

**MODULE 5.3**  
RCCE CROSS-BORDER TRAINING, EAST AFRICA



## IMPLEMENTATION – COMMUNITY PARTICIPATION

## DOT GAME

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1. Collect Instructions - Dot color
2. Follow instructions on the paper you receive



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## DOT GAME - REFLECTIONS

- How did the dot game exercise make you feel? What specifically made you feel that way?
- How does the dot game reflect reality?
- Who might be the blue, green and red groups in a community setting?
- Specify who the red dot groups are (and make note):
  - .....
  - .....
  - .....



# CROSS BORDER MINI DRAMA



# CROSS BORDER COMMUNITY MEETING



## LEARNING OBJECTIVES

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### **At the end of this session, participants will be able to**

1. Reflect on the importance of community participation for effective outbreak preparedness, response and recovery
1. Describe different methods to involve communities in planning, implementing, monitoring and evaluating response interventions
1. Outline the significance of why participatory community engagement, emphasising trust building within a response, and analyse examples of best practises from the region

## WE HAVE LEARNED FROM PAST OUTBREAKS..

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... **that active participation of community members to gain trust usually occurs at the end of the outbreak.** Yet actively engaging communities needs to be done early in the outbreak response to be effective.

Effective participatory community engagement during disease outbreaks:

- actively involves community stakeholders in exploring the issue
- identify local solutions and resources needed to control the outbreak



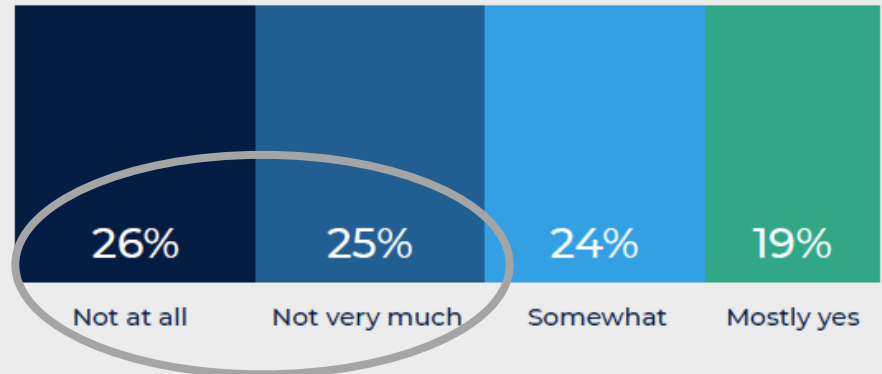
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## WHY SHOULD COMMUNITIES PARTICIPATE IN PLANNING?

If we don't involve communities in planning programmes and responses, we may end not meeting their needs and wasting resources, time and funding

Does the aid you receive meet your priority needs?



Ground Truth Solutions for the Grand Bargain report

# LEVELS OF COMMUNITY ENGAGEMENT AND PARTICIPATION

## INFORM

Community receives information

## CONSULT

Community is asked about their needs, priorities and opinions

## INVOLVE

Community provides input to key decisions

## COLLABORATE

Community and stakeholders plan and decide together

## EMPOWER

Community plan and manage the project



### COMMUNITY ENGAGEMENT

A health promotion guide for universal health coverage in the hands of the people



## PARTICIPATORY COMMUNITY ENGAGEMENT IS IMPORTANT BECAUSE..

- Trauma-affected populations need trust and consensus to adopt public health measures.
- Community-led solutions are more feasible and sustainable.
- It increases social accountability and resilience of communities.



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# KEY PRINCIPLES OF PARTICIPATORY COMMUNITY ENGAGEMENT

## Build trust

- Be honest and transparent with communities
- Listen to community doubts and concerns
- Be consistent, follow up and follow through on promises
- Be respectful of all community members beliefs, thoughts, norms and cultures

## Ensure inclusivity and empowerment

- Ensure inclusion of socially marginalized groups such as refugees, migrants, and people with disabilities in the community exploration and action planning process

## Do no harm

- Ensure staff, volunteers and community members are properly equipped and trained for their protection and to prevent the further spread of a disease in communities.
- Monitor where existing conflict tension occurs between groups and what could be exacerbated due to the outbreak
- Ensure mechanisms to monitor programmatic operations and ensure prevention of all forms of exploitation and abuse

## Listen and respond to community needs

- Demonstrate how the community's feedback is taken into account and how it is being responded to

