer facilitator should conduct workshops in refugee accommodation with the help of the REFUGIUM team. It is for that reason that the participants need to be equipped with the resources of the program. The REFUGIUM team is asked to prepare bags for the PF.

Barrier
It was observed that no equipment bag for the PF currently existed. The participants were not prepared for this training, they needed to be equipped with a bag with a file containing all manuals, flyers and materials.

Resource
The needed resources are manuals, flyers and material for workshops.
Solution
In the first step money is organised by the CF, because equipment has to be purchased. For the third unit plastic files and bags were bought and files were complemented with manuals and flyers in a transparent foil for Health peer facilitators. The equipment needs to be robust, therefore files were made from plastic and bags were chosen out of cotton. Each bag contained the prepared file and workshop materials like soap, rope, shampoo, dental kit, comb, and plaster.

![Figure 31: files for training (DPFT)](image1)
![Figure 32: bags for training (DPFT)](image2)

4 Organisation of catering

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>organisation drinks and</td>
<td>no</td>
<td>money of CF</td>
<td>thermost flasks</td>
</tr>
<tr>
<td>food</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current situation
REFUGIUM team member purchases the refreshment. For drinks water in glass bottles, tea, sugar, and hot water in thermost flasks were organized. Four glass bottles, sugar and 4 thermost flasks existed as resources in the office. Afterwards the snacks were purchased and stored in the office. As nuts were walnuts, almonds, cranberries, raisins, peanuts, hazelnuts, and cashews were purchased. For snacks, plastic cutlery, paper plates and napkins were bought.

Resource
As money was provided prior to organising catering, effective teamwork was possible, because the responsibility to purchase refreshment could be allocated to any REFUGIUM team member. Furthermore, thermost flasks existed as resources in the office. As a result time could be saved

5. Contact participants and trainers

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Current situation**

First of all, emails, sms, whatsapp messages were sent as reminders about upcoming training with date, time, place to the registered participants and trainers. The text was developed in English and was translated into Arabic and Farsi and was sent with the intern mobile phone.

**Resource**

The REFUGIUM intern mobile phone existed as a resource and functioned. The participant list existed as a resource on the platform.

6 The printing and using of needed documents

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- observation</td>
<td>arrows, nametags, participant list draft, apology letter interim report</td>
<td>development and upload : HTA,HTG guidelines -documentation of new steps with resources</td>
</tr>
<tr>
<td></td>
<td>- printing of documents</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**

In this unit health peer facilitators are trained by trainers how to conduct a workshop. The first didactical PF training of the PF was conducted in the church in which 4 HPF's participated alongside the REFUGIUM team. The most experienced health peer facilitator trainer Sameer, a federal volunteer worker in the field of refugee health conducted the training. As he is the health peer facilitator of first generation he is aware of barriers and resources of conducting a workshop in a refugee accomodation. In this step documents such as arrows, nametags, participant lists draft, apology letter, interim report are printed out.

**Barrier**

Firstly, It was observed that the didactical PF training was conducted without a corresponding document in which all important facts regarding barriers and ressources were documented. The trainer was just recalling things from his memory.
(observation protocol. p.). The procedure differs from the usual procedure. The steps need to be documented with information about resources.

**Resource**

The peer facilitator of the first generation and trainer were part of the REFUGIUM program and were a huge resource. For this step arrows, nametags, participant list drafts, apology letters, and interim reports existed as resources in electronic platform EMIL HAW Flüchtlingsgesundheit W17.

**Solution**

In order to ensure sustainability, knowledge and experience of the PF the trainer had to be documented so that it can be used as a resource in the future by the other PF trainer in the REFUGIUM program. The analysis of the questionnaire identified that this unit demanded the development of two documents the (HTG) guideline and the (HTA) appendix. The (HTA) appendix training is needed for peer facilitators how to conduct a workshop in a refugee camp. The (HTG) guideline is needed for peer facilitator trainers how to train trainees. In a team meeting this need was discussed with program coordinator and it was decided that the most experienced peer facilitator trainers will develop both guidelines. Sameeer developed the two documents under the supervision of the program coordinator Prof. Dr. Färber. Participatory action research demands participants and members of vulnerable groups to actively take part in the development of a program. Both documents were uploaded.

### 7 preparation of workshop bags and material

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>taking out and checking of workshop bags and materials</td>
<td></td>
<td>-flyers</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-manuals file</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-18 workshop bags</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-18 inventar</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-back up file</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-organised material</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-health guideline in pdf</td>
<td></td>
</tr>
</tbody>
</table>
Current situation/
The needed workshop bags for the training are taken from room N2.09. Using inventory documents each bag is checked. The inventory is read and what is missing is complemented with the help of back up file and other files in office. In case of the health care workshop, the health guide line documents are printed out.

Resource
The following items existed as flyers, manuals files, 18 workshop bags with 18 laminated inventories documents in room N 2.09, and belonging back up file in room N5.29, health guideline in pdf format and also systematically ordered on shelf. Furthermore 7 files (9) in hardcopy: 1) Material backup; 2) contacts for advertisement; 3) invitation 2017; 4) BUFDI (Federal worker); 5) Tip docs; 6) REFUGIUM participant list; 7) projects about refugee health (AWO). Manuals and flyers existed on the platform and manuals of six topics were printed out in various languages and were filed in a file as a ressource. The flyers for these topics were taken out of the shelf in 5.29 and were organised for each topic in all languages.

8. organisation shortly before training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>-stick arrows</td>
<td>-arrows</td>
<td>- manual, flyer</td>
<td></td>
</tr>
<tr>
<td>-preparation of room, manual, flyer, catering</td>
<td>-child care bag</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-welcome participants</td>
<td>- thermos</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-glas bottles</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>-documentation</td>
<td></td>
</tr>
</tbody>
</table>

Current Situation
Shortly before the training each team member takes the responsibility for one task. One stuck arrows from the SBAHN Bergedorf till the room. The others get the key of rooms from the dean and opened them. The person responsible for the key and a team member opened the room and started to move the tables aside in order to
make a circle with chairs. The child care space is prepared and child care bag is provided. Additionally, one table was prepared with snacks and drinks. On one table snacks are decorated on plates. Drinks are placed on the same table. for drinks hot water is filled in thermos flasks and water in glass bottles in the office. On the second table the manuals and flyers are arranged. The posters were displayed on the blackboard. One team member stayed at the entrance and welcomes participants and accompanies them to room.

**Resource**

As resource for these step are the already available documents such as arrows, flyers, manuals, and child care bags, thermos, glass bottles. The steps are documented with information about resources in the process tool, therefore the team was aware of them.

**9 Organisation during training**

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>arranging groups</td>
<td>-not aware specific steps of training</td>
<td>-bags for HPFs</td>
<td>documentation of additional steps</td>
</tr>
<tr>
<td>distribution of bags</td>
<td></td>
<td>-participant list</td>
<td></td>
</tr>
<tr>
<td>filling out participant list</td>
<td></td>
<td>-workshop bags</td>
<td></td>
</tr>
<tr>
<td>asking for feedback</td>
<td></td>
<td>-HTA and HTG</td>
<td></td>
</tr>
</tbody>
</table>

**Current situation**

In the beginning of training participants are asked to sit in groups according to the language they understand (Arabic, Farsi, English, Russian etc.). Each group is provided with a workshop bag in one of the topics. Then the training is conducted. The bag for HPFs were distributed in needed languages to participants. The printed out HTG guidelines are distributed to the HPF trainer, by using that as a resource the trainer can conduct the applied training phase. The HTA guideline is distributed to health peer facilitators. The HPF gets opportunity at a rehearsal. Moreover, the participant list was filled out by asking each member their numbers, email, name, address.

**Barrier**

The team is not aware of the specific steps during the training, because it differs from unit 2. The steps need to be documented with information about resources.

**Resource**
As resource manuals on the platform, printed out manuals organised in files, HTA and HTG documents, the participant list electronically saved in EMIL HAW all existed.

Solution
The additional steps were documented in the tool.

10 Organisation after training

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>cleaning room</td>
<td></td>
<td>steps are documented</td>
<td></td>
</tr>
<tr>
<td>removal of arrows</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>uploading participant list</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current situation
The organisation after the event is as followed: the room has to be checked to see if it is clean, arrows which are posted on the wall have to be removed, keys have to be given back to the dean. Back in the office the registered participants have to be added in the participant list and participant list has to be documented and uploaded electronically.

Barrier
The team is aware of the organisation shortly after the training. The steps are documented with information about resources in the program processes tool.

11. Evaluation
In order to improve the program, in each phase evaluation has to be performed. At the end of the unit the REFUGIUM team members fill out the formative process evaluation questionnaire and uploads it in the file of unit 3 in EMIL HAW Flüchtlingsgesundheit W201

<table>
<thead>
<tr>
<th>No</th>
<th>Unit</th>
<th>Setting</th>
<th>Document electronic</th>
<th>Material</th>
<th>Tool</th>
<th>In total</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Didactical Peer Facilitator Training (DPFT)</td>
<td>HAW</td>
<td>-(HTG) guideline training -(HTA) appendix</td>
<td>Bags for HPF</td>
<td>REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 12: summary of uploaded documents in EMIL HAW and developed material for unit 3
Instruction of the REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)

The REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT) is comprised of 11 steps and 7 pages.

**Content**- The third unit is the Didactical peer facilitator training (DPFT) in which the peer facilitator (PF) is trained about theory on how to conduct workshops and receive opportunities to do exercise in didactics. It is an additional phase and might not be compulsory to conduct, consultation with the program coordinator is required.

**Aim**- The use of this tool shall enable new REFUGIUM team members to organise, conduct, and evaluate unit 3 independently.

**Ressources**- The electronic resources (documents) required for Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT) are found in the electronic platform EMIL HAW Flüchtlingsgesundheit W17 in the sections: Organisation, Manuale 2017, Flyer 2017, REFUGIUM Training/ workshop material, Unit Unit 3 Didactical Peer Facilitator Training (DPFT). The needed material and documents in hardcopy are found in room N.2.09 (Cupboard 1 and 10) and room N5.29.

**Structure**- The unit 3 comprises of one part.

**Sustainability**- Constant update regarding new steps and resources (documents and materials) according to the latest state of the program is needed. REFUGIUM team member consult about needed changes with the program coordinator. The only person responsible for facilitating changes is the program coordinator.

**1-1.1- Determination of dates, place and staff**

The participants were trained in 3 days about the six topics, but to be qualified to work as a peer facilitator they need to be skilled in two sessions. In the Unit 3 peer facilitators are trained by peer facilitators trainers how to conduct a workshop. On the last training day the participants are informed about the Unit 3 didactical training and are asked about possible dates and timings regarding training at the HAW. The REFUGIUM team and program coordinator decide with participants date and time. In the next step the REFUGIUM team and program coordinator determines the peer facilitator trainer, who will conduct the DPFT.
2- 2.1 Arrangement of staff and place
In the second step rooms are booked at the faculty office (Fakultätsservicebüro) for the two sessions. Further to this the peer facilitator trainer and child care person are arranged with using the participant list of previous generations.

3- 3.3 Preparation of bags for PF
The peer facilitator should conduct workshops in refugee accomodation with the help of REFUGIUM team. Therefore, the PF needs to be equiped with the resources of the program. In the first step money is organised CF, because equipment has to be purchased. Plastic files and bags are bought and files are complemented with manuals and flyers in a transparent foil for peer facilitators. The equipment needs to be robust, therefore files out of plastic and bags are chosen out of cotton. Each bag contains the prepared file and workshop materials like soap, rope, shampoo, dental kit, comb, plaster.

4- 4.1 organisation of catering
The organisation of catering requires organising money from the project coordinator prior to purchasing drinks and snacks.

5- 5.1 contact participants and trainers
The bags for peer facilitators are prepared, now all registered participants had to be reminded about upcoming training. First, emails, sms, whatsapp messages as reminders about upcoming training with date, time, place to to the registered participants and trainers were sent. The text is developed in english and is translated into Arabic and Farsi and is sent with intern mobile phone.

6- 6.5 Printing, using of needed documents
In order to train the peer facilitators didactically the REFUGIUM program uses two guidelines. At first the REFUGIUM team provides the peer facilitator trainer with the
HTA (Health Workshops Training Appendix - for peer facilitators) guideline, which explains how to conduct a workshop in a refugee camp. This HTA guideline is also distributed to all participants and is a resource for them, when they are conducting in a real life scenario. Secondly the peer facilitator trainers are equiped by the REFUGIUM team with the HTG (Health Workshops Training Guideline (HTG) - How to train the trainees) guideline, which explains to them (peer facilitaotors trainers) how to train trainees. This document is only for the peer facilitator trainer and is not distributed to peer facilitators. Both documents are printed out in line with the numbers of peer facilitator trainers (HTG guideline) and peer facilitators (HTA appendix). Both documents are developed further and thus need the aproval of the program coordinator.

Additionally, the documents such as arrows, nametags, the participant list draft, apology letters, and the interim report are updated and printed out.

7-7.1 Preparation of workshop material
In the Didactical Peer Facilitator Training the peer facilitators get the opportunity to exercise and rehearse the didactics of six topics (physical activity, hygiene, oral health, health care, mental health, nutrition). In order to prepare the training and workshop, first of all the 18 workshop bags in room N2.09 are checked with the help of inventory list. If something is missing it is complemented with the help of the back-up file, which documents each material as both a resource and tip doc file in office N5.29. The belonging posters and materials are taken from room N2.09. For the topic of health care, the health guideline has to be printed out.

8-8.5 Organisation shortly before training
Shortly before the training each team member takes the responsibility for one task. One sticks arrows from the SBAHN Bergedorf till the room. The others gets the key of rooms from the dean and open them. In the room the tables are moved aside and a circle with chairs is made. The child care space is prepared and child care bag is provided. Additionally, one table is prepared with snacks and drinks. On one table snacks are decorated on plates. Drinks are placed on the same table. For drinks hot water is filled in thermos flasks and water in glas bottles in the office. On the second table the manuals and flyers are arranged. The posters are displayed on the blackboard. One team member stays at entrance and welcomes participants and accompanies them to the room.

9- 9.4 Organisation during training
In the beginning of training participants are asked to sit in groups according to the language they understand (Arabic, Farsi, English, Russian etc.). Each group is provided with a workshop bag in one of the topics. Then the peer facilitator trainers conduct the training. The bags for PF are distributed according to needed languages to participants. The printed-out HTG guidelines are distributed to the PF trainer, by using that as a resource the trainer can conduct the didactical training. The HTA appendix is distributed to the health peer facilitator trainer and participants. The Peer facilitator trainer discussed the HTA appendix with PF gives them the opportunity to rehearsal.

In the end the participant list is filled out by asking each one their numbers, email, name, adress.

10-10.5 Organisation after training

The organisation after the event is as follows: the room has to be checked to see if it is clean, arrows which are posted on the wall have to be removed, the key has to be given back to the dean. Back in the office the registered participants have to be added in the participant list and participant list has to be documented and uploaded electronically.

11 Evaluation

In order to improve the program, in each phase evaluation has to be performed. At the end of the unit the REFUGIUM team member fills out the formative process evaluation questionnaire and uploads it in the file of unit 3 in EMIL HAW Flüchtlingsgesundheit W201

Figure 33: Unit 3 Didactical Peer Training (DPFT) in EMIL HAW Flüchtlingsgesundheit W17

4.3.3.2 REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)
<table>
<thead>
<tr>
<th>Step</th>
<th>When</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Last day of training of unit 2</td>
<td>Decide with participants date &amp; time of ATPHF</td>
<td>Program coordinator REFUGIUM program Participants REFUGIUM team</td>
<td></td>
<td></td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1</td>
<td>before</td>
<td>Decide with Program coordinator who will conduct DPFT</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 2 File: Participant list of 2 and 3 generation</td>
<td>REFUGIUM program 2 generation Participant list. doxc REFUGIUM program Participant list 3 Generation.docx</td>
<td>Consult Arabic and Farsi speaking team members or HPF</td>
<td>Refugium team &amp; CF</td>
<td>Decide with CF whom to ask for support</td>
<td>1.column about potential trainers: language, experience, attendance</td>
</tr>
<tr>
<td>2</td>
<td>before</td>
<td>Book room</td>
<td>Verwaltung Fakultätservicebüro Room 0.14 e-mail: raumvergabe_lifesciences(@)haw-hamburg.de</td>
<td><a href="https://www.haw-hamburg.de/fakultaeten-und-departments/ls/fakultaetservicebuero.html">https://www.haw-hamburg.de/fakultaeten-und-departments/ls/fakultaetservicebuero.html</a></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>2.1</td>
<td>before</td>
<td>Arrange a person for child care</td>
<td>Gunnar Paetzelt Ulmenliet 20 Room N 5.33 T +49.40.428 75-6311</td>
<td>Contract/Werkvertrag</td>
<td>Student with a Werkvertrag for all dates</td>
<td></td>
<td>Add to email</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>before</td>
<td>Organise money from program coordinator</td>
<td>Prof. Dr Christine Färber (Program coordinator)</td>
<td></td>
<td>-save bills - copy bills - calculate expenses -show CF proof</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>before</td>
<td>Buy bags, files and transparent folder</td>
<td>File, bag &amp; transparent folder: Shop Schum EuroShop Alte Holsten Straße 20 21031 Hamburg Plastic Files Bags out of fabric Transparent folder</td>
<td></td>
<td>According to number of participants</td>
<td>2</td>
<td>participant get a bag</td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>When</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/ paper)</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be coplemented?</td>
</tr>
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<td>---------------------------</td>
<td>---------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>3.2</td>
<td>before</td>
<td>Take flyers &amp; manuals and put into file in transparent folder</td>
<td>Flyers in office N5.29 EMIL HAW Flüchtlingsgesundheit W17 Section: Manuale 2017 Manuals in office N5.29</td>
<td>Flyers in 6 topics Manuals in 6 topics</td>
<td>-According to language files have to be prepared -print manuals</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.3</td>
<td>before</td>
<td>Put in each bag the prepared file and workshop materials</td>
<td>-Prepared file -Bag -Workshop material in room 2.09, cupboard 10</td>
<td>-soap -rope -shampoo -dental kit -comb -plaster</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>before</td>
<td>Arrange snacks</td>
<td>Penny Bergedorf Alte Holstenstraße 23-25, 21031 Hamburg</td>
<td></td>
<td>nuts : walnuts, almonds, cranberries, raisins, peanuts, hazelnuts, cashews etc. -fruits: apple, bananas, strawberries, grapes, oranges) -paper plate, napkin (serviette)</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>before</td>
<td>Arrange drinks</td>
<td>Penny Bergedorf Alte Holstenstraße 23-25, 21031 Hamburg In office N5.29: Water: 4 water bottles in cupboard are filled by waterdispenser at HAW Tea: water boiler &amp; 4 thermos</td>
<td></td>
<td>-water, tea, coffee, milk, sugar, hot water in thermos flasks, - tea and coffee, plastic glasses, plastic spoons</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>When</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/ paper)</td>
<td>HOW/Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
</tr>
<tr>
<td>------</td>
<td>------------</td>
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<td>------------------------------------------------------------------------------------------</td>
<td>-----------------------------</td>
<td>--------------</td>
<td>--------------------------</td>
<td>-------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>5</td>
<td>2 days before</td>
<td>Call all participants &amp; trainers</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td></td>
<td>- use the Intern Mobile Phone</td>
<td>2</td>
<td>Arabic, Farsi speaking members shall call</td>
<td></td>
</tr>
<tr>
<td>5.1</td>
<td>2 days before</td>
<td>Send messages in Whatsapp to all participants &amp; trainers</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of? Generation</td>
<td></td>
<td>- use the Intern Mobile Phone</td>
<td>2</td>
<td>Template in intern mobile</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>before</td>
<td>Print out HTG</td>
<td>EMIL HAW Flüchtlingsgesundheit 17 Section: unit 3 File: HTA and HTG</td>
<td>How to train the trainees - Health workshops training guideline HTG - Englisch.docx</td>
<td>According to number of peer facilitator trainers - only for peer facilitator trainer - not for PF</td>
<td>1</td>
<td>How to train trainees-health workshop guideline training (HTG)</td>
<td>In process, needs approval of the CF</td>
</tr>
<tr>
<td>6.1</td>
<td>before</td>
<td>Print out HTA</td>
<td>EMIL HAW Flüchtlingsgesundheit 17 Section: unit 3 File: HTA and HTG</td>
<td>Health workshops training appendix HTA.docx</td>
<td>-print according to number of participants - distribute to peer facilitators</td>
<td>1</td>
<td>Health workshop training appendix (HTA)</td>
<td>In process, needs approval of the CF</td>
</tr>
<tr>
<td>6.2</td>
<td>before</td>
<td>Take name tags</td>
<td>EMIL HAW Flüchtlingsgesundheit 17 Section: organisation File: Name tags</td>
<td></td>
<td>Nameplates are in office’s cupboard</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.3</td>
<td>before</td>
<td>Print out apology letter</td>
<td>EMIL HAW Flüchtlingsgesundheit 17 Section: organisation File: Letter of Apology / Entschuldigungsbrief</td>
<td>Entschuldigungsbrief - 10.05.2017.docx Entschuldigungsbrief.docx neu.docx</td>
<td>Get it signed by the CF</td>
<td>1</td>
<td></td>
<td>2 one to be complemented</td>
</tr>
</tbody>
</table>

REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)
REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>When</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4</td>
<td>before</td>
<td>Print out Interim report Get it signed by CF</td>
<td>Frau Prof. Dr Christine Färber Program coordinator of REFUGIUM program</td>
<td>Interim report</td>
<td>- Ask the CF for the interim report</td>
<td>1</td>
<td>Interim report is issued when participation is 3 times</td>
<td></td>
</tr>
<tr>
<td>6.5</td>
<td>before</td>
<td>Print out Arrows with exact date, time, room and place</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: organisation File: Arrows / Pfeile</td>
<td>REFUGIUM PROGRAM arrow link.docx Etc.</td>
<td>1.complement date, time, room and place 2. print out</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>1 week before</td>
<td>Check each bag according to topic by using Inventar documents &amp; take</td>
<td>18 REFUGIUM bags in Room 2.09 in cupboard 1 EMIL HAW Flüchtlingsgesundheit W17 Section: Refugium training/ workshop material File: Refugium Inventar Key for Room 2.09</td>
<td>Refugium Inventar Health care Tasche Bag.docx etc.</td>
<td>- read inventory - note what is missing</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.1</td>
<td>1 week before</td>
<td>If health care workshop: print out health guideline</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: Health guideline/ Ratgeber Gesundheit</td>
<td>Health Guideline English.pdf Health Guideline Arabic.pdf Health Guideline Deutsch.pdf</td>
<td>1</td>
<td>Health guidelines are out of stock, therefore print them out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Training day</td>
<td>Stick arrows from SBAHN the Bergedorf till the room</td>
<td></td>
<td>Tape &amp; Foil - paste arrows showing direction to the room</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>When</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/ paper)</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
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</tr>
</tbody>
</table>
| 8.1  | Training day | Team member stays at entrance and welcomes participant | HAW HAMBURG  
Entrance: Ulmenliet 20  
Entrance: Lohbrügger kirchstrasse 69 |                               | 1.accompany participant to room  
2. second team member stays there | 2-3                      |             |             |
| 8.2  | Training day | Get the key of rooms | Take from key Dekanat secretariat office. |                               |               | 1                   |         |             |
| 8.3  | Training day | Arrange snacks & drinks on table |                               |                               |               | 1                   |         |             |
| 8.4  | Training day | Place bags on table | prepared bags from office N5.29 |                               |               | 1                   |         |             |
| 8.5  | Training day | Arrange Rooms and childcare space | In Room 2.09 in cupboard 1 | file with mandalas and pencils for childcare | - make a circle with chairs  
- arrange childcare space | 2                   |         |             |
| 9    | during      | arrange groups based on languages (arabic, farsi, english etc.) |                               | workshop bags | - Ask participants to sit on chairs  
- provide each group with workshop bag | 1                   |         |             |
<p>| 9.2  | during      | Distribute bag to each participant | Prepared PF bags |                               |               |         |             |</p>
<table>
<thead>
<tr>
<th>Step</th>
<th>When</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
</table>
| 9.3  | during | Conduct applied training phase | CF & REFUGIUM team & HPF trainers | HTA and HTG printed out | - PF trainer works with HTG  
- PF trainer distributes and discusses HTA with the PF  
- PF exercises | all | on last training day start of unit 3 |
| 9.4  | during | In each group participant list has to be filled in | EMIL HAW Flüchtlingsgesundheit W17  
Section: organisation | REFUGIUM PROGRAM participants list 01.03-1.docx | - lights off  
- windows closed  
- clean board | 1 |
| 10   | after | Check room before leaving | | | | | Responsibilty of all team members |
| 10. 1| after | Give the key back | Put into postbox of Dekanat (right side behind the door) | | | |
| 10. 2| after | Prepare participant list  
create new file in unit 3 | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 3  
File: participant list of? Generation | REFUGIUM program Participant list? Generation.docx | List participants | 1 |
| 10. 3| after | Upload as electronic ressource | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 3  
File: participant list of? Generation | | 1.create new file  
2. upload there | 1 |
| 10. 4| after | Print out as hardcopy | Office N5.29  
File on shelf | File REFUGIUM 2017 Participant list | -File in | 1 |
# REFUGIUM Program Management Tool Unit 3 Didactical Peer Facilitator Training (DPFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>When</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/ paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. 5</td>
<td>after</td>
<td>Complement participant list of graduates</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: Participant list of graduates generation</td>
<td>REFUGIUM program generation Participant list of graduates. doxc</td>
<td>-1 list who participated in applied training phase</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>End of unit 3</td>
<td>Fill out formative process evaluation questionnaire</td>
<td>EMIL HAW Flüchtlingsgesundheit W W17 Section: unit 3 File: evaluation</td>
<td>formative process evaluation questionnaire.pdf</td>
<td>1.fill out 2.upload in file</td>
<td>1</td>
<td>In order to improve the program (perform evaluation)</td>
<td>Add in email</td>
</tr>
</tbody>
</table>
4.3.4 Unit 4 Applied peer facilitator training (APFT)

In unit 4 REFUGIUM team members go through 9 activities/processes to conclude the unit. In the following, each activity will be elaborated in regard to the subthemes current situations, barriers, resources and solution.

