

Development of target group oriented pedagogical offers in psychosocial interventions

IB Hochschule Standort

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07.05.2019

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Internationaler Bund
Gesellschaft für interdisziplinäre
Studien mbH

Content

- 1) Conceptual classification of Health resources/ resilience/ Health Literacy
- 2) Programming actions (Tools)
 - Target Group/ Education interest
 - Steps of programming actions in health care (Questions to ask) Meaningfulness
- 3) Project Refugium
 - 1) Positive Experiences and challenges
- 1) Discussion
- 2) Literature

Conceptual classification of Health resources/ resilience/ Health Literacy



Virginia Community Health Care Association (2018)

Health Ressources „General resistance resources“

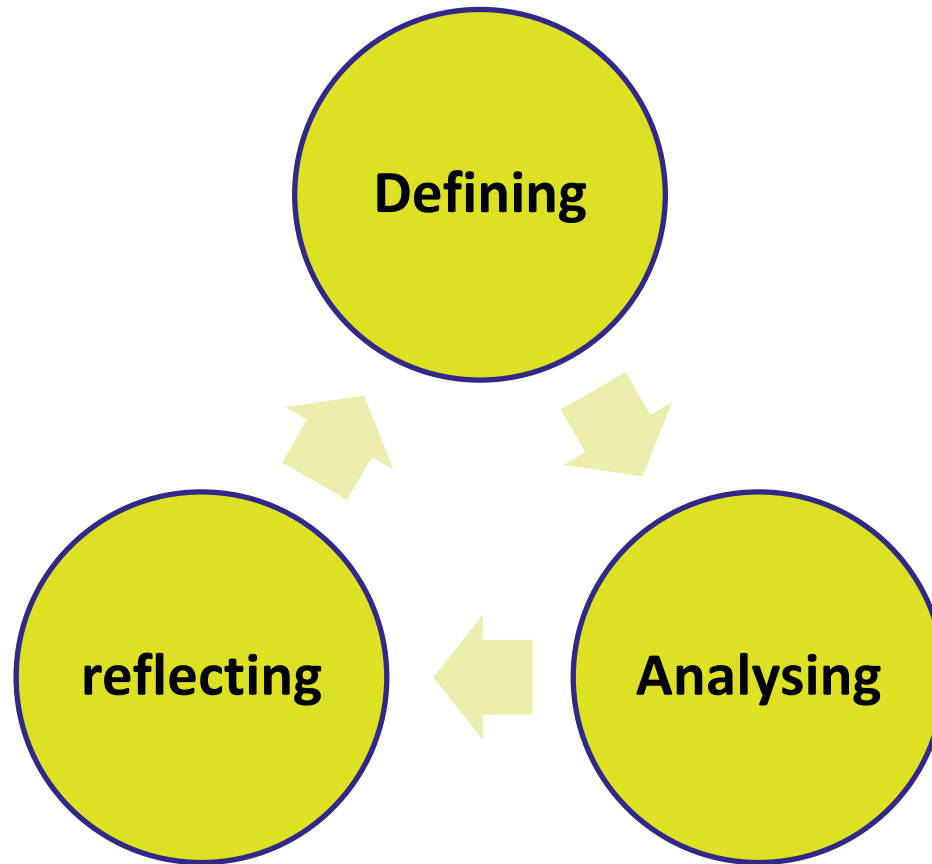
Factors:

- environmental-cultural: cultural stability, Religion, Art
- Material: Money, Property
- Social: Family, friends, Teachers, peer groups, social networks
- Personal: Knowledge, emotional Stability, I-Identity, Self-efficacy, locus of control, self-confidence, social competence

The more health resources available, the better the demands in life can be handled!

(Krause, Mayer 2012, S. 21)

Developing auf Health Ressources



Refugees and their „Health Ressources“

“it was easier for me from the beginning to communicate with the people. I didn’t have to pick a translator when I want to make something for example the bank account, going to the social office...” (RB2, 294-298)

“I’m already integrating in Berlin, I have a lot of friends here, German friends.” (RB 2, 408-409)

“And you know, we have social helpers. When we get everything, we come and tell them, and they help us. So I don’t get to live in Berlin. It is not difficult, it is easy. Because everything is with help of them” (RC, 405-408)