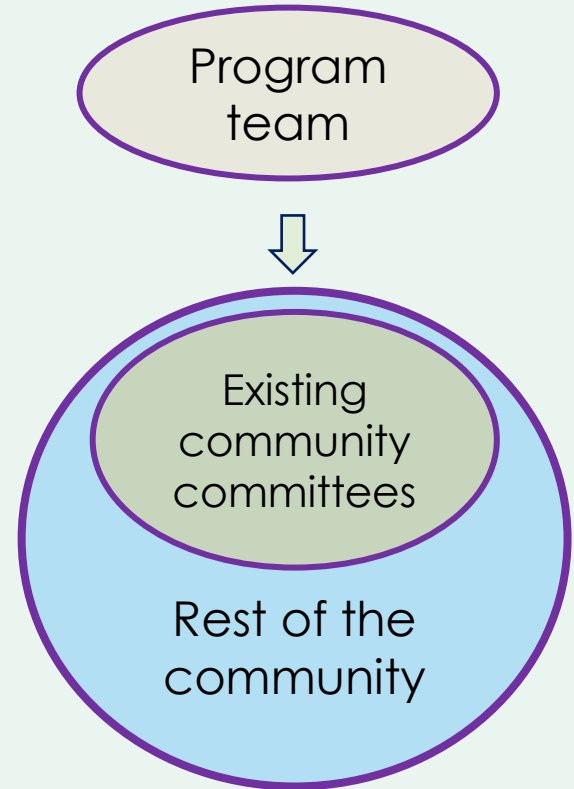


# PARTICIPATORY COMMUNITY ENGAGEMENT: THE ACTORS

There are several actors in participatory community engagement at different levels, with specific and important roles during major disease outbreaks

The groups of actors are:

- The program team
- Existing community group or committees, and
- The rest of the community



# PARTICIPATORY COMMUNITY ENGAGEMENT: THE STEPS



# PARTICIPATORY COMMUNITY ENGAGEMENT: THE STEPS

## PHASES

## STEPS

## OBJECTIVES

### 1) Prepare to mobilize communities

1. Government buy-in and collaboration with government
2. Identify program team to implement the program in communities.
3. Gather information about the health indicators and social issues and the community, community resources and constraints
4. Program team develops a community mobilization plan to guide your work forward

Buy-in and support from different levels of MoH for their approval, involvement and agreement to support the implementation of RCCE activities with communities. Discuss outbreak and areas in greatest need and where you feel your organization can support.

### 2) Organize and enter communities

1. Program team meets with community leaders
2. Program team meets with different smaller groups as needed (refugees, migrants, displaced persons) separately
3. Identify existing community committee /group
4. Creation and/or development of community committee

Buy-in and support from the community for their approval, involvement and participation.

### 3) Explore and define the issues and set priorities

1. Body mapping
2. Disease spread mapping
3. Community mapping for an outbreak
4. Synthesize key points from the activities

Explore perceptions of disease and transmission, vulnerable and at-risk populations, opportunities for transmission, impacts of disease spread in community, challenges of reducing risk and solutions.

### 4) Plan together to develop local solutions

1. Determine who will be involved in planning and their roles and responsibilities
2. Prioritization ranking of issues
3. Validate findings and priorities with wider community
4. Develop Community Action Plans

Prioritize challenges that the community can potentially solve, identify solutions and develop community action plans with roles and responsibilities and a timeline.

### 5) Community listening and monitoring

1. Validate quality of and implement action plans
2. Community listening
3. Community action group (CAG) meetings to monitor action plan progress
4. CAG reports results to the program team.

To listen to and share concerns, questions and rumors related to the outbreak and to work together to try to address them.



# PHASE 1: PREPARE

## Phase 1: Prepare

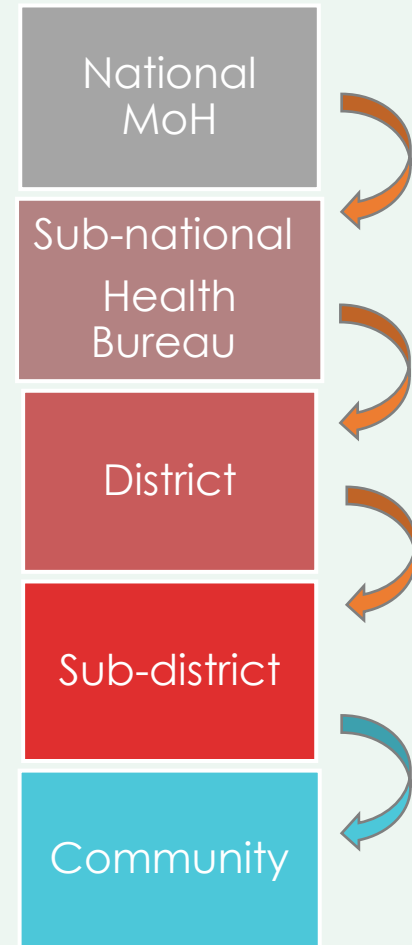
### Step 1: Gain Government Buy-in and Collaboration

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Before the program begins, meet with government leads to align the country priorities with the program's contribution, and to discuss program support and prioritized geographic areas.