<table>
<thead>
<tr>
<th>Current situation, Unit 4 Applied peer facilitator training (APFT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
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<td>3</td>
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<tr>
<td>4</td>
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<td>7</td>
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<tr>
<td>8</td>
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<tr>
<td>9</td>
</tr>
</tbody>
</table>

Table 13: current situation of unit 4

1 Determination of dates, place and staff

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultation of dates, place and staff</td>
<td>- not aware of specific steps</td>
<td>CF</td>
<td>- documentation of additional steps</td>
</tr>
<tr>
<td></td>
<td>- no template for recruitment of refugee accommodations</td>
<td></td>
<td>- template for recruitment of refugee accommodations</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- practice partners who cooperate with us contact data.doxc.</td>
</tr>
</tbody>
</table>

Current Situation

There are two different types of camps, the first one is the initial reception camp and the second is the so-called secondary camps.

The form of a camp determines the way the REFUGIUM team addresses cooperation partners and gets access to conduct a workshop there.
For organising and implementing a workshop in an initial reception camp program coordinator and the REFUGIUM team has to establish a functioning network with practice partners like the social management workers of the specific refugee accomodation and the responsible health office. In order to get access to initial reception centers, health offices are important especially as cooperation partners. The health office enables and helps the REFUGIUM Team to get access to the refugee camp and its social management. The program coordinator invited health office workers into the university to introduce to them the REFUGIUM program and ask them for cooperation. It was decided that the health office will support the refugium program to hold workshops in an initial reception camp in hamburg. A meeting between social management worker, health office worker and the refugium team was held at the initial reception center to discuss and observe the location. The concerns and possibilities were discussed and the contacts of a responsible person were given to the camp. It was decided that the security team would be aware of the program team, and thus all students and participants will be allowed to enter the camp.

In the next step the REFUGIUM team and program coordinator decided upon the date and time of the workshops. Additionally, the REFUGIUM team and program coodinator determined who the health peer facilitator trainer would be, who will accompany the new health peer facilitators in conducting workshops. As a result the social management workers of various refugees, accomodation and practice partners were contacted and asked if the REFUGIUM program would be allowed to conduct workshops there. The given and proposed timings are discussed with program coordinator.

For organising a workshop in a secondary camp, it is not important to cooperate with the health office. The social management worker is then contacted by email or phone and asked about the possibility of conducting a workshop there.

**Barrier**

The email for recruitment has to be written by team members and a draft does not exist. This task can only be accomplished by someone who is aware of the German language. It is not clear what has to be asked of the social management.

**Resource**

Program coordinator is in contact with health offices and social management worker. The CF conducted workshops already during the first generation.
Solution
Two documents were made and uploaded as resources: a template for recruitment of refugee accommodations and practice partners who cooperate with us (social management) contact data.xlsx. In the tool it is documented about which topics the REFUGIUM team has to ask the social management worker (time, date, rooms, child care, water, toilets, permission to knock at doors). It is documented who it is that needs to be contacted and how.

2 Arrangement of advertisement

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>- no advertisement poster</td>
<td>- no advertisement poster</td>
<td>CF health office &amp; social management</td>
<td>development of advertisement poster</td>
</tr>
<tr>
<td>- collaboration health office &amp; social management</td>
<td></td>
<td></td>
<td>- collaboration with practice partners</td>
</tr>
</tbody>
</table>

Current situation/ Barrier
The dates and place of the workshop were approved and had to be made public. In order to advertise the workshops in refugee accommodation an advertisement poster was needed, but did not exist. The advertisement process had to be conducted in collaboration with the health office and also social management.

Resource
The developed advertisement poster is supervised and approved by the program coordinator.

Solution
The advertisement poster was developed and uploaded as a resource in EMIL HAW Flüchtlingsgesundheit 17, it was then sent to the health office worker and she applied the hamburg logo on it and printed out and delivered to the social management of the camp. The social management worker was asked by the health office worker to stick the advertisement posters in the camp.

3 contact PF

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>sending emails, sms, whatsapp messages to PF &amp; trainers</td>
<td>no</td>
<td>mobile phone participant list participant list of 2nd &amp; 3rd generation</td>
<td></td>
</tr>
</tbody>
</table>
**Current situation**

The workshops were advertised, now all health peer facilitators and trainers had to be informed about the intended workshop. First of all, emails, sms, whatsapp messages including the date, time and place were sent. The text was developed in English and was translated into Arabic and Farsi and was sent using the intern mobile phone.

**Resource**

The REFUGIUM intern mobile phone existed as a resource and was functioning. The participant list to contact the HPF and participant lists of the 2\textsuperscript{nd} and 3\textsuperscript{rd} generation to contact the trainers also existed as a resource on the platform.

4 Printing, using of needed documents

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printing, using of needed documents</td>
<td>steps not documented</td>
<td>CF nametags, participant list draft, apology letter, advertisement poster</td>
<td>documentation of steps</td>
</tr>
</tbody>
</table>

**Current situation**

All documents such as nametags, participant list draft, apology letters, which were important for conducting the workshop, were printed out and sealed in transparent foil. In order to recruit participants in the camp, the developed advertisement poster was printed out in A5 or A4.

**Resource**

In EMIL HAW Flüchtlingsgesundheit W17 the four documents: advertisement poster, nametags, participant list draft, and apology letters were found systematically organized.
5 Preparation of workshop bags & material

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>taking out and checking of workshop bags, materials</td>
<td></td>
<td>-flyers</td>
<td>-flyers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-manuals file</td>
<td>-manuals file</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-18 workshop bag</td>
<td>-18 workshop bag</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-18 inventory</td>
<td>-18 inventory</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-back up file</td>
<td>-back up file</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-organised material</td>
<td>-organised</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-health guideline in pdf</td>
<td>-health guideline</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-tip doc file</td>
<td>-tip doc file</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-manuals file</td>
<td>-manuals file</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-platform EMIL HAW</td>
<td>-platform EMIL HAW</td>
</tr>
</tbody>
</table>

Current situation
The specific workshop bag for the workshop is taken from room N2.09. Using inventory documents each bag is checked. The inventory is read and what is missing is complemented with the help of a back up file and other files in the office. In the case of health care workshop the health guideline documents are printed out.

Resource
Pre-existing documents include flyers, manuals, files, 18 workshop bags with 18 laminated inventory documents in room N2.09 and belonging back up file in room N5.29, and health guidelines in pdf format which are also systematically ordered on shelf. Furthermore 7 files (9) in hardcopies: 1) material backup; 2) contacts for advertisement; 3) invitation 2017; 4) BUFDI (Federal worker); 5) tip docs; 6) REFUGIUM participant list; 7) projects about refugee health (AWO). Manuals and flyers existed on the platform and in hardcopy. The flyers for these topics were taken out of the shelf in 5.29 and were organised for each topic in all languages.
6 Organisation shortly before the workshop

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>registration and access</td>
<td>not aware of steps</td>
<td>advertisement poster</td>
<td>documentation</td>
</tr>
<tr>
<td>preparation of room</td>
<td></td>
<td>security of camp</td>
<td></td>
</tr>
<tr>
<td>recruit participants</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current situation
At the gate of the initial reception center the team and the HPF have to register themselves. Accompanied by the security both rooms are reached and opened for them. REFUGIUM team organised the room and asked the security for the provision of water. Even though the workshops were advertised no participants are waiting. Therefore, small groups are built to recruit participants with the advertisement poster as a resource.

Barrier
The team is not aware of the specific steps shortly before the workshop, because it differs from the procedure in Unit 2 and Unit 3. The steps need to be documented with information about resources.

Resource
The previously printed out advertisement poster.

Solution
Documentation of steps.

7 Organisation during the workshop

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>arranging groups</td>
<td>no introduction documents</td>
<td>workshop bags</td>
<td>development: REFUGIUM Flyer* document</td>
</tr>
<tr>
<td>provision of bags</td>
<td></td>
<td>participant list</td>
<td></td>
</tr>
<tr>
<td>filling out participant lists</td>
<td></td>
<td>material</td>
<td></td>
</tr>
<tr>
<td>participants complaining</td>
<td></td>
<td>flyer</td>
<td></td>
</tr>
</tbody>
</table>

Current situation
At the beginning of the workshop the participants are asked about their language knowledge (Arabic, Farsi, English, Russian etc.) and are allocated into the specific room. Each room is provided with material, a workshop bag and flyers in one of the topics. Then the training is conducted, while REFUGIUM team members document
the number of participants, place, workshop topics, and what's going on in the workshops. It was observed that participants are complaining and leaving the workshop. Some participants felt insulted that they are being taught by a team of university students who are younger than they are and have a lower level of education in comparison to them. One participant noted: “just because we are refugees you can come from a university and teach us about hygiene, we are not animals”.

In the last phase of the workshop the materials are distributed to participants. Moreover, the participant list was filled in by asking each one their numbers, email, name, and address.

**Barrier**

Participants are not provided with an introduction document, which briefly sums up the REFUGIUM program’s goals and values; as a result of this participants can have the misconception that the REFUGIUM team wants to establish a hierarchy and educate those called “uneducated” refugees. This might lead to complaints and conflicts.

The team is not aware of the specific steps during the workshop, because it differs from unit 2 and unit 3. The steps need to be documented with information about resources.

**Resource**

Workshop bags, participant lists, materials and flyers already existed as resources.

**Solution**

The REFUGIUM team identified that the REFUGIUM program has to introduce its goals and team in the beginning of any workshop. The document “REFUGIUM Flyer” was discussed and developed as an introduction document, which briefly sums up the REFUGIUM program’s goals and values. The document is then processed and is uploaded as soon it is concluded. The additional steps were documented in the tool.

### 8 Organisation after the workshop

<table>
<thead>
<tr>
<th>Current situation</th>
<th>Barrier</th>
<th>Resource</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>cleaning room</td>
<td>- no draft of protocol or workshop list</td>
<td>Reimbursement documents, graduates list</td>
<td>developed and uploaded: 8 protocols workshop list</td>
</tr>
<tr>
<td>giving key back</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>uploading protocol</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>uploading participant list</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Current situation
After the workshop the room has to be cleaned and key has to be returned to the social management worker. In case of initial reception center the security closes the rooms. Back in the office the documentation is transferred into a word file and uploaded in EMIL HAW as a resource. the registered participants and health peer facilitators have to be added in the participant list and uploaded electronically. The participation of health peer facilitator is complemented in the graduates list and the reimbursement document is complemented with their details. In the last step the workshop list is filled out.

Barrier
No draft for a protocol or workshop list exists. The team is not aware of all steps of the organisation shortly after the workshop, because they differ from unit 2 and unit 3.

Resource
Reimbursement documents, graduates list

Solution
The two documents of protocols and workshop lists are developed and uploaded onto platform. The steps are documented with information about resources in the program processes tool.

9. Evaluation
In order to improve the program, in each phase evaluation has to be performed. At the end of the unit the REFUGIUM team member fills out the formative process evaluation questionnaire and uploads it in the file of unit one in EMIL HAW Flüchtlingsgesundheit W201

<table>
<thead>
<tr>
<th>No</th>
<th>Unit</th>
<th>Setting</th>
<th>Document electronic</th>
<th>Tool</th>
<th>In total</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Applied peer facilitator training (APFT)</td>
<td>Schnackenburg allee, Brookhehe Church</td>
<td>Advertisement poster (Appendix 18) - Template for recruitment of refugee accommodations (Appendix 19) - Protocols of workshop 20.04.17-12.06.17</td>
<td>REFUGIUM Program Management Tool Unit 4 Applied peer facilitator training (APFT)</td>
<td>12</td>
</tr>
</tbody>
</table>
4.3.4.1 Instruction of REFUGIUM Program Management Tool Unit 4

**Instruction of REFUGIUM Program Management Tool Unit 4 Aplied Peer Facilitator Training (APFT)**

The REFUGIUM Program Management Tool **Unit 4 Aplied peer facilitator training (APFT)** comprises of of 9 steps and 6 pages.

**Content** - The fourth unit is the Aplied peer facilitator training (APFT). Peer facilitators apply the learned theory in form of conduction of accompanied workshops by the peer facilitator, trainer and HAW staff in refugee accomodation.

It is an additional phase and might not be compulsary to conduct, consultation with the program coordinator CF is required.

**Aim** - The use of this tool shall enable new REFUGIUM team members to organize, conduct, and evaluate unit 4 independently.

**Ressources** - The electronic resources (documents) required for the Program Management Tool Unit 4 Aplied peer facilitator training (APFT) are found in the electronic platform EMIL HAW Flüchtlingsgesundheit W17 in the sections: Organisation, Manuale 2017, Flyer 2017, REFUGIUM Training/ workshop material, Unit 4 Aplied peer facilitator training (APFT). The needed material and documents in hardcopy are found in room N.2.09 (Cupboard 1 and 10) and room N5.29 (Figure ?).

**Structure** - Unit 4 comprises of 1 part.

**Sustainability** - Constantly updated regarding new steps and ressources (documents and materials) according to the latest state of the program which is needed. REFUGIUM team members consult about needed changes with the program.
coordinator. The Responsible person for facilitating changes is the program coordinator.

1- 1.4 Determination of dates, place and staff
The participants accomplished the peer facilitator training (Unit 2) and Didactical Peer Facilitator Training (Unit 3). As a result they were then aware of REFUGIUM programmes six topics and the procedure of how to conduct a workshop in refugee accommodation. The learned knowledge is put in practice by conducting a workshop in a refugee accommodation.

There are two different types of camps, the first one is the initial reception camps and the second is the secondary camps. The type of camp determines the way REFUGIUM team addresses cooperation partners and gets access to conduct a workshop there.

Initial reception camp- For organising and implementing a workshop in an initial reception camp the program coordinator and REFUGIUM team has to establish a functioning network with practice partners like the social management workers of the specific refugee accommodation and the responsible health office. In order to get access to initial reception center’s health offices act as important cooperation partners. The health office enables and helps the REFUGIUM Team to get access to the refugee camp and its social management. If the workshops are planned in an initial reception center then the health office has to be contacted parallely to the social management worker.

In order to enter an initial reception camp, the responsible social management worker has to be informed beforehand by the REFUGIUM team. At the gate everyone should register and the camp is entered and left accompanied by security.

Secondary camp- For organising a workshop in a secondary camp it is not important to cooperate with the health office. The social management workers are contacted by email or phone and asked about the possibility to conduct a workshop there. The organisation starts with a meeting with the program coordinator, in which workshop dates, timings and peer facilitators and staff are consulted upon. Additionally, the REFUGIUM Team and program coordinator determines who the peer facilitator trainer will be and who will accompany the new health peer facilitators in conducting workshops. As a result social management workers of various refugee accommodation and practice partners are contacted and asked if the REFUGIUM
program is allowed to conduct workshops there. The given and proposed timings are discussed with the program coordinator.

2-2.4 Arrangement of advertisement
The existent advertisement poster draft is updated with the date, place and time. The approved version is documented by the coordinator electronically.

Initial reception camp- In case of initial reception camp the health office workers are asked to print out the advertisement poster and provide the social management worker to stick it in their camps.

Secondary camp- In case of secondary camp the poster is sent to social management worker and they are asked to print it out and stick it in their camps.

3- 3.2 contact PF
The peer facilitators and peer facilitator trainer are contacted by email and phone calls.

4- 4.2 Printing, using of needed documents
Important documents such as nametags, participant list draft, apology letters, and REFUGIUM Flyer are printed out and sealed in transparent foil. In order to recruit participants in the camp, the advertisement poster is printed out in A5 or A4.

5- 5.2 Preparation of workshop bags & material
The specific workshop bag for the workshop is taken from room N2.09. Using Inventory documents each bag is checked. The inventory is read and what is missing is complemented with the help of back up file and other files in the office. In the case of the healthcare workshop the health guide line documents are printed out.

6- 6.3 Organisation shortly before workshop
Initial reception camp- At the gate of the initial reception center the team and HPF have to register themselves. Accompanied by the security both rooms are reached and opened. The REFUGIUM team organises the room and asks security for provision of water. For recruiting participants small multilingual groups are built (students, REFUGIUM team, PF) to recruit participants with the advertisement poster as resource.

Secondary camp- In the secondary camp one REFUGIUM team member collects the key of rooms by the social management worker. In the rooms chairs are arranged in a circle and from the kitchen water is filled in a jug for participants.

7- 7.3 Organisation during workshop
In the beginning of the workshop the participants are asked about which language they understand (Arabic, Farsi, English, Russian etc.) and are allocated into the specific room. Each room is provided with material, a workshop bag and flyers in one of the topics. Then the training is conducted, while the REFUGIUM team members observe and document the number of participants, place, workshop topics and what's going on in the workshops. The peer facilitator trainer distributes the document "REFUGIUM Flyer", which briefly sums up the REFUGIUM program’s goals and values.

In the last phase of the workshop the materials are distributed to participants. Moreover, the participant list is filled in by asking each peer facilitator trainer their numbers, email, name, address.

8-8.5 Organisation after workshop

After the workshop, the room has to be cleaned and key has to be returned to the social management worker. Concerning the initial reception center the security closes the rooms. Back in the office the observation notes are used to write a workshop protocol by using an existent workshop protocol draft and uploaded in EMIL HAW as a resource.

The registered peer facilitators have to be added in the participant list and uploaded electronically. The participation of peer facilitator is complemented in the graduates list and the reimbursement document is complemented with their details. In the last step the workshop list is filled out, which exists as a draft.

9 Evaluation

In order to improve the program, in each phase evaluation has to be performed. At the end of the unit the REFUGIUM team member fills out the formative process evaluation questionnaire and uploads it in the file of unit one in EMIL HAW Flüchtlingsgesundheit W201
UNIT 4 Applied Peer Facilitator Training (APFT)

- Protocols of workshops 20.04-12.06
- Practice partners who cooperate with us (social management) contact data
- Workshop list of 2 and 3 generation 2017
- Template for recruitment of refugee accommodations’ Vorlage anwerben von Fluchtenkünften
- REFUGIUM Flyer
- REFUGIUM Flyer
- Evaluation

Figure 34: Unit 4 Applied Peer Facilitator Training (APFT) in EMIL HAW Flüchtlingsgesundheit W17

4.3.4.2 REFUGIUM Program Management Tool Unit 4 Applied Peer Facilitator Training (APFT)
<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>before</td>
<td>Meeting</td>
<td>Prof. Dr Christine Färber Program coordinator of REFUGIUM program <a href="mailto:Christine.faerber@haw-hamburg.de">Christine.faerber@haw-hamburg.de</a> Abbreviated in this document with CF</td>
<td>Calender pinned on the door Book room N5.32 by writing name and time in the calendar with a pencil</td>
<td>Refugium team &amp; CF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1</td>
<td>before</td>
<td>Determine workshop dates</td>
<td>Prof. Dr Christine Färber Program coordinator of REFUGIUM program</td>
<td>Team, HPF and CF decides for date, timing</td>
<td>Refugium team &amp; CF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2</td>
<td>before</td>
<td>Decide with program coordinator who will conduct workshop</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 2 File: Participant list of 2 and 3 generation</td>
<td>REFUGIUM program 2nd generation Participant list. docx REFUGIUM program Participant list 3rd Generation.docx</td>
<td>Consult Arabic and Farsi speaking team members or the HPF Refugium team &amp; CF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3</td>
<td>before</td>
<td>Write email to social management of camps and health office - call social management of camps and health office</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 Section: unit 4</td>
<td>template for recruitment of refugee accommodations/ Vorlage anwerben für Fluchtunterkünfte.docx practice partners who cooperate with us (social management) contact data.docx</td>
<td>1. Copy and paste first text into mail 2. ask about time, date 3. Ask about rooms, child care, water, toilets 4. permission to knock at doors</td>
<td>1</td>
<td>In order to get access to initial reception centers health offices are important cooperation partners practice partners who cooperate with data.docx has to be complemented according to latest status continuously</td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/ Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td></td>
</tr>
<tr>
<td>------</td>
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<td>------</td>
<td>----------------------------</td>
<td>----------------------------</td>
<td>---------------</td>
<td>--------------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>1.4</td>
<td>before</td>
<td>Consult Cf about proposed time and date</td>
<td>Prof. Dr. Faiber Programm coordinator Flüchtlingsgesundheit W17 Section: Invitation and advertisement Poster</td>
<td>Poster_Handzettel REFUGIUM.pptx</td>
<td>1.3 Use poster as template 2. Consult Arabic and Farsi speaking team members</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>before</td>
<td>Complement advertisement with date, place and time</td>
<td>EMIL HAW Flichtningsgesundheit W17 Section: Invitation and advertisement Poster</td>
<td>File: advertisement poster</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1</td>
<td>before</td>
<td>Upload new version of advertisement poster in EMIL HAW</td>
<td>EMIL HAW Flichtningsgesundheit W17 Section: Invitation and advertisement Poster</td>
<td>File: advertisement poster</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2</td>
<td>before</td>
<td>Create pdf version and send to social management and health office</td>
<td>EMIL HAW Flichtningsgesundheit W17 Section: Invitation and advertisement Poster</td>
<td>File: advertisement poster</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3</td>
<td>before</td>
<td>Ask health office to print out the advertisement poster and send to social management</td>
<td>EMIL HAW Flichtningsgesundheit W17 Section: unit 4 practice partners who cooperate with us (social management)</td>
<td>data.docx</td>
<td>1</td>
<td>In order to get access to initial reception centers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.4</td>
<td>before</td>
<td>Ask social management to stick in refugee accommodation</td>
<td>EMIL HAW Flichtningsgesundheit W17 Section: unit 4 practice partners who cooperate with us (social management)</td>
<td>data.docx</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
</tr>
<tr>
<td>------</td>
<td>----------</td>
<td>--------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
<td>-----------------------------</td>
<td>--------------</td>
<td>---------------------------</td>
<td>---------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>3</td>
<td>5 days before</td>
<td>Call HPF</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of ? Generation</td>
<td>participant list of ? Generation</td>
<td>- use the Intern Mobile Phone</td>
<td>2</td>
<td>Arabic, Farsi speaking members shall call</td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>5 days before</td>
<td>Send messages in Whatsapp to all PF</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of ? Generation</td>
<td>participant list of ? Generation</td>
<td>- use the Intern Mobile Phone</td>
<td>2</td>
<td>Template in intern mobile</td>
<td></td>
</tr>
<tr>
<td>3.2</td>
<td>before</td>
<td>Call and send messages in Whatsapp to trainers</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 2 File: participant list of 2 and 3 Generation</td>
<td>REFUGIUM program 2 generation Participant list. doxc REFUGIUM program Participant list 3 Generation.docx</td>
<td>Intern Mobile Phone</td>
<td>2</td>
<td>Arabic, Farsi speaking members shall call</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>before</td>
<td>Print out advertisement poster for recruitment at camp</td>
<td>EMIL HAW Flüchtlingsgesundheit 17 Section: Invitation and advertisement Poster File: advertisement poster</td>
<td>Poster_Handzettel REFUGIUM ? generation.pptx</td>
<td>- 100 - A5 or A4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>before</td>
<td>Print out apology letter Get it signed by CF Print out REFUGIUM Flyer</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 4</td>
<td>Entschuldigungsbrief - 10.05.2017.docx</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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### REFUGIUM Program Management Tool Unit 4 Applied Peer Facilitator Training (APFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/ Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be completed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2</td>
<td>before</td>
<td>Print out the participant list draft</td>
<td>EMIL HAW Flüchtlingsgesundheit W 17 section: organisation</td>
<td>REFUGIUM PROGRAM participants list 01.03-1.docx</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>before</td>
<td>Prepare Poster and material</td>
<td>In Room 2.09 in cupboard 1 and 10</td>
<td>poster materials</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1</td>
<td>before</td>
<td>Check and prepare bag for each topic by using Inventar documents</td>
<td>Refugium bags in Room N2.09 in cupboard 1 EMIL HAW Flüchtlingsgesundheit W17 Section: Refugium training/ workshop material File: Refugium Inventar</td>
<td>Refugium Inventar Health care Tasche Bag.docx Etc. Key for Room 2.09</td>
<td></td>
<td>1-2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.2</td>
<td>before</td>
<td>Arrange Refugium flyers for displaying and distributing</td>
<td>Cupboard in the office N5.29</td>
<td>Flyer topic: Hygiene, Nutrition, Physical activity, Health care, mental health and oral health AWO flyer in File: projects about refugee health -sort out 30 Refugium flyer of each topic and language</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>workshop day</td>
<td>-take key of social management wor. - register and security</td>
<td></td>
<td>-in initial centers security will open the room</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.1</td>
<td>workshop day</td>
<td>prepare room for workshop</td>
<td>workshop bags, flyer and material</td>
<td>-put chairs in circle way - material on table</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2</td>
<td>workshop day</td>
<td>go to kitchen or ask for water</td>
<td></td>
<td>fill water in jug</td>
<td></td>
<td>1</td>
<td>Initial centers =no kitchen</td>
<td></td>
</tr>
</tbody>
</table>
### REFUGIUM Program Management Tool Unit 4 Applied Peer Facilitator Training (APFT)

<table>
<thead>
<tr>
<th>Step</th>
<th>WHEN</th>
<th>Task</th>
<th>FROM WHERE OR WHOM TO GET</th>
<th>DOCUMENT (Electronic/paper)</th>
<th>HOW/Material</th>
<th>WHO number of team member</th>
<th>Comment</th>
<th>What should be complemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.3</td>
<td>work-shop day</td>
<td>recruit participants in the camp in multilingual groups</td>
<td>printed out advertisement posters in A4 or A4</td>
<td>Poster_Handzettel REFUGIUM ? generation.pptx</td>
<td>- in team: various languages -knock or ring</td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>during</td>
<td>Conduct workshop</td>
<td>paper, pencil</td>
<td></td>
<td>1. document number of participants, place, workshop topics 2. what's going on</td>
<td>all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.1</td>
<td>during</td>
<td>distribute REFUGIUM Flyer</td>
<td>Flüchtlingsgesundheit W17 Section: unit 4</td>
<td>REFUGIUM Flyer.pdf REFUGIUM Flyer.docx</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.2</td>
<td>during</td>
<td>get the participant list filled out</td>
<td>printed participant list</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.3</td>
<td>during</td>
<td>distribute materials to participants</td>
<td>Room N2.09</td>
<td></td>
<td>skipping rope, hand cream</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>after</td>
<td>Check room before leaving</td>
<td></td>
<td></td>
<td>- projector &amp; lights off - windows closed</td>
<td>all</td>
<td>Responsibility of all team members</td>
<td></td>
</tr>
<tr>
<td>8.1</td>
<td>after</td>
<td>give key back to social management worker</td>
<td></td>
<td></td>
<td>- go personally - in initial camps security will close rooms</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2</td>
<td>after</td>
<td>make protocol for each workshop of refugee accommodation</td>
<td>EMIL HAW Flüchtlingsgesundheit W17 Section: unit 4 file: protocols of workshop 20.04.17-12.06.17</td>
<td>existent &amp; protocols in word</td>
<td>1. Use existent versions as template 2. create new file 3. upload new document</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step</td>
<td>WHEN</td>
<td>Task</td>
<td>FROM WHERE OR WHOM TO GET</td>
<td>DOCUMENT (Electronic/paper)</td>
<td>HOW/Material</td>
<td>WHO number of team member</td>
<td>Comment</td>
<td>What should be complemented?</td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>------</td>
<td>---------------------------</td>
<td>-----------------------------</td>
<td>--------------</td>
<td>-------------------------</td>
<td>---------</td>
<td>----------------------------</td>
</tr>
</tbody>
</table>
| 8.3  | after| Complement participant list of graduates | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 2  
File: Participant list of graduates generation | REFUGIUM program generation  
Participant list of graduates.docx | -1 list who participated in training  
-2 list Who conducted workshops in refugee accommodations | 1 | | Have to be added of 2 & 3 generation |
| 8.4  | after| Complement reimbursement details | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 2  
File: Reimbursement details 2 and 3 generation.xlsx | 1 REIMBURSEMENT TOTAL Details 2 and 3 generation.xlsx  
2 REIMBURSEMENT TOTAL 2 and 3 generation.xlsx | 1.complement names & participation of HPF by using excel sheet as a template | 1 | | needed for farewell party unit 2 |
| 8.5  | after| documentation: make list of workshops & trainings | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 4  
File: Workshop list of 2 and 3 generation 2017 | workshops list 2017 Feb-june final version.docx | 1.Use existent versions as template  
2.create new file  
3. upload new document | | | |
| 9    | End of unit 4| Fill out the formative process evaluation questionnaire | EMIL HAW Flüchtlingsgesundheit W17  
Section: unit 2  
File: evaluation | formative process evaluation questionnaire.pdf | 1.fill out  
2.upload in file | | | In order to improve the program (performance evaluation) | Add in emil |
4.4 Results: Evaluation (fourth phase of public health action cycle)

The 4 step of the public health action cycle is visualized here, the application of the program-management resulted in the decreasing of time for organisation immensely. The tools were completed in context of this study and could not be evaluated completely. But the mid stream modifications and the application of the primary program management tools led to relevant changes in major processes. For example, preparing the documents and workshop bags for training and workshops previously took many hours to undertake (observation protocol, p.195), as everything had to be searched for and organised. For the peer facilitator training day of unit 2 of second generation 1140 min (19 hours) and 4 team members were needed. After the application of the program-management only 10 min for 1 training day was needed of unit 2 of third generation and 1 team member was needed to organizes this. In order to assess the useability, the 4 program management tools need to be evaluated by future REFUGIUM team members.

