A Toolkit for Community Organizing

Power On!

WHITE RIBBON ALLIANCE
Acknowledgments

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For more information on White Ribbon Alliance, please visit [www.whiteribbonalliance.org](http://www.whiteribbonalliance.org).

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PART ONE
Overview

Community members know their lives and experiences best. Their voices and demands matter and can make a difference!

*Power On: A Toolkit for Community Organizing* explains how you can help your family, friends, neighbors, health and social service workers, and leaders come together and solve shared challenges facing the community, especially those affecting the health and rights of women and girls.

**Welcome to community organizing**

Do you have a passion for improving your own and your community’s health and rights? Are you eager to see change, but are not sure where to start? Are you motivated, compassionate, and energetic? Do you enjoy working with others? If so, this toolkit is for you!

As a community organizer, you can help your community:

- **Identify shared concerns** about health and social services.
- **Develop local solutions** to common challenges.
- **Advocate together** for change.
- **Learn about guaranteed rights** to health and other services.
- **Hold leaders accountable** for their promises.
- **Challenge discrimination** and make sure everyone is heard and valued.
- **Connect** with resources and opportunities.
- **Be inspired and use your power**!
How to use this toolkit

This toolkit has three parts and an annex with facilitation tips and practical tools to support your community organizing efforts. It is primarily focused on health and related rights. However, you can easily apply it to other sectors and social services.

PART ONE: Overview
Background information on the power of community voice and demand, the right to health and social services, and what communities are entitled to as part of government responsibilities and commitments.

PART TWO: Action Planning
Guidance on how to begin community organizing, including creating a Community Action Plan.

PART THREE: Community Organizing Activities
Suggestions to mobilize community members and connect with other organizers to make a change in your community and beyond.

ANNEXES
Guidance, tools, and templates for facilitating and organizing effective meetings and activities.

Power On: A Toolkit for Community Organizing is a companion piece to Power Up: White Ribbon Alliance’s Program Planning Guide. Power Up is a foundational resource that maps to White Ribbon Alliance’s Theory of Change and equips women and girls to lead and design their own programs. Power Up focuses on three mutually reinforcing areas:

- **Self-Care**
  When women and girls act to maintain and improve their and their family’s health and well-being.

- **Self-Advocacy**
  When women and girls express their needs and demand their rights.

- **Self-Organize**
  When women and girls join with their communities to address shared challenges.

This toolkit on community organizing provides comprehensive guidance on how to put “Self-Organize” into practice. While this toolkit encourages elevating the perspectives of women and girls, it takes a wider view and can be used for and by anyone who wants to bring about change in their community.
Before going further, a few important things to keep in mind to be a successful community organizer:

1. Throughout this guide, we will address “you” as we share information. But it is important to remember that community organizing is all about working with others. You cannot—and should not—do it alone.

2. Community members are the “experts” regarding their own lives and experiences. Their opinions matter as much as any organizer, health provider, aid worker, or policymaker.

3. Community members, especially women and girls, can and should speak for themselves. They do not need anyone to express their views for them. They simply require opportunities and openness.

4. Community organizing does not happen overnight. It requires both urgency and patience.

5. The status quo often remains the status quo by those in power saying when it is the “right” time to say something or when it is not “appropriate” to push for change. Change can and should be made whenever needed to improve people’s health and rights.

6. The information included on community organizing applies to many other topics impacting communities in addition to health and rights.

7. This toolkit is meant to be short and simple so it can be used by the greatest number of people. If you would like more information on community organizing for health and rights, contact White Ribbon Alliance in your area. See the last section of Part One: Overview for White Ribbon Alliance contact information.

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Health & Safety and Community Organizing

Community organizers have an important role and responsibility in supporting the community to safely organize. Understanding and mitigating potential risks is an important part of the planning process. Different regions are contending with different circumstances, including: health concerns, such as the Covid-19 pandemic; security concerns and limitations on public gatherings; retaliation for speaking out; and suppression of self-expression and identity. Community organizers should consider relevant training and preparation such as bystander invention, de-escalation strategies, and public health planning.
The power of community voice and demand

This toolkit, first and foremost, is inspired by the power of people to demand and create change.

Community members know what they need (and don’t need) when it comes to their health and other basic needs like food, housing, safety, and so on. They know what solutions are most likely to work. And when community members come together to prioritize issues and act, they are a powerful force for change—from making concrete improvements at a local facility to strengthening policies that will benefit the wider community.

As part of this, it is especially important for community organizers to mobilize and hear directly from a diverse range of women and girls. In many places, the perspectives of women and girls are routinely overlooked, ignored, or silenced. Women and girls often have limited representation at or are entirely excluded from decision-making tables. It is no wonder, then, that women and girls suffer disproportionately from poor health, rights abuses, and inequitable access to basic services. But it doesn’t have to be this way. Community organizers can help create vital opportunities and platforms to ensure women’s demands are collected and acted upon, so that women’s health and living conditions improve.

One such example is the What Women Want campaign organized by White Ribbon Alliance and implemented by more than 350 partner organizations. Launched in 2018, the campaign heard from more than a million women and girls worldwide about their top request, in their own words, for their reproductive and maternal health care. The huge number of responses was only made possible by thousands of community organizers and mobilizers who connected directly with women and girls in their countries.

Answers revealed that women’s and girls’ most basic needs are not being met. Across the board, women and girls want to be treated with kindness and respect when receiving care. They want clean health facilities, quality medicines and supplies, and more and better skilled health providers. The encouraging news is decision-makers at all levels are taking notice of women’s demands. They are making changes to give women and girls what they actually want and need—from the installation of running water and safely managed and working toilets to the recruitment of midwives, and more. Read more about the What Women Want campaign and how you can implement it or a similar initiative in your community in Part Three: Community Organizing Activities.
The right to health and the right to social services

This toolkit also recognizes that everyone has the right to health and the right to social services. These rights are grounded in internationally recognized human rights. Many countries have enshrined the right to health and the right to social services in their national laws.

The **right to health** means that health care facilities, services, and goods must be:

- **Available**: There must be adequate numbers of health care facilities, services, service providers, and goods that function well.
- **Accessible**: They must be affordable, physically accessible, and provided without discrimination.
- **Acceptable**: They must respond to people's diverse needs, circumstances, and cultures.
- **High quality**: They must be safe, effective, efficient, timely, and centered around people.

