



BC CARMA CHIWOS COLLABORATION

British Columbia CARMA CHIWOS Collaboration (BCC3): REACH Facilitator Workbook

REMOTE LEARNING WORKBOOK
February 2026



Acknowledgements

While this training will occur across various regions of Canada, much of the work planning and delivering these lessons took place on the ancestral, traditional, and unceded territories of xwməθkwəyəm (Musqueam), Skwxwú7mesh (Squamish), and səílwətaʔ (Tsleil-Waututh). We are thankful to collaborate and learn on these lands, and we honour those who have stewarded these lands since time immemorial.

This training manual and guide were adapted from the CHIWOS PRA Training Manual, the BCC3 Peer Research Associate Training Manual, and the REIMAGYN Study YRA Training Manual:

CHIWOS PRA Training Working Group (2013). CHIWOS Peer Research Associate Training Manual: English Quebec Version. Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS): Toronto, Canada. Available online: www.chiwos.ca. Date accessed: September 30, 2025

BCC3 PRA Training Collaborative (2020). BCC3 Peer Research Associate Remote Training Manual. British Columbia CARMA CHIWOS Collaboration (BCC3): Vancouver, British Columbia. Available online: www.hivhear.me.ca. Date accessed: September 30, 2025

RE-IMAGYN study YRA Training Collaborative (2023). Youth Research Associate (YRA) Virtual Qualitative Research Training Manual. Relationship and Gender Equity Measurement Among Gender-Inclusive Young Women and Non-Binary Youth in British Columbia (RE-IMAGYN BC) study: Vancouver, British Columbia. Date Accessed: September 30, 2025

For more information, please contact:

Dr. Monika Kowatsch:
University of British Columbia
monika.kowatsch@ubc.ca

Sahel Mirrazavi
University of British Columbia
sahel.mirrazavi@ubc.ca

General Study Inquiries

BCC3 Research Team
hivhear.me@gmail.com

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We are sharing the entirety of the REACH Workbook and resources so that others may benefit from this work. We ask that you cite this manual using the suggested citation below.

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Community Guidelines

In an effort to maintain a safe and welcoming environment, we ask that you follow these agreements:



Assume Best Intent

This is a space to learn, and sometimes that means making mistakes



Take Space, Make Space

Include your voice, and make space for other voices to be heard.



One Person, One Mic

One person speaks at a time.



Las Vegas Rule

What we learn here, leaves here. What we say here, stays here.



Stay Curious

Be curious and respectful of opinions and perspectives different than your own



Self Care

Take care of yourself in the ways that work best for you!

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Lesson 1: Introduction

Learning Objectives for BCC3 REACH Facilitators

By the end of this lesson, you will be able to:

1. Describe the importance of land acknowledgements and present your own land acknowledgement
2. Understand confidentiality and its importance in community-based HIV work.
3. Understand how stigma and discrimination affect people living with HIV.
4. Understand basic principles of Equity, Diversity, and Inclusion (EDI) when engaging communities.
5. Understand the importance of community participation and lived experience in HIV research.
6. Identify the purpose and goals of the BCC3 study.

Lesson 1.1

What is a territory/land acknowledgement and why is it important?



Acknowledging traditional territory is, for many Indigenous peoples, a long-standing practice and a regular aspect of governance and ceremony. In recent years, a land acknowledgement (or territorial acknowledgement) has become considered a respectful statement which acknowledges the colonial context of the Indigenous territories where a gathering is taking place.

It recognizes relationships between land and people, and in particular Indigenous peoples' continued presence on the lands being acknowledged. Land acknowledgements are formal statements usually performed at the beginning of a gathering, to insert awareness of the history of land into daily life. When doing a land acknowledgement, some individuals may also situate themselves in relation to the land by mentioning their ancestry or the nation or community they belong to.

Land Acknowledgement Guiding Principles

1 Learn who is native to your local land

- If you already know who's land you are on, we urge you to take some time and learn more. If you do not know whose territories you are organizing on, we have included some resources below that may be helpful, and we encourage further research.
- You can visit [native-land.ca](https://www.native-land.ca) view a traditional territory, language and treaties map.

2 Explain why you're sharing a land acknowledgement

- Take the time to reflect on why it is important for you to acknowledge the land and what your relationship is with the territory you are on. Explain why you find it important to acknowledge the land.

3 Address the importance of Indigenous rights

- Take the time to reflect on these systemic connections. If you find it hard to capture the relationship between the issues you are working on in words, you can also speak to how you and your group will continue to support Indigenous rights in your ongoing activist work.