Health Literacy

*“Health literacy is linked to **literacy** and entails people’s **knowledge, motivation and competences** to **access, understand, appraise, and apply** health information in order to make judgments and take decisions in everyday life concerning **healthcare, disease prevention and health promotion** to maintain or improve quality of life during the life course.”*

European Health Literacy Consortium 2012

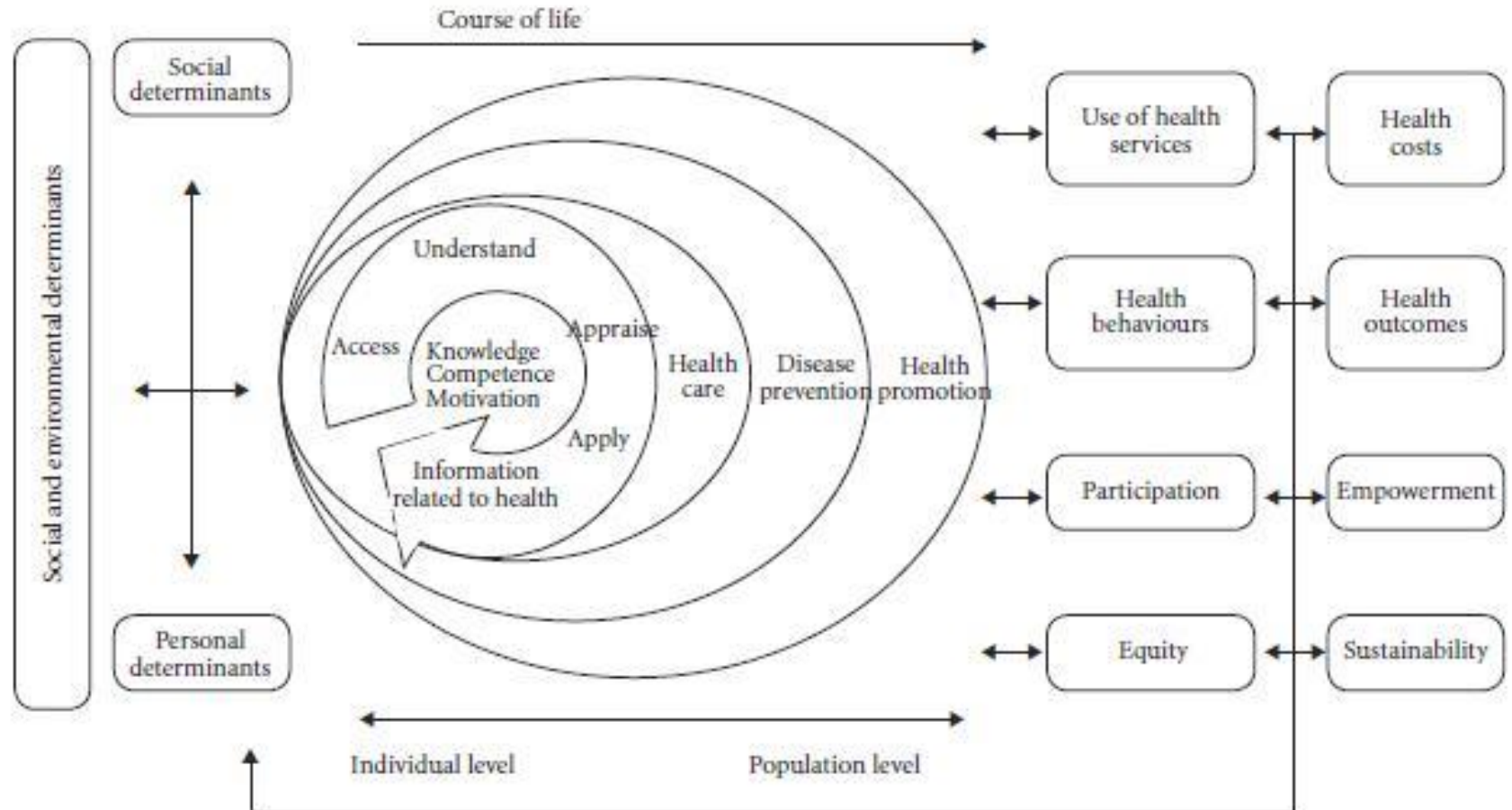
Roles of different *Stakeholders*

To implement Health Literacy

- ❖ government
- ❖ civil society
- ❖ Media (social media)
- ❖ United Nations
- ❖ Community Leaders
- ❖ Research and academic institutions