The **right to social services** encompasses many things, including but not limited to:

- A **standard of living adequate for the health and well-being of oneself and of one’s family**, including: food, clothing, housing, medical care, and necessary social services.
- **Right to security** in the event of: job loss, sickness, disability, widowhood, or old age.

These rights have two components: **freedoms and entitlements**

- **Freedoms** are about your own body. Freedoms include the right to make and control decisions about your health and to be free from coercion—meaning you cannot be compelled to do things against your will.
- **Entitlements** are about the services and support you get from your government. Entitlements include access to a health system and protections that give everyone an equal opportunity to be as healthy, safe, and financially stable as possible.

It is important to note that with freedoms and entitlements also come responsibilities, including the responsibility to take positive steps to protect your own health and rights and those of others.

For more information, see the World Health Organization’s **Human Rights and Health** resource and the **Universal Declaration of Human Rights**.
Health and rights charters

Your government may have adopted or created a **patient or health charter** and/or a **social services charter** that further explains the health and social services to which community members are entitled as well as their own responsibilities or obligations. Charters vary by country and sometimes by type of service or population group, however, they commonly detail your right to:

- **Accessible medical care, supplies, and equipment** in its many forms including promotive, preventative, treatment, rehabilitative, and comforting care.
- **Emergency care** regardless of ability to pay.
- **Seek and receive health and social services** without discrimination.
- **A safe environment for services**, including a clean water supply, sanitation, waste disposal, and security.
- **Be treated with respect and dignity** by an identifiable and skilled health worker.
- **Adequate and accurate counseling** so you can make an informed decision about your health and whether to consent or refuse services.
- **Freedom of movement** within and across borders and to seek asylum from prosecution.
- **Access to public service and to take part in governmental procedures** through freely chosen representatives.
- **Work in just and favorable conditions** and to protection against unemployment.
- Among others.

A copy of your government’s constitution, health, and/or social services charters are important organizing tools. They will help you raise your community’s awareness about its rights and which areas require community organizing to make sure the improvements you want to see are made.

If your country has a charter, it should be available at your local health or relevant social services office. Charters should also be posted at all health centers and government agencies that provide public services, but often are not. Your local White Ribbon Alliance may be able to help you locate charters and create community copies of simplified charters. Even better, as a community organizer, you can demand your local government create, provide copies, and ensure a charter is posted at all relevant facilities.

You now know more about your basic rights to health and social services. But what if it turns out that you and members of your community do not have access to affordable and quality services, supplies, or health workers? What do you do? Proceed to **Part Two: Action Planning** to find out.
Respectful Maternity Care Charter: Universal Rights of Mothers and Newborns

In some instances, your country may not have a charter, or it does not lay out all the rights you think are important. If so, you can advocate for your country to adopt, expand, or even create a new charter. Many advocates have created global charters that can be adapted and used by local organizers.

The Respectful Maternity Care (RMC) Charter is one example of a health service charter that was created to fill a gap. The Charter clearly spells out the rights of women, birthing persons, and newborns while receiving maternity care within a health care facility. It is based on widely accepted human rights instruments at the international and regional levels. The Charter states that:

1. Everyone has the right to freedom from harm and ill-treatment.
2. Everyone has the right to information, informed consent, and respect for their choices and preferences, including companion of choice during maternity care and refusal of medical procedures.
3. Everyone has the right to privacy and confidentiality.
4. Everyone is their own person from the moment of birth and has the right to be treated with dignity and respect.
5. Everyone has the right to equality, freedom from discrimination, and equitable care.
6. Everyone has the right to health care and to the highest attainable level of health.
7. Everyone has the right to liberty, autonomy, self-determination, and freedom from arbitrary detention.
8. Every child has the right to be with their parents or guardians.
9. Every child has the right to an identity and nationality from birth.
10. Everyone has the right to adequate nutrition and clean water.

To view the entire charter, visit: whiteribbonalliance.org/respectful-maternity-care-charter/

Contact the Respectful Maternity Care Council at info@whiteribbonalliance.org for support adapting the RMC Charter to your local context.
Connect with White Ribbon Alliance

White Ribbon Alliance’s vision is a world where all women and girls realize their right to quality health and well-being.

We believe the most powerful force for change is when people come together to take and demand action for their health and rights. We have supported community organizing and community organizers since our founding more than 20 years ago.

Whether you are just starting out as a community organizer or have been organizing within your community for a long time, we recommend connecting with White Ribbon Alliance at the local, national, or global levels.

Contact White Ribbon Alliance to be connected at the global or national level:
info@whiteribbonalliance.org
whiteribbonalliance.org
twitter.com/wraglobal
instagram.com/whiteribbonalliance
facebook.com/whiteribbonalliance

White Ribbon Alliance at the Country Level
There may be an Alliance that operates at the national level and/or works in a specific geography, like a district or city.

Suggest contacting to:
• Inform the Alliance of your activities, seek advice when needed, and partner where relevant.
• Share results.
• Connect what’s happening locally to regional and/or national efforts.

White Ribbon Alliance at the Global Level
Supports the global movement.

Suggest contacting to:
• Get tools on community organizing and advocacy.
• Share your work through global channels.
Community action planning

The heart of community organizing is bringing people together to create and implement a Community Action Plan for making change.

Your plan may include specific activities your community itself will do to improve their health and/or social services. It may also include activities where you will advocate to people in power to make sure your rights are fulfilled.

There are four key steps for community action planning.

1. Identify community groups and key partners or resources.
2. Identify current challenges or gaps in health rights and/or social services.
4. Implement and adjust your plan.
Identify community groups and key partners or resources

You may already be part of a formal community group or network and want to use the Power On Toolkit to strengthen your community organizing. But it is not a problem if you are not. Before getting started, find out if there are already any existing organizing groups in your community that you could join. Your local school, health, council, and/or religious leaders may be able to connect you. If you can’t find a community group that matches your exact interest or needs, start one! Either way, it is helpful to know who else is organizing on health and rights, especially pertaining to women and girls, so you can either coordinate or collaborate.

You will also want to visit with local health and/or political leaders, providers, and advocates to gain their support for your community organizing. In consultation with community members, you may even invite select people to attend a community action planning session as potential allies to offer knowledge on processes to influence decision-makers and/or point the community to resources. Always remember that community action planning is for the community. Too many other stakeholders in the room may drown out the perspectives of the community. It is essential that community members have the opportunity to first share their own experiences without others speaking on their behalf, assuming what health improvements people want to see, or shutting down their demands. There are many other activities described in more detail in Part Three: Community Organizing Activities that bring communities, decision-makers, and duty-bearers together to plan and act.