Lesson 1.2

Confidentiality in HIV Work

Why Confidentiality Matters

- Many women living with HIV face stigma that can lead to social isolation, discrimination, or even safety concerns if their status is disclosed.
- Building trust requires strict respect for privacy

Confidentiality is not just a policy, it's an ethical foundation for all community-based work

Key Principles

- 1 ***Do not share*** personal stories, notes or identifying details without explicit consent.
- 2 ***Avoid assumptions*** about who knows someone's HIV status, never "out" anyone.
- 3 ***Model confidentiality*** by reminding participants at the start of sessions that shared information stays within the group.
- 4 ***Store data or notes safely*** (locked or password-protected) (example: Ensure names are written as initials (i.e. Jane Doe → JD) for both written or electronic notes)
- 5 ***Be mindful of language***, use discretion when referring to individuals, especially in mixed spaces. This includes being mindful of pronouns.

Reflection Activity #2

What does confidentiality mean to you? What can we do as facilitators to protect it?

Lesson 1.3

What is HIV Stigma?

HIV Stigma

What is HIV stigma to you?

Impacts of Stigma

What are some impacts of stigma? Note down some thoughts.

Example: Creates barriers to HIV prevention, testing, treatment and adherence

Stigma Support

What are some things that are supportive against stigma?

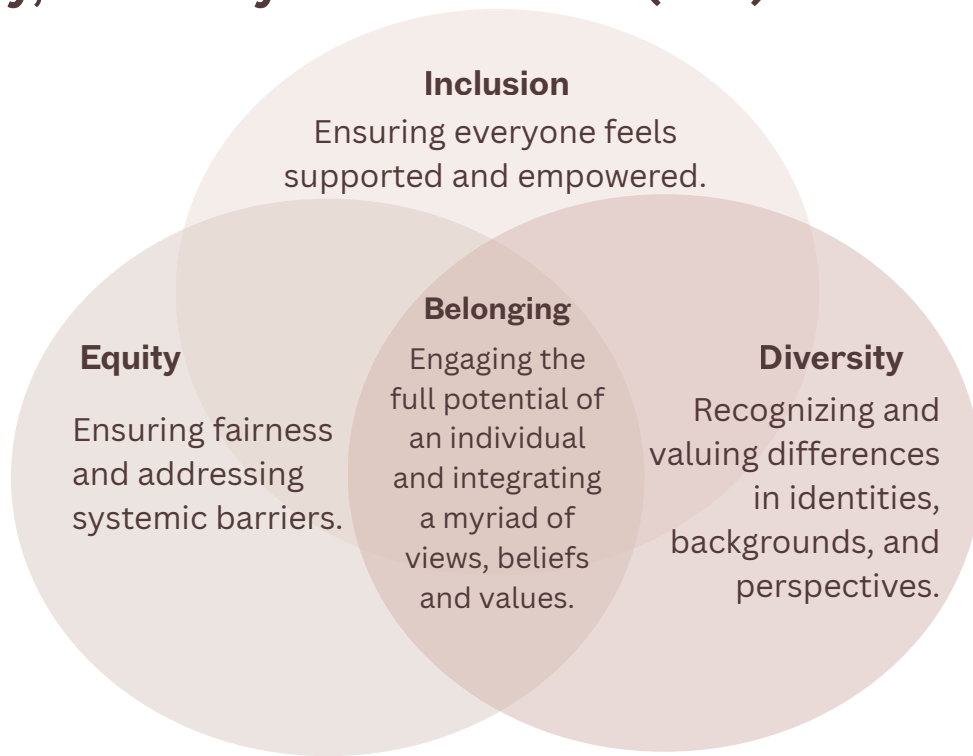
Examples: Social support

Reflection Activity #3

What do you as a facilitator have to do to minimize the stigma attached to attending the event? What will you do to mitigate the stigma that could potentially arise in the room?

Lesson 1.4

Equity, Diversity and Inclusion (EDI) in Practice



EDI in the Context of HIV Work:

- Use person-first language (“women living with HIV” rather than “WLWH”)
- Ensure materials are culturally appropriate and accessible (translation and terminology consideration) - e.g. BCC3 has translated some of our knowledge-mobilization materials into French, Swahili, Zulu, Shona, Gujarati, Hausa and Luganda to allow for increased accessibility and engagement with our events.
- Reflect on power dynamics in the room

Reflection Activity #5

How can we make our spaces more inclusive?

HIV Research and Community Involvement

What is Community-Based Research?

Community based research (CBR) is a **community-driven** or **community-led approach** to research that supports **collaborative partnerships** between **community leaders, community members** (particularly people with lived/living experience), and **researchers** from academic or other research institutions.

– Canadian Institute of Health Research

Community-based research (CBR) is a methodological practice that places community partnerships at the forefront. CBR approaches are marked by the following principles:

1 Collaborative

The communities in which the research is taking place are full partners in all stages of the process. Community and academic experts work together to develop questions that are responsive to community needs, determine appropriate data collection methods, and develop effective knowledge dissemination strategies.