Consider the following process:

- Meet officials from different levels of Ministry of Health (MoH) for buy-in, involvement and support for the implementation of RCCE activities
- Discuss epidemiological data and geographic areas that are in greatest need and where your organization can support
- Start with the MoH and continue to the community level.
- Organizations may need to engage other leaders or community gatekeepers, such as the Ministry of Education.

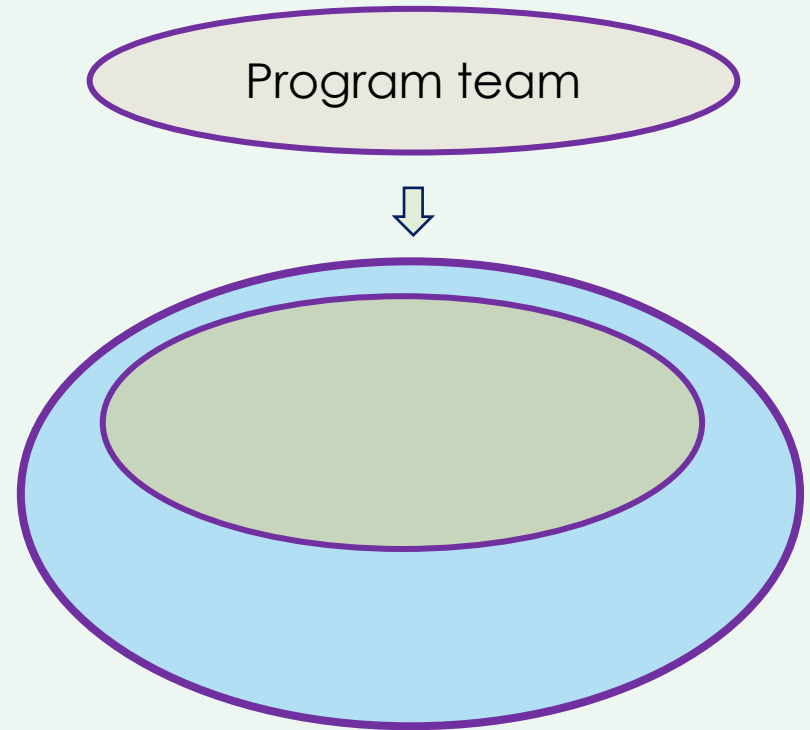


# PHASE 1: PREPARE

## STEP 2: IDENTIFY PROGRAM TEAM

### PROGRAM TEAM

- Usually from an INGO, NGO, cluster, government or CBO at the national/regional level made up of technical personnel such as: health promotion, community engagement, community mobilizers, etc.
- Support the community group/committee members in facilitating the process to co-design, plan and support implementation of the activities
- They will review the action plan and help guide the community to solutions that are feasible for the community carry forward





## Phase 1: Prepare

### Step 3: Document Information about the Outbreak and Community

FACTORS TO CONSIDER	CONDITIONS THAT FACILITATE COMMUNITY MOBILIZATION	CONDITIONS THAT INHIBIT COMMUNITY MOBILIZATION
Magnitude of the problem		
Most impacted people in the community (by the outbreak)		
Political support		
Sociocultural context		
Resources (time, money, skills of staff and community, equipment and supplies)		
Organization		
Feasibility of response		
History of community participation		
Accessibility (geography, climate, etc.)		
Representation (other areas in the country)		



# PHASE 2: ORGANIZE

## Phase 2: Organize

### Step 1: Meet with Community Leaders

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Many organizations are likely already working in the communities where the outbreak is occurring; however, when you enter a community the following steps are important to follow:

- Introduce yourself and the organization you are representing
- During the meeting, discuss the **participatory action planning activity/process**, timeline, roles and expectations for all parties involved. Attain their **approval and buy-in**
- Discuss existing resources including **existing community groups or committees** that can lead and implement the RCCE process, and other **resources**
- Ask community leaders to create an **introduction to the community committees**



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## Phase 2: Organize

### Step 2: Meet Separately with Smaller Groups as Needed

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Engaging marginalized populations and meeting with smaller groups of people is important

- For example, in some places men and women do not meet together, or migrants and displaced persons might not feel comfortable meeting with the larger community because of possible stigma
- In such cases, you might hold smaller group meetings – for example, with women, people with disabilities, migrants, refugees, displaced persons, or other marginalized people - to introduce the project and understand their participation and needs
- In these smaller groups, identify someone who can represent the group in the wider exploration and planning meetings (Phase 3 & 4).
- Otherwise, this is an opportunity to identify priorities to ensure they are considered during community planning (Phase 4).