(WHO 2016)

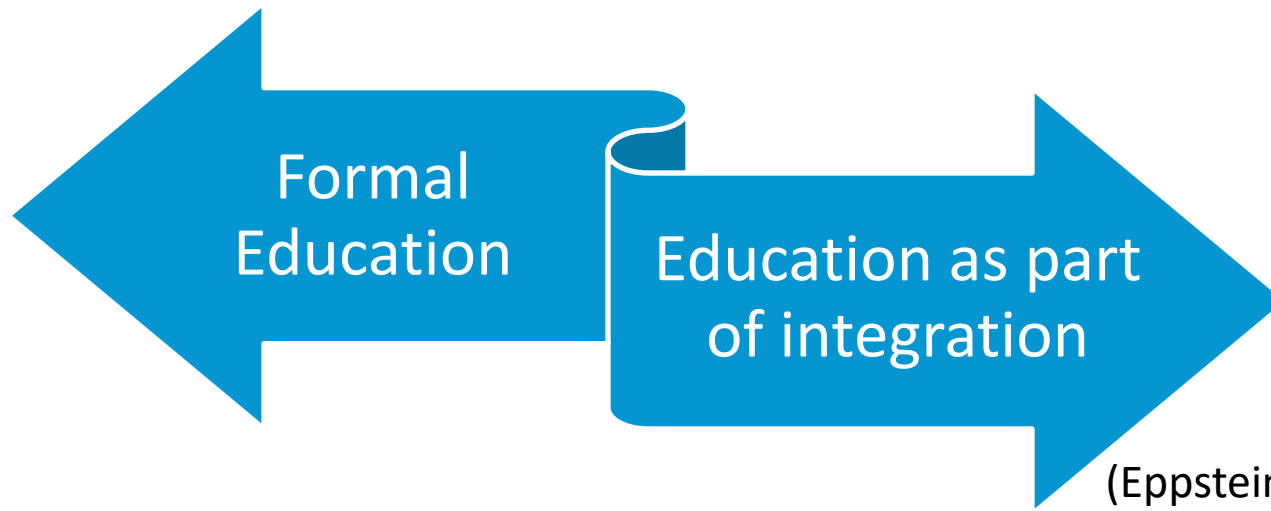
Integrated model of health literacy



Sorensen, K. et al. (2012)

Relationship between Education and Health

- Gap between education interests from refugee perspective and public discussions
- Education perspectives for refugees seem to be dependent from stay perspective (defensive perspective) instead of interest – headed (expansive perspective)



(Eppstein p. 150-152)

What do we need for targetgroup oriented educational programs/courses

Educational Needs:

- Difference between objective and subjective needs

We have to reflect
education understanding,
biography and life situation
of the individual



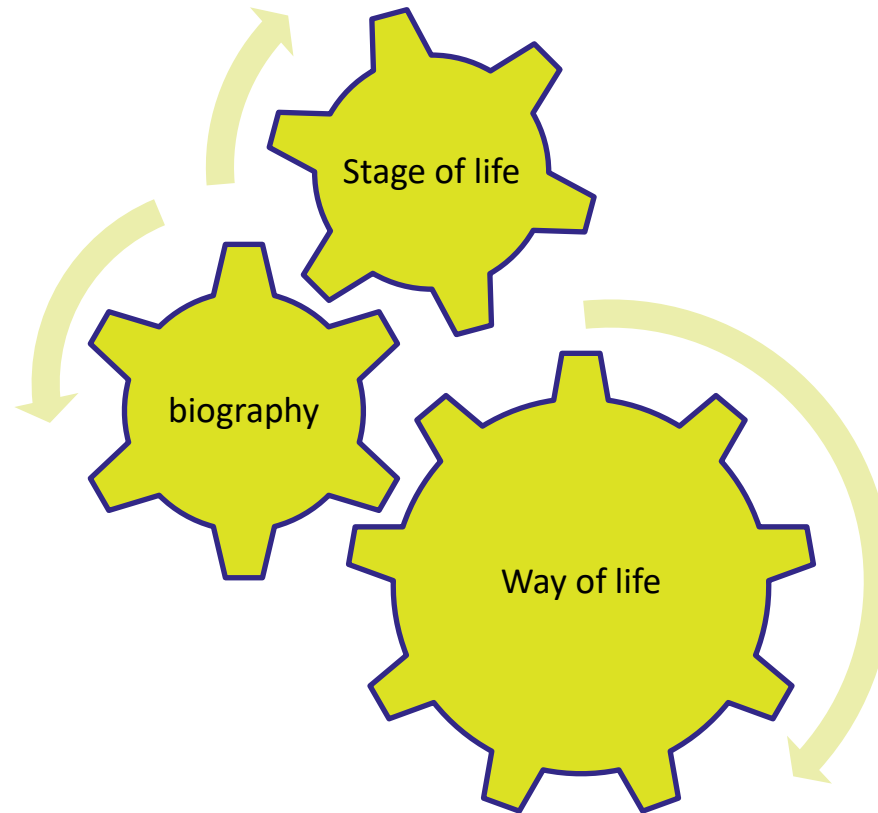
Cross-cultural competences, civil-
society knowledge (community
stories, dialogues, relationship
networks as social capital),
individual refugee stories