![Duration in organising 1 training day of unit 2](image)

Figure 35: evaluation of REFUGIUM programs 1 training day of unit 2
5. Development of Induction document for new REFUGIUM team members

The MODeST framework (Maylor, 2010) was taken as reference to assess the REFUGIUM program’s complexity. The elements of complexity (Mission, Organisation, Delivery, Stakeholders, Team) of the REFUGIUM program were analysed (Maylor, 2010, p.38). The observational protocol was read several times and the issues which made management complex were analysed for the REFUGIUM program. The identified issues were given as reference. The complexity element of stakeholders is not analysed, because the REFUGIUM program has no stakeholders, however it does have cooperation partners. On the basis of analysis a response to the identified conflicts and challenges while working through two generations was developed. Of every assessed complexity element a question was developed with provision of a corresponding answer. The elements determine the success and failure of the work in the REFUGIUM program, therefore they need to be discussed with new REFUGIUM team members. In result the "Induction document for new REFUGIUM team member by Montaha Shafiq" in regard to the themes: Mission, Organisation, Delivery, Team was developed. The project coordinator in the beginning of unit 1 will use this document for new REFUGIUM team members.

<table>
<thead>
<tr>
<th>Element of complexity</th>
<th>Examples of issues that make management complex</th>
<th>REFUGIUM Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission</td>
<td>Lack of clarity of requirements</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Large scale, high value, high importance, high urgency</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>Large number of constraints – legal, health and safety, security</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>High level of interaction and interdependency with other projects</td>
<td>no</td>
</tr>
<tr>
<td></td>
<td>High level of uncertainty – novelty, implications and side effect</td>
<td>yes</td>
</tr>
<tr>
<td>Organisation</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------</td>
<td>----</td>
<td>----</td>
</tr>
<tr>
<td>Multiple time zones which project team members operate in</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of collocation of project team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Linguistic differences between team members</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Lack of appropriate organisational structure used in the project</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>High level of change that the project produces in the organisation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delivery</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Lack of common or appropriate project management method</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Inappropriate human, financial or other resources</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Problematic communications in the project team</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Lack of clear or timely decision-making</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of flexibility for the project manager to respond to change</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stakeholders</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>Large number of stakeholders with differing requirements</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>Lack of commitment to the project by key stakeholders</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>Interference in the project by key stakeholders</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>Problematic inter-relations between stakeholders</td>
<td>no</td>
<td>no</td>
</tr>
</tbody>
</table>
5.1 Results: Assessment of REFUGIUM program’s complexity elements

<table>
<thead>
<tr>
<th>Complexity Element of REFUGIUM</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>High level of uncertainty – novelty, implications and side effect (observation protocol, p. 186-190)</td>
<td><strong>What is the aim of the REFUGIUM program?</strong></td>
</tr>
<tr>
<td></td>
<td>The REFUGIUM program</td>
</tr>
<tr>
<td></td>
<td>- The REFUGIUM program</td>
</tr>
<tr>
<td></td>
<td>- Aims to activate refugee’s health resources in a comprehensive and holistic approach (Neuhaus et al., 2017, p. 3).</td>
</tr>
<tr>
<td></td>
<td>- The program aims to support refugees to cope with the living conditions in Germany by providing a platform (Neuhaus et al., 2017, p. 3).</td>
</tr>
<tr>
<td></td>
<td>- The intention of the REFUGIUM program is to address inequality by giving voice to individuals who may be excluded.</td>
</tr>
<tr>
<td></td>
<td>- It promotes the full participation of vulnerable individuals and group in developing and conducting the program’s following participatory action research approach.</td>
</tr>
</tbody>
</table>
### What are the work themes in the REFUGIUM program?

The REFUGIUM program is structured in 8 main work themes:

1. Concept, management, and evaluation
2. Participatory development, translation and validation of flyers and manuals in relevant languages for refugees
3. Publication of flyers and manuals in cooperation with Budrich publishers as freeware on the homepage www.refugium.agency.
4. Fundraising, purchase and provision of materials, which are needed for trainings and workshops
5. Conduction and formative evaluation of REFUGIUM peer facilitator training
6. Organisation and implementation of workshops in refugee accommodations by communicating with Peer Facilitators and social management workers
7. Establishment of a functioning network with practice partners (social management of refugee accommodations and health administrations, health care providers, NGO's).
8. Establishment of a structure in which Peer Facilitators are empowered with the support of the researcher and team members (including personal, bureaucratic, and emotional support) to become part of the REFUGIUM team as volunteer workers (BUFDI) or guest lecturers at university and work successfully.

### What will be my responsibility and work as REFUGIUM team member?

The responsibility of a REFUGIUM team member is to plan, conduct, research and evaluate the REFUGIUM program under the supervision of the program coordinator. Your tasks will be the organisation of the unit 2, (3), 4. Implementation of training in the university and workshops in refugee
accomodation.

Which characteristics are necessary for a REFUGIUM team member?

Character traits like patience, courage, open-mindness, and creativity are important for REFUGIUM team members. Intercultural competencies are of huge advantage. A high degree of flexibility and adaptability depending on the circumstances, status, and needs of participants involved is demanded.

Who is the target group of the REFUGIUM program and what has to be considered while working with a vulnerable target group?

The target group are refugees. Refugees are groups of people who not only represent people from various ethnic backgrounds, cultures, religions, ideologies, attitudes towards health, and philosophies of life, but also a group of people who have experienced abuse, oppression and persecution due to war and political conflicts (Federal Agency of Migration and Refugees, 2016; Laurence et al., 2011).

As a REFUGIUM team member it is important to be emotionally ready (without prejudices) to work in a program where interaction and work with refugees is a prerequisite. The health and behaviour of people is determined by the circumstances and factors in which they live. The understanding of the determinants regarding refugee’s mental health, which lead to psychological stress or mental well-being is a prerequisite to understanding a vulnerable group. Research has shown that refugees are healthy and resilient
people, but they have fears and hopes due to their vulnerable circumstance (uncertainty about the future, long asylum seeking process, detention and temporary permits, separation from family members), which is the main detrimental factor for their mental health (Bozorgmehr et al., 2017, p. 592; Betancourt, et al., 2013; WHO, 2012, p. 5; Neuhaus et al., 2017).

Protective factors were identified such as: social support, health promotion structures in the camp, opportunities for study/ work, integration and health care facilities (WHO, 2012, p. 5; Lindert, 2016; Lambert et al., 2015; Carta et al., 2015; Sleijpen et al., 2015; Neuhaus et al., 2017; Bozorgmehr et al., 2017, p. 592). This short background knowledge will enable you as a REFUGIUM team member to work sensibly and sensitively with refugees.

Figure 37: Complexity Element of REFUGIUM program: Mission

<table>
<thead>
<tr>
<th>Complexity Element of REFUGIUM</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of appropriate organisational structure used in the project (observation protocol, p. 200)</td>
<td>How is the program structured? What are the units of the program?</td>
</tr>
</tbody>
</table>

**REFUGIUM units**

The REFUGIUM program is structured in 4 units and the settings of these units are HAW and specific refugee accommodations. The first unit is the induction phase for new REFUGIUM team members which comprises of the introduction and is a step to get familiar with the content of the program and integrate oneself into the program for new REFUGIUM team members. The unit 2, unit 3 and unit 4 are the three stages, which have to be accomplished by participants to be qualified as a peer facilitator. The second unit is the Peer facilitator training (PFT) unit in which refugees are trained in 6 health topics.
From an organisational point of view the second unit comprises of the following three parts: kick-off meeting, peer facilitator training and a farewell party. The third unit is the didactical peer facilitator training (DPFT) in which peer facilitators (PF) are trained about theory on how to conduct workshops and is an opportunity to conduct exercises in didactics. The fourth unit is the applied peer facilitator training (APFT) in the form of the conduction of accompanied workshops by peer facilitators, trainers and HAW staff in refugee accommodation.

1- Induction phase for new REFUGIUM Team members
2- Theory on 6 topics
3- Theory and exercise on didactics
4- Applied training - workshops in refugee accomodation

<table>
<thead>
<tr>
<th>Unit</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Themes</td>
<td>Induction phase for new REFUGIUM Team members</td>
<td>Peer facilitator training (PFT)</td>
<td>Didactical peer facilitator training (DPFT)</td>
<td>Applied peer facilitator training (APFT)</td>
</tr>
<tr>
<td>Setting</td>
<td>HAW</td>
<td>HAW</td>
<td>HAW</td>
<td>Refugee accommodation</td>
</tr>
<tr>
<td>Contents</td>
<td>Introduction and getting familiar with REFUGIUM program for team members</td>
<td>Refugees are trained in 6 health topics - theory on topics</td>
<td>Peer facilitator (PF) are trained how to conduct workshop - theory and</td>
<td>Peer facilitator, trainer, HAW staff conduct workshop in refugee accomodation</td>
</tr>
</tbody>
</table>
| Linguistic differences between team members (observation protocol, p. 201) | Which language is used in team work?  
Many team members are aware of the English language instead of German, therefore English is used as the main language. |

Figure 38: Complexity Element of REFUGIUM program: Organisation

<table>
<thead>
<tr>
<th>Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complexity of REFUGIUM</td>
</tr>
</tbody>
</table>
| Lack of common or appropriate project management method (observation protocol, p. 200) | What are the resources, which will help me to organize the program?  
The program uses electronic resources such as the EMIL HAW Flüchtlingsgesundheit platform. In this platform all documents in regard to the program are documented and are used by the REFUGIUM team to organize the program.  
Moreover the program has 4 guidelines namely the program management tools and instructions for each unit, which support the REFUGIUM team members to organise the program. |

<table>
<thead>
<tr>
<th>Program management tool</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUGIUM Manual Program Management tool unit 1 Induction phase as a new REFUGIUM</td>
</tr>
<tr>
<td>REFUGIUM Manual Program Management Tool Unit 3 Didactical peer facilitator training</td>
</tr>
</tbody>
</table>
### Where can I find the program management tools?

The program management tools for unit 1, 2, 3 and 4 are found on the electronic platform EMIL HAW Flüchtlingsgesundheit W17 in the section project management Bergedorf.

### Inappropriate resources (observation protocol, p. 200)

**What are the main resources used to train the participants?**
Flyers and manuals exist in various languages; materials like posters and 18 workshop bags.

### Lack of clear or timely decision-making (observation protocol, p. 200)

**How can I make decisions and work independently as a REFUGIUM team member?**
The program management tools enable team members to make decisions and work independently. The approval of the program coordinator is important, therefore discussing the work with her regularly in team meetings is also important.

### Problematic communications in the project team (observation protocol, p. 196-197)

**What has to be considered while working in a multicultural team?**
- The REFUGIUM team members are all of different nations, ethical values, cultures, mentalities, educational backgrounds, religions and status of residency.
- Differences of status and culture might exist in a multicultural team
- Conflicts can occur in team work due to problematic communications
- Conflicts can be solved by treating each other in equality of independently of which status or ethnicity one belong to
- The ideas of each team member have to be treated in a equal way
- allocation of work has to be decided as a team and no one will be discriminated against
- Everyone should respect each other and if one has the feeling that he or she is not treated fair, he or she should discuss with the coordinator

**Figure 39:** Complexity Element of REFUGIUM program: Delivery

<table>
<thead>
<tr>
<th>Complexity of REFUGIUM</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of leadership shown by project manager</td>
<td>What is the responsibility of the project coordinator?</td>
</tr>
<tr>
<td>the REFUGIUM program has no project manager, but a program coordinator. (observation protocol, p. 200)</td>
<td>The project coordinator is the main responsible person of the program and the REFUGIUM team members. In the case of questions and problems the coordinator is there for the team members and will try to help. Team members of vulnerable groups are under huge pressure to prove themselves in the German labour market. Therefore it is the responsibility of the program coordinator to support and appreciate team members by encouraging them. Focusing on their strengths and not weaknesses.</td>
</tr>
<tr>
<td>Cultural and other differences between team members (observation protocol, p. 220-221) (observation protocol, p. 196-197)</td>
<td>What has to be considered while working with vulnerable team members?</td>
</tr>
<tr>
<td></td>
<td>- team members are all individuals of a vulnerable group therefore they should strive to develop sympathy and understanding for each other.</td>
</tr>
<tr>
<td></td>
<td>- There will be days in which one member will be upset about his or her private situation (asylum status, bureaucratic issues, problems with the job center, responsibility for parents or siblings, experience of discrimination, financial</td>
</tr>
</tbody>
</table>
strains) and won't be able to work effectively and efficiently,
in this certain time it is the responsibility of team members and program coordinator to listen to his or her problems if they want to share.
- Team members should try to help: like translating a document, or filling out a document which is in German.
- The REFUGIUM program is developed, organised and conducted by team members who are also of a vulnerable group. As REFUGIUM team members you might have to help and support team members or health peer facilitators. By doing so empowerment, confidence and participation, low thresholdness in the program is achieved.

<table>
<thead>
<tr>
<th>Low level of motivation of team members (observation protocol, p.195)</th>
<th>How can my work as a REFUGIUM team member contribute to a higher meaning?</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a REFUGIUM team member you will be part and creator of such a setting in which refugees are being: -welcomed, appreciated and empowered, -where psychosocial development and self-determination among vulnerable individuals will be promoted. As a REFUGIUM team member you will be working for a higher cause, particularly for promoting integration of migrants into German society resulting in peaceful coexistence.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lack of appropriate training for team members (observation protocol, p. 201)</th>
<th>Who will train and support me as a REFUGIUM team member?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The project coordinator will hold constant team meetings in which the work can be discussed and questions can be answered.</td>
<td></td>
</tr>
</tbody>
</table>

Figure 40: Complexity Element of REFUGIUM program: Team
6. Discussion

6.1 Results comprised

The present study aimed to evaluate the REFUGIUM programs processes. In results of formative process evaluation a dynamic process was given structure by developing and establishing professional program management. The process of how to develop program management tools was identified and a framework with steps from A to M was built. The required instruments for this process were developed and comprised of the formative evaluation questionnaire, the 9 categories and management tools with corresponding resources (instructions, documents, materials). The developed structure (program management tools for unit 1-4) establishes a basis in program in order to support the constantly changing processes and fluctuation of team members. That required participatory observation of the organisational preparation and conduction of 56 training sessions and 54 workshops of 2nd and 3rd generation as person of charge. The mid-stream modifications and application of program management led to the following result:

In the period from February till July 2017 (during 2 and 3 generation) 32 refugees were trained by peer facilitator trainers and staff of university. The training consisted of 5-6 peer facilitator training sessions, 2 didactical peer facilitator sessions and 2 applied facilitator training sessions in camps each in arabic, dari/farsi, english and german, with child care, catering and reimbursement of expenses (Neuhaus et al., 2017). In total from February till July 2017 (during 2 and 3 generation) 100 workshops were conducted in refugee accommodations and at university in arabic, dari/farsi, english and german. Additionally the incorporation of documents systematically in EMIL HAW Flüchtlingsgesundheit 2017 (electronic resources) and storing materials in systematic order in room N5.29 and N2.09. In result program management tools with corresponding instructions for unit 1, 2, 3, 4 by using developed and existing resources of the REFUGIUM program were created: induction phase for new REFUGIUM Team members (unit 1), Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3), Applied peer facilitator training (APFT) (unit 4). Lastly assessment of REFUGIUM programs managerial complexity elements by using MODeST framework was used as a reference and creation of induction document for unit 1 (Maylor, 2010, p.38).
6.2 Discussion of Methodology

The used method of case study evaluation provided an in-depth understanding of the implementation processes in the REFUGIUM program (Creswell, 2013, p. 104). The case study evaluation "tracked the implementation process" (Creswell, 2013, p. 104) with fieldwork conducted during the implementation period of unit 1 to 4 of second and third generation. The case study evaluation played a formative role, as with the findings from the evaluation of the management of the REFUGIUM program was developed and refined (Yin, 2014, p.222-223). The useful formative feedback in regard to complex coordinating and organizational features led to mid-stream modifications in the program to improve health promotion practice (Geonnotti et al., 2013, p.4; Yin, 2014, p.222-223). Research studies confirm that formative evaluation helps to meet various challenges to effective implementation in projects and its scientific study (Stetler, 2006, p. 8). According to Stetler (2006) formative evaluation is often key to the success, interpretation, and replication of the results of implementation projects (Stetler, 2006, p. 8). The processes underwent a constant change due to participation, so the emergent design benefitted as a flexible approach to assess the dynamic process (Cresswell, 2013, p.107).

Research suggests that Internal evaluation reveals better insight into program function and meaning (Linnan, 2002, p.85; Creswell, 2013, p. 104). The approach participatory action research demands of researchers to act simultaneously as researchers and team members (Ottoson, 2003, p.87).

Being a participatory observer and responsible REFUGIUM team member in the REFUGIUM program gave better insight into program function and meaning, because personal involvement in implementation of 4 units during second and third generation was the only way to detect the tasks, barriers, resources and lead to a certified development of solutions.

As the REFUGIUM Program follows a participatory action approach, the REFUGIUM team members and program coordinator were involved in a formative evaluation and development of solutions. This was necessary due to the whole process being dependent on knowledge and experience of all team members and the program coordinator. The process required monitoring and documentation and the involvement of the REFUGIUM team and program coordinator. The REFUGIUM team members identified a chronology of steps, the barriers, and the resources while working through all units. They were asked open-ended queries in two timepoints
of unit 1 to 4. In a team meeting the REFUGIUM team members discussed the identified barriers and developed solution proposals in regard to needed material and documents. In the next step the barriers and developed solution proposals were presented to program coordinator in order to discuss and consult. As a result of this the discussed solutions (documents and materials) were developed under supervision of the program coordinator and were presented again to the program coordinator for approval. Hence, required material and documents were developed for each task of each unit by the REFUGIUM Team under the supervision of the program coordinator Prof. Dr. Christine Färber. This procedure considers the multiple perspectives and ideas of every team member and ensures participatory development and validation (Creswell, 2013, p.251). This procedure was the only way that the used documents and methods were developed in a target group-oriented and sensitive way in regard to their needs. These resources were systematically incorporated in the correct rooms and electronic platform. That was only possible, as the evaluator was also involved as an insider; a REFUGIUM team member.

**challenges**

The method of participatory observation was a condition for formative process evaluation and has strengths as well as challenges. Participatory observation required going into the real world of the REFUGIUM program field in order to capture what is actually happening (Patton, 2002, p.48). Actively participating in the life of the observed meant becoming personally engaged (Patton, 2002,p.49). Such engagement stands in contrast to external evaluators, who are detached (Patton, 2002,p.49). Research indicates that external evaluators are assumed to be more objective (Linnan, 2002, p.85; Patton, 2002,p.49). Internal evaluators can become too involved by going native (Patton, 2002,p.50). Of course this might cloud judgement due to lack of critical distance to the observed issue (Patton, 2002, p.50). On the other hand remaining too distant can reduce understanding (Patton, 2002, p.50). In this research study the quantitative questionnaires were used to validate the findings in the observation protocol. This method was used to produce qualitative data that is trustworthy and fair to the people and program studied (Patton, 2002, p.50). In general, it can not be ruled out that the self-reported results were distorted by recall bias and limited understanding of the questions.
The participatory observation and development of program management in a program following participatory action research is highly time consuming (Geonnotti et al., 2013, p.4). Conducting research in a program with vulnerable team members and gatekeepers (refugees, students, federal workers) demands a high degree of flexibility and adaptability depending on the circumstances, status and needs of participants involved (Aldrige, 2015, p. 22). In context of the REFUGIUM program the success of team work depended on external factors like the emotional status of team members, punctuality and cooperativeness of camp social management. An ongoing support and empowering of team members with refugee background was demanded. Their bureaucratic and personal issues were associated with their performance in the team. If the problems were not solved successful working was hindered. A lot of time was invested in being supportive and empowering the fellows to work successfully and enabling them to work by solving their personal problems as a team. Furthermore it influenced and undermined the ability of us as team members and researchers to realise the intended goals for the day or certain research aspirations. Even with the investment of large amounts of time it did not necessarily lead to achieving the intended goal. The participatory development of documents required discussion and approval; many times due to cultural and linguistic differences the communication amongst the team was difficult. The experiences of the REFUGIUM team confirm existing findings of Aldrige et al., (2015) that "The nature of participants vulnerability (whether innate, circumstantial or multidimensional) can influence and even undermine participatory research objectives- and the ability of researchers to realise their collaborative or inclusive aspirations" (Aldrige, 2015, p. 22). Thus, developing a structure in an emergent and participatory action research program with changing team members represented a challenge. The researcher in the role of a team member and observer was strongly involved in building up organisational structure, therefore had lack of time to reflect upon the work scientifically.

6.3 Discussion of Study Results
The researcher of this study developed and designed the program management tools for unit 1 to 4 from the perspective of a new REFUGIUM team member. Keeping in mind the question "Which information would a new REFUGIUM team member need in order to work efficiently in a participatory action research program?". The process of how to develop program management tools was identified and a framework with steps from A to M was built. The framework is in line with the project management
literature of Maylor (2010) and the project management institute (Maylor, 2010, p.106; ). The needed instruments for this process were developed and entails the formative evaluation questionnaire, the 9 categories and management tools with corresponding resources (instructions, documents, materials). The planning process involved identifying activities, determining their logical sequence, estimating times and presenting the plan (Maylor, 2010, p.106; Project Management Institute, 2013, p.81). The standards which apply for the task were systematically incorporated in the correct rooms and electronic platform. This process had been highly time consuming and complex, because all documents and resources had to be searched and organised systematically. It was necessary to label everything in English and German in the electronic platform EMIL HAW Flüchtlingsgesundheit W 17. The management tools gives the REFUGIUM team members the responsibility for a more manageable unit (Maylor, 2010, p. 106). Moreover through the management tools a logical basis for decision making is provided, the use of which saves a considerable amount of time (Maylor, 2010, p. 106). Additionally the lessons learned from practice can be incorporated easily into the tools (Maylor, 2010, p. 106). For example, the correct chronology of a task was a lesson learned from practice. Accordingly the chronology of tasks was designed in the most effective and efficient way. The useful experiences of the REFUGIUM team members were integrated into the chronology of tasks. The correct chronology and time points (before, during, after) were important as they influenced the success of work. For example in the program the management tool of unit 2 step 6 it is stated to organise money prior to purchasing from the project coordinator. This step seems very logical, but during the second generation team members spent money from their own savings. The problem with that was that some team members could not afford to spend money from their own budget on program expenditures. By putting this task of prior purchasing during the 3 generation, time was saved immensely and allocation of work was made easier.

The assessment of barriers led to development of needed resources (key-documents and materials) for each unit. The main material, which saved time were the 18 workshops bags, which were from now on only taken from the cupboard and checked with the inventory list and backup files. These systematically-organised bags were used for unit 2,3 as well as 4 and represent an important resource for the
implementation of the REFUGIUM program. These already made up bags save time and logistically of implementation immensely.

Besides saving time another goal of developing documents and materials was to overcome obstacles in regard to acceptance of the REFUGIUM program among the participants. During the conduction of (unit 4) workshops in refugee accommodation some participants complained and said “just because we are refugees you can come from a university and teach us about hygiene, we are not animals ” (observational protocol, p.225). The reason for this was that the REFUGIUM program did not provide participants with an introduction document, which briefly summed up the REFUGIUM programs goals and values. Therefore the participants had the misconception that the REFUGIUM program seeks to establish a hierarchy and educate the supposedly ,"uneducated" refugees. Thus, one document, the "REFUGIUM Flyer", was made to prevent misunderstanding in regard to the REFUGIUM program’s goals amongst refugees. By developing this document in participation with federal worker complaints and conflicts were prevented. In result, participants will be empowered to take part in workshops, because they will feel acknowledged and respected. This document (appendix 18) was developed during the second and third generations, but was complemented by the REFUGIUM team of the fourth generation.