2 Change-oriented

Although community-based research can make important contributions to knowledge, its ultimate objective is to promote positive social change. Community-based research seeks to empower communities and effect policy changes.

3 Inclusive

Community-based research seeks to democratize knowledge by recognizing and valuing the unique strengths and perspectives of all members involved in the research process.

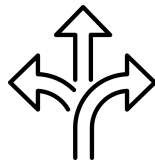
Hallmarks of Successful Community-Based Research



**Mutual
Respect &
Trust**



**Commitment to
long-term,
sustainable
relationships**



Flexibility



**Meeting the
community
where they
are at**



**Community-
informed
methods and
sound ethical
practices.**

Tokenistic Research

- The community's lived experience is included for legitimacy, but not actually used to shape the study's design, methods, or analysis
- Community is used solely for data collection (e.g. survey distribution) rather than being involved as partners within the research process
- Research uses language of participation but does not share decision-making power
- Lack of action - findings are not shared back with the community, no transparency on what is done with the data

Reflection Activity #6

What's the difference between CBR and helicopter research? How do these different types of research make you feel as a participant?

Lesson 1.6

Introduction to the British Columbia CARMA-CHIOWS Collaboration (BCC3) Study

What is BCC3?

The British Columbia CARMA-CHIOWS Collaboration (BCC3) is a **community-based, women-centered, cell-to-society** study. BCC3 brings together women living with HIV, researchers, clinicians, and community partners, with the goal of better understanding how to improve and support healthy aging for women living with HIV.



Community-Based

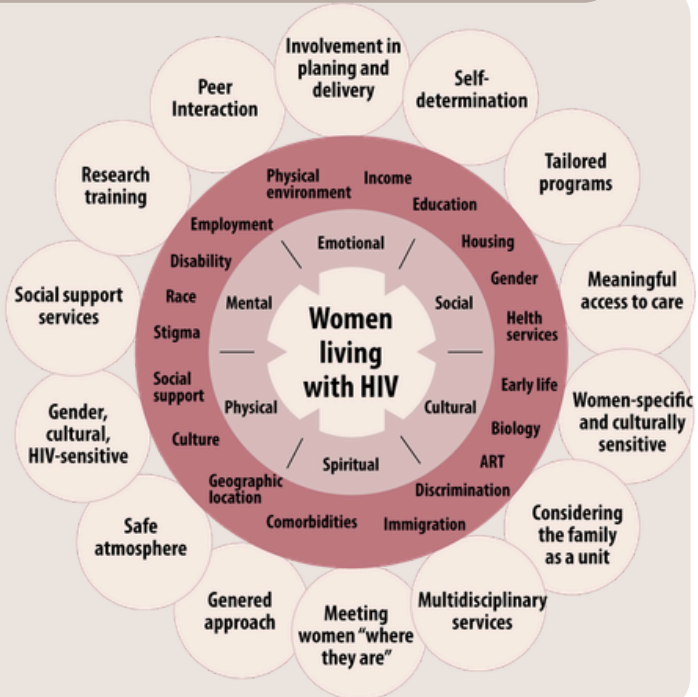
BCC3 follows the following community based research principles:

1. Greater Involvement of People Living with HIV/AIDS (**GIPA**)
2. Meaningful Involvement of Women Living with HIV/AIDS (**MIWA**)
3. Ownership, Control, Access and Possession of data collection processes in Indigenous communities (**OCAP**) – enacting the Truth and Reconciliation Commission

The key to successful and meaningful research is community collaboration. Studies that utilize a community based research approach create results that can properly address the needs of the community. In doing so, researchers collaborate with the community along every step of the research journey, including: designing the research questions and protocol, conducting the study, interpreting results, and translating knowledge. It is vital to foster lasting and genuine connections between researchers and the community, to ask what the community needs and let this guide the research, and to come to research questions and study design together. This allows for a client-centered approach that can best improve care and access to health services. In regards to BCC3, this means ensuring that women living with HIV are included in each step of the research process and following the GIPA, MIWA and OCAP principles. In turn, community based research can create more meaningful findings and work to empower women living with HIV.