Identify and prioritize current challenges or gaps in health rights and/or social services

First, you will want to raise awareness among potential participants, including women and girls, about their rights to health and social services. Don’t forget about your government’s previous commitments and/or charters that you can use as your starting point. They will help guide you and your community to identify relevant gaps and challenges.

Then, focus on gathering input from as many different members of your community as you can. The best way to do this is to bring community representatives together to complete an Issue Matrix.

In advance of your meeting, prepare an issue matrix like the one below using large sheets of paper and markers, or drawing the matrix on a chalkboard. This will hang on the wall and be completed during the community action planning session. Annex 1: Helpful Facilitation Tips includes suggestions on gathering input from everyone and how to make decisions and prioritize them.
Instructions to complete the Issue Matrix

1. In Column A, list some of the major guarantees or rights in your government’s constitution, laws, or health and social services-related charters. You can’t solve all issues or problems at once. You will be more successful if you focus on a few. Try to limit yourself to no more than 3-4 guarantees. Your larger information collection efforts can help you limit and prioritize if you have a long list of guarantees or rights from which to choose. We suggest you create the list of health or social service guarantees in advance of your community action planning session to help explain them as part of the action planning session. However, leave room to add an option since community members may believe that a right that isn’t part of existing guarantees is more important.

2. During the community action planning meeting, community members should complete Column B by filling in specific gaps or challenges that infringe on each right or guarantee listed in Column A. The more precise and specific the gap, the easier it is to address. Again, it is better to focus on a few rather than include long lists. When someone raises a gap, see how many others it may affect to help identify the top three concerns for each right.

3. In Column C, communities choose between the gaps they listed in Column B. Ideally, your community group will decide to tackle no more than 3-4 priority issues at a time. You can always add more issues later if you are successful addressing your initial priorities.

**EXAMPLE | Issue Matrix (health)**

<table>
<thead>
<tr>
<th>A. Health guarantees and rights</th>
<th>B. Specific gap or challenge</th>
<th>C. Priority issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordable health services</td>
<td>Charged for services that should be free</td>
<td>✔ Charged for services that should be free</td>
</tr>
<tr>
<td>Accessible, acceptable, and timely care</td>
<td>Long wait times, Lack of disability-friendly equipment, No clean toilets at the health facility</td>
<td>✔ Lack of disability-friendly equipment</td>
</tr>
<tr>
<td>Competent, motivated, and respectful health workers</td>
<td>Not enough health workers, Rude behavior of health workers</td>
<td>✔ Not enough health workers</td>
</tr>
<tr>
<td>Availability of medicines and supplies</td>
<td>Lack of mama kits / safe delivery kits, Stockouts of family planning products</td>
<td>✔ Stockouts of family planning products</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
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</tbody>
</table>
### Issue Matrix

<table>
<thead>
<tr>
<th>A. Health guarantees and rights</th>
<th>B. Specific gap or challenge</th>
<th>C. Priority issue</th>
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</table>
Fill out a Community Action Plan

Now that the community has prioritized its challenges and frustrations in accessing and receiving health and social services, it is time to plan how to tackle them. For each prioritized issue, create an action plan template like the one below. Again, this will hang on the wall and be completed as a group during the community action planning session. We recommend that you work with the community to complete both the Issue Matrix and Community Action Plan as part of one meeting.

Instructions to complete the Community Action Plan

1. In Row 1, write down one of the issues listed in Column C from the Issue Matrix.

2. In Row 2, the community will list a solution to the challenging issue. Start by having the group brainstorm a few different ideas and then decide together which idea will have the most impact and is achievable.

If you try to tackle too many solutions at once, you and the community may become overwhelmed.

Solutions should be specific, concrete changes that can be experienced by the community. Sometimes community members can fully implement their desired solution themselves. For example, suppose that one challenge is the long distance to the facility. The community may decide to create a system where it bands together to organize transportation for women in labor. Alternatively, the community might decide the best solution is to repair a road, something that it cannot do alone, but will require persuading others to act.

3. Once you have a preferred solution, work with the community to complete Columns A through G. In Column A, list the big activities that will either turn your solution into a reality or persuade others to join the cause. In Column B, list specific steps or tasks to complete the big activity. For those solutions that require others to act, your activities will be advocacy activities. The next section Part Three: Community Organizing Activities provides a variety of suggestions and ideas.

For each big activity, the community will then decide:

- If there are specific people to whom they need to reach out and/or persuade. This is especially important for advocacy activities.
- The person or people responsible for coordinating the action step or task.
- The timeline by which the action step should be completed.
- Any needed resources.

4. Make copies of your action plan. This will be important for implementation and adjustment.
### Community Action Plan

<table>
<thead>
<tr>
<th>Issue (problem)</th>
<th>Solution</th>
</tr>
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<tbody>
<tr>
<td>Not enough health workers</td>
<td>Hire more frontline healthcare providers, including midwives</td>
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</table>

#### 3. Activity & Action Step

<table>
<thead>
<tr>
<th>A. Activity</th>
<th>B. Action Step</th>
<th>C. Target (person/people)</th>
<th>D. Responsible</th>
<th>E. Timeline</th>
<th>F. Resources</th>
<th>G. Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Petition calling on local councilors to hire more midwives</td>
<td>Collect 100 signatures on a petition</td>
<td>Community members</td>
<td>Sarah, Wanjiku, and Faith</td>
<td>January 2022</td>
<td>Paper</td>
<td>In progress</td>
</tr>
<tr>
<td>Present the petition at the upcoming council meeting</td>
<td>Chairperson of the district council</td>
<td>Sarah and Angela</td>
<td>February 2022</td>
<td>None</td>
<td>Not yet started</td>
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When identifying targets, be as specific as possible—people not institutions. **Who has the power to give you what you want? Who or what influences them?**
## Community Action Plan

1. **Issue (problem)**

2. **Solution**

<table>
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<th>B. Action Step</th>
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Implement and adjust your plan

Congratulations! Your **Community Action Plan** is completed. Now it is time to carry out the included activities.

**Remember:** The Community Action Plan is a way to strategically organize activities to reach a specific goal. It is not set in stone! If you learn of new information that changes one of your target decision-makers or discover a new barrier keeping facilities from improving services, you can and should always go back and update your plan.

In fact, we recommend your community routinely checks in together on the action plan. Set a time to reconvene with the community and review your action plan. Depending on the issue, solution, and community, this might be once a week, month, or season. When you reconvene, update **Column G** of the action plan by listing the status of the action step and any needed adjustments.