The developed structure (program management tools for unit 1-4) establishes a basis in the program in order to support the shifts of constantly changing processes and team members. The first unit entitled "Induction phase for new REFUGIUM Team members" was designed for familiarization for the new team members. The phase should enable new REFUGIUM team members to work successfully in the program by being emotionally and theoretically prepared resulting in highly motivated team members. In this context the document "Induction document for new REFUGIUM team members by Montaha Shafiq. N.pdf" was scientifically developed. In this document the managerial complexity elements (Mission, Organisation, Delivery, Stakeholders, Team) according to Maylor (2010) are assessed and answered in regard to the REFUGIUM program. According to the MODeST framework uncertainty and being uninformed about challenges and how to overcome them leads to decreased motivation among workers in a project (Maylor, 2010, p.38). The aim of the document is to inform new team members about the various challenges and provide them information about resources and knowledge that might be the solutions
to overcome said challenges. For example one such challenge is the so called "cultural and other differences between team members" challenge. As a response the question was formulated thusly: What has to be considered while working with vulnerable team members?. The answer provides the REFUGIUM team members with advice about how to react and how to regulate his or her emotions and possible solution in regard to this challenging situation; team members are all individuals of a vulnerable group therefore they should strive to develop sympathy and understanding for each other. There will be days in which one member will be upset about his or her private situation (asylum status, bureaucratic issues, problems with the job center, responsibility for parents or siblings, experience of discrimination, financial strains) and won't be able to work effectively and efficiently, at which time it is the responsibility of the other team members and the program coordinator to listen to his or her problems, if they are willing to share. Team members should try to help: like translating a document, or filling out a document which is in German. The REFUGIUM program is developed, organised and conducted by team members who are from vulnerable groups. As REFUGIUM team member you might have to help and support team members or health peer facilitators. By doing so empowerment, confidence, low thresholdness and participation, in the program is achieved (Induction document, p. 3). It might be that the proposed advice is not perceived as correct for future team members, but it was helpful in the period during implementation of 2 and 3 generation. Thereby knowledge and experience of the previous REFUGIUM team is forwarded to future team members. The induction document will inform and prepare new REFUGIUM team members to work in a complex program environment consequently increasing their motivation.

The actual work phase is represented in unit 2, unit 3 and unit 4, which are the three stages, which has to be accomplished by participants to be qualified as peer facilitators. The use of program management tools shall enable new REFUGIUM team members to organize, conduct and independently evaluate the unit 2, unit 3 and unit 4 steps. The program management tools are designed to save time and for team members to implement their best practice. Time is therefore saved, because large activities were broken down into manageable tasks. In basic project management literature it is stated that the breaking down of large activities into manageable units is a fundamental part of project management (Maylor, 2010, p.116; Project Management Institute, 2013, p.4). Due to this time, activity and controls are
planned in detail (Maylor, 2010, p.116). Study results confirm existing findings that
the use of project management can benefit both management and scientific
outcomes of health and medical research projects (Stetler, 2006, p.8; Payne et al,
2011, p.1). Santos et al. has assessed success factors and grouped them in four
groups and a framework was thus built that allows the evaluation of a project
(Santos et al., 2014, p.1084). A projects organizational structure is one of the
evaluation features (Santos et al., 2014, p.1084). Other research studies on similar
research questions such as: “How to organise and implement a health promotion
program for refugees effectively and efficiently?” were not found. But there are
studies which show that the application of project management in a health research
project is of benefit for management and scientific outcomes (Payne, 2011, p. 1-11)
Even though the program management tools are designed as user friendly resource
for new team members it is possible that they are not understood or are not
perceived as user friendly. Additionally it might be that the chronology is not
accurate. The evaluation of the tools by users of the future generation is important in
order to assess if they adhere to their needs.

The goal of the formative process evaluation in the REFUGIUM Peer-health
promotion program for refugees, in the context of multi method case studies is to
bring conformity with the 12 criteria (1 Concept and Project Planning, 2 Target Group
Orientation, 3 Settings Approach, 4 Integrating Intermediaries, 5 Sustainability,
6 Low-Threshold Methodology, 7 Participation, 8 Empowerment, 9 Integrated Action/
Networking, 10 Quality Management, 11 Documentation and Evaluation, 12
Capturing Cost- Effectiveness) for Good Practice in Health Promotion developed by
the German Cooperation Network ‘Equity in Health’.

The developed program management tools with corresponding instructions for unit 1
to 4 are in line with all criterion.
The first criterion "Concept and Project Planning" states that projects should have a
project plan which serves as a guideline for shaping and assessing daily work
(German Cooperation Network ‘Equity in Health’ (2015, p. 7-10). The tools represent
a project plan for the day to day work.
The second criteria ‘Target Group’ Orientation and third criteria Settings Approach
are considered, because the target group of refugees refers to the "socially
disadvantaged" and workshops are within structured settings (German Cooperation
Network ‘Equity in Health’, 2015, p.11-14, p.15-18)
The fourth criterion "Integrating Intermediaries" is considered, because in the program the peer to peer approach is integrated (German Cooperation Network ‘Equity in Health’, 2015, p.19-22).

The fifth criterion Sustainability states that the project shall strive towards long-term implementation (German Cooperation Network ‘Equity in Health’, 2015, p.23-26). The program management tools enable the project to be conducted in the long-term, because new team members join the program and a basis like the project plan is needed to implement the program without major challenges. The sustainability in regard to the tools is ensured as it is advised in the instructions and in the tools to document and improve the steps and resources. As a result of this the continuation of the program is ensured.

The sixth criterion "Low-Threshold Methodology" is fulfilled, because through the tools the program provides for a low-threshold approach (German Cooperation Network ‘Equity in Health’, 2015, p. 27-30). The tool enables internees and federal workers to understand how to conduct and manage the program. As the knowledge, in regard to the implementation process and resources, is documented and provided in the language, which is common in refugees as often no language barrier exists. The non-academic approach is established as no university degree or perfect German language skills are needed to understand what to do. In order to work successfully in the program the educational background is not as important as it was without these tools. The management tools are an important resource for team members to work without any disadvantages.

The participatory development in the REFUGIUM program brings conformity with the seventh criterion "Participation". The seventh criterion states, that the target group is heavily involved in the design, implementation and evaluation of the project (German Cooperation Network ‘Equity in Health’, 2015, p. 31-34). In the case of the REFUGIUM program the representative of refugees in the role of federal workers was highly involved in the process of development of the program management tools, documents and evaluation. The benefit of participation is that exactly what suits the needs of the target group will be made and developed.

The tool enables internees and federal worker with less experience in project management to conduct the program independently, which leads to empowerment. The team members with refugee backgrounds are given the same opportunity and basis as the internee of a university. Both have the same amount of knowledge and
could fulfill the same task. This fact is in line with the 8th criterion "Empowerment" (German Cooperation Network 'Equity in Health', 2015, p. 35-38).

The tenth criterion "Quality Management" demands, that the project provides for a continuous improvement process in the sense of the Public Health Action Cycle (German Cooperation Network 'Equity in Health', 2015, p. 43-46). The evaluation and development of program management in the REFUGIUM program was applied to the public health action cycle so that quality improvement is assured. For the fourth level ongoing systematic, and comprehensive, quality management are the program management tools basis. They can be used by the program team and coordinator to support quality development. Taking the tools as reference barriers and resources these are discussed in team meetings and these insights are then systematically incorporated into the further development of the program plan and methodology (German Cooperation Network 'Equity in Health', 2015, p. 45).

The eleventh criterion "documentation and evaluation" states that project work is documented and evaluated (German Cooperation Network 'Equity in Health', 2015, p. 44-50). The evaluation and documentation was a condition to develop the program management tools. A major task in all tools development is the documentation of all new processes and documents in the electronic platform. Team members are frequently asked in the tools development to upload the new version in EMIL HAW Flüchtlingsgesundheit W17.

The last criterion (12) "Capturing Cost-Effectiveness" suggest that the cost of the project is in proportion to the benefit (German Cooperation Network 'Equity in Health', 2015, p.51-54). The program management are a basis to estimate which cost and benefits the program has.

7. Conclusion

The research question "How to organise and implement the REFUGIUM health promotion program for refugees effectively and efficiently" could be answered through this study. A Health promotion program, which follows participatory action research and works with a vulnerable target group and volunteers, needs a professional program management to function in the long term. In such a program it is required that focus is on project planning, quality management and documentation as well as evaluation from the onset. A program such as this can only function if
formative process evaluation of the project processes by a project team is conducted constantly. That means activities, barriers and resources are assessed and solutions developed collaboratively during implementation of the program. All needed documents and materials are developed and uploaded on the electronic resource platform like EMIL and materials are systematically organised in rooms. These program processes with standards, which apply to this task are documented/precisely (low threshold, non academic approach, user-friendly) in program-management tools. Moreover, to attain low the content is in international language such as English. As a result of this the structure enables ownership and prescribe not recipes. The study contributes to public health research, the knowledge in regards to the process and instruments which are needed to organise and evaluate a health promotion program following participatory action research approach working with a vulnerable group effectively and efficiently. The developed instruments comprise of the formative evaluation questionnaire, the 9 categories, the management tools with corresponding resources (instructions, documents, materials) and these instruments can be used and applied in future studies to develop program management in health promotion programs.
8. References


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9. Appendices

Appendix 1: Formative process evaluation questionnaire for REFUGIUM program

1. What is the current-situation?
2. What is functioning (what resources exist)?
3. What are the main activities?
4. What are the steps?
5. How much time is spent organizing?
6. How many team members are needed?
7. What are observations or realizations?
8. What are the challenges and barriers in the process of implementation?
9. What is the reason?
10. Who is responsible for that?
11. What resources (material, documents) are missing?
12. Where to make improvements?
13. What can be changed so that an improvement is achieved?
14. What is the opinion of the team and project coordinator?
15. How can the approved improvement be implemented?
16. Is the development of a written electronic resource important?
17. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?
18. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017?
19. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?
20. Are the project processes documented precisely so that a new team member can work independently?

References
(Neuhaus MS, 2017)
(Rank and Neumann, 2016, p. 38 & p.16)
UNIT 1: Induction phase of new REFUGIUM team members:

Descriptive notes:
First of all it was important to be emotionally ready with no prejudices and fears in regard to my work in a program where I had to interact and work with refugees. Prejudices and fears existed, because I knew for example, the male refugees only from word in news, where this group was portrayed as mentally ill and seen as sexual harassers. I was able to overcome my prejudices, when I got in contact with refugees while researching about them.

In the second semester of master health sciences, in the course, advanced qualitative design it was our task to conduct a study on the refugees' health. Thus two fellow students of mine Sona Sainju, Sabrina Günsche and me decided to conduct a study regarding the risks and resources influencing mental health of refugees in Hamburg by using the narrative study approach under the supervision of prof dr. Färber. Therefore all of us participated in recruiting refugees as researchers and students of master health science in the trainings of the REFUGIUM project of the first generation which were held from the 2nd to the 30th May 2016. In our study we interviewed both male and female refugees and the results of our study showed that refugees are not in general, mentally ill or aggressive but rather uncertainty about the future and the asylum process in the new home country. Long asylum seeking process, detention and temporary permits, separation from family members, have the most adverse effect on refugees mental health (Neuhaus et al., 2016). Whereas protective factors were identified as social support, health promotion structures in the camp, opportunities for study/ work, integration and health care facilities (Neuhaus et al., 2016). These results encouraged me to work with the refugees besides making me emotionally ready to work in a setting where I interacted and worked with refugees. Because from then on I saw the refugees as people who were all healthy though they lived in fear and lacked hope due to their vulnerable circumstance.

Social support was identified one of the basic resource and therefore I felt it was my responsibility as German resident to create this kind of setting. An environment in which refugees would be welcomed and appreciated, where psychosocial development and self-determination particularly among vulnerable individuals would
be promoted. The REFUGIUM program gives a voice to individuals who may be excluded. Therefore I decided to join the program. The most important factor, which enabled me to work with members of a vulnerable group, was by overcoming “dangerous images” and dismantling prejudices regarding refugees. This made me familiar with the project REFUGIUM and with the topic refugees health before my internship.

Reflective Notes:
The REFUGIUM team members who are interested in working in the program need to be sensitised for working with a vulnerable group about many prejudices that exists. In order to work or conduct research in a health promotion program with a vulnerable group like refugees, the knowledge regarding their current situation, problems and needs is essential.

It’s the responsibility of the program coordinator or manager to elaborately inform elaborate the refugium team members about the current situation and problems and needs of the individuals with whom they will work in future. That should happen in a meeting before starting to work in the REFUGIUM program. In the meeting the coordinator should focus on and discuss two topics:

First of all they should be prepared emotionally to work in the REFUGIUM program with refugees. This can be achieved through providing them with the publication study regarding the risks and resources influencing mental health of refugees in Hamburg of Neuhaus et al, 2016. This publication will inform them about refugees as people who are healthy people, but who have fear and hopes due to their vulnerable circumstance. As a result they will be able to overcome possible “dangerous images” and prejudices regarding refugees.

Secondly they should be intrinsically motivated to work in such a setting and with the target group which might be demanding. This is why the coordinator must enlighten new team members about the aims of the REFUGIUM program in relationship with the role they will play and how their work will help in achieving these aims.

The REFUGIUM program gives voice to individuals who may be marginalised or excluded. It also promotes the full participation of vulnerable individuals and groups in developing and conducting the program.

The REFUGIUM team member take part in creation of a setting in which the refugees are welcomed, appreciated and empowered. This is also the place where
psycho-social development and self-determination particularly among vulnerable individuals will be promoted. They will be working for a higher course, particularly in promoting integration of migrants into the German society resulting in peaceful coexistent. In order to achieve this aim organizational tasks and character traits like patience, courage, open-mindness, creativity are important for REFUGIUM team members. REFUGIUM team members should be aware of these traits, because they will need them from time to time during work (pre condition). This they get once they are provided with with the refugium background and participatory action approach fact sheet and as such they shall have been prepared to work in the program and they shall have understood well their roles thus resulting in having a highly motivated team. No meeting as such was conducted before I started my internship and therefore I overcame my prejudices alone. As the aim of REFUGIUM program was clear to me I was motivated to work and create a setting in which refugees are welcomed and empowered a resolve not expected by everyone and therefore these information has to be given to all the new REFUGIUM team memebers by the coordinator in a meeting before work.

**Descriptive notes:** On the first of February 2016, as i started my internship, the program coordinator Prof. Dr. Färber, the head of the health sciences department and professor of empirical research methods, provided me with the documents with the background about REFUGIUM program and asked me to read them so that im well prepared and familiar with the REFUGIUM program. Additionally i was told to conduct a literature research on refugee health and the method participatory action research. This was important in order to understand the method of REFUGIUM program namely participatory action research and how to research, work, observe and behave accordingly. As a student of masters in health sciences i was equal to the task, but for the interns who lack the academic background it proved to be difficult. This calls for the REFUGIUM program to provide new internees, federal worker, researcher with the about participatory action reseach. It should be uploaded in the electronic plattform. As a master students it was my task to find a research gap for the purpose of study in regard to the REFUGIUM program in order to render the performance proof to university.

Besides this i had to get familiar with the resources of program. They include: flyers, manuals, electronic plattform HAW EMIL Flüchtlingsgesundheit 17 and materials in
the rooms 2.09 and 5.29. She provided me with the password to enrol myself in the electronic plattform HAW EMIL Flüchtlingsgesundheit 17. I observed that the platform was not maintained according to current status of program. For example the refugium background documents and flyers were not uploaded there, eventhough they existed in a pdf version.

To start off i had to organise myself by filling out the key contract and get signed by CF, getting the key by emitng key contract to facility manager , emitng my internship contract to the Rechenzentrum (Mrs Raudina) to get paid for my internship.

**Reflective Notes:** this was a hard task owing to the fact that I had no knowledge the exact people to contact for the exact reason i needed only depended on knowledge given to me by the team members or coordinator. It was my task to conduct trainings and workshops so i made a file with all manuals and flyers for me so that i could learn, read and carry them with me as my resources. i was also responsible for organisational tasks so i made a file in the office to file all important documents regarding my internship and REFUGIUM program.

**Reflective Notes:** All of these processes need to be documented for new members as reference to go through.. The are time consuming and they need a overview where and who is responsible. By this time and ressources can be saved. As it was observed that the platform is not maintained it needs to be organised according to the latest status of the program so that it can used of team members.

**UNIT 2 : Peer facilitator training, Second generation**

**Descriptive notes:** When i started my internship in february 2017 i was given the responsibility of implementing training and workshops of 2 generations as a responsible worker by the Programm coordinator, Prof. Dr. Färber, . I did this together with;Sameer, a Refugee, Health peer facilitator of first generation, Federal volunteer(BUFDI), Soni and Monica,an internee of master health sciences study at HAW who had been members of the REFUGIUM Team six months earlier than meMonica my friend and Sameer whom i had seen in the training of first generation. With the guidelines of Prof. Dr. Färber the dates were set, the venue was identifiedand timingsand the duration of the training of 2 generation was determined. the new internees were then informed about it. The training was conducted from the 22nd Feb 2017 to 8th March 2017at (HAW Hamburg - Campus Berliner Tor, Berliner Tor 5 20099 Hamburg). Soni an internee of master health
sciences study at HAW, joined our team later. And together we attended as participant observers and researchers.

The REFUGIUM team included two health peer facilitator trainers: Sameer, a federal volunteer worker in the field of refugee health, and Sami, a guest lecturer and a peer facilitator trainer. Team members from the university were: Dr. Omar Aboelyazeid, a scientist in the program who conducted the first generation as responsible internee and was going to offer a lot of support in training the second generation as well as conducting workshops in various refugee accommodations taking the role of a lecturer, while Soni. Monica and I were the student facilitators as well as observers.

At that certain time the situation of refugium program was as followed: there was a lack of funding, program-management, project coordination, there were unknown and undocumented program processes and conduct of intervention was planned in an unknown setting (Berliner tor).

Our first assignment as a REFUGIUM team from the program coordinator Prof. Dr. Färber was to complement the present invitation draft with the date (22.02.2017, 28.02.2017, 01.03.2017, 08.03.2017) time (16-18, 14-18) and place (HAW Hamburg - Campus Berliner Tor, Berliner Tor 5 20099 Hamburg), by including our names and develop work the design. The invitation was needed to advertise for the second generation and to recruit participants. We met at university and were introduced to each other. I was given a warm welcome by both of them and we started to work. During consultation and discussion of the task we didn’t seem to agree and thus, we were not able to work further. The situation was very sensitive, because I was new in team and not aware of their team work culture. In order to achieve our goal it was important that we constructively discuss and consult how we can conclude the task. I observed that there was no understanding and team work between both of them. In general it is a challenge to work in a team with people from different nations, ethical values, cultures, mentalities, educational backgrounds, religions and residential status to find common ground when considering a task. In our case we were all of different nations, ethical values, cultures, mentalities, educational backgrounds, religions and status of residence, but additionally each one of us belonged to a vulnerable group: Monica being an african black woman from Kenya and is in German as an international student; Sameer, a refugee and me a German
national with migration background, with an experience of ten years of asylum-procedure and a woman wearing a headscarf living with her family. According to research (Bertelsmann stiftung) a black women who wears headscarfs, and refugees are the most discriminated group of people in the German labour market and society. These descriptions made all of us a vulnerable team members. All of us were not peers for each other, because there were these concepts of each other. The federal worker might have felt that we as the other team members regarded them as of less knowledge and education and therefore not implementing, his proposes. Due to these personal issues about status and different perceptions of each other we had a lot of unneccessary discussions which could have been saved if all would have regarded each other as equal peers and team members. The major factor which determined the team work was the difference in status which lead to conflicts and was a barrier to having a healthy team work.

With the above mentioned picture at hand i took the task of regulating the situation, so that we could work succesfully. This i did as a new team member. I tried to handle the situation by discussing the ideas of both sides and finding a common entity. I gave attention and resepct to the federal worker, because i realised the he easily got offended, thinking that we did not respect his position owing to the fact that he was a refugee I approached him and with respect persuaded him to share and discuss with us why he thought we should change it. I further made him understand that our goal was to solve the task as team and that. Everbody's idea mattered and we would appreciate his too and implement them and emphasized that we were very thankful for his help and dependent on his knowledge, because he had been in the program from the first generation and as a result an expert. Eventually it became easier to communicate with each other, because it was clarified that we as master students and non-refugees do not perceive him as only a refugee, but rather as an equal and even more experienced member of REFUGIUM team. Keeping this in mind, i explained the reason behind my ideas concerning the task and why we should do the task like that. In the end we concluded the task succesfully. That incident was discussed in a team meeting with the program coordinator, she listened to us and then explained to us the challenging situation in which we were and that we had to respect each other.

After all this Soni joined the team and she learned what the current situation was and how to handle. Soni, Monica and me were friends already from study time and
having her now in team was very positive for me. We both were skilled in working
together and being effective. Soni is a very calm person with a friendly attitude so
everyone easily accepted her and she was warmly welcomed

Reflective Notes: In such a team where differences of status and culture exist it is the
responsibility of the program a coordinator to conduct a meeting before the team
work begins and discuss the equality of all team members independently as well as
discuss the the status and ethnicity of the team members. It has to be elaborated that
the ideas of each team member have to be treated in a equal way, this means if a
member is of higher educational status he listens and acknowledges to the ideas of
his surbordinates i.e from a refugee, migrant and any other. of a lower educational
background. In such a case then the team members with the „better” status should
make clear that the opinion and ideas of all team members are treated equally ,
because as team members all are equal. Although this consumes time, it provides
for an opportunity of team members respecting each other and empowers the target
group which is one of the main aims of REFUGIUM program. Moreover it has to be
said, that the allocation of work has to be within the group and no one should be
discriminated against. Everyone should respect each other and If anyone has the
feeling that the or she is not being treated fairly, he or she should discuss with the
coordinator or scientific worker. The concept of vulnerability has to be made clear.
The team members are all individuals of a vulnerable group therefore they should
strive to develop sympathy and understanding for each other. There will be days in
which one member will be upset about his or her private situation (asylum status,
behörden kram, problems with job center, responsibility for parents or siblings,
experienced discrimination against, financial strains) and wont be able to work
effectively and efficiently, in such times it is the responsibility of the team coordinator
to listen to his or her problems if they want to share. Moreover if they are obliged to
and it is an issue which the team members can join in to assist the team member
they should try to. Like translating a document, or filling out a document which is in
German or writing a email. The project coordinator can be informed and should be
aware of the issues and problems of the team members, it is the coordinators duty to
try and offer assistance. The Coordinator also invites the tea members to discuss
their private issues with her and she will try to find a solution, although she might not
solve all the problems. The project coordinaote or the boss Cares for private
problems in the work place which is not common practice in the western labour market, because it is not the issue of co workers to solve private problems

The REFUGIUM program is developed, organised and conducted by team members who are a vulnerable group. So the attitude towards them has to be according to their status. By doing so empowerment, confidence and participation from the low thresholdness in the team members is achieved. All these facts have to be written down in a document, with the title: ethical guidelines of REFUGIUM program and uploaded in EMIL flüchtlingsgesundheit 17/WS plattform. As result program coordinator can provide any new team members in the meeting with this sheet, accessed from the EMIL flüchtlingsgesundheit plattform.

Descriptive notes: After the team meeting with Prof färber it became easier to work as a team. I was able to handle and cope with everyone according to his or her needs, therefore I became the team leader and gave clear instructions about what we had to do in order to achieve our goals. Besides being dominant I was friendly and respected by each of the internees and refugees who worked as team members with us. Therefore I shared my background with them so they know that I am aware of their suffering being a refugee in Germany. I told them of how my parents fled their home country and underwent 10 years of asylum procedure in Germany. When I was 6, when we got the German nationality as family. This traumatic experience has had a negative impact on health of my parents, which they are living with to date; twenty five years after. My refugee team members did not expect such a background and that I had gone through the experiences in which they were going through. They were surprised and appreciated my parents and me that despite going through adverse circumstances we moved on and did not give up. My story empowered them and made me to their peer as someone, who understands how you feel and suffer as a asylum seeker in germany.

Reflective Notes: I was accepted and seen as a team leader, because I was aware of the German culture/attitue and migrant culture/attitue very well. Owing to the fact that I was a German national with pakistani migration background with an experience of ten years with the asylum- procedure and as woman wearing a headscarf living. Therefore I represented a German and was additionally a peer to them.

The REFUGIUM program is in need of a scientific worker and according to this anlysis the program coordinator should search for a german born national with
migration background and with a own asylum experience or of parents. This scientific worker should work there constantly for the program and with new team members. The program is in need of a constant worker, because in the current situation the responsibility lies on the coordinator, who herself is the head of department and gives time of her leisure time to the program, and team members, who are students, bufdis, internees and no one of them stays constantly there or is capable to handle the huge responsibility alone.

**Reflective Notes:** As a team, we were able to overcome the differences, although we were all under great pressure, because we had to work in a German university which we were not familiar with and we had to be responsible workers at the same time. We were all members of a vulnerable group and mostly underrepresented in the German labour market, especially in research at universities. Most of the other staff member of the department health sciences who were working in the University were of German origin and only few were migrants. In such a setting each one of us had to prove him and herself as a professional and hard-working team member. The German labour market perceives migrants, individuals with migration background, and refugees as members of vulnerable group. Germans in higher positions prefer German speaking and a non-migrant appearance (head-scarf, black, black hair, oriental names) worker. For us as a multicultural and migrant group the huge responsibility was a chance to prove that members of vulnerable group could also work efficiently and responsibly. It was perceived from all of us as an honour that a German professor, the program coordinator (Prof. Dr. Christine Färber) and head of department trusted us and gave us the responsibility under her supervision to plan, conduct, research and evaluate the REFUGIUM program. For the first time looking different (skin colour, head scarf, hair colour), speaking another language, having a non-german name, having experienced asylum procedure, being a refugee was a resource and an important advantage for the workplace. Normally all these factors lead to exclusion from German labour market but in case of REFUGIUM program people with such requirements were needed. In the REFUGIUM program we as REFUGIUM team members worked as gatekeepers for the participating refugees. The refugee participants saw us as persons in response as well as workers in the REFUGIUM program and were able to build trust, because we looked, spoke and experienced migration similarly. We were peers of the participating refugees, even though not all of us were refugees. A white-skinned German team might not be
accepted by refugees as we were. According to research peer to peer design leads to success. Thus Prof. Dr Färber empowered us very often by appreciating each one of us and emphasizing how important we were for the success of REFUGIUM program.

Planning kick off event

Descriptive notes: one week before the kick off of the event at Campus Berliner Tor, We as REFUGIUM team asked for a team meeting with the prof so as to be ware of what to do in order to organise the training. she explained to us the main processes. In order to plan the info session we were told to book and inspect the rooms in Berliner Tor, send complemented invitation to all practice partners and make advertisement in refugee accomodations.

Reflective notes: We solocted for documentation of these processes but there was non and we were made aware that the only one person who conducted and organised for these before was a, Dr. Omar Aboelyazeid, but he was only aware of processes in Bergedorf and he was in vacation. We felt like thrown into the cold as none of us was aware of how to handle this situation. From this observation i made a conclusion that:
1 There was a lack of funding for the program-management and project coordination,
2 There were an unknown and undocumented program processes
3 The conduct of intervention was planned in a unknown setting (Berliner tor).
Nevertheless we accepted the situation as a challenge and started to work.