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## Phase 2: Organize

### Step 2: Meet Separately with Smaller Groups as Needed

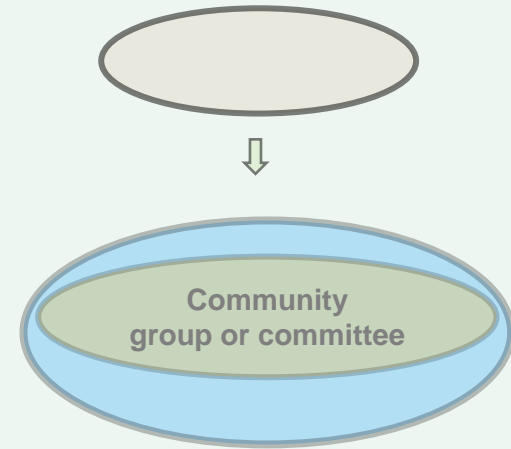
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#### Option 1: Work with an existing community group or committee

Helpful because they will

- already have a governance structure in place
- people, roles and responsibilities are defined
- a process for planning and organizing action in the community exists.

\*If the group already exists, you may need to negotiate with them to include a sub-group for the outbreak that would include community members most affected by the outbreak to ensure the exploration and planning process is inclusive of them as well.



## Phase 2: Organize

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\*If the group already exists, you may need to negotiate with them to include a sub-group for the outbreak that would include community members most affected by the outbreak to ensure the exploration and planning process is inclusive of them as well.

### Option 2: Develop a community committee

- Usually 15-20 members, based in the community
- The group should include 60% members from marginalized groups and those experiencing vulnerability (most at-risk of disease exposure and those such as refugees, displaced persons, or others who may be most impacted by the outbreak response)
- Be sure to ask how different community members want to be represented



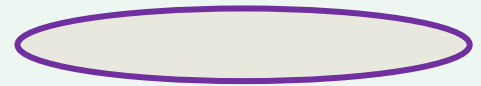
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## "Explore" Activities are Led by the Community Group or Committee with Support from the Program Team to Engage the Other Members of the Community

### THE REST OF THE COMMUNITY

- Their role is to participate in exploration of issues and activities such as action planning for solutions.
- This group is inclusive of the most marginalized groups – for example, women, refugees, displaced persons, child/youth, people with disabilities, and those at high risk of disease.





## Note Capture for "Explore" Activities

Use this table to capture key points and priorities made during the different activities (body mapping, disease spread mapping and community mapping). This will help you identify some of the key priorities to take forward during the planning phase.

*Instructions: Create this table on a flipchart and ask the note taker should document the topics that people discuss a lot, or are the most important or those where community members mention as being a priority.*

Issue exploration activity notes	
Topics	Notes from discussion
Transmission	
Protective measures	
Vulnerable people	
Taking care of others	
Health workers	



## Phase 3: Explore

### Step 1: Conduct Disease Spread Mapping

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#### What it is:

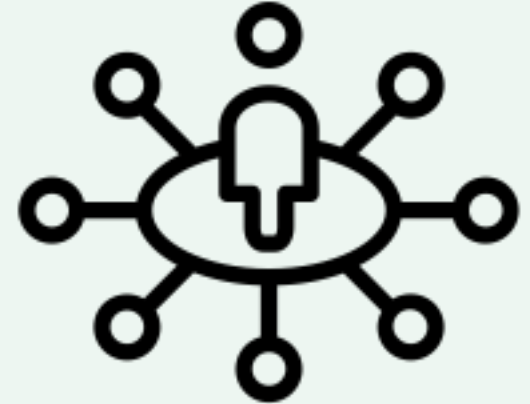
- A disease spread map indicates how a disease spreads from one person to another and helps prompt discussion about transmission

#### Objectives:

- Build a collective realization of how the disease can rapidly spread
- Explore ideas around the different ways in which rapid spread of the disease can affect individuals, neighborhoods and health facilities

#### Who participates:

- Community leaders
- Community members



## Phase 3: Explore

### Step 2: Conduct Disease Spread Mapping

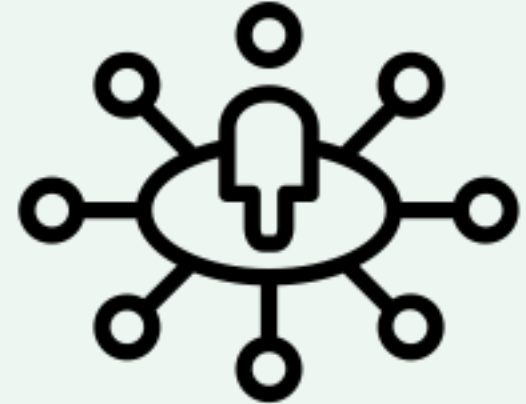
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#### Steps:

- Ask someone to draw a house on the paper or the ground of where your “**persona**” lives
- Brainstorm their **daily activities** (church/mosque, school, market, etc.) place locations on the map
- Draw lines indicating their route
- Who did the person interact with (neighbor, traditional leader, etc.) place those people on the map
- How did they greet these people (waving, shaking hands, etc.)
- Discuss how at the beginning of the day the person felt healthy but later that day felt ill, could they have been infected when they saw other people during their day? Discuss the impact of these interactions

#### Who participates:

- Community leaders
- Community members

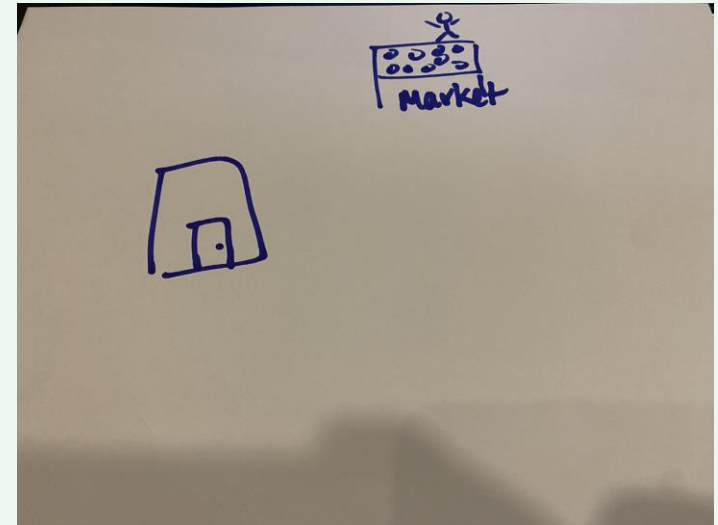


## Phase 3: Explore

### Step 2: Conduct Disease Spread Mapping

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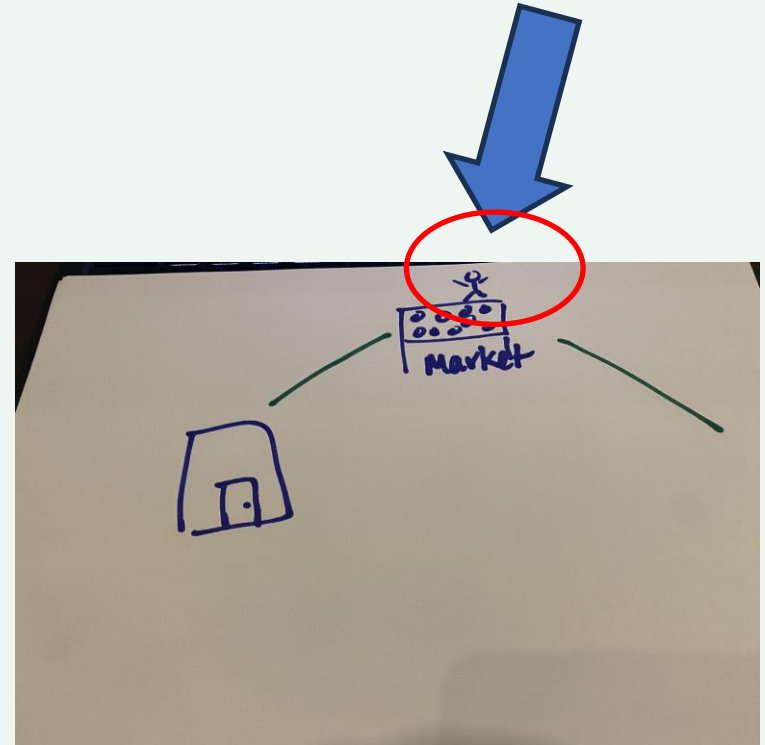
Brainstorm a person's (pick a person in the community) **daily activities** (church/mosque, school, market, etc.) place locations on the map