You may also revisit Columns A and B and add new activities and action steps if you are not making the progress you hoped within your desired timeframe. Do not be afraid to try something different! Once the community feels its problem has been reasonably solved, celebrate! Then pick a new issue to tackle and design a new action plan.
This section describes how to conduct different activities to help achieve desired changes identified in your Community Action Plan.

These activities should take place AFTER you have developed your action plan. Any new information, results, or commitments generated by these activities should then be added to your action plan.

The activities in this toolkit include:

1. Community Hearing
2. Listening Session
3. Community Scorecard
4. Surveys and Petitions
5. March
6. Community Journalism

Deciding on activities
Generally, you will want a mix of activities. But do not take on too many at once. Be strategic and ask yourself the following questions to help you choose.

- Will the activity get the attention of your targets?
- Do you have the resources needed to conduct the activity?
- Does the activity pose any risk to the community?

Across all activities, pay close attention to how you will reach, engage, and partner with women, girls, and other groups often excluded from power. You may need to adapt activities and ways of working to ensure people of different backgrounds and abilities can fully participate.

Finally, when planning activities, reach out to your local White Ribbon Alliance for additional guidance, tools, and mentoring. After your activity has concluded, don’t forget to share results with White Ribbon Alliance. White Ribbon Alliance can help share your outcomes and connect your work to broader policy improvements at the regional or national levels. See Part One: Overview for more information on contacting White Ribbon Alliance.
ACTIVITY 1
Community Hearing

What is a Community Hearing?
A Community Hearing is a meeting that brings together community members, duty-bearers, decision-makers, and other stakeholder groups to discuss health problems, advance shared solutions, and generate commitments for action.

Why is a Community Hearing important?
A Community Hearing provides a constructive space for community members, especially women and girls, to raise health-related or social service gaps and grievances in the presence of duty-bearers and decision-makers who can make change. It is an excellent forum to seek commitments from power holders to take forward solutions in your Community Action Plan.

How do you organize a Community Hearing?
There are four key steps to organizing a Community Hearing.
1. Prepare for the hearing by focusing on the topic and including relevant stakeholders.
2. Welcome participants and review entitlements.
3. Discuss problems and solutions.
4. Generate and record commitments.

HELPFUL HINT:
Community Hearings can take place anywhere that community members feel comfortable and are willing and able to gather. This could include a community center, a classroom, a house of worship, or a park.
Prepare for the hearing by focusing on the topic and including relevant stakeholders

The good news is that you have already done most of the work for this step! Your Community Hearing should focus on no more than 3-4 priority issues and solutions identified in your Community Action Plan from Part Two: Action Planning.

Invite people who attended your community action planning meeting and others with direct experience with these issues and solutions. This may include:

- Individual community members and leaders.
- Community groups.
- Health and social service providers.
- Duty-bearers and decision-makers, including those identified in Column C of your Community Action Plan.
- Community journalists and traditional journalists.

Make sure your invitation list includes diverse participants so the issues can be discussed from all viewpoints. Groups traditionally excluded from power should actively participate in the hearing and contribute to preparations. Ahead of the hearing, identify a skilled person to facilitate the meeting—this could be you or someone else—and a person to take notes. To support facilitation, refer to Annex 1: Helpful Facilitation Tips. To organize your notes, use the Community Hearing Minutes Template found in Annex 2.

Welcome participants and review entitlements

Now you are ready to begin the Community Hearing.

- Introduce yourself and explain why you have asked everyone to attend.
- Share the priority issues and solutions from your Community Action Plan.
- Be clear on what you hope will result from the hearing. This might include informing the community at large and generating commitments from duty-bearers and decision-makers to act.
- Ask everyone to briefly introduce themselves and say what they would like to get out of the hearing. Circulate a sign-in sheet to capture participants’ names and contact information.
- After introductions, consider reviewing your government’s health and social service charters. This helps remind community members of their rights and responsibilities, and duty-bearers of their obligation to fulfill commitments and deliver services. Refer to Part One: Overview for more information about charters.
Discuss problems and solutions

After welcoming everyone and providing background information, it is time to turn to the heart of the hearing: dialogue.

- Ensure there is an open discussion on the focus topic and that all participants have an opportunity to share their ideas. To maximize participation, use a few different approaches.
  - You could facilitate a large group discussion or have everyone break into small groups and present back to the larger group.
  - You could also collect everyone’s ideas by having people write down or draw their concerns on a piece of paper and then read or explain them out loud.

- This is the time for community members to share evidence of the problem and the community’s priority solutions.
  - Ask community members to share personal testimonies, pictures, or videos that demonstrate the issue’s human impact.
  - Community members can also present survey results or signed petitions that show community demand for specific solutions. The goal of sharing community evidence is to build your case and compel duty-bearers and decision-makers in attendance to act!

Refer to Annex 1: Helpful Facilitation Tips for ideas on how to generate discussion and the sharing of ideas for people with different abilities and styles.

Generate and record commitments

After all participants have expressed their views, you should summarize the “asks” or requests being made of the duty-bearers and decision-makers. Allow them to respond and make a commitment. If possible, take photographs or record a video of the commitments being made. At a minimum, have the note-taker and any present Community Journalists (see Activity 6) write down commitments using the Community Hearing Minutes Template (see Annex 2). In advance of the meeting, prepare the template using large sheets of paper and markers and hang it on the wall, or use an available chalkboard, so everyone can see what has been captured. Thank the duty-bearers for their commitments and note how community members plan to follow up to ensure accountability for implementation.

HELPFUL HINTS:
Reach out to community members before the Community Hearing so they can feel prepared to share their stories and documentation. During these pre-hearing discussions, ask three to five community members if they are comfortable going first. Having a few people lined up with stories in advance can get the conversation going and help others feel comfortable coming forward.
ACTIVITY 2
Listening Session

What is a Listening Session?
A Listening Session is similar to a community hearing, however, these sessions focus on giving the floor to those often not heard—specifically girls and women—while duty-bearers and decision-makers role is to listen and deepen their understanding of the lived experiences and perspectives of community members. Only after community members have shared their views are all invited to participate in collaborative discussions on actions to prioritize and address community requests.