The process of booking a seminar room

For the 2nd generation Refugium training we booked two seminar rooms, one child care room and auditorium with child care room for the info session in Berliner Tor. The procedure was as follows: first the (application) is downloaded from the webpage: https://www.haw-hamburg.de/raumvermietung/standorte/berliner-tor.html. Then it is filled out in consultation with prof and signed by prof.dr and lastly sent to Mrs Hesse the responsible employee. It is needed to stay in continuously contact with her telephonically and email, because misunderstandings can occur. In response from Mrs Hesse we got the contract for using the rooms these contracts had to be signed by prof and given in original to their office. To get the keys an appointment was made with the Facilty manager Herr Gerbendorf of this building Campus Berliner tor 5. The handover of keys was documented by the faculty manager and as a
collecting student I signed the document. I signed the document by taking all responsibility the return was decided on 10.03. After that we inspected the rooms and if there are toilets nearby, if the rooms are big enough and appropriate for workshops. It was observed that Flipchart, Pinnwand, Overhead Projector, Blackboard, Chairs and tables were found in all rooms. Similarly we inspected the Auditorium and called the responsible employee Mr. Daum Beamer (Event engineering and support) to show ensure that all the requirements were there. The needed beamer, public address system existed and he promised us to provide and help us with the Handheld microphone on 22.02.17 at 14:30.

Reflective notes: During the inspections of all rooms i made pictures, because prof and other team members were not present. In order to show them and get approved by prof, i sent them all pictures and documented all of these processes in form of a table immediately and sent to the team and prof (table 1).

Invitation and Advertisement of REFUGIUM training

Descriptive notes: In the existing invitation draft the missing information regarding the rooms were complemented and invitations in four different languages (German, English, Arabic and Farsi) were made with the help of farsi and Arabic speaking REFUGIUM team members. For this task the farsi speaking team member sami was contacted and asked if he could do the translation in the office. After we fixed a appointment with him the translation was done in office, because it is the most effective way. In the next step the invitations were sent to prof for corrections and approval. After approval the invitations were ready to be sent to all the important contacts. We thought this task would be easy, because for the first generation the former REFUGIUM team also sent emails to contacts for advertisement. So we expected that a list of addresses would exist as a resource for further generations. But there was no such a document or list in which all contacts were documented. When we looked into the refugium_info mail, we could not find any contact list, whether in office in hardcopay or electronically in Flüchtlingsgesundheit 17. We were in need of a contact list for advertisement, because it would be time consuming to search email addresses one by one of organisations or people related to refugees. In that moment I remembered that I had one list in pdf and one in word of all important contacts (social management, refugee health organisations, researchers), which I got as a visitor of a refugee health meeting . So i provided the REFUGIUM
program with this list and we as team started to send emails to each one of them by addressing the people by their last names. Each email included an advertisement text, which was developed by monica and me under supervision of prof and the four invitations in pdf version in all languages. The documents: advertisement text as word, contact lists as word and pdf were uploaded in EMIL HAW, because of access as a team. Besides addressing the social managements, it was important to recruit our target group the refugees. As we did our 2nd generation training at HAW Berliner Tor, we intentionally choose those refugee accommodations which were near to Berliner tor. In order to recruit adequate participants for peer health facilitator training we distributed REFUGIUM invitation letters in different refugee accommodation of “Fördern und Wohnen” in team and also spoke to refugees personally.

As a Procedure: We first visited the office of social management and asked for permission and asked where we are allowed to stick the invitation letters. After that we stuck the invitation letters with tape on all entrances of each container/ House. Additionally we threw letters into their post boxes. Some of those refugee accommodations where we distributed are listed below in a Table.

Table 2: List of refugee accommodations where REFUGIUM posters were distributed in 2nd Generation

<table>
<thead>
<tr>
<th>Refuge accommodations (Fördern und Wohnen Unterkünfte)</th>
<th>Place</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grüner Deich – Wohnunterkunft</td>
<td>Hammerbrook</td>
</tr>
<tr>
<td>Friesenstraße 14 – Wohnunterkunft</td>
<td>Hammerbrook</td>
</tr>
<tr>
<td>Friesenstraße 22 - Wohnunterkunft</td>
<td>Hammerbrook</td>
</tr>
<tr>
<td>Georg-Wilhelm-Straße – Wohnunterkunft</td>
<td>Wilhelmsburg</td>
</tr>
<tr>
<td>Am Veringhof – Wohnunterkunft</td>
<td>Wilhelmsburg</td>
</tr>
<tr>
<td>An der Hafenbahn – Wohnanlagen</td>
<td>Wilhelmsburg</td>
</tr>
<tr>
<td>Schlenzigstraße - Wohnunterkunft</td>
<td>Wilhelmsburg</td>
</tr>
<tr>
<td>Karl-Arnold-Ring (EA)</td>
<td>Wilhelmsburg</td>
</tr>
<tr>
<td>Brookkehre -Wohnunterkunft</td>
<td>Bergedorf</td>
</tr>
<tr>
<td>Friedrich-Frank-Bogen – Wohnunterkunft</td>
<td>Nettelnburg</td>
</tr>
</tbody>
</table>

Preparation of info session
Descriptive notes: Rooms were booked, program was advertised, now we had to prepare each day with the neccessary materials and documents. In team meeting we
asked the prof and discussed what we would need for the kick off meeting, as all of us were not aware of what would be needed and how we would prepare and conduct the info session. She told us what was needed: the info-presentation about REFUGIUM with different languages, Refugium flyers for displaying and distributing in 8 languages and organising a person for child care and child care equipment. The info presentation had to be updated with latest changes so the old version, which was found in Flüchtlingsgesundheit 17 was sent to prof and she complemented it. The arabic and farsi translations were complemented by mohammad and milad. Refugium flyers existed and where systematically ordered in 6 topics and in 8 languages in office. As a team of each language and and topic 30 flyers were prepared. There was no one in prior generation for childcare so i organised one bachelor student whom i trusted and who was a friend of mine Hafsa rasheed for the childcare. As equipment a child care bag was developed with printed out manadalas without copyright issues from internet, pencils and balls were searched in both rooms and were put into that bag.

As documents name tags, arrows and participant list had to be created. The Name tags were created and were sent for approval to prof, after corrections they had to be printed and put into plastic badges, which were in office 5.29. Name tags were important so that the team members are recognised as REFUGIUM team member and emphasizing which status they have. The arrows showing in different directions with room and time were created so that the participants would be enabled to find the way to the room. participant list were created and had to be complemented with participants who registered through email.

It was decided that refreshment would be offered to the participants. These would be healthy snacks such as; nuts and drinks like water and tea. we checked in office for what was already available. a list was then made in which everything was listed which had to be purchased. The responsibility to purchase the snacks, cutlery, paper plates, napkins and tea was distributed. REFUGIUM team members, who had enough cash available, spent their money. Therefore that task could only be allocated to one who could spend his/her money in the meantime as we awaited for prof to come. This made effective teamwork very difficult and it emerged that we need this kind of money from prof. Prior to the purchases. We needed water in glass bottles, tea, sugar and hot water in thermoses. there was sugar in the office but we lacked thermoses. So thermos with hot water had to be organized. I searched the
number of the mensa of Berliner tor and asked them if it is possible to provide us with thermos with hot water till 14:00 for free. The secretary of mensa provided me with the number of the responsible person Mister Metzner with the number: 040 247994 and I called him. He asked me about the purpose and promised to help us. He asked us to collect the thermos from mensa in the first floor till 13:30, because mensa closed at 14:00. It was my responsibility to remind him and ensure that I did the collection with my team.

Two days prior to info session we printed all the needed documents such as name tags, participant list, arrows. Nametags were printed and put into plastic badges, which were in office 5.29. Participant list, with participants who registered through email and arrows were printed out and put in transparent foil. The info-presentation was put in an extra file on the desktop so that it would be found when needed and a day before the info session we all met in office Bergedorf and collected all the needed materials (glass bottles, flyer, rope, shampoo, etc) and documents and then carried to Campus Berliner tor in and stored them in the child care room next to the auditorium. Afterwards the snacks were purchased and stored in child care room. As nuts were bought which included Walnut, almond, cranberries, raisins, peanut, hazelnut, cashew from lidl, because it was near by. For snacks, we ensured plastic cutlery and paper plate and napkins were bought. On the day of info session we all met in Bergedorf and a meeting with prof was held in which we informed her of our progress she advised us not to forget to fill out participant list after the info session. We also discussed as a team what was left for us to do and decided that each team member takes responsibility over one task and we reached Berliner tor at 13:00. One Sticked arrows from SBAHN Berliner tor till the room. The other ones prepared in the auditorium one table with snacks and drinks and the second table for displaying flyers and workshop material like rope, shampoo, . Herr Daum was informed that we were in the auditorium and he brought and explained to us the use of the handhold microphone and the overhead projector. At 13:30 I collected the thermos with the help of milad and hafsa from mister metzner of mensa. Prof and Sameer brought the laptop and remaining flyers from Bergedorf. The child care room, which was next to the auditorium was prepared. The laptop was linked to the system and the presentation started, all was in order.

Conducting the kick off event
Descriptive notes: After conducting the info session the participant list was filled in by asking each one their numbers, email, name. Some participants explained that they would be going to school and therefore would not be able to take part in training. The prof suggested to them to visit the training, because they would be provided with an apology letter, which explains the reason of their absence. As we finished, everything was organized in the bags and the room was cleaned and checked before leaving. All bags were put in the rooms which we got for the training dates with a reminder, a paper with written purpose and name of prof with telephone number, was written for the facility manager so as not to throw away our bags. On the way back all arrows which were pasted were removed. In the next morning the noted participants were added in the participant list and sent to refugium_info@haw-hamburg.de.

Organisation of Peer Facilitator Training day 128.02.2017

Organising material and documents

Descriptive notes: The info session was conducted successfully as the (22.02.2017 was Wednesday, we only had Thursday, Friday and Monday to prepare for the trainings on 28.02.2017, 01.03.2017, 08.03.2017) time (14-18).

Reflective Notes: We were tensed, because we didn’t know how to manage the training within the given days. So we asked for a meeting on Thursday 23.02.17 with prof. She informed us that we would find information on what is needed for each day of training in the manuals according to the topics. Even though the training had already been conducted in the first generation, there was no guide explaining the processes or an inventory list giving information about what was needed existed. As informed by prof we ensured that the materials and documents were distributed randomly in the rooms 5.19 and 2.09. First of all we inspected the cupboard 10 in room 2.09 and the room 5.29 in order to get an overview and estimate what was there as resource. Afterwards we contacted the students of first generation, because they were the last ones who prepared and carried out the training and workshops to ask where they had put the materials. Not everyone could be reached, because they were in holidays. Some who were reached told us that there were several bags in room 2.09 and 5.29 in which the materials could be. This did not help us much.

As we had only few days left we focused on training topics, which would be conducted on the first day of the training at 28.02. this was on nutrition and physical
activity. We started with the topic nutrition and studied the nutrition manual for needed documents and material. We noted down on a list what was mentioned in the manual and started to search as a team in both rooms 2.09 and 5.29. What was found was noted down and what was missing was marked in order to ask prof. Some materials were missing like the measuring cylinder, because it was not returned to REFUGIUM program of students of last generation, but we didn’t know that and searched it for hours. There was also material which did not exist at all like a plastic bowl and DGE nutrition circle. After the unsuccessful search we contacted the prof and she advised us to use a plastic glass instead of measuring cylinder and told us to collect the DGE nutrition circle in the latest post at dekanat. For conducting this topic also fresh fruits such as apples, bananas, strawberries, grapes and many others were needed. They had to be purchased on the day of training. As it was not clear how many language groups would be formed, we estimated that there would be a maximum of three (arabic, farsi, english). Thus each language group would be in need of same materials and documents, so we collected and put all the necessary materials for the three groups in one plastic shopper. We didn’t get enough materials and documents for all the three groups. In the same manner we searched each document and material in both rooms for the topic physical health and it took us plenty of time. For e.g. for physical activity workshop we had to search cards with different sport activities, motivation poster for sport etc. Again we collected and put all materials in one shopper for physical health.

Organisation of Peer Facilitator Training day 2 01.03.2017
Organising material and documents
Descriptive notes: The second day of training day was on the 01.03.2017. It revolved around the topic Hygiene and oral health. So we studied the Hygiene and oral health manual for needed documents and material. For Hygiene we needed: tape, marker, glitter, hand cream, shampoo, shaving cream, toothbrush, hair brush, lice comb, soap, refuge manual hygiene intern. While in the oral health manual these were stated: tape, marker, mouth model with toothbrush, toothpaste, dental floss, dry pea, interdental brush, rice, salt. These materials were noted down on paper and we started to search as a team in both rooms 2.09 and 5.29. Most of these materials were found in room 2.09 in cupboard 10, but they were not organised systematically. It was very time consuming and exhausting to find existing materials and documents.
Missing materials like dental floss, dry pea, interdental brush, rice, salt had to be purchased, because they did not exist

Organisation of Peer Facilitator Training day 3 08.03.2017

Organising material and documents

Descriptive notes: Mental health and health care

Similarly for the topic health care important documents were needed like berechtigungsschein, tip doc, aok karte laminated, health care guideline. These documents were stored unsystematically in shelves, mixed up with papers in rooms 5.29 and 2.09. So we asked prof to help us with the search of these documents, because not all of us were aware of how these documents looked like. With the help of prof we found the documents, but it was a very difficult and time consuming task to search in an office of a prof for papers with a certain heading. We expected these documents to be filed in a file as resources, but this was not the case.

Reflective notes: We never left the University after eight hours of work. We always left after we were done with our work, mostly when the building closed at 21:00pm. This was a very exhaustive task at the end for each workshops topic we organised the materials as well as manuals in corresponding languages.

Preparation of manuals and flyers

Descriptive notes: The latest version of completed manuals for the topic were sent to us by prof and we printed them out in all available languages. And organised in systematic order and marked so that it will be find. It was a challenging task because these manuals had not been translated into one needed language and they were not complete by the morning of day of the training, because responsible translator had no internet connection in his camp. The flyers for these topics were taken out of the shelf in 5.29 and were organised for each topic in all languages.

Contact with REFUGIUM training participants

Descriptive notes: The training material and documents were prepared, now we had to remind all registered participants about the upcoming training. First of all we had to send emails and sms, whatsapp messages as reminder about upcoming training with date, time, place to the registered participants. The text was developed in English and was translated into arabic and farsi and was sent with our private mobile phones to the refugees, because the intern mobile phone did not function. Not every team
member was willing to share his or her private number for work purposes so only one member was ready to sacrifice her number. Messages from her phone and emails were sent from refugium_info@haw-hamburg.de to them on the Friday 24.02.

**Finalt Preparations**

Descriptive notes: One day prior to the training day we printed all needed documents as participant list, arrows. Participant list, with participants who registered through email and complemented arrows were printed out and put in transparent foil. I called mister metzner to book again the thermos with hot water till 14:00 and reminded the person responsible for child care to be present. In the morning of the training day we all met in Bergedorf and a meeting with prof was held during which we informed her of our progress. She discussed how the training day would run and advised us to fill out participant list after the training day. We discussed in team what is still remaining and decided that each team member takes responsibility for one task. One stucked arrows from SBAHN Berliner tor till the room. The chairs were organized and the snacks put in place a table was also set for displaying flyers and workshop material like rope, cards. The posters were displayed on the blackboard. To complement the topic, fresh fruits were purchased by another team member. At 13:50PM I collected the thermos with the help of milad and hafsa from mister metzner of mensa. The thermos and fruits were allocated to both rooms and were placed on the table.

The training was conducted and in the last step both groups met in one room and the they were asked for their feedback. The manuals were distributed in all needed languages and topics and they were reminded about the upcoming training days. Moreover the participant list was filled in by asking each one their numbers, email, name, adress.

**Reflective notes:** In this phase it was very important to motivate and be very friendly so that we do not loose our participants. They were given the feeling of being respected and valued by thanking each one separately while seeing them off. Female team members hugged intentionally female participants and male REFUGIUM team members gave male participants hand. Female REFUGIUM team members who were willing to shake hands with male participants did that also. Due to diverse cultural and religious background it was not possible for the women and men toget in physical contact even while shaking hands, as is usual in Germany. These differences have to be considered by using intercultural competencies of REFUGIUM team members.
Descriptive notes: After the 3 trainings in the 3 days the participants were finally told about the need to be trained further and were asked about possible dates and timings regarding training at HAW. They shared their possible free times and we in unison came up with these as the dates for the next training: 21.03.17 and 28.03.17 from 18-20 and provided them with the address of HAW hamburg in Bergedorf.

Post-Training conduct

Descriptive notes: In the end everything was organised in the bags and the room was cleaned and checked before leaving. All bags were put back into the rooms in which we got them from with the next training dates with a reminder and a paper with written purpose and name of prof with telephone number, for facility manager to not throw away our bags. On the way back all arrows which were pasted were removed.

In the next the noted participants were added in the participant list and sent to refugium_info@haw-hamburg.de.

Reflective notes: Program management table for Berliner Tor implementation

In order to organise the work in Beriner tor, I documented the process in form of a table. This was meant to establish program management and ensure sustainability. I adopted these headings: Task, notes, To do? To buy?, Who to Contact Whenever the program will be conducted in Berliner tor again team members will find documented processes.

Table 1

<table>
<thead>
<tr>
<th>Aufgabe</th>
<th>Notizen</th>
<th>TO DO? TO BUY?</th>
<th>Wer</th>
<th>Kontakt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutzungsantrag ausfüllen</td>
<td><a href="https://www.haw-hamburg.de/raumvermietung/standorte/berliner-tor.html">https://www.haw-hamburg.de/raumvermietung/standorte/berliner-tor.html</a></td>
<td></td>
<td>Frau Hesse</td>
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<td>Raumvermietungsservice</td>
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<td>T +49.40.428 75-9093</td>
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<td></td>
<td></td>
<td></td>
<td>zentrale_raumvermietung(@)haw-hamburg.de</td>
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<tr>
<td>Nutzungsantrag</td>
<td>Von Frau Färber die 4</td>
<td>Schon</td>
<td>Frau Hesse</td>
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<td>Schritt</td>
<td>Beschreibung</td>
<td>Erledigt am</td>
<td>Ansprechpartner</td>
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<tr>
<td>1. Schlüsselübergabe</td>
<td>zwischen Herrn Gerbendorf und Montaha Neuhaus</td>
<td>erledigt am 10.03.17 von Montaha</td>
<td>Herr Gerbendorf Hausmeister 040/428759241 01736263574</td>
<td></td>
</tr>
<tr>
<td>2. Besichtigung der Seminarräume</td>
<td>Vorgefunden in allen Seminarräumen: -Flipchart -Pinnwand -Overhead Projector -Tafel -Stühle und Tische</td>
<td>Moderationskoffer -Stecknadeln (Pinnwand) -Papier (Flipchart) selbst mitbringen und im Raum auf der Fensterbank verstauen</td>
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</tr>
<tr>
<td>3. Kinderbetreuungsräume</td>
<td>Es ist ein einfacher Seminarraum</td>
<td>Spielzeug -Matten -Erste Hilfe Box</td>
<td></td>
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<tr>
<td>Besichtigung des Hörsaals</td>
<td>Vorgefunden: Beamer (Gelbe und lila Flecken) Lautsprecheranlage Handmikrofon stellt Herr Daum zur Verfügung</td>
<td>Aufbau im Hörsaal - Termin mit Herrn Daum am 22.02.17 um 14:30 - Email an ihn schreiben</td>
<td>Herr Daum Veranstaltungstechnik und betreuung 040/ 428759266 017642852692 <a href="mailto:veranstaltungstechnik@haw-hamburg.de">veranstaltungstechnik@haw-hamburg.de</a></td>
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<td>Thermoskannen</td>
<td>Einen Tag vor dem Training die Thermoskanennen mit heißem Wasser bestellen und bis 14:00 abholen</td>
<td></td>
<td>Herr Metzner 040 247994 Mensa Campus Berliner Tor</td>
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<tr>
<td>Verpflegung</td>
<td>Teeküche befindet sich in der 9 Etage und das Fakultätsservicebüro Public Management (Raum 09.23) erlaubt uns diese zu nutzen</td>
<td>Wasser für die Glasflaschen</td>
<td>Fakultätsservicebüro Public Management Ina Landsch Berliner Tor 5 20099 Hamburg</td>
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</tr>
</tbody>
</table>
### Material zum Workshop mitnehmen

Flyer alle Themen: je 30 in allen Sprachen, die wir sprechen und 5 in den Sprachen, die wir nicht sprechen.

Laptop und Präsentation

Tee, Zucker, Servietten

Flyer vorab packen

Präsentation auf Laptop spielen, Laptop einpacken

Tee, Zucker, Servietten müssten noch im Schrank liegen: einpacken!

Team REFUGIUM bitte Montag und Dienstag klären

### Vorbereitung treffen am Mittwoch

Monica, Montaha, Soni please meet me Wednesday at 11 at university

### Werbung Refugium Programm

- Emails versandt
- Flyer ausgehängt an verschiedenen Orten

Weiter machen

Team Refugium

---

**UNIT 3 Didactical peer facilitator training (DPFT)**

**Descriptive notes:** The refugees were trained for 3 days on the six topics, but to be qualified to work as health peer facilitators they needed to be skilled in two sessions on how to conduct a workshop. In this part health peer facilitators are trained by health peer facilitators trainers on how to conduct a workshop. The first training of
HPF was conducted in the church on the 9.03.17 from 16-18 in which 4 HPF participated alongside the REFUGIUM team. The responsibility for bereitstellen of room and advertisement and recruitment was on the collaborating pastor. Actually it was planned that the workshop is conducted in the church, but only 4 refugees participated who were participants of completed training of second generation. As they were aware of the content we changed the purpose of this meeting and decided to train them about how to conduct a workshop. Thus the most experienced team member and peer health facilitator trainer Mohammed Kalo, a federal volunteer worker in the field of refugee health was chosen from the team to conduct the training. Because, he was the only one aware of the challenges and resources related to all the six topics, which were important to consider while conducting a workshop. The trainer told them that they will need the corresponding manual, and material in order to conduct a workshop.

**Reflective notes:** Two important facts were observed while in this session. Firstly It was observed that the training was conducted without a corresponding document in which all important facts regarding barriers and resources were documented, he was just telling them out of his memory. Hereby it was concluded that in order to ensure sustainability the knowledge and experience of the team member had to be documented so that it could be used as a resource in future by other HPF trainer in REFUGIUM program. As well as distributed to health peer facilitator as resource while conducting a workshop. Secondly it was observed that the participants were not prepared for this training, they needed to be equipped with a file containing all manuals and flyers and materials. The trainer mentioned in training all these things but they did not have them. In a team meeting this needs were discussed with program coordinator and Mohammed Kalo developed the two documents under the supervision of Prof. Dr. Färber.

**Booking of seminar room for training**

**Descriptive notes:** The didactic training phase For the 2nd generation were held on the 21.03.17 and 28.03.17 from 18-20. in HAW Bergedorf. The procedure of booking rooms in HAW Bergedorf was as the follows. The rooms were booked by visiting personally the faculty service office (FSB) (Verwaltung, Fakultätsservicebüro, Ulmenliet 20, 21033 Hamburg) in room 0.14. to check that the room is big enough, with adequate chairs and tables, with white board and all the necessities. The rooms N4.11 and N4.12 were identified. since the the office is above. The key from the
room was taken from Dekanat secretariat office on the day of training

Contact to participants
Descriptive notes: For this purpose all participants were contacted by sending reminder messages. We sent emails and sms, whatsapp messages as reminder about upcoming training with date, time, and place to the registered participants. The text was developed in English and was translated into Arabic and Farsi and was sent with the REFUGIUM intern mobile phones, emails were sent from refugium_info@haw-hamburg.de to the refugees.

Last preparations of snacks and drinks
Descriptive notes: The nuts bought included Walnut, almond, cranberries, raisins, peanut, hazelnut and cashew. We also purchased plastic cutlery, paper plates and napkins. Arrows were printed with new headings. One stucked arrows from SBAHN Berliner tor till the room. The responsible person for key and a team member opened the room and started to move the tables aside in order to make a circle with chairs. Additionally one table was prepared with snacks and drinks and the second table for displaying flyers and workshop material like rope, cards. The posters were displayed on the blackboard.

Developing and preparing content
Descriptive notes: For this phase plastic files, transparent foil and bags were searched and bought. Files were complemented with manuals and flyers in a transparent foil for Health peer facilitators. Plastic files and bags were chosen out of cotton, because they are robust.

Documentations of emails and contracts:

Email für die Raumvermietung
Sehr geehrte Frau Schneegans,

im Rahmen des Projektes Refugium von Frau Prof. Dr. Färber (Departmentleiterin Gesundheitswissenschaften Fakultät Life Sciences) benötigen wir Räume jeweils mit dem aufgeführten Equipment zu den folgenden Terminen:

22.02.2017 14:30 - 18:18 1 Raum für circa 100 Personen, 1 Raum für Kinderbetreuung (maximal 15 Kinder)

Equipment: Lautsprecheranlage incl., Rednerpultmikro, Beamer, Mikrofon (kabellos), Flip-Chart, Stehtische
28.02. 2017  12:30 -18  3 Räume für jeweils 20 Personen , 1 Raum für Kinderbetreuung (maximal 15 Kinder)  

Equipment: Flipchart-Ständer oder Magnettafel  

1.03. 2017  12:30 -18  3 Räume für jeweils 20 Personen, 1 Raum für Kinderbetreuung (maximal 15 Kinder)  

Equipment: Flipchart-Ständer oder Magnettafel  

8.03.2017  12:30 -18  3 Räume für jeweils 20 Personen, 1 Raum für Kinderbetreuung (maximal 15 Kinder)  

Equipment: Flipchart-Ständer oder Magnettafel  

Es ist von besonderer Wichtigkeit, dass zu allen drei Terminen (28.02, 1.03, 8.03) die Räume identisch sind. Falls es möglich ist, uns die Schlüssel für diese Nutzungszeit zur Verfügung zu stellen, wäre dies sehr hilfreich.  

Wir bedanken uns bei Ihnen im Voraus und freuen uns auf eine zeitnahe Rückmeldung.  

Sehr geehrte Frau Hesse,  


22.02.2017  14:30 -18  1 Raum für circa 100 Personen, 1 Raum für Kinderbetreuung (maximal 15 Kinder)  

Equipment: Lausprecheranlage incl., Rednerpultmikro, Beamer, Mikrofon (kabellos) , Flip-Chart, Stehtische  

Protokoll für die Raumvermietung  

Telefonat mit Frau Hesse am 3.02.2017  

Termin 1: 22.02.2017 von 14:30-18:00  

Frau Hesse bucht den Hörsaal im Gebäude Berliner Tor 5  
Die Verfügbarkeit des Kinderbetreuungszimmers steht noch aus. Sie kümmert sich darum.  