## Phase 3: Explore

### Step 2: Conduct Disease Spread Mapping

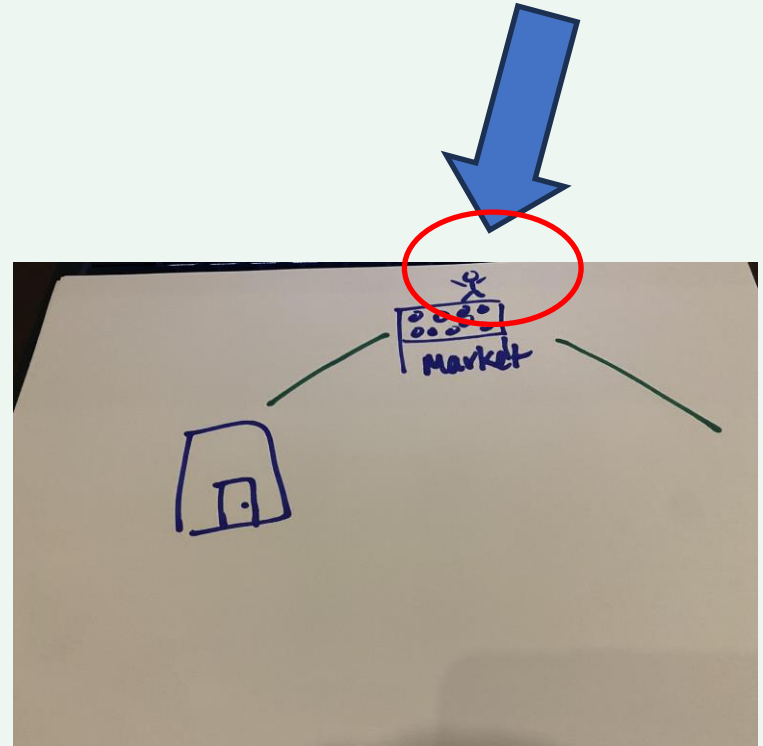
- Draw lines indicating their **route**
- Who did the **person interact with** (neighbor, traditional leader, etc.) place those people on the map
- How did they **greet these people** (waving, shaking hands, etc.)



## Phase 3: Explore

### Step 2: Conduct Disease Spread Mapping

- Discuss how at the beginning of the day the person felt healthy but later that day felt ill, could they have been infected when they saw other people during their day? Discuss the impact of these interactions



## Phase 3: Explore

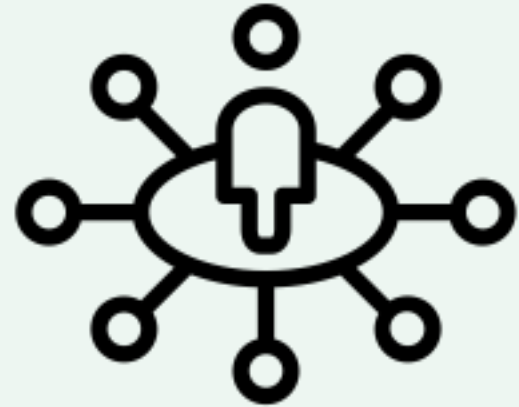
### Step 2: Disease Spread Mapping

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# Activity

20 minutes

Body mapping



*\*\*This activity is from the SMAC Community-Led Ebola Action (CLEA) Field Guide for Community Mobilisers*

<https://ebolacommunicationnetwork.org/ebolacomresource/community-led-ebola-action-clea-field-guide-for-community-mobilizers/>



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## Add notes to the table

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Issue exploration activity notes	
Topics	Notes from discussion
Transmission	<i>Jkdaljflk;asjfdlkajf</i>
Protective measures	<i>hjkjhkh</i>
Vulnerable people	<i>hjgkjh</i>
Taking care of others	<i>Jaskldjfalksdjf;lasd, jhklajdlkfajs</i>
Health workers	<i>jkdlajklfjaf</i>



## Phase 3: Explore

### Step 3: Conduct Community Mapping for an Outbreak

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#### What it is:

- A map of important places in a community

#### Objectives:

- To identify where the most common points of transmission are within a community
- To identify where people are most at risk
- Discuss the challenges of reducing risk of disease transmission
- Identify ways to reduce risk while completing necessary activities (e.g. shopping for food, going to market, pharmacy, health facility, etc.)

#### Who participates:

- Community leaders
- Community members



*\*\*This activity is adapted from Save the Children's Community Action Cycle Approach*

## Phase 3: Explore

### Step 3: Conduct Community Mapping for an Outbreak

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- On flipchart paper using pens (or people can draw in the dirt or use leaves or stones as identifiers of housing/buildings), community members can draw what the community looks like.
- Ask participants to note where certain groups of people live, such as marginalized groups, and where health facilities, markets, schools, places of worship and any other areas where people congregate - for example, a borehole well, or bus stop - are located.
- Ask them to note where people might be exposed to the disease. For example, ask questions like: "Where do you feel like people come together and are likely to be in close quarters?" Or "Where you feel the disease can spread?"
- Consider what times of day are most risky because of an increase of people in one location (for example, a water source or market).
- Probe why these points are risky or not risky, and how people might be able to protect themselves and others while doing their daily activities.
- As people begin to discuss solutions, prompt more dialogues on this topic and encourage more discussion on how people can protect themselves, their family, and the wider community and why this is important.

*\*\*This activity is adapted from Save the Children's Community Action Cycle Approach*



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# PHASE 4: PLAN COMMUNITY ACTIVITIES

## Phase 4: PLAN TOGETHER

### STEP 1: Identify who should participate in planning

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- The program team supports the community committee in developing the action plan. To support the community committee in developing the action plan, the committee might invite others to participate in the action plan, if desired. The committee should identify those who should **participate in development of the community action plan**, including:
  - Those most vulnerable and affected by the outbreak
  - Key decision-makers
  - Ensure that opposing points of view can be voiced and discussed in a constructive manner
  - This is a way to provide check and balance and ensure that those most affected and those who are able to make decisions are included in the action planning process.