Why is a Listening Session important?
Listening Sessions put forth community members as the “experts” in the room and create ample space for community demands to be heard directly by duty-bearers and decision-makers. These meetings can be particularly effective for women and girls to raise their concerns and solutions, as their voices are not always listened to, especially by people in power. Listening Sessions also show policymakers the benefits of community engagement and how it can advance priorities through real-time feedback on what is and is not working well in health facilities or with social services. Finally, they allow for community members to share more specific and nuanced insights on general topics like family planning, disability accessibility, or access to jobs.

How do you organize a Listening Session?
There are four key steps to organizing and holding a successful Listening Session:
1. Choose your topic and invite relevant stakeholders.
2. Conduct a preparation meeting and run-through.
3. Open the Listening Session and the floor to community members to speak.
4. Create dialogue among all participants and generate and record commitments.
Choose your topic and invite relevant stakeholders

Choose one of your priority issues identified in your Community Action Plan from Part Two: Action Planning to focus on during the Listening Session.

Invite individuals who attended your community action planning meeting, individuals with direct experience on focus issues, and decision-makers who can act on recommendations and solutions that arise during the Listening Session. Participation is recommended to range from 10-30 people, depending on available resources. Participants may include:

- A facilitator.
- Individual community members and leaders.
- Community groups.
- Service providers.
- Duty-bearers and decision-makers, including those identified in Column C of your Community Action Plan.
- Community journalists and traditional journalists.

Make sure your invitation list includes diverse participants so the issues can be discussed from all viewpoints. Groups traditionally excluded from power should actively participate in the Listening Session and contribute to preparations. Ask target decision-makers if they will officially host the Listening Session. Be sure to identify a skilled facilitator, ideally a person who has the trust of both the community and the government. To support facilitation, refer to Annex 1: Helpful Facilitation Tips. Additionally, identify a note-taker who can use the Listening Session Minutes Template found in Annex 2.

Conduct a preparation meeting

Before the official Listening Session takes place, organize a meeting with community members beforehand so you can identify individuals who want to and feel comfortable sharing their stories on the focus topic. These may be community members who participated in the Community Action Plan development/and or who are directly affected by the issue.

- Welcome everyone to the pre-meeting and explain why this meeting is taking place. Describe what a Listening Session is and what community members can expect during the session.
- Share background information on the topic and ground rules for making the preparation meeting a safe and respectful space.
Ask attendees to share their experiences, demands, and solutions on the given topic and help them strengthen their presentations by focusing on 1-2 of their most relevant experiences.

Confirm attendees feel comfortable sharing their stories, and potentially others’ experiences, during the official Listening Session, making clear who else will be in attendance and doing the “listening.”

Thank everyone for attending, and ensure the identified speakers are available and feel prepared to provide their testimonies during the Listening Session.

Open the Listening Session and the floor to community members to speak

Now you are prepared and ready to hold the Listening Session:

- Introduce yourself and explain why you have asked everyone to attend.
- Explain the spirit of the Listening Session and how it provides a unique opportunity for duty-bearers and decision-makers to hear and act on the wisdom of the community.
- Share a brief background on the priority issue from your Community Action Plan.
- Be clear on what you hope will result from the Listening Session.
- Ask everyone to introduce themselves and say what they would like to achieve from the Listening Session.

After welcoming everyone and providing background information, it is time for community members to share and for decision-makers to listen.

- Invite community members to share their personal experiences and solutions.
- Invite duty-bearers, decision-makers, and other stakeholders to actively listen to the personal testimonies. This includes acknowledging what has been said and asking clarifying questions.
- Record main demands and solutions in the Listening Session Minutes Template (see Annex 2). It is encouraged to have a copy hanging on the wall or drawn on a chalkboard.

HELPFUL HINT:
Make clear that testimonies during the Listening Session may be shared in front of male and female decision-makers. If some subjects make participants uncomfortable to share in front of strangers (like family planning, abortion, menstrual health, etc.), ask a spokesperson to anonymously summarize their testimonies and share on behalf of the group.
Create dialogue among all participants and generate and record commitments

When the community members have finished sharing their personal testimonies and recommendations, invite all participants to engage in discussion and agree on solutions. The goal of these discussions is to be collaborative, with individuals from all backgrounds working together to identify actionable and realistic solutions.

- To get the conversation flowing, the facilitator can begin with a question or open-ended prompt directed to the duty-bearers and decision-makers, such as:
  - “Who would like to share their reflections based on what you heard?”
  - “What challenge resonates with you the most?”
  - “What were you most surprised or shocked to learn?”
  - “Based on your role, what are one or two actions you can take to address these demands?”

- If you are working in a large group, it may be beneficial to break out into smaller groups and have a targeted conversation about the demands and solutions raised, and steps duty-bearers and decision-makers will take to address them. Ask partners or volunteers to facilitate, take notes, and report back to the bigger group.

- Close the meeting by summarizing the key challenges and solutions faced by community members, highlighting commitments from decision-makers, and outlining key next steps. If possible, take photos or a video of the commitments being made. Thank everyone for participating in the Listening Session and share how their commitments will be recorded and how community members plan to follow up to ensure commitments are acted upon.

- Record reactions and commitments in the Listening Session Minutes Template (see Annex 2).
ACTIVITY 3
Community Scorecard

What is a Community Scorecard?
A Community Scorecard is a tool to assess the quality and availability of entitlements, services, and supplies at facilities providing health and social services. A scorecard is completed regularly, such as every six months or one year, to document any changes in health and service delivery.

Why is a Community Scorecard important?
A Community Scorecard gives community members a constructive way to engage with health workers and social service providers to identify or confirm gaps in service delivery. Scorecards can be used to monitor progress over time on service delivery improvements and to provide additional evidence of health and rights issues located in your Community Action Plan. Scorecards will often be presented at Community Hearings.

How do you use a Community Scorecard?
There are four key steps to using a Community Scorecard once it is created.

1. Identify facilities and create your scoring team.
2. Assess facilities.
3. Complete scorecard.
4. Use findings.

Create your scorecard
Fortunately, you do not have to start from scratch to create a scorecard. Draw from the Community Scorecard Template below to meet your needs.
Instructions to create a Community Scorecard

First, refer to the issues that your community prioritized in its Community Action Plan. These are the issues that your scorecard will assess.

1. In Column A of the Community Scorecard Template below, list your priority issues. We have prepopulated it with issues from the example Community Action Plan shared in Part One to illustrate how they work together.

2. In Column B, write 1-3 questions that your assessment team will ask staff and patients/service users at each facility to learn more about each issue. The best questions do not have a simple yes or no answer. Questions should also be framed neutrally. Refer to the Community Scorecard Template for examples of questions you can ask to score your issue. You can use these questions directly, edit them, or replace them with your own questions.