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Anmerkung</th>
<th>Aufgabe</th>
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<tbody>
<tr>
<td>Lausprecheranlage incl.</td>
<td>Besteht</td>
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</tr>
<tr>
<td>Rednerpultmikro,</td>
<td>Besteht</td>
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</table>

211
<table>
<thead>
<tr>
<th></th>
<th>Besteht, aber hat schlechte Qualität.</th>
<th>Selbst Beamer organisieren</th>
</tr>
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<tbody>
<tr>
<td>Beamer</td>
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<td>Mikrofon (kabellos)</td>
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<td>Flip-Chart</td>
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<tr>
<td>Stehtische</td>
<td>Besteht nicht</td>
<td>Selbst organisieren?</td>
</tr>
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|                                |                                        |
| Termin 2: 28.02, Termin 3: 1.03, Termin 4: 8.03 |

Frau Hesse hat noch keine Antwort bezüglich der Räume an der Alexanderstrasse 1.

Frau Hesse: Es sind Semesterferien, aber die Gebäude sind in ständiger Nutzung, deshalb kann ich nicht sagen, ob es klappt. Leider, habt ihr euch sehr kurzfristig gemeldet.

Raumvermietungsstelle stellt internen Nutzern nur Räume zur Verfügung und nicht das Equipment.
Sobald Sie wissen in welchem Gebäude/ welchen Räumen ihre Veranstaltung stattfinden wird müssen Sie das Equipment selbstständig organisieren.
Wir werden Ihnen die Nummern der jeweiligen Fakultätsservicebüros mitteilen, damit Sie nach den Verfügbarkeiten fragen können.
Es wäre von Vorteil sich die Räume anzugucken.
Wichtig: Frau Prof. Dr. Färber muss einen Interner Nutzungsantrag ausfüllen. Diesen wird uns Frau Hesse per Email noch verschicken.
Die Schlüssel für die Räume haben die Hausmeister und in der Regel schließen diese die Räume auf. Informationen über die Schlüsselnutzung sind dem Internen Nutzungsantrag zu entnehmen.
Start of 3 generation peer facilitator training

Reflective notes: The info session, training and didactic training was organised and conducted by us as the REFUGIUM team and the program coordinator successfully and was appreciated by the program coordinator prof immensly. She told us that she was very impressed by our work and the ability to conduct the trainings, perfectly amidst unorganised structures and conditions within the program and without prior documentation and, module handbook. She was so impressed that she announced the training dates of the 3rd generation.

When the meeting ended we went to the room 2.09 and discussed and tried to cope with this huge responsibility in a REFUGIUM team meeting. We all expressed concern that it was tiresome to work in a program with no elaborate no structures as it is time consuming. The announcement of the commencement of the third generation session was therefore not welcome. As such we planned for a meeting in which we would express our concerns to Frau Färber. This was however, a hard task for me as I feared, how she would judge me out of it. One because I’m a migrant and two I thought she would use this to compare me to German workers. All in all I approached her told her of our planned conversation that we are not able to organise the 3rd generation, because the program had no program management. I told her that the implementation of all unknown units of the 2nd generation was highly challenging and time consuming. For example it took 19 hours for 4 team members to prepare for one training day. She explained that we would be able to organise it, because we are aware of all processes and organised and implemented the second generation successfully in Berliner Tor. She added that the organisation and conduct of the 3rd generation would be easier, because it would be in the university in Bergedorf. We had no choice but to take up the task once more and organise for the 3rd generation.

The practical part of training of second generation did not complete and we as a team had to begin to plan the organisation and implementation of third generation. In order to decrease the preparation time and be effective for third generation the REFUGIUM program was in need of a strategy which would ensure the establishment of structure in such a dynamic process.

More precisely the Program was in need of formative process evaluation in order to develop a program process tool for each unit. In light of these findings the research
question was “How to organise and implement REFUGIUM health promotion program for refugees effectively and efficiently”

To answer this question it was important to recognise the program processes. Meaning the common action that cuts across the program activities, observed interactions and program content (patton, 2002, p. 474)

![Program coordination
Frau Prof. Dr. Färber](image)

<table>
<thead>
<tr>
<th>REFUGIUM TEAM</th>
<th>Task</th>
<th>REFUGIUM Program</th>
<th>Challenging Implementation (2 generation)</th>
<th>Strategy</th>
<th>Easy Implementation (3 generation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>-Bufdi (PHF)</td>
<td>Implementation of REF. program</td>
<td>-undocumented &amp; unknown program processes</td>
<td>1. preparation</td>
<td>1. preparation</td>
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<td>- 3 internee</td>
<td>1. preparation</td>
<td>-unknown setting</td>
<td>2. training</td>
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<tr>
<td>(Master health sciences)</td>
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<td>3. training (HPF)</td>
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<td>4. workshop</td>
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<td>4. workshop</td>
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</table>

**Figure:**

**Development of strategy**

**Reflective notes:** During implementation and organisation of second generation many documents were made, but they were not saved in systematic order in electronic platform. Most of them were saved in an unorganised way in the accounts of all of us, no one had access to all documents which were made during the second generation. Many materials were needed, but were not purchased. To get an overview and an exact estimation, which resources and barriers existed in the program a questionnaire was needed which had to be filled in by all team members.

The last training of peer health facilitators ended on 28.03.16 and the kick off meeting for 3 generation was on 10.04.16. The challenge was to develop the strategy and collecting data in limited time.

**Ongoing Support and empowering of team members with refugee background**

**Descriptive notes:** As the REFUGIUM program was working with vulnerable team members and participants, it demanded the internees to help REFUGIUM team members and Peer health facilitator in bureaucratic work. Their bureaucratic and personal issues were associated with their performance in team. If the problems were not
solved out the successful working was hindered, therefore it was our duty to help team members during work time. These tasks were like translating and filling in letters of the job centre, calling the persons in charge of the job centre, giving company in visiting job centre because the German language is a barrier. Moreover, supporting new peer health facilitator in the process of application in AWO and team members in university. The Application for students with a foreign degree demands translation and evaluation by uni-assist. As internees we organised translation of the documents, stayed in contact with translators, accompanied in collecting the translations, filling up and in submitting application for uni assist and study at university.

Reflective notes: The bureaucratic work was very time consuming therefore it influenced and undermined the ability of us as team members and researchers to realise the intended goals for the day or research aspirations. A lot of time was invested in being a support and empowering the fellows to work successfully and enabling them to work by solving their own problems as a team. New Team members had to be informed before that they would help and support the team members or peer facilitators.

**UNIT 2 Peer facilitator training, Third generation:**

In order to become Health peer facilitators the refugees had to accomplish 3 stages from then on: the Peer facilitator training (PFT) (unit 2), Didactical peer facilitator training (DPFT) (unit 3) and Applied peer facilitator training (APFT) (unit 4). After taking part actively in these three stages they were qualified as peer facilitators and were awarded with certificates. The additional two stages Didactical peer facilitator training (DPFT) and Applied peer facilitator training (APFT) were taken into the training program, because it was the goal to support, train and empower the participants better as in the first generation. Only few of the graduated peer facilitators of first generation were in contact with the REFUGIUM programme. The additional support and training shall help the participants to be selfconfident, while conducting the workshops in real life scenario.

The Peer facilitator training (PFT) of second generation was conducted on the 22.02.2017, 28.02.2017, 01.03.2017, 08.03.2017) from 16-18 pm; 14-18 pm and
place was HAW Hamburg - Campus Berliner Tor (Berliner Tor 5 20099 Hamburg). The Didactical peer facilitator training (DPFT) was on 21.03.2017, 28.03.2017 16-18 pm and place was HAW Hamburg - Campus Bergedorf. The Applied peer facilitator training (APFT) was on 20.04.2017, 24.04.2017 from 14-16 and was held in the initial reception centre in Hamburg- Schnackenburgallee.

The Peer facilitator training (PFT) of third generation was conducted on the 24.04.2017, 08.05.2017, 15.05.2017) from 16-20 and place was HAW Hamburg - Campus Bergedorf. The Didactical peer facilitator training (DPFT) was on 22.03.2017 from 16-18 uhr and conduct of Applied peer facilitator training (APFT) was on 23.05.2017, 12.06.2017 from 14-16.

Reflective notes: For the second unit terms of materials three workshop bags for each topic with existent material inside (2), in total 18 workshop bags were made (4). The bags were bought from woolworth in Bergedorf. Moreover to the workshop bags an belonging back up file in N5.29 (3) and inventar lists, child care bag (8), files with manuals (5 & 6) were developed and thermos (7) was buyed. In order to ensure sustainability the documents such as as Inventory-list, invitation email, contacts of practice partners, name tags, draft of participant list, arrows, interim report, apology letter were developed and with existent manuals, flyer and health guideline uploaded in electronic plattform EMIL HAW Flüchtlingsgesundheit 17. The health guideline was a existent ressource in the office and was systematically ordered in shelf according to language (11). Additionally it was searched as pdf version (http://www.ratgeber-gesundheit-fuer-asylsuchende.de/inventory.aspx) and was uploaded in EMIL HAW as ressource, because of supply shortages according to Federal Office of Migration and Refugees (BAMF). Furthermore 7 files (9) in hardcopys were made with the heading of what documents are filed in: 1) Material backup; 2) contacts for advertisement; 3) invitation 2017; 4) BUFDI (Federal worker); 5) Tip docs; 6) REFUGIUM participant list; 7) projects about refugee health (AWO). All of these files were made as a resource in office in case the electronic platform failed. The documents, which were filed into 7 files, were stored unorganized in office 5.29 and by organizing them hours of searching them were saved.
workshop bag nutrition

back up file

files of manuals in room 5.29

18 workshop bags in room 2.09
thermos in room 5.29  

child care

7 files in room 5.29
1) Material backup, 2) contacts for advertisement, 3) invitation 2017, 4) BUFDI (Federal worker), 5) Tip docs, 6) REFUGIUM participant list, 7) projects about refugee health (AWO)

flyers in room 5.29  

health guideline in room 5.29
Unit 3 Didactical Peer facilitator training, third generation
Reflective notes: For the third unit named plastic files and bags were bought and files were complemented with manuals and flyers in a transparent foil for Health peer facilitators. Plastic files and bags were choosen out of cotton, because they are robust. In this unit health peer facilitators are trained by trainers how to conduct a workshop. The first training of HPF was conducted in the church in which 4 HPF participated alongside the REFUGIUM team. Thus the most experienced team member and peer health facilitator trainer Mohammed Kalo, a federal volunteer worker in the field of refugee health conducted the training without a document in which all important facts were documented. In order to ensure sustainability the knowledge and experience of the team member had to be documented so that it can be used as a ressource in future by other HPF trainer in REFUGIUM program. The analysis of questionnaire identified that this unit demanded the development of two documents -(HTG) guideline training and (HTA) appendix. In a team meeting this need was discussed with program coordinator and Mohammed Kalo developed the two documents in supervision of Prof. Dr. Färber. The REFUGIUM Training (ATPHPF) Program processes tool comprises of 25 steps describing all processes in order to conduct succesfully (appendix).

Unit 4 Applied Peer Facilitator training, third generation
Descriptive notes: The first workshop was planned in the primary refugee camp Schnackenburgalle on the 20.04.17 for mainly the second generation health peer facilitators. In order to organise and implement a workshop in a primary camp it was important to establish a functioning network with practice partners as the social management workers of the specific refugee accomodation and the responsible health office. For that prof. färber invited in february 2017 health office workers of altona into the office in order to cooperate with them, so that they would help the REFUGIUM Team to get access to the refugee camp and its social management. It was decided that health office will support the refugium program to held workshops in schnackenburg alle. Prof and team was in constant contact with health office worker by email and telephone. In the other hand the social management worker of schnackenburgallee were contacted by the health office worker regarding our goal and intention to conduct the program there. A meeting between social management worker, health office worker and the refugium team was held at the schnackenburg
alle to discuss and observe the location. The concerns and possibilities were discussed and the contacts of a responsible person were given to the schnackenburg alle camp. It was decided that the security would be aware of the program team, all students and participants would be allowed to enter the camp. The social management would help stick the advertisement posters in the camp and the health office would provide them with the printed version of the poster. In order to advertise workshops in refugee accommodation Schnackenburgalle an advertisement poster was needed (appendix). So it was our task to develop an advertisement poster and this, we did as a team, whereas the main responsibility was on me to finish the poster. The final version was sent to the health office worker and she put the hamburg logo on it and printed out and delivered to schnakenburg allee. The social management stuck the poster in the camp in some places. One week before the workshop all participants were called and contacted by messages about the intended workshop. When we reached the camp security asked us about who we are and were told us to register on a list with our name, signature. Accompanied by the security we reached the rooms and set them according to our needs. As no participants were waiting for us, small groups were build to recruit participants. During a hygiene workshop in a refugee accommodation (Schnackenburgalle) some of the male participants felt insulted that they were taught by a team of university of less age and education in comparison to them: „just because we are refugees u can come from a university and teach us about hygiene, we are not animals“.

Reflective notes: For the fourth unit documents as advertisement poster, draft of participant list were developed and uploaded in EMIL HAW Flüchtlingsgesundheit 17. In order to advertise workshops in refugee accommodation Schnackenburgalle an advertisement poster was needed (appendix). Moreover ethical guidelines and, “Who We Are“ were developed in consultation with team and Prof. Dr. Färber by Mohammed Kalo. These documents were needed, due to the misconceptions the participants had about the REFUGIUM Program and REFUGIUM team members which they shared during a hygiene workshop in a refugee accommodation (Schnackenburgalle). Thus some of the male participants felt insulted that they were taught by a team of university of less age and education in comparison to them. This is a comment picked from one of the Participants: „just because we are refugees u can come from a university and teach us about hygiene, we are not animals“. There was the misunderstanding that we as REFUGIUM team are here to establish a
hierachy and show we know better and we want to teach the refugees who are not aware of anything. The participants suggested that we teach the women and the children about hygiene, because they are responsible for dirt and mess in toilets and not adult men. Agitated this participant left the workshop and alongside him other participants in total 4 left. The team identified that the REFUGIUM program has to introduce its goals and ensure that they are along with the ethical guideline of the participants in the beginning of any workshop.

Appendix 3: formative process evaluation questionnaire filled out

<table>
<thead>
<tr>
<th>Unit 2 of 2 generation</th>
<th>20.02.17</th>
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</table>

Formative process evaluation questionnaire

21. What is the current-situation?

We are preparing for the training workshops in HAW Hamburg - Berliner Tor 5, a lot of things to do, materials and stuff, also we have to contact the administration to book the room and facilities…

22. What is functioning (what resources exist)?

Flyers, manuals and posters, participants list and students list

23. What are the main activities?

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To communicate with refugee to remind them
- To conduct the workshops
- To document the workshops

24. What are the steps?

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To conduct the workshops
- To document the workshop

25. How much time is spent organizing?

3 - 4 days, that means more than 30 working hour
26. How many team members are needed?

4-5 team members

27. What are observations or realisations?

- It is a new place to do the training workshops
- And to transfer the materials to Berliner Tor 5 was hard, and took time

28. What are the challenges and barriers in the process of implementation?

Time, materials were not sorted in a good way

29. What is the reason?

There is no experience to conduct REFUGIUM program in another campus, which needs to book rooms and contact with a lot of people from the administration staff

30. Who is responsible for that?

REFUGIUM members and program coordinator

31. What resources (material, documents) are missing?

- Projects management tools
- How to train the trainees guideline
- Some manuals still in process
- We need to buy some materials

32. Where to make improvements?

- Documentation
- Sort the materials in a better way
- Create a guideline in future, contains all the steps

33. What can be changed so that an improvement is achieved?

- Document these workshops and the whole processes
- Use this experience to improve the work in future

34. What is the opinion of the team and project coordinator?

- There is a lot of stress, things to do and there is no clear structure to guide the team member step by step
- Team members discussed the problems and there is a need to find solutions and to improve the work

35. How can the approved improvement implemented?

REFUGIUM team member have to discuss all the problems and how to reduce the time of preparations
36. Is the development of a written electronic resource important?

Yes, and has priority

37. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

38. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Some of them, and still working on other documents

39. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section

40. Are the project processes documented precisely that a new team member can work independently?

Not yet

| Unit 2 of 2 generation | 01.03.17 |

Formative process evaluation questionnaire

41. What is the current-situation?

We are conducting workshops in HAW Hamburg - Berliner Tor 5

42. What is functioning (what resources exist)?

Flyers, manuals, participants list,...

43. What are the main activities?

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To communicate with refugee to remind them
- To conduct the workshops
- To document the workshops

44. What are the steps?
• Set up the materials before participants arriving.
• Prepare snacks and drinks
• To call the peer health facilitators and guide them to the rooms
• Arrange the rooms
• Bring hot water
• Set up the posters

45. How much time is spent organizing?

Between 2-3 hours

46. How many team member are needed?

3-4 members

47. What are observations or realisations?

• It is a new place to do the training workshops
• And to transfer the materials to Berliner Tor 5 was hard, and took time

48. What are the challenges and barriers in the process of implementation?

• Time, materials were not sorted in a good way
• Some participants came late because of the language class

49. What is the reason?

• Timing
• Language courses
• Some people participated only for one time, I think they were not that motivated

50. Who is responsible for that?

Team members, and program coordinator

51. What resources (material, documents) are missing?

• Project management tools
• Gender issue manual
• How to train the trainees guideline

52. Where to make improvements?

• Provide an electronic copies of the protocols and documents
• Document the processes and tasks
53. What can be changed so that an improvement is achieved?

- Trying to decrease the time of preparation
- Document the process
- Give refugee more motivations
- Create missing documents

54. What is the opinion of the team and project coordinator?

Team members discussed the problems and we have to improve the work, and

55. How can the approved improvement be implemented?

- To know about the difficulties of the program as the time, or reasons belong to refugee themselves, how can we motivate them more and more?
- How can we save more time for preparations?

56. Is the development of a written electronic resource important?

Yes, very important

57. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

58. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Some of them, and still working on other documents

59. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section

60. Are the project processes documented precisely so that a new team member can work independently?

Not yet
Formative process evaluation questionnaire

61. What is the current-situation?

- 13 workshops (6 Arabic, 6 Farsi and the info session) were conducted in HAW Hamburg Berliner Tor 5
- It was hard to prepare all the materials and took a lot of time
- We had to transfer all the materials from HAW Hamburg in Bergedorf to Berliner Tor 5
- REFUGIUM team members had to do a lot of logistic work, preparing, packing and transport
- Most of the materials were sorted not in systematic way
- A clear guide to know how to book the facilities and with whom we have to talk... were missing
- That made a lot of stress on the team

62. What is functioning (what resources exist)?

- The existing resources were sorted not in systematic way, and the team had to spend a lot of time and did big effort to sort them, and to prepare workshops bags depends on the topic
- Some materials were missing, or not enough

63. What are the main activities?

- Preparations
- Conducting health workshops
- Transport

64. What are the steps?

- To communicate with the people who are in charge in HAW Berliner Tor 5, to book rooms and to provide us with some materials that we need or equipments
- To communicate with the social managements in refugees accommodations and to do advertisements
- To communicate with refugees who were interested in the program
- Materials preparation and transport
- To set up the materials and prepare the rooms before the workshops
- To conduct the workshops

65. How much time is spent organizing?

Between 3 - 4 days

66. How many team member are needed?

4 members
67. What are observations or realisations?

- Organisational issue
- Needed a lot of effort and time

68. What are the challenges and barriers in the process of implementation?

- A central mobile phone for the team were missing, then they had to communicate with refugees and administration staff from their personal phones
- A guideline to conduct the workshops were missing

69. What is the reason?

- A lot of documents are missing, and there were no protocols to guide the team
- For the first time REFUGIUM training workshops had to conduct in another campus

70. Who is responsible for that?

The previous team members should document their work in the past

71. What resources (material, documents) are missing?

- List of the preparations for the workshops is missing
- Participants list
- Apologise letter for school
- A training guideline

72. Where to make improvements?

- Documentation
- Organisational issue

73. What can be changed so that an improvement is achieved?

- Documentation
- Sort the material in systematic way
- Print out missing materials
- Buy some missing materials

74. What is the opinion of the team and project coordinator?

To improve the performance and quality of the program

75. How can the approved improvement implemented?
● Use EMIL platform in an effective way
● Document the processes
● Make a guidelines

76. Is the development of a written electronic resources important?

Yes, and has high priority.

77. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

78. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Not all, some documents are missing, and should be created and uploaded

79. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section

80. Are the project processes documented precisely that a new team member can work independently?

No, we have to work a lot on this

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Formative process evaluation questionnaire

81. What is the current-situation?

- We conducted two peer health facilitators training sessions in HAW Hamburg Bergedorf in 09 and 21.03.2017
- There was two groups, Arabic and Farsi, in the same room

82. What is functioning (what resources exist)?

Flyers, manuals, participants list, workshop guideline (but it is not enough), apologise letter for school, arrows

83. What are the main activities?

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To communicate with refugee to remind them
- To conduct the workshops
To document the workshops

What are the steps?

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To communicate with refugee to remind them
- To conduct the workshops
- To document the workshop

85. How much time is spent organizing?

For materials preparations 15-20 minutes
Set up the materials and prepare the rooms between 30-45 minutes

86. How many team member are needed?

3 members

87. What are observations or realisations?

- The atmosphere were good because the room is a big one, and there is enough space between the groups so they can focus on the training

88. What are the challenges and barriers in the process of implementation?

- Some participants did not come because the training is in a new campus
- Some did not come because of the time, school, or they can not stay till evening
- Some participants found that it takes time to be in Bergedorf and it is a long way to there

89. What is the reason?

The long way to Bergedorf, most of them have German class so they can not be here on time, some women they can not stay there till 8 o'clock because they have to come back alone to their camps

90. Who is responsible for that?

Timing, Deutsch course, the long way

91. What resources (material, documents) are missing?

- Project management quality tools
- How to train the trainees guideline
92. Where to make improvements?

- The time, and the documentation
- Sort the materials in a good way
- Create guidelines for the processes step by step

93. What can be changed so that an improvement is achieved?

- Chose better timing in future
- Develop a training manuals; how to train the trainees
- Discuss the gender issue

94. What is the opinion of the team and project coordinator?

REFUGIUM team members discussed the problems during workshops and suggested some solutions, maybe it is better to change the time, so there will be more female participants in the program

95. How can the approved improvement implemented?

- Have a clear guidelines about the gender issues and how can women feel more comfortable, and how to let them feel secure in refugee accommodation, whether the female participants or the female peer health facilitators
- Have a better guideline for the training, includes all the information about peer health facilitators training

96. Ist the development of a written electronic resource important?

Yes, and has high priority.

97. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

98. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Few of them, not all

99. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section
100. Are the project processes documented precisely that a new team member can work independently?

Working on it

<table>
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<tr>
<th>unit 4 of 2 generation</th>
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Formative process evaluation questionnaire

101. What is the current-situation?

We conducted hygiene workshop n Schnackenburgallee 81-83 refugee accommodation in 20.04.2017

102. What is functioning (what resources exist)?

Flyers, manuals and hygiene poster, hygiene items of health supplies to refugees. e.g; shampoo, hand creams.

103. What are the main activities?

- REFUGIUM team will communicate with the refugee accommodation management
- REFUGIUM team will prepare all the materials and equipments, including flyers, posters.
- Going to refugee accommodation
- Calling the peer health facilitators
- Conducting health care workshop
- Writing a protocol

104. What are the steps?

- Set up health equipments before participants arriving.
- Arrange the room, the chairs and tables.
- Promote and advertise the health workshop, by walking around, talking to refugees, going to the canteen to motivate the refugees there.

105. How much time is spent organizing?

For materials preparations 15-20 minutes
Set up the materials and prepare the rooms between 30-45 minutes
To be in refugee accommodation took a lot of time because we had to take more than one train and then bus and then to walk.
Total time: Around 2-3 hours

106. How many team member are needed?
3 members

107. What are observations or realisations?
- The timing of the workshop was not that good, because it is the lunch time
- Some of them know already about the information, and they find the topic not that interesting
- Some of them had to go to the German class, so they can not participate
- Gender issue

108. What are the challenges and barriers in the process of implementation?
- The time it is not suitable for all of the refugee, so that effects on the number of the participants
- Women need to be more motivated and to feel more secure
- Some people find the information is not enough and they left the workshops
- Some of them have appointments with the social management or with doctor, so they could not participate.
- Some documents still need to be developed

109. What is the reason?
Lunch time, German class, some cultural issues, there is no clear policy about how to deal with gender issue..

110. Who is responsible for that?
It is a common responsibility

111. What resources (material, documents) are missing?
- Project management quality tools
- How to train the trainees guideline
- Some manuals still in process

112. Where to make improvements?

Documentation

113. What can be changed so that an improvement is achieved?
Work faster on the manuals and the flyers
Re-check the structure of Flüchtlingsgesundheit 2017 on EMIL platform and added new documents and section
Thinking about the that women feel good, maybe by giving workshops by female peer health facilitators for women only...

114. What is the opinion of the team and project coordinator?

Team members agreed that there is a need to develop a better guideline and manuals covers most of the issue about gender, privacy and security
but even with that, team members have found that work goes better as it was before
We have to find a ways to improve the quality and decrease the time

115. How can the approved improvement implemented?

Work faster on the manuals and the flyers
Re-check the structure of Flüchtlingsgesundheit 2017 on EMIL platform and added new documents and section

116. Is the development of a written electronic resource important?

yes

117. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

118. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Few of them, not all

119. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section

120. Are the project processes documented precisely that a new team member can work independently?

Working on it
Formative process evaluation questionnaire

121. What is the current-situation?

- We were conducted workshops in Schnackenburgallee 81-83 refugee accommodation
- And training workshops for the 3rd generation in HAW Hamburg - Bergedorf

122. What is functioning (what resources exist)?

- Flyers of three languages; Arabic, Farsi and Russian, because we have three different groups of participants
- All materials sorted in a good way
- Workshops materials were into bags, and it is easier now to prepare for the workshops

123. What are the main activities?

**For refugee accommodation**

- REFUGIUM team will communicate with the refugee accommodation management
- REFUGIUM team will prepare all the materials and equipments, including flyers, posters...
- Going to refugee accommodation
- Calling the peer health facilitators
- Conducting health care workshop
- Writing a protocol

**For the training workshops at HAW Hamburg:**

- To print out arrows and participants list, apologise letters and students list
- To set up the materials and prepare the rooms before the workshops
- To communicate with refugee to remind them
- To conduct the workshops
- To document the workshops

124. What are the steps?

**For the training at HAW Hamburg**

- Set up the materials before participants arriving.
- To call the peer health facilitators
- Arrange the rooms
For the workshops in refugee accommodation:

- Set up health equipments before participants arriving.
- To print out arrows and participants list, apologise letters and students list
- Set up health equipments before participants arriving.
- Arrange the room, the chairs and tables.
- Promote and advertise the health workshop, by walking around, talking to refugees, going to the canteen to motivate the refugees there.