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## Phase 4: PLAN TOGETHER

### STEP 1: Identify who should participate in planning

Guiding Questions	Yes	No
Is the person/group directly affected by the outbreak?	0	0
Does the person/group have decision-making authority over policies or resources that relate to the health issues?	0	0
Is the person a local leader (formal or informal) or key opinion leader?	0	0
Is the person very affected by the outbreak?	0	0
Does the person influence decisions or access to information or services for those who are directly affected by the outbreak?	0	0
Does the person/group possess special skills, knowledge or abilities that could help the group make more informed decisions or implement the action plan?	0	0
If the person/group was not invited, would they try to obstruct implementation of the action plan or create other problems?	0	0
Would strategies require this person's or group approval?	0	0



## Phase 4: PLAN TOGETHER

### STEP 2: Priority voting – preparations

Review the notes from your exploration activities.  
Identify and circle **important themes** that the community agrees to take forward into a voting process to prioritize which issues will be addressed first.

Issue exploration activity notes	
Topics	Notes from discussion
Transmission	<i>Jkdaljflk;asjfdlkajf</i>
Protective measures	<i>hjkjhkh</i>
Vulnerable people	<i>hjkjh</i>
Taking care of others	<i>Jaskldjfalbsdjf;lasd, jhklajdlkfajs</i>
Health workers	<i>jkdalajklfjaf</i>

## Phase 4: PLAN TOGETHER

### STEP 2: Priority voting – preparations

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Write the identified 5-7 issues in circles on a flipchart







## Phase 4: Plan together

### Step 4: Develop community action plan

Instructions: Insert prioritized issues in the left column and complete the action plan using the questions in the table.

Action Plan Template							
Issue/behavior	Objectives	Root cause	Activities	Responsible	Resources	Timeline	Indicators of success
What is the prioritized issue to be addressed?	What do we want to achieve specifically?	What is getting in the way of achieving the objective?	What are we going to do to achieve the result?	Who is responsible for each activity? (Names)	What do we need to achieve the result?	When and how long is needed for each activity? (From X to X)	How will we know when we have achieved the result?
		Root cause 1:	Activity 1:				
			Activity 2:				
		Root cause 2:	Activity 1:				
			Activity 2:				



# PHASE 5: LISTEN AND MONITOR



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## Phase 5: Community listening and monitoring

### STEP 1: Conduct community listening

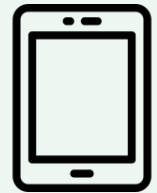
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Community listening: the process of collecting and acting upon information relevant to the outbreak and its impacts shared by the community

- Purpose: to understand community concerns, perceptions, rumors and questions and to find ways to address the issues.
- Community listening not only raises information-based issues but also structural or operational ones, and can provide suggestions or praise.

Community listening information can be collected in a variety of different ways including:

- Community dialogues
- Phone calls
- SMS (WhatsApp, etc.)



# Phase 5: Community listening and monitoring

## STEP 1: Conduct community listening

Document community feedback as community activities are conducted and share the feedback to the community committee

### COMMUNITY ACTIVITY FORM 2

A. General Information				
A1. * State:		A2. * District:		
A4. * Event Community:		A5. * Event Venue:		
A3. * Community:				
A6. * Event Date (DD/MM/YYYY):				
A7. * Community event type <i>(Please tick only one)</i>		<input type="checkbox"/> Community Dialogue <input type="checkbox"/> Community Drama <input type="checkbox"/> Market Event <input type="checkbox"/> Motorized Campaign <input type="checkbox"/> Townhall Meeting <input type="checkbox"/> Other <i>(Specify)</i> :		
A8. * Facilitated by: <i>(Please tick only one)</i>		<input type="checkbox"/> Health worker <input type="checkbox"/> Community Health Volunteer <input type="checkbox"/> Religious leader <input type="checkbox"/> Community mobilizer volunteer <input type="checkbox"/> Other Specify		
B. Outbreak Priority Behavior Topics Addressed during event				
HEALTH TOPICS ADDRESSED DURING COMMUNITY EVENT	1. 2. 3.			
C. Number of People Reached			Male	Female
Number of people reached with messages during community event <i>(count only participants that appear to be 10 years and above using a counting device)</i>				

D. Rumors heard during Community Event	
Did you hear any rumor on any concerns disease outbreak during this activity? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what rumor was reported during this event?	
Rumor 1	
Rumor 2	
Rumor 3	
Rumor 4	
Rumor 5	

\_\_\_\_\_  
Name and Designation

\_\_\_\_\_  
Mobile No

\_\_\_\_\_  
Signature/Date

# Phase 5: Community listening and monitoring

## STEP 2: Synthesize feedback and add relevant action to action plan

Document community feedback as community activities are conducted and share with the community committee.