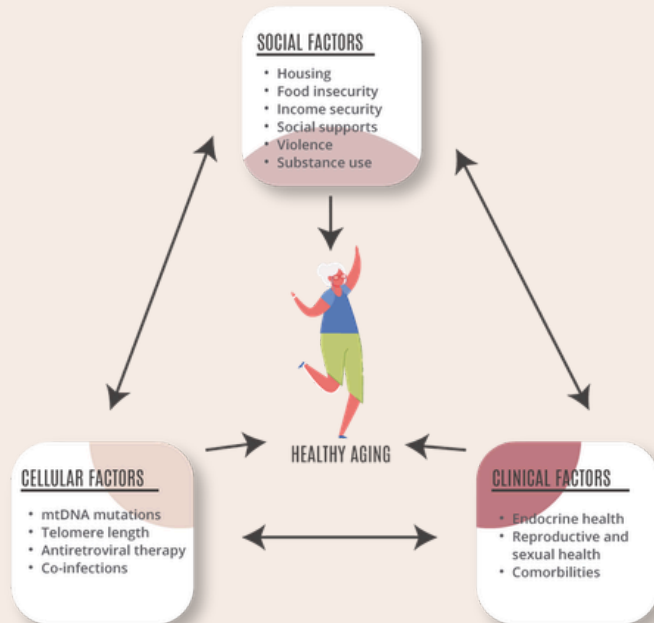
Women-Centred

We follow a women's centered approach, which includes research that: purposely involves the perspectives of women; sees women as leaders and active participants in the research process; shares generated knowledge from research with the community to influence systemic and structural change. Some of the many different aspects of the lives of women living with HIV are shown in the Figure.



Cell-to-Society

Healthy aging of women living with HIV is influenced by cellular, clinical and social factors which also interact with each other. To understand healthy aging of women living with HIV, we need to study these various factors, that interact with one another and influence aging.



Lesson 1 - References and Further Readings

Land Acknowledgements

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2. arnesty.ca/activism-guide/activism-skills-land-and-territory-acknowledgement/
3. fnha.ca/Documents/FNHA-Territory-Acknowledgements-Information-Booklet.pdf
4. <https://guides.library.ubc.ca/distance-research-xwi7xwa/landacknowledgements>

HIV Timeline in Canada

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4. soonatsooneh.org
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HIV Stigma

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CBR

1. <https://paninbc.ca/research-and-evaluation/what-is-cbr/>
2. <https://cihr-irsc.gc.ca/e/25835.html>

BCC3

1. hivhearne.ca

EDI

1. <https://medium.com/@krysburnette/its-2019-and-we-are-still-talking-about-equity-diversity-and-inclusion-dd00c9a66113>

Lesson 2: Trauma-Informed Care and Intersectionality

2.1 Understanding Intersectionality - page 1

Approximate Time - 10 minutes

2.2 Trauma-Informed Care (TIC) - page 2-3

Approximate Time - 20 minutes

2.3 Cultural Humility and Positionality - page 4-5

Approximate Time - 20 minutes

2.4 De-Escalation Using the CUBE Model - page 6

Approximate Time - 25 minutes

2.5 Self-Care - page 7-8

Approximate Time - 10 minutes

Activity: Making Connections - page 9

Approximate Time - 35 minutes

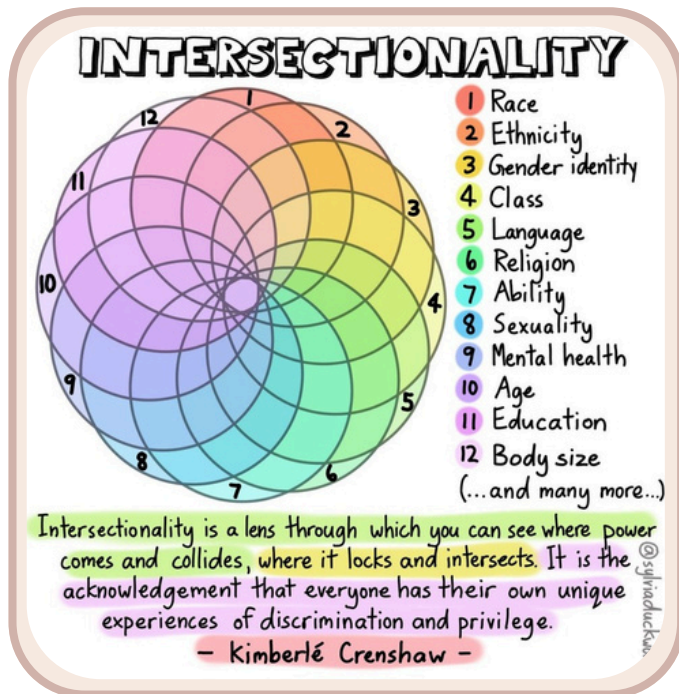
Learning Objectives for BCC3 REACH Facilitators

By the end of this lesson, you will be able to:

1. Define trauma and re-traumatization
2. Describe the 5 principles of trauma-informed care
3. Understand the importance of cultural humility and intersectionality
4. Apply the CUBE model of feedback to manage difficult interactions as a facilitator during an event.

Lesson 2.1

Understanding Intersectionality



Coined by **Kimberlé Crenshaw** in 1989, *intersectionality* explains how overlapping identities (race, gender, sexuality, class) shape **unique** experiences of privilege or oppression. Crenshaw used this term to explain how her identities of being both Black AND a woman do not operate independently of one another. Rather, the interactions between her two identities frequently reinforce one another and shape her experience within an inequitable system.