125. How much time is spent organizing?

For materials preparations 15-20 minutes
For flyers preparation between 15 - 20 minutes
For travelling around 1 hour
To set up the materials and prepare before participants arriving whether in refugee accommodation or at HAW Hamburg around 45 minutes

Total between 3 - 4 hours

126. How many team member are needed?

3 members

127. What are observations or realisations?

- To buy some materials, like fruits for example, and that takes time
- Flyers and manuals are good sorted
- Arrows are always ready to print

128. What are the challenges and barriers in the process of implementation?

- Hard to find quiet atmosphere, because the workshops were conducted in the same room, so we had 3 different language groups, Arabic, Farsi and Russian.
- We had to wait for long time for the Russian speaker participants

129. What is the reason?

Only one big room is available to do the training workshops

130. Who is responsible for that?

Team members and team coordinator

131. What resources (material, documents) are missing?

Some documents still in the final process, how to train the trainees for example
132. Where to make improvements?

- Documentation, improve the performance of the program
- Most of the documents should be created and uploaded on EMIL platform

133. What can be changed so that an improvement is achieved?

- Most of the flyers, manuals and documents should be checked and uploaded on EMIL platform
- The work on the new documents should be done soon

134. What is the opinion of the team and project coordinator?

We achieved good point, the work is already improved, but we still need to improve it more

135. How can the approved improvement implemented?

- Work faster on the manuals and the flyers
- Re-check the structure of Flüchtlingsgesundheit 2017 on EMIL platform and added new documents and sections

136. Is the development of a written electronic resource important?

Yes, and has high priority.

137. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

138. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Most of them

139. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

Depends on the topic and section

140. Are the project processes documented precisely that a new team member can work independently?

Yes, 90%
Formative process evaluation questionnaire

141. What is the current-situation?
   - A peer health facilitators training sessions for the 3rd generation were conducted in 22.05.2017 at HAW Hamburg. Campus Bergedorf

142. What is functioning (what resources exist)?
   - Participants list
   - Apology letter for the school
   - Some workshops materials e.g: flyer, manual and poster.

143. What are the main activities?
   - To conduct the peer health facilitators training session about how can they conduct a health workshops in refugee accommodations
   - To document the training session and write a protocol about that.

144. What are the steps?
   - Set up the materials before participants arriving.
   - Arrange the place
   - To call the peer health facilitators

145. How much time is spent organizing?
   - Around 25 minutes

146. How many team member are needed?
   - 2-3 members

147. What are observations or realisations?
   - The is a need for a child care service
   - A need for a training guideline: how to train the trainees
   - There should be a person who is responsible to write the protocol

148. What are the challenges and barriers in the process of implementation?
• Peer health facilitators should be more motivated
• No female participants
• Child care was missing
• We need to find a peer health facilitator for the Russian language

149. What is the reason?

• Peer health facilitators are less motivated
• Child care was missing
• To call peer health facilitators was not that easy, because most of them have school

150. Who is responsible for that?

The program structure and time issue

151. What resources (material, documents) are missing?

• How to train the trainees - Health Workshop Training guideline (HTG).
• Health Workshops Training Appendix (HTA).
• zwischen Zertifikat

152. Where to make improvements?

• To develop documents

153. What can be changed so that an improvement is achieved?

To work on the training guideline and the documents should be saved, and sorted in an easy way to return back to them in future.

154. What is the opinion of the team and project coordinator?

The team members discussed this important topics, and there is a need to develop such important documents

155. How can the approved improvement implemented?

The gender issue and how to deal with it should be included in the new training guideline which is should be created also.
156. Is the development of a written electronic resources important?

It is very important, because we need all the data in our work, and the work will be more easy for the new workers in the program.

157. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator

158. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Yes. 90% of them

159. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

- Workshop materials
- drafts

160. Are the project processes documented precisely that a new team member can work independently?

Yes. But we have to sort then in systematic way

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Formative process evaluation questionnaire

161. What is the current-situation?

- A training sessions for 3\textsuperscript{rd} generation workshop were conducted in 22.05.2017 at HAW Hamburg . Campus Bergedorf
- A health care workshops were conducted in 23.05.2017 in Schnackenburgallee 81-83

162. What is functioning (what resources exist)?

For the training:

- Prepare the materials
- Snacks and drinks

For the health care workshop
- Health care bags
- Copies of TIP DOC
- Copies of Ratgeber Gesundheit handbooks
- Participants list
- Apology letter for the school
- students list

163. What are the main activities?

- REFUGIUM team will communicate with the refugee accommodation management
- REFUGIUM team will prepare all the materials and equipments, including flyers, posters.
- Going to refugee accommodation
- Calling the peer health facilitators
- Conducting health care workshop
- Writing a protocol

164. What are the steps?

- Set up health equipments before participants arriving.
- To print out arrows and participants list, apologise letters and students list
- Set up health equipments before participants arriving.
- Arrange the room, the chairs and tables.
- Promote and advertise the health workshop, by walking around, talking to refugees, going to the canteen to motivate the refugees there.

165. How much time is spent organizing?

- Materials preparations, took between 15-20 minutes
- Travelling around 1hour
- Set up the equipment and promotion 30-45 minutes

166. How many team member are needed?

2 - 3 team members

167. What are observations or realisations?

- It is hard to motivate the refugees to join the workshop.
- We needed time to call the peer health facilitators
- Some refugees have to do another things like going to school, or having lunch, so was hard for them to join us.

168. What are the challenges and barriers in the process of implementation?

- Motivate more refugees
• To provide good atmosphere for women, which effects on the number of women who participated

169. What is the reason?

There is no clear structure to deal with such a gender issues

170. Who is responsible for that?

• The culture background
• The social management
• The security staff

171. What resources (material, documents) are missing?

• How to train the trainees - Health workshops training guideline HTG.
• Clear policy about gender issue.

172. Where to make improvements?

• Provide a secure atmosphere for women participants and peer health facilitators

173. What can be changed so that an improvement is achieved?

• posters are not enough, we need more of them. e.g: physical activity poster
• to discuss the the gender issues

174. What is the opinion of the team and project coordinator?

The team members discussed this important topics, and there is a need to develop such important documents

175. How can the approved improvement implemented?

By writing a new documents about how to train the trainees and how to deal with gender issues during health workshop

176. Is the development of a written electronic resource important?

It is very important, because we need all the data in our work, and for future.

177. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Program team members and the project coordinator
178. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Yes. 90% of them

179. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

- Workshop materials
- Workshop tools and resources

180. Are the project processes documented precisely that a new team member can work independently?

Yes, most of the documents were documented precisely

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Formative process evaluation questionnaire

181. What is the current-situation?

We conducted 6 workshops in Berliner tor. It is very hard and exhausted as we have to transport all the workshop materials from Bergedorf to Berliner tor. The workshop materials are not organised well. It consumes lot of time to organise and prepare workshop materials. Refugium team did not know well how and where to go to book the room and get the key of the room. It takes lot of time to get to know about how and where to book room as well as to fix the appointment with Hausmeister (caretaker). There was lot of work to do.

182. What is functioning (what resources exist)?

Most of the workshop materials are already available. But some materials are still missing

183. What are the main activities?

The main activities are to conduct workshop, support peer health care facilitator in workshop.

184. What are the steps?

First we have to do advertisement about HAW Refugium program
Then we have to organise all those things which we need to conduct workshop like room, materials, participants list etc.

185. How much time is spent organizing?

Around 3 days we need time for organising as some materials are not available

186. How many team member are needed?

For advertisement – 5 team member
For preparation – 4 team member

187. What are observations or realisations?
Somehow we managed to conduct workshop well. But it was hard and we realise that the workshop materials were not ordered in systematic way. It consumes lot of time just to find/search materials

188. What are the challenges and barriers in the process of implementation?
As the materials were not organised well, it cost lot of time to prepare all things for workshop.
As there was no mobile phone available for refugium team – we could not send reminder sms to workshop participants.
Refugium team member has no guideline about conducting workshop and its preparation, so it was a big challenge for refugium team member to work without guideline/handbook.

189. What is the reason?
Form the past workshop there was no documentation available.
Most of the refugium team member is new in the program so we don’t know exactly how and what we have to do.

190. Who is responsible for that?
Refugium team member from the past should have organised well.

191. What resources (material, documents) are missing?
A handbook/guideline about conducting workshop is missing.
A muster apolozige letter is missing.
Inventor of workshop materials are missing.
Muster of participants list is missing.

192. Where to make improvements?
There are lot of sections where we can do improvements like having regular contact with 1st generation participants, organizing all things in systematic way in electronic version as well printed version.

193. What can be changed so that an improvement is achieved?
- The materials and tools of the workshop should be organised well.
- There should be guideline and handbook about the works to be performed when we conduct workshop.
- The workshop materials should be arranged well.

194. What is the opinion of the team and project coordinator?
Workshop team member has to think themselves what they have to do to go well in workshop.

195. How can the approved improvement implemented?
- By making online platform where we can save all important documents.
- By arranging workshop materials according to topics.

196. Is the development of a written electronic resource important?
- Yes, it is very important.
197. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?
   - Project coordinator + team member

198. Are the important documents saved as electronic resources in Emil Haw Flüchtlingsgesundheit 2017?
   - Not all

199. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?
   - REFUGIUM Documents

200. Are the project processes documented precisely that a new team member can work independently?
   - No, not at all

Formative process evaluation questionnaire

201. What is the current situation?
   - We are preparing for 3rd generation refugium workshop
   - This time we have 3 language groups: Arabic, farsi and russisch

202. What is functioning (what resources exist)?
   - We have flyers in all three languages
   - We have well organised manuals also in all 3 language but the manuals of Russian language is not good enough
   - We have well prepared workshop materials
   - 3 workshops bags from each topics

203. What are the main activities?
   - Prepare for workshop
   - Prepare room, participants list, apology letter, contact list of participants
   - Contact with participants who wants to participate in training

204. What are the steps?
   - Sending sms to participants
   - Organizing materials for workshop

205. How much time is spent organizing?
   - Around 3-4 hours

206. How many team member are needed?
3 team member is sufficient

207. What are observations or realisations?
For most of the workshops, workshop materials are well organised
In case of nutrition workshop, we have to buy fruits so it takes little bit more time to buy fruits
Flyers and manuals are good access able
Buying snacks, preparing for tee, water, hot water, plastic glass etc.
for workshop participants take extra time

208. What are the challenges and barriers in the process of implementation?
All 3 workshops are conducted in same room therefore the atmosphere of the workshop was not so good

209. What is the reason?
Only one room is available for the workshop

210. Who is responsible for that?
Team member and team coordinator

211. What resources (material, documents) are missing?
- Zwischen Zertifikat is missing
- Workshop guideline / handout is missing (how to train the trainer)
- Documentation draft sheet is missing
- Inventar of some workshop bags are still missing

212. Where to make improvements?
- Inventar of workshop materials
- Print out poster of workshop materials
- Manuals organisation

213. What can be changed so that an improvement is achieved?
Manuals can be organised well according to language in electronic version
Inventar of workshop materials should be completed
Back up file should be managed

214. What is the opinion of the team and project coordinator?
For team it was not so stressful to organise the workshop materials

215. How can the approved improvement implemented?
Making Inventar for each workshop bag
Making back up file

216. Is the development of a written electronic resource important?
Yes. Very important
217. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017? 
Team member as well as project coordinator

218. Are the important documents saved as a electronic resource in Emil Haw Flüchtlingsgesundheit 2017? 
Yes some few documents are saved

219. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017? 
Workshop tools / resources

220. Are the project processes documented precisely that a new team member can work independently? 
Not …not precisely

Unit 3 of 3 generation 23.05.17

Formative process evaluation questionnaire

- What is the current-situation? 
We conducted 3rd generation workshop at HAW Hamburg. 
It was not so hard to prepare all workshop materials. 
It didn’t consume lot of time for the preparation as materials were already organised well 
Workshop can be conducted without chaos

221. What is functioning (what resources exist)? 
There is draft of participant list 
There is draft of letter of apology 
There is draft of preparation work to do before conducting workshop 
Workshop materials were organised well in the bag 
for each workshops we have bags where there is workshop materials arranged according to the topic

222. What are the main activities? 
To support in conducting refugium workshop 
To document the workshops

223. What are the steps? 
To organise the documents in more systematic order

224. How much time is spent organizing? 
Around 30 minutes is enough for organizing the things

225. How many team member are needed? 
With 3 team member, workshop can be conducted well

247
226. What are observations or realisations?
Still lot of things to improve
There should be extra child care availability – a fixed person for child care
Rooms are not organised well
A responsible person for documentation

227. What are the challenges and barriers in the process of implementation?
It was hard to manage good atmosphere during the workshop
Some workshop team member has to support peer health care facilitator as well as students of evaluation class, why make them hard to concentrate in the workshop
It is hard to get women participants
We need more women peer health facilitator
We need health facilitator in Russian language
Russian language flyer and manuals are not developed well

228. What is the reason?
3 workshop were done at same time and at same room that's why there not good atmosphere in the workshop room
There is no extra room for childcare

229. Who is responsible for that?
Eventhough Workshop team member organise child care but due to large no. of students there was not good atmosphere in workshop room

230. What ressources (material, documents) are missing?
Still missing zwischen Zertifikat
Handout / guideline about how to train the trainer
Guideline about gender sensibility in the workshop

231. Where to make improvements?
In documentation
In arranging the materials
Developing guideline

232. What can be changed so that an improvement is achieved?
All documents about Refugium workshop should be ordered well
All materials and ressources should we arranged in systematic order

233. What is the opinion of the team and project coordinator?
Eventhough workshop is conducted well….there are many things to do for improvement in future

234. How can the approved improvement implemented?
There should be handout about conducting workshop considering gender topic
235. Ist the development of a written electronic resource important?

Yes – it is very important for the sustainability of the program

236. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

Project coordinator and refugium team member

237. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Yes, most of the documents are saved

238. How will the section, file, and document be named in Emil Haw Flüchtlingsgesundheit 2017?

- Workshop materials
- drafts

239. Are the project processes documented precisely so that a new team member can work independently?

Yes but not in systematic way

| Unit 4 of 3 generation | 24.05.17 |

Formative process evaluation questionnaire

240. What is the current-situation?
We conducted refugium workshop in Schnackenburgallee
For the preparation of workshop, we do not have to spend a lot of time as the workshop materials were already well organized in the bags

241. What is functioning (what resources exist)?
- For each workshop, we have bags where there is workshop material arranged according to the topic
- Draft of participants list is available
- Draft of apology letter is available

242. What are the main activities?
- Conducting workshop in camp
- Contacting with social management
- Travel to refugee camp
- Arranging materials to distribute in the camps for participants

243. What are the steps?
- Writing email to the respondent person in the camp
- To look for travel route and time
- Documentation of each workshop in camp

244. How much time is spent organizing?
- For organization, not so much time
- But for travel and gathering the peer health facilitator, it consumes a lot of time

245. How many team members are needed?
- 4 team members
246. What are observations or realisations?
   It was hard to get participants in the camp
   The workshop atmosphere are sometime hard to manage
   It took lot of time to organise the tables and chairs in the room in camp

247. What are the challenges and barriers in the process of implementation?
   - To motivate people to participate in workshop
   - Less women participants
   - To provide secure atmosphere to women peer health facilitator

248. What is the reason?
   - Gender issue has not been discussed well in refugium program
   - Even though advertise, less no. of participants

249. Who is responsible for that?
   - Documentation is done by scientific team member
   - Workshop are conducted by peer health facilitator

250. What ressources (material, documents) are missing?
   Inventor list of each workshop bag in different languages are missing
   Guideline about how to train the trainer is not completed yet

251. Where to make improvements?
   - Its important to develop a handout about conducting workshop in camp
   - Security for women peer facilitator
   - There should be more ressources like some more workshop materials e.g. posters

252. What can be changed so that an improvement is achieved?
   - Gender issue should be discussed in program
   - More posters should be printed out in future

253. What is the opinion of the team and project coordinator?
   Project team member are organizing the structure of the program in systematic way

254. How can the approved improvement implemented?

255. Ist the development of a written electronic ressource important?
   Yes …each and every workshops are documented well …and available in both printed and electronic version

256. Who is responsible for devoloping, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?
   Program team member
   Project coordinator

257. Are the important documents saved as a electronic ressource in Emil Haw Flüchtlingsgesundheit 2017?
Yes almost all the important documents are saved

258. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?
   Workshop materials
   Workshop tools and resources

259. Are the project processes documented precisely that a new team member can work independently?
   Yes but still missing some important documents

Appendix 4

<table>
<thead>
<tr>
<th>unit 2</th>
<th>10.03.17</th>
</tr>
</thead>
</table>

Formative process evaluation questionnaire

1. What is the current-situation?
   They PHF graduated already, only 12 people appeared for the presentation
   Farsi PHF second generation did not come for the graduation

2. What is functioning (what resources exist)?
   The coordination with students
   Getting volunteers interested in the programme

3. What are the main activities?
   Advertising for the PHF through making and printing flyers in different languages
   Getting to accommodation camps to look for refugees
   Organizing workshops, conducting them and organizing workshops in camps with PHF, successful PHF graduate

4. What are the steps?
   Spiral process of planning, organization and implementation, then back to planning

5. How much time is spent organizing
   Ca. Over 70 percent of the project management time

6. How many team member are needed?
   As many as possible, not less than 4

7. What are observations or realisations?
   Not all peer facilitators come for health training, some come for social reasons like getting friends

8. What are the challenges and barriers in the process of implementation?
   Implementing last minute ideas
   Unorganized resources and materials

9. What is the reason?
The project is still new, and new ideas and methods keep on arising

10. Who is responsible for that?
   All team members

11. What resources (material, documents) are missing?
   Resources like t-shirts, workshop bags with REFUGIUM logo

12. Where to make improvements?
   Organization of workshops and new training

13. What can be changed so that an improvement is achieved?
   More working space needed
   Intercultural training needed for team members

14. What is the opinion of the team and project coordinator?
   We can manage all through team work

15. How can the approved improvement be implemented?
   By not implementing ideas before team discussion

16. Is the development of a written electronic resource important?
   Yes

17. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?
   Team members/evaluation tutors

18. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017?
   Yes

19. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?
   I don’t know

20. Are the project processes documented precisely that a new team member can work independently?
   Yes

unit 2 of 3 generation  23.05.17

Formative process evaluation questionnaire

1. What is the current-situation?
   PHF have graduated already, the graduation was for the second and the third generation

2. What is functioning (what resources exist)?
Working with peer facilitator trainers has been going on well, although only few peer health facilitators are involved.

3. What are the main activities?

Training refugees on six topics, social contact with them, helping them to conduct workshops in the camps

4. What are the steps?

Training and motivation of the upcoming peer facilitator trainers, organizing for workshops in camps, going for the workshops together

5. How much time is spent organizing?

More than 90% of the time goes to planning

6. How many team member are needed?

Minimum 4

7. What are observations or realisations?

More people are still needed in the project, participatory action research has different dimensions and this creates a lot of work for the team members

8. What are the challenges and barriers in the process of implementation?

The social management are not helping much as required, especially by doing advertisement. Refugees in the camps have other problems and are not interested in health.

9. What is the reason?

The refugees go through or have gone through a lot of trauma and this influence their participation in the workshops.

10. Who is responsible for that?

The politicians in their countries of birth or the hostile social environment in general.

11. What resources (material, documents) are missing?

Flyers in Urdu and manuals as well as in Tigrinya and French are still in the making.

12. Where to make improvements?

Collaboration with the social management.

13. What can be changed so that an improvement is achieved?

The social management need to create a little bit more time for health programmes.

14. What is the opinion of the team and project coordinator?

They think the project has a chance of overcoming the hurdles soon, when the cooperation with other parties work well.
15. How can the approved improvement implemented?

Opinions on the social management side are to be analyzed

16. Ist the development of a written electronic resource important?

yes

17. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017?

The organization team and interns

18. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017?

Yes

19. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017?

I don’t know, maybe they will change the name slightly by replacing 2017 by 2018

20. Are the project processes documented precisely that a new team member can work independently?

yes

Formative process evaluation questionnaire

1. What is the current situation?
   Workshops were conducted in Schnackenburgallee

2. What is functioning (what resources exist)?
   Support from security
   Getting drinks from the

3. What are the main activities?
   Planning and conducting workshops there

4. What are the steps?
   Calling the social management
   Texting PHF
   Preparing the materials
   Meeting on train station and going together

5. How much time is spent organizing?
   Maximum a week
6. How many team members are needed? 
   4

7. What are observations or realisations? 
   Follow up is important after texting PHT

8. What are the challenges and barriers in the process of implementation? 
   Attendance low
   Women hard to reach

9. What is the reason? 
   Other problems of refugees, health is no priority
   Cultural barriers

10. Who is responsible for that? 

11. What resources (material, documents) are missing? 

12. Where to make improvements? 
   Work with social management

13. What can be changed so that an improvement is achieved? 
   Way of advertisement, Social Management need to support more

14. What is the opinion of the team and project coordinator? 
   To do a survey and see how to improve this

15. How can the approved improvement be implemented? 
   Interviews with the social workers

16. Is the development of a written electronic resource important? 
   Ja

17. Who is responsible for developing, writing, approving and uploading the document to EMIL HAW Flüchtlingsgesundheit 2017? 
   Evaluation tutors/team members

18. Are the important documents saved as an electronic resource in Emil Haw Flüchtlingsgesundheit 2017? 
   Ja

19. How will the section, file and document be named in Emil Haw Flüchtlingsgesundheit 2017? 
   I don’t know

20. Are the project processes documented precisely so that a new team member can work independently? 
   Ja
Appendix 4: Observation field notes

1. Preparatory
   - Preparation
   - Equipment
   -リスト

2. Procedure
   - Observation
   - Note-taking
   - Sampling

3. Data Analysis
   - Quantitative
   - Qualitative
   - Interpretation

4. Conclusion
   - Summary
   - Implications
   - Recommendations
Frau Förker To Do

→ Verträge ausgedruckt und unterschreiben lassen

→ Scannen und Email an Frau Förker

→ zu Raumvermietung: Selbst bezogen durch Bauram, Tief-Chart, selbständig für 22.02.17

→ Final Email kann nicht versendet werden, da das Poster fehlt in 4 Sprachen

→ Badges; Wauerschilder; Frau Förker, Maike, Marcel, Omar

→ haute erstellen

→ Liste ausdrucken an denen die Email versendet werden muss → Einrichtungen

→ Liste von Teilnehmern bearbeiten

→ Das Dokument Raumvermietung ausdrucken

→ Feedback zu Workshop Einladung →

→ good idea to give version with blank spaces to facilitators

→ die Punkte von der Einladung sollten da rein → vorallem kostenlos

→ Freien wir zum Kongress?

→ Wie aktivieren wir heute? Wie kann man daran engagieren?

→ Was können die Bedingungen für Multiplizierbarkeit für die Anwender?
209 Multispecies
2.02, 2.04, 2.09 to me
2.08

new succession day - longer-term

0.03

from meeter

recommend a schedule here workshops - team

not unit down time

mulled: facilitator training

a module plan not work

not facilitator training

attendance list (come, lunch)

208
Muscle surgery
Introduction
transplant
list of general name
all in front certificate
extra list of workshop
Bovine
photo 21 3 question all with student
officially bye
bye

Arabic = Russia

Evaluation
two main sections
seminar 4 std
workshop

peer facilitator name: France
Abschlussanstrengung
26.06.2017

- Manuals: Email to each person of Britrich
- Graduation certificates:
  - Evaluation certificates: sign in on Monday, get individually
  - July 2: sign-in
- Money for participants:
  - T-shirts, possible books
- Note: Seminar, Beverages
  - Getränke holen → neue booteDea
  - Wasser, chini und Geräte, etc.

36 → take + bag + certificate

- Please: Take the collective to the university in the afternoon.

27.06.17

[Handwritten notes]

260
<table>
<thead>
<tr>
<th>Erledigungen</th>
<th>Wer</th>
<th>Wann</th>
<th>Woher Besorgen?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Alle Teilnehmerinnen 2-3 Tage vorher ankündigen</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Raum 209 Schlüssel nach Theresa suchen</td>
</tr>
<tr>
<td>2. Pfeile von Beispielen in den Kopf hauen!</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Raum 209 Schlüssel nach Theresa suchen</td>
</tr>
<tr>
<td>3. Workshop guidelines ausdrucken für Teilnehmer</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>4. Materialien zusammenstellen für den Training</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>5. Teilnehmerlisten ausdrucken</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>6. Versorgung kaufen - Teekanne, Bananen, Käse, Würstchen</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>7. Tee kannen von der Mensa erfragen 2 Tage vorher</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>8. Vom Bekannten den Schlüssel für den geschlossenen Raum abholen</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
<tr>
<td>9. Liste ausdrucken der Workshop Gäste ausdrucken</td>
<td>pfp</td>
<td>erwünscht</td>
<td>in Mensa Bergedorf</td>
</tr>
</tbody>
</table>
Activities in Unit 1

Kick off event

1-3
1. Determination of dates and staff
2. Arrangement of place and time, staff and police
3. Preparation of material drafts
4. Facilitating advertisement electronically and
5. Invitation in camps

4.2
4.3

5. Organisation before
6. Preparation of resources
7. Preparation of content and
6.1 Preparation of organisation and catering
Vending
Printing and preparation of
8. Arrangement of
Arrangement of kick off event day
9. Organisation during kick off event day
10. Organisation after kick off event day

Theoretical training
11. Facilitating advertisement electronically
12. Preparation of workshop, physical training
13. Contact participants
14. Organisation of catering
15. Printing, usage of needed documents

Author: Maslala
Nkhenshi

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19. Invitation of all stakeholders involved, reasons and partners

20. Development of graduates list and certificates

21. Preparation of reimbursement

22. Printing graduate list, organisation of money for graduates

23. Printing and organisation of catering and flowers, decoration

24. Printing and needed documents

25.

26.

27.

28. Evaluation
2 Trainings
1. Training church
2. Training girls

*church* → training

- did training

- realised discovered

-fluid Moham is doing (around)

- we have big dilemma

- we asked Simon the pre.

- in a meeting with Far.