Community committee address what they are able to, otherwise they share with the program team.

Prioritized actions from feedback are added to the community action plan.

**COMMUNITY ACTIVITY FORM 2**

**A. General Information**

A1. \* State: \_\_\_\_\_ A2. \* District: \_\_\_\_\_ A3. \* Community: \_\_\_\_\_  
 A4. \* Event Community: \_\_\_\_\_ A5. \* Event Venue: \_\_\_\_\_

**A6. \* Event Date:** (DD/MM/YYYY) \_\_\_\_\_

**A7. \* Community event type** (Please tick only one)

Community Dialogue     Community Drama  
 Market Event     Motorized Campaign  
 Townhall Meeting  
 Other (Specify): \_\_\_\_\_

**A8. \* Facilitated by:** (Please tick only one)

Health worker     Community Health Volunteer  
 Religious leader     Community mobilizer/volunteer  
 Other Specify: \_\_\_\_\_

**B. Outbreak/Emergency Behavior Topics Addressed during event**

**HEALTH TOPICS ADDRESSED DURING COMMUNITY EVENT**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**C. Number of People Reached**

(Number of people reached with messages during community event (count only participants that agreed to be 30 years and above using a household device)

Male	Female

**D. Rumors heard during Community Event**

Did you hear any rumor on any concerns disease outbreak during this activity?  Yes  No

If yes, what rumor was reported during this event?

Rumor 1: \_\_\_\_\_

Rumor 2: \_\_\_\_\_

Rumor 3: \_\_\_\_\_

Rumor 4: \_\_\_\_\_

Rumor 5: \_\_\_\_\_

Name and Designation: \_\_\_\_\_ Mobile No: \_\_\_\_\_ Signature/Date: \_\_\_\_\_



Action Plan Template							
Issue/behavior	Objectives	Root cause	Activities	Responsible	Resources	Timeline	Indicators of success
What is the prioritized issue to be addressed?	What do we want to achieve specifically?	What is getting in the way of achieving the objective?	What are we going to do to achieve the result?	Who is responsible for each activity? (Names)	What do we need to achieve the result?	When and how long is needed for each activity? (From X to X)	How will we know when we have achieved the result?
		Root cause 1:	Activity 1:				
			Activity 2:				
		Root cause	Activity 1:				



## Phase 5: Community listening and monitoring

### STEP 1: Conduct community listening

Examples of issues identified during community feedback/listening and added to the community action plans.

Issue Identified	Action taken
People do not know when or where to seek care if they are feeling sick.	Identify a person who can seek updated information on a weekly basis from ministry of health about symptoms for care seeking. And identify where people should go, distribute that to community members through a community dialogue (if safe to meet) or through announcements via loud speaker.
Circulating misinformation; people need reliable information from people they trust.	Identify a point person in the community, e.g. the health worker, who can conduct a community dialogue each week to address questions and concerns.
People fear going to markets because they worry that people who are sick will go shopping for food and other items.	Each household identifies a person who can go to the market for them if someone in their house is sick and they need to isolate / not go to the market.
Fear of infection coming into the community.	Position checkpoints at community entry points for symptom check (e.g. temperature, etc.) and distribute masks, if appropriate.
Lack of handwashing stations at community entry and other public community spaces.	Put handwashing stations at community entry and public community spaces.

## Phase 5: Community listening and monitoring

### STEP 3: Recurring Community Committee meetings held to monitor community feedback and progress of action plans

Community committee members who are monitoring the action plan meet regularly to update the status of action plan activities.

- As part of the governance structure of the community committee they should agree on how often they will meet, e.g. during an outbreak the groups often meet weekly
- During the meeting, members responsible for activities will report on the activity/task status, results of the activity and recommendations and next steps.
- Members can report on the risky issues or rumors that they are hearing, which the group can address or seek support from the program team.

## Phase 5: Community listening and monitoring

### STEP 4: Monitoring plan

This template can be used to monitor the action plan and can also be shared with the program team.

Activities	Indicators of success	Responsible	Timeline	Task status	Results obtained from activity	Recommendation and next steps
What are we going to do to achieve the result?	How will we know when we have achieved the result?	Who is responsible for each activity? (Names)	When and how long is needed for each activity? (From X to X)	Is the task completed, not started, in progress?	List the results of completing the task/activity.	List the recommendation and next steps.
Activity 1						
Activity 2						



# THANK YOU

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Please direct questions to  
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This module was developed based on Save the Children's Community Action Cycle with adaptations for disease outbreaks under the READY project, and includes activities from Goal Global and the Social Mobilization Action Consortium.