This framework acknowledges that discrimination often operates at the *intersections*, for example, women of colour may face unique barriers different from men of colour or white women,

How does intersectionality impact me?

Now that we understand that people comprise more identities than what meets the eye, we can begin to make an active choice to see one another holistically and not what we perceive another person to be. We can begin to think critically and strategically about how **systems intersect and create compounding effects on an individual**. This will allow us to expose the inequities in history, policies, structures, and the lived realities that marginalized persons have endured and continue to endure. By doing so, we can begin to institute change in a meaningful and long-lasting way that is social justice-oriented and person-centered.

Reflection Activity #6

Which parts of your identity shape how you move through the world?
How might that shape how you facilitate?

Lesson 2.2

Trauma-Informed Care (TIC)

What is trauma?

Any disturbing experience that results in significant fear, helplessness, dissociation, confusion, or other disruptive feelings intense enough to have a long-lasting negative effect on a person's attitudes, behavior, and other aspects of functioning.

Re-Traumatization

When an interaction or environment triggers a person's past trauma.

Trauma-Informed Care

An approach that aims to prevent re-traumatization and supports healing by acknowledging and navigating the traumas and adversities individuals have faced.

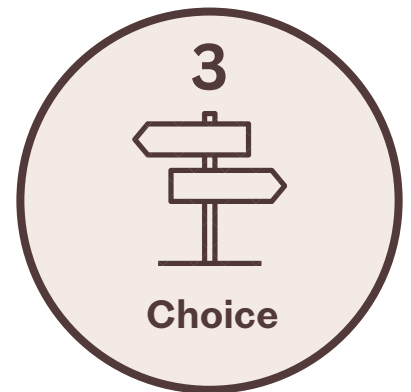
Five Core Principles of Trauma-Informed Care:



Emotional and physical safety.



Clear expectations and boundaries.



Supporting autonomy and self-determination.



Sharing power and decision-making.



Building strengths and resilience.

Lesson 2.3

Cultural Humility and Positionality

What is Cultural Humility?

A personal lifelong commitment to self-evaluation and self-critique whereby the individual not only learns about another's culture, but one starts with an examination of her/his own beliefs and cultural identities.

It requires a recognition of power dynamics and imbalances, a desire to fix those power imbalances and to develop partnerships with people and groups who advocate for others

Key Attributes of Cultural Humility

**Institutional
accountability**

**Acknowledging
Power
Imbalances and
Balancing power
imbalances**

**To be “other-
oriented”**

Openness

**Self-
Reflection/
Awareness**

**Empathy and
compassion**

**Lifelong
Learning**

What is Positionality?

Positionality refers to the how differences in social position and power shape identities and access in society.

In acknowledging positionality, we also acknowledge intersecting social locations and complex power dynamics. Therefore, our approach to classroom climate is also grounded in analysis of intersectionality, a concept arising out of Black feminist legal studies and critical race theories.

Lesson 2.4

De-Escalation Using the CUBE Model

De-escalation is essential in any community setting, especially when covering topics related to trauma, stigma or discrimination in health-care and social systems. As facilitators, your role is to create spaces where participants feel safe, respected and heard. Moments of tension, disagreement, or emotional overwhelm can arise naturally when discussing sensitive topics, such as health, identity or lived experiences and de-escalation helps us respond with compassion rather than reaction.

Effective de-escalation helps protect the emotional safety of everyone in the room, preserves trust and keeps conversations constructive.

What is the CUBE model?

CUBE model helps manage tension through non-defensive communication.

Observations: What you see or hear.

Thoughts: How you interpret it.

Feelings: How it makes you feel.

Wants: What you hope to happen next.

Example:

“I noticed the tone of our discussion changed (**Observation**). I think we may be misunderstanding each other (**Thought**). I feel uncomfortable when that happens (**Feeling**). I’d like to reset and hear everyone’s view (**Want**).”

Practice Exercise

Try writing your own CUBE statement for a difficult moment you’ve experienced or witnessed.

Observations:

Thoughts:

Wants:

Feelings:

Lesson 2.5

Self-Care Practices

When facilitating, you might hear about participants experiences with trauma, stigma and lived experiences. While these conversations are meaningful, they may also be emotionally taxing. Trauma-informed work requires **not only caring for participants but also caring for yourself**. Self-care helps prevent burnout, supports long-term involvement, and allows you to show up fully and compassionately.

Self-Care Tips

Before the Session

- **Check in with your body:** “How am I feeling today? What do I need to feel steady?”
- **Build buffer time:** Give yourself 10–15 minutes before the session to settle in, breathe, or review notes.
- **Plan grounding supports:** Water, a warm drink, tissues, or a calming object can help you stay regulated.