3. Leave Columns C, D, and E blank for now. These columns will be filled out when you use your scorecard.

---

**EXAMPLE | Community Scorecard Template (for health facilities)**

<table>
<thead>
<tr>
<th>Date of assessment:</th>
<th>Facility:</th>
<th>Name of person conducting assessment:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A. Issue being scored</th>
<th>B. Questions to ask</th>
<th>C. Names and roles of persons being interviewed and their responses</th>
<th>D. Responses and observations</th>
<th>E. Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordable health services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charged for services that should be free</td>
<td>What services do patients currently pay for and why?</td>
<td></td>
<td></td>
<td>1 = very bad</td>
</tr>
<tr>
<td>Accessible, acceptable, and timely care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability-friendly equipment</td>
<td>What special accommodations does this facility have for persons with disabilities?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**EXAMPLE | Community Scorecard Template (for health facilities)**

<table>
<thead>
<tr>
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<th>Name of person conducting assessment:</th>
</tr>
</thead>
</table>

<table>
<thead>
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<th><strong>A. Issue being scored</strong></th>
<th><strong>B. Questions to ask</strong></th>
<th><strong>C. Names and roles of persons being interviewed and their responses</strong></th>
<th><strong>D. Responses and observations</strong></th>
<th><strong>E. Score</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Competent, motivated, and respectful health workers</td>
<td>How many health workers are at this facility?</td>
<td></td>
<td></td>
<td>1 = very bad</td>
</tr>
<tr>
<td>Numbers of health workers</td>
<td>How many workers by cadre?</td>
<td></td>
<td></td>
<td>2 = poor</td>
</tr>
<tr>
<td></td>
<td>What time of day do these health care providers work?</td>
<td></td>
<td></td>
<td>3 = okay</td>
</tr>
<tr>
<td></td>
<td>When are health care workers unavailable and why?</td>
<td></td>
<td></td>
<td>4 = good</td>
</tr>
<tr>
<td></td>
<td>How long does someone usually wait for health services (little time, some time, lots of time) and why?</td>
<td></td>
<td></td>
<td>5 = very good</td>
</tr>
</tbody>
</table>

Availability of medicines and supplies

<table>
<thead>
<tr>
<th><strong>Availability of family planning methods</strong></th>
<th><strong>Which family planning methods are currently available at this facility?</strong></th>
<th><strong>Which supplies are out of stock and why?</strong></th>
</tr>
</thead>
</table>
Identify facilities and create your teams

It is now time to identify the health facilities or other service points to be assessed and create the teams that will do the assessment.

- Choose facilities that are most used by the community members you are working with. There is no set number of facilities, but 3-5 may feel manageable in size and give you enough evidence to identify any trends. The numbers of health staff and patients listed below—while rough guides—will help ensure different perspectives are collected while hopefully feeling manageable to all involved.

- Identify the number of health staff and patients to interview. It is not practical or even feasible to interview all health staff and all patients at a facility on a given day. You must interview a smaller subset of individuals.
  - For health staff, try to speak with at least 3-5 staff on shift, depending on the size of the facility, including the person overseeing the facility.
  - For patients, aim to speak to about 10-15 patients per facility. Select patients at random to help address any inherent bias by the assessment team. One way to do this, for a facility that serves about 100-150 people in a day, is to approach every 10th patient leaving the facility for an interview.

- Confirm the date and time when each facility will be assessed with their staff.

- Confirm with the facility whether photography, videography, and audiotape are allowed and any rules that must be followed for patient privacy.

- Create a diverse team of 4-6 people to assess the facilities. Ideally, the team should include representation from the community, including women and girls, groups often excluded from power, health officers, and local officials.

- Identify a group leader and familiarize them with the scorecard. The group leader should then orient their team on the scorecard and its use, organize the logistics of the assessment, and moderate discussion between the group and facility staff during the assessment.

HELPFUL HINT:
You may need to explore different ways to gain entry to a health facility to use your Community Scorecard. One option is to work through your local health committee. Another option is to use personal, trusted relationships with health workers. When health workers see a scorecard as a way to improve their own work environment, they are often willing—and excited—to collaborate.
**Assess facilities**

Now the team is ready to assess the selected health facilities. Before starting out, make sure each person on the team has a copy of the scorecard and a pencil or pen to take notes. The team leader should:

- Introduce the group.
- Explain the purpose of the scorecard.
- Describe how results will be used.
- Seek permission to record the interview and/or take pictures, and follow any rules required to protect privacy.

The team should then proceed with collecting information. You should do this in two ways:

- **Ask questions of health facility staff and patients.** Come prepared to ask at least one question about each issue. This will create an informative discussion. Be sure to listen to responses and ask follow-up questions for clarification or more detail. Each team member should write down the key things they heard in **Column D** of their copy of the scorecard.

- **Document your observations.** Your team’s observations are another source of valuable information. This includes things you see, hear, or feel. Using disability-friendly equipment as an example, a team might witness that there are no proper places to sit for people with physical disabilities. Each team member should write their observations in **Column D** or otherwise record them with still photography, videography, or audio recordings, as permitted.

**Complete scorecard and use findings**

After the team has completed its facility assessment, it should meet to fill out one single Community Scorecard that reflects the full team’s input. For a blank [Community Scorecard Template](#), see Annex 2.
Instructions to complete your Community Scorecard

1. In Column D of Final Community Scorecard, team members should summarize the responses of staff and patients, noting where there may be differences and why. Team members should also record their final observations after discussing and agreeing as a group, noting both the main challenges and positive things they heard, saw, or felt.

2. In Column E, team members should record a consensus “score” for each issue, taking into account their interviews and observations, and include a few sentences explaining their score. Use the scale from 1 to 5, where 1 = very poor and 5 = very good. For tips on how to facilitate consensus, see Annex 1: Helpful Facilitation Tips.

**Example** | Final Community Scorecard (Health)

<table>
<thead>
<tr>
<th>Date of assessment: 20 July 2021</th>
<th>Facility: Primary Health Care Center IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person conducting assessment: Aisha</td>
<td></td>
</tr>
<tr>
<td>A. Issue being scored</td>
<td>B. Questions to ask</td>
</tr>
<tr>
<td>Affordable health services</td>
<td>Charged for services that should be free</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

See blank worksheet on page 59.
### Final Community Scorecard (Health)

**Date of assessment:** 20 July 2021

**Facility:** Primary Health Care Center IV

**Name of person conducting assessment:** Aisha

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<tr>
<th>A. Issue being scored</th>
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<th>D. Responses and observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accessible, acceptable, and timely care</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Disability-friendly equipment | What special accommodations does this facility have for persons with disabilities? | Personnel: 1 medical officer-in-charge, 2 nurse midwives, 1 community health worker
Patients: Fatima, Grace, Mercy, Chioma, Mariam, Robert, Victor, Ruth, Idris, Ayo, Halima | RESPONSES
Health personnel: The facility has some accommodations for people with physical disabilities. There is a ramp at the entrance and one wheelchair available.