Workshop training manual

If we need a

Section

How to train the trainers -

For trainers → Health workshop quick step training

For refuges → Health workshops training

Appendix (HTA)
1. Decision about date and staff
2. Arrangement of rooms and childcare
3. Preparation of bags for HPF
4. Arrangement of catering
5. Contract with participants

6. Providing HPF theoretical content to HPF/HPF Trainer guidelines

7. Finding venue

8. Prepare workshop material

9. Arrangement of catering
10. Organise socially before course

9. Organisation during training
10. Organisation after training
11. Evaluation

Signed: [Signature]
Naloom
At the end of the year, we communicate with social management.

English, French, German, Italian, Spanish, Portuguese.

Your final year, June 4, 2023.

UNIT 4: Workshop

To finish, the

As of
UNIT 4

267
(2) Wir arbeiten mit der Gesundheitsberatung

(3) Kinderbetreuung muss organisiert werden

Frau Färber spricht nicht über Gender bezogen besonderen

Pas Trauer geschützt werden für die Facilitators

(4) Resultat: soll der leichste von consuming spezifisch Austragung

Community starts to exist, empower, solidarity

Hier wird geredet von den Teilnehmerinnen

scheiden nachdenklich
Appendix 5: Unit 1 Induction document for new REFUGIUM team member by Montaha Shafiq. N

Mission

What is the aim of the REFUGIUM program?

The REFUGIUM program
- The REFUGIUM program
- Aims to activate refugee’s health resources in a comprehensive and holistic approach (Neuhaus et al., 2017, p. 3).
- The program aims to support refugees to cope with the living conditions in Germany by providing a platform (Neuhaus et al., 2017, p. 3).
- The intention of the REFUGIUM program is to address inequality by giving voice to individuals who may be excluded. - It promotes the full participation of vulnerable individuals and group in developing and conducting the program’s following participatory action research approach.

What are the work themes in the REFUGIUM program?

The REFUGIUM program is structured in 8 main work themes:

1. Concept, management, and evaluation
2. Participatory development, translation and validation of flyers and manuals in relevant languages for refugees
3. Publication of flyers and manuals in cooperation with Budrich publishers as freeware on the homepage www.refugium.agency.
4. Fundraising, purchase and provision of materials, which are needed for trainings and workshops
5. Conduction and formative evaluation of REFUGIUM peer facilitator training
6. Organisation and implementation of workshops in refugee accommodations by communicating with Peer Facilitators and social management workers
7. Establishment of a functioning network with practice partners (social management of refugee accommodations and health administrations, health care providers, NGO's).
8. Establishment of a structure in which Peer Facilitators are empowered with the support of the researcher and team members (including personal,
bureaucratic, and emotional support) to become part of the REFUGIUM team as volunteer workers (BUFDI) or guest lecturers at university and work successfully.

What will be my responsibility and work as REFUGIUM team member?

The responsibility of a REFUGIUM team member is to plan, conduct, research and evaluate the REFUGIUM program under the supervision of the program coordinator. Your tasks will be the organisation of the unit 2, (3), 4. Implementation of training in the university and workshops in refugee accommodation.

Which characteristics are necessary for a REFUGIUM team member?

Character traits like patience, courage, open-mindedness, and creativity are important for REFUGIUM team members. Intercultural competencies are of huge advantage. A high degree of flexibility and adaptability depending on the circumstances, status, and needs of participants involved is demanded.

Who is the target group of the REFUGIUM program and what has to be considered while working with a vulnerable target group?

The target group are refugees. Refugees are groups of people who not only represent people from various ethnic backgrounds, cultures, religions, ideologies, attitudes towards health, and philosophies of life, but also a group of people who have experienced abuse, oppression and persecution due to war and political conflicts (Federal Agency of Migration and Refugees, 2016; Laurence et al., 2011).

As a REFUGIUM team member it is important to be emotionally ready (without prejudices) to work in a program where interaction and work with refugees is a prerequisite. The health and behaviour of people is determined by the circumstances and factors in which they live. The understanding of the determinants regarding refugee’s mental health, which lead to psychological stress or mental well-being is a prerequisite to understanding a vulnerable group.

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Research has shown that refugees are healthy and resilient people, but they have fears and hopes due to their vulnerable circumstance (uncertainty about the future, long asylum seeking process, detention and temporary permits, separation from family members), which is the main detrimental factor for their mental health (Bozorgmehr et al., 2017, p.592; Betancourt, et.al., 2013; WHO, 2012, p. 5; Neuhaus et al., 2017).

Protective factors were identified such as: social support, health promotion structures in the camp, opportunities for study/work, integration and health care facilities (WHO, 2012, p. 5; Lindert, 2016; Lambert et al., 2015; Carta et al., 2015; Sleijpen et al., 2015; Neuhaus et al., 2017; Bozorgmehr et al., 2017, p.592). This short background knowledge will enable you as a REFUGIUM team member to work sensibly and sensitively with refugees.

Organisation

How is the program structured? What are the units of program?

REFUGIUM units

The REFUGIUM program is structured in 4 units and the settings of these units are HAW and specific refugee accomodations. The first unit is the induction phase for new REFUGIUM team members which comprises of the introduction and is a step to get familiar with the content of the program and integrate oneself into the program for new REFUGIUM team members. The unit 2, unit 3 and unit 4 are the three stages, which have to be accomplished by participants to be qualified as a peer facilitator. The second unit is the Peer facilitator training (PFT) unit in which refugees are trained in 6 health topics. From an organisational point of view the second unit comprises of the following three parts: kick-off meeting, peer facilitator training and a farewell party. The third unit is the didactical peer facilitator training (DPFT) in which peer facilitators (PF) are trained about theory on how to conduct workshops and is an opportunity to conduct exercises in didactics. The fourth unit is the applied peer facilitator training (APFT) in the form of c the onduction of accompanied workshops by peer facilitators, trainers and HAW staff in refugee accomodation.

1- Induction phase for new REFUGIUM Team members
2- Theory on 6 topics
3- Theory and exercise on didactics
4- Applied training - workshops in refugee accommodation

<table>
<thead>
<tr>
<th>Unit</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Themes</strong></td>
<td>Induction phase for new REFUGIUM Team members</td>
<td>Peer facilitator training (PFT)</td>
<td>Didactical peer facilitator training (DPFT)</td>
<td>Applied peer facilitator training (APFT)</td>
</tr>
<tr>
<td><strong>Setting</strong></td>
<td>HAW</td>
<td>HAW</td>
<td>HAW</td>
<td>Refugee accommodation</td>
</tr>
<tr>
<td><strong>Contents</strong></td>
<td>Introduction and getting familiar with REFUGIUM program for team members</td>
<td>Refugees are trained in 6 health topics - theory on topics</td>
<td>Peer facilitator (PF) are trained how to conduct workshop - theory and exercise on didactics</td>
<td>Peer facilitator, trainer, HAW staff conduct workshop in refugee accommodation</td>
</tr>
</tbody>
</table>

**Which language is used in team work?**
Many team members are aware of the English language instead of German, therefore English is used as the main language.

**Delivery**

**What are the resources, which will help me to organize the program?**
The program uses electronic resources such as the EMIL HAW Flüchtlingsgesundheit platform. In this platform all documents in regard to the
program are documented and are used by the REFUGIUM team to organize the program.

Moreover the program has 4 guidelines namely the program management tools and instructions for each unit, which support the REFUGIUM team members to organise the program.

<table>
<thead>
<tr>
<th>Program management tool</th>
<th>Program management tool</th>
<th>Program management tool</th>
<th>Program management tool</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management tool unit 1</td>
<td>Management tool unit 2</td>
<td>Management tool unit 3</td>
<td>Management tool unit 4</td>
</tr>
<tr>
<td>Induction phase as a new</td>
<td>Peer facilitator training</td>
<td>Didactical peer facilitator training</td>
<td>Applied peer facilitator training</td>
</tr>
<tr>
<td>REFUGIUM team member</td>
<td>&amp; Instruction</td>
<td>&amp; Instruction</td>
<td>&amp; Instruction</td>
</tr>
<tr>
<td>&amp; Instruction</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Where can I find the program management tools?

The program management tools for unit 1, 2, 3 and 4 are found on the electronic platform EMIL HAW Flüchtlingsgesundheit W17 in the section project management Bergedorf.

What are the main resources used to train the participants?

Flyers and manuals exist in various languages; materials like posters and 18 workshop bags.

How can I make decisions and work independently as a REFUGIUM team member?

The program management tools enable team members to make decisions and work independently. The approval of the program coordinator is important, therefore discussing the work with her regularly in team meetings is also important.

What has to be considered while working in a multicultural team?
- The REFUGIUM team members are all of different nations, ethical values, cultures, mentalities, educational backgrounds, religions and status of residency.

- Differences of status and culture might exist in a multicultural team
- Conflicts can occur in team work due to problematic communications
- Conflicts can be solved by treating each other in equality of independently of which status or ethnicity one belong to
- The ideas of each team member have to be treated in a equal way
- Allocation of work has to be decided as a team and no one will be discriminated against
- Everyone should respect each other and if one has the feeling that he or she is not treated fair, he or she should discuss with the coordinator

Team

What is the responsibility of the project coordinator?

The project coordinator is the main responsible person of the program and the REFUGIUM team members.

In the case of questions and problems the coordinator is there for the team members and will try to help.

Team members of vulnerable groups are under huge pressure to prove themselves in the German labour market. Therefore it is the responsibility of the program coordinator to support and appreciate team members by encouraging them. Focussing on their strengths and not weaknesses

What has to be considered while working with vulnerable team members?

- Team members are all individuals of a vulnerable group therefore they should strive to develop sympathy and understanding for each other.
- There will be days in which one member will be upset about his or her private situation (asylum status, bureaucratic issues, problems with the job center, responsibility for parents or siblings, experience of discrimination, financial strains) and won't be able to work effectively and efficiently,
- In this certain time it is the responsibility of team members and program coordinator to listen to his or her problems if they want to share.
- Team members should try to help: like translating a document, or filling out a document which is in German

- The REFUGIUM program is developed, organised and conducted by team members who are also of a vulnerable group. As REFUGIUM team members you might have to help and support team members or health peer facilitators. By doing so empowerment, confidence and participation, low thresholdness in the program is achieved.

How can my work as a REFUGIUM team member contribute to a higher meaning?

As a REFUGIUM team member you will be part and creator of such a setting in which refugees are being:
- welcomed appreciated and empowered,
- where psychosocial development and self-determination among vulnerable individuals will be promoted.

As a REFUGIUM team member you will be working for a higher cause, particularly for promoting integration of migrants into German society resulting in peaceful coexistence.

Who will train and support me as a REFUGIUM team member?

The project coordinator will hold constant team meetings in which the work can be discussed and questions can be answered.
Appendix 6: Publication about REFUGIUM program: Poster mental health
Appendix 7: Publication about REFUGIUM program: Refugee Health Awareness and Empowerment Program in Hamburg, Germany. REFUGIUM. Christine Faerber

Issue
Germany received about 1 Mio refugees in 2015. They mostly live in camps, and have specific health needs. Living conditions, stigma and exclusion as well as insufficient access to adequate health care lead to trauma and foster the development of posttraumatic stress disorder as well as diseases. This is why we developed a peer to peer activating multi-lingual health awareness program.
The problem is that refugees have no sufficient information about the German health care system and feel paternalized. So how can we empower refugees? How can we activate, transfer and complement their knowledge about health to stay healthy?

Results
We developed a practical peer-to-peer health awareness intervention program together with refugees and with students of refugee background from September 2015 to July 2016. Evidence-based information is assembled in flyers and communicated in peer-to-peer workshops facilitated by students and refugees together. Content focuses on access to local health care and rights to care, mental health, physical activity, nutrition and hygiene. Flyers and peer facilitator manuals have been developed in 8 languages. The intervention raises awareness about primary, secondary and tertiary prevention, regarding the most important dimensions of refugee health.
Problems faced are multilingual content management, winning refugees to become facilitators, and managing the high expectations of our facilitators during training. Positive results are empowerment, multilingual flyers and training manuals.
Lessons learnt are that refugees are very interested in prevention and in maintaining and improving their mental health. We integrated mental health in a holistic setting approach that is empowering, and non-paternalistic way.

Key message:
- REFUGIUM empowers refugees in a multilingual peer-to-peer health awareness program through a health promotion, prevention and resource oriented approach
Appendix 8: Inventar documents

**Refugium Inventar Health care Tasche/ Bag**

<table>
<thead>
<tr>
<th>Deutsch</th>
<th>English</th>
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<tbody>
<tr>
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<tr>
<td>Tip doc (Arabisch, Farzi, Tigrinya)</td>
<td>Tip doc (arabic, farsi, tigrinya)</td>
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<tr>
<td>AOK-Karte (laminiert)</td>
<td>AOK-Card (laminated)</td>
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<tr>
<td>Berechtigungsschein</td>
<td>Authorization Certificate</td>
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<tr>
<td>Musterbrief</td>
<td>Sample letter</td>
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<tr>
<td>Ratgeber Gesundheit</td>
<td>Health guide</td>
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<td>Pflaster</td>
<td>Plaster</td>
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**Refugium Inventar Hygiene Tasche/ Bag**

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<tr>
<td>Shampoo</td>
<td>Shampoo</td>
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<tr>
<td>Rasierschaum</td>
<td>Shaving cream</td>
</tr>
<tr>
<td>Zahnbürste</td>
<td>Toothbrush</td>
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<tr>
<td>Haarbürste</td>
<td>Hair brush</td>
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<tr>
<td>Läusekamm</td>
<td>Lice comb</td>
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<tr>
<td>Seife</td>
<td>Soap</td>
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<td>Refugium Manual Hygiene Intern</td>
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**Refugium Inventar Mental Health Tasche/ Bag**

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<td>Skala</td>
<td>Scale</td>
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<tr>
<td>Moderationspunkte</td>
<td>Moderation points</td>
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<td>Karten (Gefühle)</td>
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**Refugium Inventar Nutrition Tasche/ Bag**
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<tr>
<td>Zuckerwürfel</td>
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<td>Messzyylinder</td>
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**Refugium Inventar Oral Health Tasche/ Bag**

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**Refugium Inventar Physical Activity Tasche/ Bag**

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<td>Springseil</td>
<td>Skipping rope</td>
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<tr>
<td>Poster mit Übungen</td>
<td>Poster with exercises</td>
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Appendix 9 Invitation email

Am besten verschiedene Mails an verschiedene Zielgruppen, daher individualisierte Anreden, das wirkt am besten:

Liebe hier eine persönliche Ansprache (Name oder Institution)
Ansonsten: Sehr geehrte Damen und Herren
oder
Liebe Kolleginnen und Kollegen,

wir haben an der HAW Hamburg das Gesundheitsförderungsprogramm für Flüchtlinge "REFUGIUM" entwickelt, das Flüchtlinge befähigt ihre Gesundheit zu erhalten und im Krankheitsfall das Versorgungssystem richtig zu nutzen. Hierfür bitten wir Sie um Unterstützung:


Am 22.02.2016 findet eine Informationsveranstaltung statt um Interessentinnen und Interessenten über das Programm aufzuklären und sie für die Ausbildung zu gewinnen.
Wir bitten Sie Menschen mit Fluchterfahrung über unser Programm zu informieren und sie zur Teilnahme zu motivieren. Anbei befindet sich die Einladung auf 4 Sprachen. Wir bitten Sie diese in Ihrer Einrichtung auszuhängen und es auch individuell an geeignete Personen weiterzurreichen. Wir freuen uns, wenn sie uns Kontaktdaten von Interessierten zusenden können.

Die Ausbildung im Programm REFUGIUM umfasst 6 verschiedene Themen:
Ernährung, Bewegung, Psychische Gesundheit, Hygiene, Mundhygiene & lokale Versorgung) und wird in fünf Sprachen (Arabisch, Dari/Farsi, Urdu, Englisch, Deutsch) kostenlos angeboten.

Teilnahmebedingungen:
- Fluchterfahrung
- Interesse an Gesundheit
- Im Idealfall Vorbildung im Gesundheitsbereich oder im Bereich Bildung und Erziehung
- Zeit für die Ausbildung an 3 Terminen (28.02., 01.03, 08.03)
- Motivation anderen zu helfen und ehrenamtlich tätig zu werden.

Eltern mit Kindern sind herzlich willkommen, da für die Kinderbetreuung gesorgt sein wird.

Gern können Sie sich bei Fragen an uns wenden: REFUGIUM_info@haw-hamburg.de
Über unsere Homepage erhalten Sie weitere Informationen: www.refugium.agency

Mit freundlichen Grüßen, Christine Färber und das Team REFUGIUM

Prof. Dr. Christine Färber
HAW Hamburg
Fakultät Life Sciences
Department Gesundheitswissenschaften
Departmentleiterin
Ulmenliet 20
21033 Hamburg
040-42875-6115

Appendix 10: Name tags
## REFUGIUM PROGRAM

**Teilnehmer Liste: DATUM**  
*Participant’s list: Date*

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<thead>
<tr>
<th>No.</th>
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Appendix 12: Arrows

REFUGIUM PROGRAM
Ulmenliet 20, HAW Hamburg
Raum: N 4.12
Aufzug: A5N
REFUGIUM PROGRAM
Ulmenliet 20, HAW Hamburg
Raum: N 4.12
Aufzug: A5N
Zwischenzeugnis

Hamburg den, 26.04.2017

Herr/Frau……………………………………, geboren am…………………… ist derzeit ehrenamtlich im REFUGIUM-Programm tätig, welches ein Gesundheitsförderungsprogramm für Flüchtlinge ist.


Herr/Frau………………………………….wurde an der Hochschule für Angewandten Wissenschaften in oben genannten Themen ausgebildet, und wird Ihr Zertifikat offiziell am 30.05.2017 bekommen. Er/Sie zeigt bei der Erfüllung ihrer Aufgaben großes Engagement und Eigeninitiative, auch bei wechselnden Anforderungen übt Herr/Frau…………………………………seinen/ihren Aufgaben immer sehr zuverlässig, umsichtig und verantwortungsbewusst aus. Wir sind mit den Ergebnissen und ausgezeichnetem Engagement in jeder Hinsicht sehr zufrieden. Ihr persönliches Verhalten ist zu jeder Zeit und in jeder Hinsicht einwandfrei.

Wir danken Herr/Frau……………………………………………… für die gute Zusammenarbeit mit unserer Hochschule und wünschen Ihr auf ihren weiteren Berufs- und Lebensweg alles Gute und weiterhin viel Erfolg.

Mit freundlichen Grüßen

Prof. Dr. Christine Färber
HAW Hamburg
Fakultät Life Sciences
Department Gesundheitswissenschaften
Departmentleiterin
Ulmenliet 20
21033 Hamburg
Sehr geehrte Damen und Herren,
ich möchte mich im Namen von Frau/Herrn ………………………………entschuldigen, dass sie/er am ……………………………..in der Schule nicht sein kann/konnte.
Ich bedanke mich für Ihr Verständnis.

Mit freundlichen Grüßen

Prof. Dr. Christine Färber
HAW Hamburg
Fakultät Life Sciences
Department Gesundheitswissenschaften
Departmentleiterin
Ulmenliet 20
## Practice partners who cooperated with REFUGIUM program

<table>
<thead>
<tr>
<th>What kind</th>
<th>When we conducted workshops there</th>
<th>Camp address</th>
<th>Contacts of responsible Social management worker</th>
<th>Health office</th>
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<td>Schnackenburtle 81-83 22525 HH</td>
<td>Philip Rösener <a href="mailto:Philip.roesener@Foerdernundwohnen.de">Philip.roesener@Foerdernundwohnen.de</a> Tel: 040/428152151 Mobile: 0176-42854331</td>
<td>Eva Grünberger Kommunales Gesundheitsförderungsmangement (KGFM) Gesundheitsberichterstattung Freie und Hansestadt Hamburg, Bezirksamt Altona Fachamt Gesundheit, A/GA 25/3, R. 307 Bahrenfelder Str. 254-260 (VIVO-Gebäude), D-22765 Hamburg Telefon: +49 40 42811-2107 Fax: +49 40 42731-3360 E-Mail: <a href="mailto:eva.gruenberger@altona.hamburg.de">eva.gruenberger@altona.hamburg.de</a></td>
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<td>Brookkehre 20 21029 hamburg</td>
<td>Christin Münzberg Christin. <a href="mailto:muenzberg@foerdernundwohnen.de">muenzberg@foerdernundwohnen.de</a> Tel: 040 986717898</td>
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Appendix 16 Press office contact data for fare well party

Dr. Katharina Jeorgakopulos
Pressesprecherin und Pressereferentin

T +49 40 428 75 9132 / M +49 172 412 48 47
F +49 40 428 75 9019
katharina.jeorgakopulos@haw-hamburg.de
presse@haw-hamburg.de

HOCHSCHULE FÜR ANGEWANDTE WISSENSCHAFTEN HAMBURG
Presse und Kommunikation
Berliner Tor 5 / 20099 Hamburg
haw-hamburg.de

Appendix 17 Invitation template for fare well party

Liebe ....,
Heute ist unser Abschlussfest von REFUGIUM an der HAW Hamburg von 16-18 Uhr,
Ulmenliet 20, 21033 Hamburg- Bergedorf, Raum S4.07 (Aufzug AS 4).

Sie erhalten Ihr Zertifikat, dass Sie erfolgreich die Ausbildung als Multiplikatorin absolviert haben.

Wir freuen uns sehr auf Sie.

Herzliche Grüße,
Ihr Team REFUGIUM
# REFUGIUM

**Flucht & Gesundheit**

Workshops für Frauen und Männer ab 14 Jahren

Workshops for women and men above 14 years

20.04.2017 14-16  
**Datum - Date**  
**Zeit - Time**  
**Thema - Topic**  
**Sprachen - Languages**  
**Raum - Room**

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Für Kinderbetreuung gesorgt - Childcare is available
Sehr geehrte Frau/ Herr,

wir haben an der HAW Hamburg das Gesundheitsförderungsprogramm für Flüchtlinge "REFUGIUM" entwickelt.

Ziel des Programms ist Flüchtlinge zu befähigen ihre Gesundheit zu erhalten und im Krankheitsfall das Versorgungssystem richtig zu nutzen. Hierfür bilden wir Menschen mit Fluchterfahrung zu Multiplikatoren aus, damit sie selbstständig Gesundheitsworkshops in Unterkünften durchführen können. Das Ausbildungsprogramm umfasst 6 verschiedene Themen (Ernährung, Bewegung, Psychische Gesundheit, Hygiene, Mundhygiene & lokale Versorgung) und ist in 4 Sprachen (Farsi, Deutsch, English, Urdu) verfügbar.

Besteht die Möglichkeit die Workshops in Ihrer Unterkunft durchzuführen?

Über unsere Homepage erhalten sie weitere Informationen: [www.refugium.budrich.de](http://www.refugium.budrich.de)

Mit freundlichen Grüßen, Christine Färber
--
Prof. Dr. Christine Färber
HAW Hamburg
Fakultät Life Sciences
Department Gesundheitswissenschaften
Departmentleiterin
Ulmenliet 20

Sehr geehrte Frau Färber,

Wann und mit welchem Zeitumfang würden die Workshops stattfinden? Wie viele Teilnehmer sind zu erwarten? Dann würde ich schauen inwieweit ein Gruppenraum zur Verfügung steht.

Mit freundlichen Grüßen

Sehr geehrte Frau/ Herr,

die Workshops sollen während der Woche von Dienstag bis Freitag stattfinden, im Zeitrahmen von 14-16 Uhr. Es werden circa 25 Personen teilnehmen. Ein Raum für die eventuelle Kinderbetreuung wäre auch von Vorteil.
Liebe Team Refugium,

Einen Raum könnte ich zur Verfügung stellen. Zwei weitere Räume sind kindgerecht eingerichtet. Ich nehme an, dass von Ihnen Betreuer für die Kinder dabei sein werden. Laufen die Workshops dann über drei Wochen?

Mit freundlichen Grüßen und ein schönes Wochenende!

Sehr geehrte Frau/ Herr,


Beste Grüße

Team Refugium
Unserer Erfolge sind...
- REFUGIUM trat mit 1500 Frauen und Männern in Gemeindevertreter*innen aufginge.
- mehr als 30 Gemeinde-Workshops in Fluchtvorsorge in Hamburg und der Umland durchgeführt.
- mehr als 1500 Gesundheits- und Projektberatung an die Teilnehmer*innen vermittelt.
- in einem partizipativen Prozess neue Themen-Formen und Modalitäten (Workshops, Zeitschriften, etc.) entwickelt.
- an 2017 Workshop gedacht und vermittelt.

Unsere Kooperationspartner sind...
- Arbeitsgemeinschaft
- Beate-Schulung
- Bevölkerung
- Diabetes Gemeinschaft Hamburg
- Gudensberg
- Gesundheitsämter Altstädter Bezirksamt Zentrum
- Bürger Stiftung
- Frauenärztliche Gewerkschaft
- Verband der einheimischen und Arbeitenden Frauen der Stadt Hamburg

Unserer Idee ist...
...Gesundheitserreger in einer umfassenden und integrativen Ansatz zu stärken. Wir unterstützen Flüchtende in Deutschland und in Deutschland zu erhalten. Wir versuchen, in partizipativen Workshops Wissen in formelle Gesundheitswesen zu vermitteln, indem wir eine unabhängige, unabhängige und selbständige Ansatz zu stärken. Wir prägen unser Feedback und den heutigen Zusammenhalt für alle Menschen gestalten.

Unserer Vision ist...
...Flüchtende, die schnell und günstig in Deutschland zu erweitern und ihre Gesundheit nachhaltig zu stärken. Wir möchten, dass der Verein mit Flüchtenden, Flüchtenden und Flüchtenden zusammenarbeiten, um die Gesundheit aller Menschen zu verbessern, besonders der Flüchtenden, die Hilfsbereit sind. Wir möchten, dass bei der Erweiterung der Lebensbedingungen und Gemeindevertreter in Deutschland zu unterstützen.

Unserer Ziele sind...
- Flüchtende bei der Erweiterung der Lebensbedingungen und Gemeindevertreter in Deutschland zu unterstützen.
- Entwicklung von Teilnehmer*innen zu ihnen, die aktiv im Projektschaffen arbeiten.
- Partizipationsformen für Gesundheitsförderung und berichten zu aktivieren.

Unserer Werte sind...
...gegenseitiges Vertrauen, Verantwortung und Umsetzung. Uns ist wichtig, dass wir bei gesellschaftlichem und ethnischem Engagement wirken. Wir sind dafür, dass eine gesellschaftliche Umsetzung und gesellschaftliche Engagement wirksam ist. Wir sind dafür, dass wir gemeinsam engagiert sind und unser Engagement zu verstärken.
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Appendix 22 STATUTORY DECLARATION

I declare that this work is independently authored. I have not used other than the declared sources/resources. All materials which have been quoted either literally or by content from the used sources are explicitly marked.

Montaha Shafiq. Neuhaus

Signature_________________ Date________________