During the Session

- **Breathing breaks:** Slow breaths in for 4 seconds, out for 6; do this quietly while others talk.
- **Body awareness:** Unclench your jaw, drop your shoulders, keep both feet on the floor.
- **Pause when needed** - it’s okay to say “Let’s take a quick break”
- **Share facilitation load:** If co-facilitating, trade off sections or roles.

After the Session

- **Take 5–10 minutes to decompress:** Don’t rush into another task. Stretch, walk, drink water.
- **Name successes:** Acknowledge what went well, even small things.
- **Reach out for peer support:** Talk to another facilitator, or colleague — don’t carry it alone.
- **Avoid overprocessing:** Allow yourself to let the session go once you’ve reflected

Emotional Boundaries

- It’s important to acknowledge someone’s pain without absorbing it.
- Redirect heavy emotional disclosures gently:
 - “Thank you for trusting us with that. Let’s connect after the session to talk about support options.”
- Know your limits — it is not a failure to step back when needed.

When You Experience Vicarious Trauma:

Facilitators sometimes absorb the emotional weight of others' stories.

Signs include:



Feeling unusually tired or irritable



Intrusive thoughts



Difficulty Sleeping

What to do:



Take extra rest time when you can



Talk to a trusted friend, colleague or study team member



Use grounding techniques that work for you

Building a Sustainable Self-Care Routine



Proper Sleep and Nutrition



Nature: Even short time outdoors can boost your mental health



Creative Expression: Art, writing, cooking music are all ways to process emotions creatively



Movement: Incorporate gentle movement activities that work best for you



Boundaries: Limit how often you check work messages



Joy: Schedule something small that brings you joy weekly

Reflection Activity #8

What self-care practices support you the most after emotional conversations?
What is one routine you would like to integrate to as a facilitator?

Lesson 2

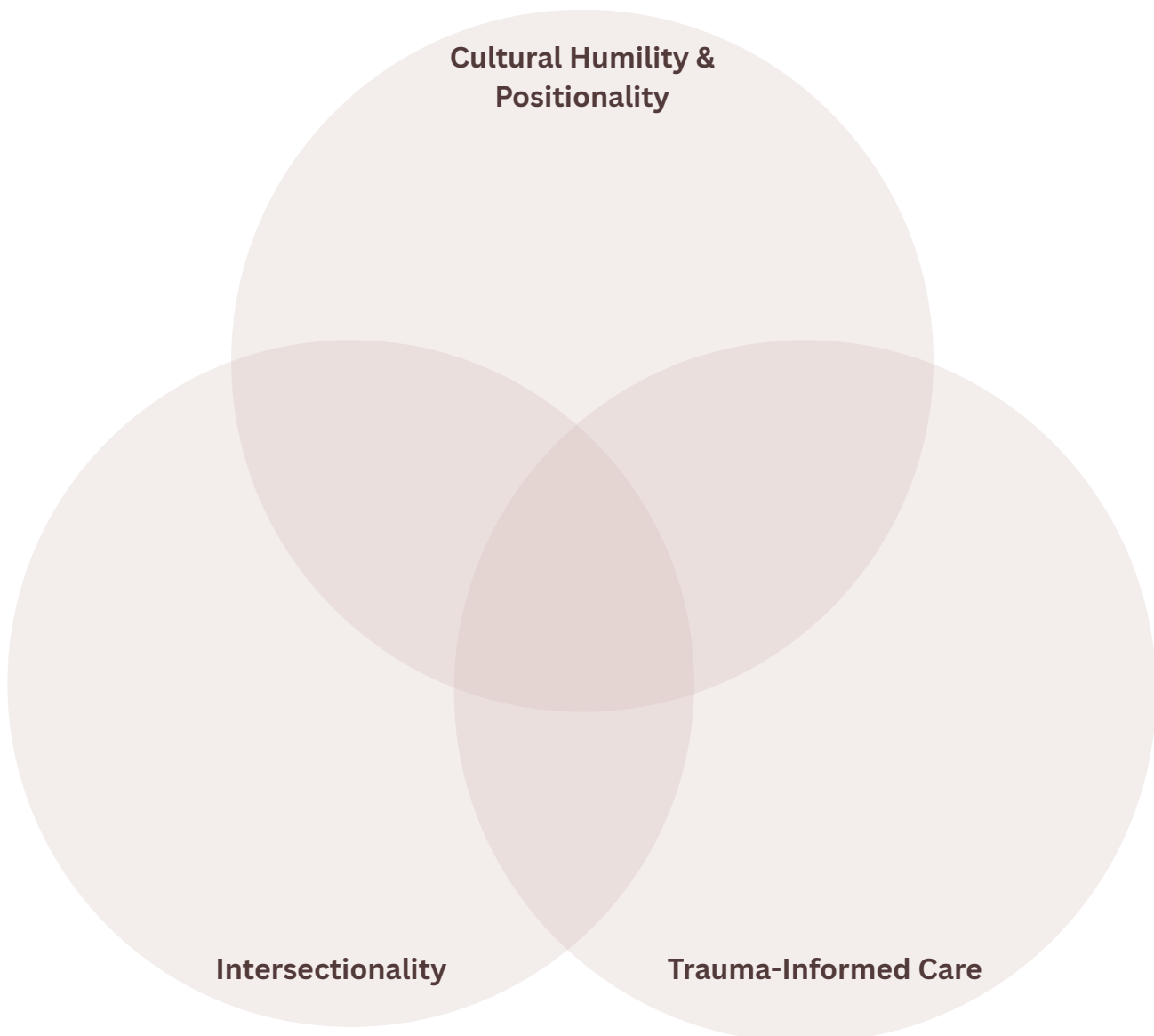
Workbook Activity: “Making Connections”