Patients: One of the patients interviewed has a son who is deaf. The patient said that she has never encountered a staff who knows how to sign when accompanying her son to his medical visits.

OBSERVATIONS
The scoring team confirmed the ramp and availability of the wheelchair, but the wheels appeared to be broken. The team did not observe any special accommodations for blind or deaf patients.

| E. Score | 1 = very bad
| 2 = poor
| 3 = okay
| 4 = good
| 5 = very good |

2

Some attempts have been made to accommodate patients with physical disabilities, but there was limited evidence of accommodations for those with other types of disabilities.
**EXAMPLE | Final Community Scorecard (Health)**

<table>
<thead>
<tr>
<th>Date of assessment: 20 July 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Facility:</strong> Primary Health Care Center IV</td>
</tr>
<tr>
<td><strong>Name of person conducting assessment:</strong> Aisha</td>
</tr>
</tbody>
</table>

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Competent, motivated, and respectful health workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Numbers of health workers</td>
<td>How many health workers are at this facility? How many workers by cadre?</td>
<td>Health personnel: 1 medical officer-in-charge, 2 nurse midwives, 1 community health worker</td>
<td><strong>RESPONSES</strong></td>
</tr>
<tr>
<td></td>
<td>What time of day do these health care providers work?</td>
<td>Patients: Fatima, Grace, Mercy, Chioma, Mariam, Robert, Victor, Ruth, Idris, Ayo, Halima</td>
<td>Health personnel: The facility complies with the minimum standard for health personnel and support staff (23 positions). This includes 1 medical officer, 4 nurses/midwives, 3 community health workers, 1 laboratory technician, and so on (Medical officer-in-charge provided a list of all employed staff by cadre).</td>
</tr>
<tr>
<td></td>
<td>When are health care workers unavailable and why?</td>
<td></td>
<td>Patients: The patients are not aware of how many health workers are supposed to be at the facility. They say health workers were unavailable some of the time.</td>
</tr>
<tr>
<td></td>
<td>How long does someone usually wait for health services (little time, some time, lots of time) and why?</td>
<td></td>
<td>OBSERVATIONS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>The scoring team saw or met 17 staff at the facility on its tour of the premise. It was unclear where the other 6 were at the time.</td>
</tr>
</tbody>
</table>

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Example continued on next page...
Congratulations! You and the team have completed a scorecard. After scorecards are completed for each of the facilities, you should all come back together to review and compare findings across facilities. A note-taker should record common challenges and opportunities across the different health facilities. Everyone should then discuss how the scorecards will be used. Some possibilities include:

- Update your **Community Action Plan** with additional evidence of gaps or new insights for activities and action steps.
- Create copies of your **Community Scorecard** to distribute at a **Community Hearing** or **March**.
- Use preliminary findings to monitor service delivery improvements.

### Example | Final Community Scorecard (Health)

| Date of assessment: 20 July 2021 |
| Facility: Primary Health Care Center IV |
| Name of person conducting assessment: Aisha |

<table>
<thead>
<tr>
<th>A. Issue being scored</th>
<th>B. Questions to ask</th>
<th>C. Names and roles of persons being interviewed and their responses</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Availability of medicines and supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Which family planning methods are currently available at this facility?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Which supplies are out of stock and why?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health personnel: 1 medical officer-in-charge, 2 nurse midwives, 1 community health worker</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients: Fatima, Grace, Marcia, Chioma, Mariam, Robert, Victor, Ruth, Idris, Ayo, Halima</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESPONSES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health personnel: The facility offers injectables, intrauterine devices (IUDs), implants, pills, male condoms, and female and male sterilization. However, at any given time, there are stockouts of two or three methods. Today the facility is stocked out of IUDs, implants, and pills. This is because of persistent shipment delays due to poor road conditions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients: Three patients are at the facility for a family planning visit. They were offered only injectables.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OBSERVATIONS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The scoring team felt that there is a genuine desire to provide a range of methods, but stockouts are common.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E. Score  
1 = very bad  
2 = poor  
3 = okay  
4 = good  
5 = very good  

**Example continued...**
ACTIVITY 4

Surveys and Petitions

What are surveys and petitions?
A survey is a questionnaire given to community members to seek their views on a topic related to health and/or social services. Surveys are used to provide additional evidence of your broader community’s most urgent issues and desired solutions included in your Community Action Plan.

A petition is a written request to a duty-bearer or decision-maker, supported by the signatures of many people, to take an action or make a change. With a petition, individuals lend their support to a solution that has already been identified in your Community Action Plan.

Why are surveys and petitions important?
Surveys and petitions are used to demonstrate widespread demand from your community for improved health and/or social services. They can be strategic tools for getting duty-bearers and decision-makers to act in a way you want. Many powerholders are persuaded by large numbers of community members asking for the same thing with “one voice.”

How to use a survey or petition
There are five key steps to use a survey or petition.
1. Identify your audiences.
2. Write your survey or petition.
3. Format your survey or petition.
4. Create a plan and collect responses.
5. Analyze and share results.
Identify your audiences

Before you start writing your survey or petition, think about who you want to complete it. This audience should be directly affected by the problems and solutions identified in your Community Action Plan. Some examples may include:

- Women and girls
- Adolescents and young people
- Refugees
- Persons with disabilities

For petitions, in addition to determining who you want to sign your petition, you also need to identify the duty-bearers or decision-makers that you will approach to request change. Examples may include:

- County or district health officers
- Your local member of parliament
- Your local council chairperson
- The head administrator of the nearest hospital

Set a goal for how many surveys or signatures you want to collect. For petitions specifically, set a high number that you feel you can reasonably achieve. After all, the whole point of a petition is to show duty-bearers and decision-makers that many community members support you!