Eppstein, p. 150

Directions of targetgroup oriented Education planning

1. Learning psychology approach: homogenic socio-demographic learning groups → so as to increase the effectiveness off educational processes (Schiermann S. 321)
2. Educational and social policy approach: Addressing traditionally unreachable groups
3. Politically accented perspective: should initialize and accompany social changes

So, what to do without any standards?



Objective Needs vs. Individual needs

Objective needs:

generally denotes the tension between a feeling of deficiency and the prospect of satisfying it. This means that a need arises from a should be deviation. In this sense, need is something objective. (Schlutz 2006, S.3)

Individual Needs:

in contrast to objective needs, refer to the subjective view: the desires, motivations and interests of the individual in the learning process and the learning object. If a need is concretized and specific possibilities for consent are sought, the need is objectified and thus a objective need. (ibid.)

Objective needs are more likely to be set from the outside (same education offers, for example language courses).

- Needs analysis are important to account development trends in the respective requirements.

Steps of educational program planning

for what?

- with regard to specific life and use situations
- specific competences which should be developed
- Problems which become clear from the life and use situation

for whom?

- Which Competences, learning prerequisites, learning difficulties can be assumed?
- existing willingness to learn, learning needs
- what common or heterogenous characteristics does the target group have

what for?

- which learning goals should be achieved
- Learning objectives appropriate in terms of needs, prerequisites and application goals
- Learning goals realistic with regard to time, material, methods and learning objectives of the individual

What?

- Which content
- Structure of the content regarding to needs and learning goals
- Targetgroup oriented?

How?

- which event and organization form
- with which method setting
- how can self-activity and independent learning be methodically stimulated?

Where? with what?

- action and practice-related places
- Which furniture, which media
- where can learning materials and presentation results be documented
- ...



For educational perspectives, flanking socio-pedagogical, health-educational and psychosocial support offers in entanglement are important, but also intercultural expansive offers of activity.

Health education in the health care of refugees using the example of occupational therapy


Forschungsfrage

Which health educational requirements are given in the health care of refugees in Berlin using the example of occupational therapy?



<http://publicdomainvectors.org/photos/refugees.png>

Problembenennung und Erkenntnisinteresse

- aktuelle Flüchtlingssituation in Deutschland 
gesellschaftlichen Herausforderungen die auch den Bereich der Gesundheitsversorgung betreffen
- vorhandene Gesundheitskompetenzen und Probleme von Flüchtlingen sind zu ermitteln, um Aufgaben für die Gesundheitspädagogik zu identifizieren
- Hypothese: Gesundheitspädagogische Konzepte, am Beispiel ergotherapeutischer, klientenzentrierter Betätigungsangebote sind für Flüchtlinge gesundheitsförderlich und ermöglichen die Integration in die Gesellschaft