To wrap-up lesson 2, we would like to bring some of the ideas discussed during this lesson together through a word map activity.

Instructions:

Inside the 3 circles labelled below, write key words or phrases that come to mind from your self-paced work (i.e. *identity, power, safety, empathy, healing, inclusion*). Where any of the circles overlap, write how the concepts from each circle connect.

Take a picture of this and email it to sahel.mirrazavi@ubc.ca for us to share with the group at the beginning of lesson 3.



Lesson 2 - References and Further Readings

Intersectionality

1. [britannica.com/topic/intersectionality](https://www.britannica.com/topic/intersectionality)
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CUBE Model

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Lesson 3: Facilitation Skills for Creating Safe, Empowering Spaces

Learning Objectives for BCC3 REACH Facilitators

By the end of this lesson, you will be able to:

1. Practice the CUBE model for responding to challenging interactions.
2. Understand and articulate the importance of having a welcoming and inclusive space
3. Employ active listening skills
4. Learn how to handle common situations facilitators face during sessions

Lesson 3.1

Managing Challenging Interactions

As facilitators, you may encounter participants who appear frustrated, dominating, or disengaged. These behaviours often reflect discomfort, stress, or lived experiences, not personal attacks. **Respond with curiosity, calm and compassion rather than defensiveness.**

Tips for Responding

- Remember: behaviour does not equal character. Try to understand what's beneath the reaction.
- Stay grounded by taking a breath before responding.
- Use neutral body language and tone.
- Apply the CUBE model (refer to lesson 2.4 for more details)
 - **Observe:** "I noticed you seem frustrated"
 - **Think:** "It sounds like you have a different view"
 - **Feel:** "I feel concerned when our space feels tense."
 - **Want:** "I'd like us to pause and reset together."

Practice Exercise

Let's practice what we've learned through some role-play scenarios with other facilitators. You can use the spaces below to jot down any notes you might deem important during this practice.

Instructions:

Participants will break into small groups. Each group will practice responding to one of the following facilitation scenarios:

1. **A participant interrupts others or dominates the discussion**
2. **Someone makes a comment that could be perceived as rude or stigmatizing**
3. **A participant walks out upset mid-discussion**
4. **Someone starts crying during a sensitive topic**

Each group:

- Assigns one facilitator and one or two participants to role-play
- Uses the CUBE model to guide their responses

Lesson 3.2

Creating Welcoming and Inclusive Spaces

Importance of a Welcoming and Inclusive Space

A welcoming and comfortable space helps participants feel safe, respected, and open to sharing. For those who may have faced stigma, discrimination, or isolation, these environments are essential for building trust and connection.

When people feel at ease, they engage more fully, support one another, and benefit more deeply from the session. A warm, inclusive atmosphere lays the foundation for learning, healing, and community.

Practical Tips for Building Connection



Warm Welcome: Greet participants by their **preferred names**, ensure you're using their **preferred pronouns**. Start with an engaging check-in or ice-breaker.



Body Language: Use an open posture, nod, and make eye-contact.



Inclusive Language: Use gender-neutral and person-first language (e.g. "people living with HIV")



Accessibility: Be mindful of pace, tone, vocabulary, expectations and access needs. Read the room.



Empathy in Action: Listen actively. "That sounds really hard" can go a long way in building trust and inclusion.

Active Listening Skills:

- 1 Listening may be enough** - we may be tempted to “fix” the problem, but at times people may just need us to listen.
- 2 Don't give advice** - Allow the person to finish speaking before attempting to paraphrase. You want to make sure that you fully understand them first.
- 3 Avoid Judgement** - your goal is to understand the person's perspective, try not to interrupt with your own opinions while the person is talking.
- 4 Show Empathy** - If the person voices negative feelings, try actively understand and respect their perspective. Consider why they feel this way and put yourself in their shoes.
- 5 Ask questions** - Ask questions to encourage the person to elaborate on their thoughts and feelings.
- 6 Paraphrase** - Try to paraphrase what the person has said to make sure you understand and to show that you are engaged.
- 7 Use positive body language** - Includes open, relaxed and engaged non-verbal cues that build trust and rapport.