Theoretical Background

Statistics and Definitions Number of refugees

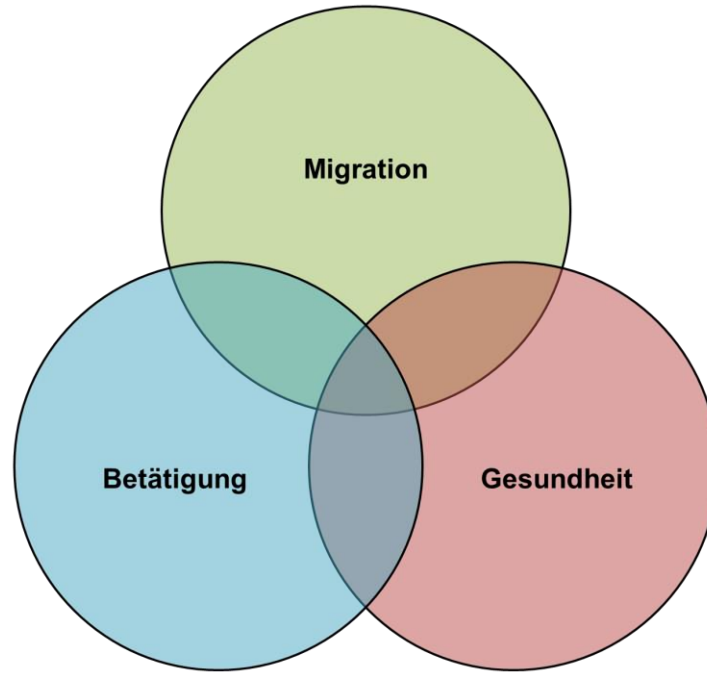
- in Berlin increased by 135% in 2015 compared to 2014 → Impact on the health system (Federal Office for Migration and Refugees (2016a))

Health educational approaches

- Health resources and burdens of migrants (to R. Hornung in Hurrelmann, 2014, p.371)
- Intercultural and transcultural competences for health-educational behaviors (Krause, 2012, p.109-110)

Health educational approaches in occupational therapy

Importance of exercise as a health-promoting core competence (Christiansen, C., Townsend, E. (2004))



Subject-specific research results show:

- Need for research on actuarial needs and health resources of refugees
 - to develop health education concepts
 - to identify and, if necessary, adapt transcultural competencies in the resource reinforcement of clients with flight experience

Method

Qualitative Guided Interviews



„How does your life look at the moment? Please describe your daily routine to me.“

“When do you get up in the morning, how do you spend your time?”

„What was your daily routine in your country of origin?“

“What were your daily tasks?”

“Describe your work tasks.”

“How did you use your leisure time?”

„Can you describe your individual needs these days?“

“Tell me which activities do you miss.”

„How do you deal with problems in your daily life?“

“Please provide a recent example of a difficult situation that you had to resolve yourself.”

„What are your wishes for future?“

“Please tell me about your plans/hopes for the future.”

Results



Health risks because of „Occupational Injustice“

“you have only this small room. All your life is inside this container” (RB 2, 78-79) → **Occupational Deprivation**

“Actually, at this time it’s a little bit complicated because I spend almost five months but I still didn’t get an answer from the court regarding my situation. So I’m still waiting and I don’t know when this will happen” (RA 22-24) → **Occupational Imbalance**

“I sometimes go for people who wants help by translating for English or Russian or either Arabic. It’s just a way to waste the time and that’s it.” (RA 27-28) → **Occupational Alienation**

Individual activity needs "normality"

„I miss normal life. Shortly (...) Going to work back home and have these relations with people, public life.” (RA, 136-137)

Health Ressources

- Social Network
 - Communication
 - Flexibility
 - Satisfaction/Contentedness
 - Motivation
- 
- Depending on the asylum seeker status

“The first you come here you have nothing to do. You just wait for your papers, you wait for your procedures to go on. And once you got accepted here, once you get the resident, everything is changed. And you start with the integration, with the German society, you start knowing more people, you start contacting with the outside world. So you are no more close minded.” (RB 2,7-11)

Discussion

- Health-educational intervention using the example of occupational therapy is given → participation in socio-social life

Health educational mission:

- Advice on performing meaningful activities taking into account individual health resources
- Networking with self-help groups and the community interpreter service to strengthen social and communicative resources

but also ...

- Acquisition of transcultural competencies in education, training and further education through networking of learning places and projects in asylum seekers → Addressing socio-political issues

Lernortkooperation AdG /Flüchtlingseinrichtung AWO Refugium Berlin-Buch



Vorbereitung



Umsetzung
Betätigungs-
angebote
I



Evaluation



Umsetzung
Betätigungs-
angebote
II



Gesamt-
evaluation

Lernortkooperation mit der Flüchtlingseinrichtung AWO Refugium
Berlin-Buch

Further research needs



- Needs and resources of other groups with refugee experience (women, children ...)
- Curricular adaptations in health professions regarding trans- and intercultural competence acquisition
- Implementation and evaluation of activity offers

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