Practice Exercise

Let's practice what we've learned through some role-play scenarios with other facilitators.

Instructions:

- 1)** One person shares a very personal story about their journey living with HIV (e.g. a confidentiality breach in a clinical setting or a made up story)
- 2)** The listener practices active listening without interrupting, paraphrasing what they've heard and reflecting that back in a supportive and constructive way, ensuring the storytellers voice is heard. Be sure to use all appropriate active listening skills, including positive body language.

Reflection Activity #2

How did it feel to listen deeply without responding right away?

Reflection Activity #3

How did it feel to not give advice or share personal experience in response?

Lesson 3.3

Navigating Practical Facilitation Scenarios

Facilitation is less about having the right answers and more about making intentional decisions in the moment. This lesson will teach you **when** and **how to intervene** in some common scenarios to serve the group.

A note on preparation and time:

Preparation, punctuality, and time management are also core facilitation skills. Winging it places unnecessary pressure on both the facilitator and participants. Structure allows facilitators to listen more deeply, respond more intentionally and protect everyone's time.

Scenario 1: Running Out of Time

The Situation:

You are behind schedule. The current discussion is engaging and meaningful, but there are still important topics or activities remaining in the session.

What's at Stake:

- Respect for participants' time
- Completion of learning objectives
- Session flow

Facilitator Move:

Name the time constraints, honour the discussion and make a clear decision on how to proceed.

Example Phrases:

- "This conversation is important but I also want to make sure we cover what's ahead. If that's okay, can we move on?"
- "I want to thank everybody for their valuable input, in the interest of time, let's capture one final thought here and then move forward."
- "If it's okay with everyone, I'm going to park this topic so we can return to it later if time allows."

Scenario 2: Someone is Talking Too Long

The Situation:

One participant is taking extended turns speaking, limiting space for others.

What's at Stake:

- Equity of voice
- Group engagement

Facilitator Move:

Intervene early and kindly, redirecting focus back to the group

Example Phrases:

- “Thank you so much for your input, this is great. I’m going to pause you there so we can hear from a few other voices”
- “That’s helpful context, thank you for sharing your perspective - let’s hear how this is landing for others”
- “Thank you for your input, you raised pertinent points. I’d like to open this up to some of the folks we have not heard from yet.”

Scenario 3: Transitioning Between Topics

The Situation:

You need to move the group to a new topic while participants are still engaged in the current one.

What's at Stake:

- Learning momentum
- Time management
- Clarity and focus

Facilitator Move:

Acknowledge what was shared, summarize key themes and explain why the transition matters.

Example Phrases :

- “I’m hearing a few key themes emerging, I want to pause us here and connect this to our next topic in the interest of time.”
- “This is really great work so far, thank you everyone for your valuable insights. I think to build on what has been shared, I suggest we transition now to apply these ideas in the next activity”

Scenario 4: You Don't Know the Answer

The Situation:

A participant asks a question you don't know how to answer.

What's at Stake:

- Credibility
- Trust
- Learning Culture

Facilitator Move:

Be honest, stay calm, and model curiosity rather than expertise.

Example phrases:

- “That’s a great question, I don’t have the answer right now but will definitely look into it and follow up with you”
- “Honestly, that’s not my area of expertise. Let me reach out to someone who may know better and I’ll make sure to follow-up with you after the event.” (Clarify the contact information for following up)

Scenario 5: When Stories Take Over (Including Your Own)

The Situation:

Participants begin sharing personal stories, and you feel tempted to add your own to connect.

What's at Stake:

- Focus on learning objectives
- Clarity of the facilitator role
- Time boundaries

Facilitator Move:

Honor the story, reflect themes, and redirect without adding your own experience

Example phrases:

- “I can see this has deep meaning and significance for you, thank you so much for sharing that experience.”
- “I’m noticing a common theme emerging across these stories, thank you all for your honesty and trust sharing your lived experience.”
- “Thank you all for your deep and honest sharing, if you didn’t get a chance to share, thank you for listening.”

Scenario 5: When Stories Take Over (Including Your Own)

What *not* to do:

- Share a personal story to match the participants' experience
- Fill silence unnecessarily
- Let storytelling continue without purpose

Reflection #4:

When do you feel most tempted to share your own story?

How can reflecting participants stories replace your personal storytelling?

Lesson 3 - References and Further Readings

Managing Challenging Interactions

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Michael Smith
Health
Research BC