Write your survey or petition

After you have identified who you want to reach, draft your survey or petition. Follow these simple steps:

For SURVEYS:

- **Identify one key survey question.** Examples may include:
  - What is your most important health service request?
  - What does quality health care look like to you?
  - What is your most urgent basic need?
- **Decide what information you want to collect about the people who take your survey.** This might include:
  - Name
  - Age
  - Sub-county or village

Important considerations for your survey question and response options

With your survey question, you can either ask an open-ended question or you can provide them with a list of answers from which to choose.

- If you ask an open-ended question, you give people a chance to define their own priorities. However, analyzing unique responses can be difficult and time consuming.
- If you have people select an answer from a pre-determined list, it will be easy and quick to analyze the results. However, you may miss out on specific concerns and priorities held by community members. If you have a pre-determined list, consider including an “other” option, where people can make a different suggestion.
For PETITIONS:

• **Develop a brief background statement that summarizes the issue.** Use language describing the issue from your Community Action Plan.

  **Example:** Petition Background: Unplanned pregnancy is a challenge for women and adolescent girls in our county. Many women want to prevent pregnancy or space their births. But when they visit the nearest health facility, women often find stockouts of family planning methods. If family planning is available, usually the options are limited to just condoms and pills.

• **Write the action you are petitioning for.** Be sure to name the target decision-makers

  **Example:** We, the undersigned, respectfully urge health facility administrators, the county Ministry of Health, and the county Ministry of Finance to strengthen funding and supply chains to ensure a range of family planning methods are consistently available at all primary health facilities in our county.

• **Decide what information you want to collect about the people who sign your petition.** At a minimum, petitions include a person’s name. Age and address are optional, as are other factors such as identified gender, education, and employment status, which may be useful to know.

Format your survey or petition

Now that you have written your survey or petition, format it in a way that is accessible to your target audiences. Here’s how:

• **Make sure the survey uses clear and simple language.** This will make it easier to translate into local languages. It will also make it easier to understand for people who have difficulty reading or filling out forms.

• **Select a format.** Your survey can be digital or paper-based. Digital surveys can be on the internet or a mobile phone. For a digital survey, consider free platforms such as WhatsApp or Google Forms. For a digital petition, free platforms include www.change.org or www.ipetitions.com. Remember, make sure that the format you choose is easy for your target audience to access and use.

Below are sample templates with illustrative responses for paper-based surveys and petitions. Blank Survey and Petition Templates can be found in Annex 2.

**INNOVATION IN ACTION:**

**What Women Want Digital**

White Ribbon Alliance is launching the What Women Want Digital tool to collect survey responses through the mobile phone app WhatsApp. The technology will allow women and girls to routinely share their open-ended preferences and wishes for health and rights, and other topics of interest through their or a mobilizer’s smartphone.

What Women Want Digital will analyze answers in real-time. Participating women and girls, as well as other stakeholders, will learn immediately what is being collectively demanded at any moment, in any given place. What Women Want Digital will also connect women and girls to each other so they can collectively organize in their community, and with campaigners who can help elevate their demands to national, regional, and global leaders while connecting them with opportunities and resources to advocate. The tool will also inform women about their impact and highlight changes resulting from their demands. For questions or updates on What Women Want Digital, contact info@whiteribbonalliance.org
EXAMPLE | Survey Template

| Surname: Chopra | Sub-country: Uttar Pradesh | Age: 20 |
| Given name: Vidya | Country: India | Consent to participate obtained (tick off): ✓ |

Survey question: What is your most urgent basic need?

Answer: Adequate nutrition

EXAMPLE | Petition Template

Petition summary and background
Unplanned pregnancy is a challenge for women and adolescent girls in our county. Many women want to prevent pregnancy or space their births. But when they visit the nearest health facility, women often find stockouts of family planning methods. If family planning is available, usually the options are limited to just condoms and pills.

Action petitioned for:
We, the undersigned, respectfully urge health facility administrators, the county Ministry of Health, and the county Ministry of Finance to strengthen funding and supply chains to ensure a range of family planning methods are consistently available at all primary health facilities in our county.

<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Signature</th>
<th>Address (can be district or county)</th>
<th>Age</th>
<th>Comment</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rose</td>
<td>Rose</td>
<td>Narok</td>
<td>18</td>
<td>In addition to contraceptives, I want providers who won’t judge my choices</td>
<td>5 January 2021</td>
</tr>
<tr>
<td>Matilda</td>
<td>Narok</td>
<td>Narok</td>
<td>25</td>
<td>None</td>
<td>5 January 2021</td>
</tr>
</tbody>
</table>
Create a plan to collect responses

The next step is to create and implement a plan to collect responses. Here are several important things to keep in mind:

- **Who will collect survey responses or petition signatures.** If you are using a paper-based survey or petition, you will need a team of volunteers to go house to house or to set up in a public place where people gather, such as a market. You’ll also need to train your volunteers on how to collect responses properly, including how to get informed consent (see below).

- **Where will you collect responses.** Identify the specific geographic areas where your target audiences live or gather and how best to connect with them. Consider partnering with other organizations or networks to expand the reach of your survey or petition.

- **How to ensure informed consent.** It is important that any person taking your survey or signing your petition understands exactly what they are being asked to do, and gives their consent to participate. If you are using paper, the team collecting responses must document verbal or written consent. If you are using a digital approach, include a tick box for the person taking the survey or petition to provide their consent to participate.

- **How you will store responses.** Whether you use a paper or a digital approach, have a plan for how surveys and petition signatures will be collected from volunteers and stored for safekeeping.

Analyze and share results

With responses in hand, it is time to make sense of what you found. The process is slightly different for surveys versus petitions.

**For SURVEYS:**

- If you ask an open-ended question: Read through all the responses. It is possible responses may vary widely! If this is the case, identify the bigger topics or themes that come up repeatedly. For example, say your survey question is: “What is your most important health service request?” And you see responses like check-ups during pregnancy, ultrasound scans, folic acid, and blood pressure screening. All of these responses have to do with antenatal care services, so you would group them into the broader topic of “antenatal care.”

- If you provided people with a list of answers: Simply tally how many people selected each answer. Then, determine the answers that received the greatest number of responses.

**HELPFUL HINT:** It can be powerful to include the perspectives and voices of adolescents (minors) on issues that affect them. If you want to include minors, consult with your local White Ribbon Alliance about whether collecting information from minors is permitted, and what permission or consent you may need to secure.
For PETITIONS:

Analyzing a petition is easy! Simply tally the total number of signatures. Depending on your advocacy issue and the personal information you collected on the petition form, you may want to break down the number of signatures by age or location. Going back to the example petition on increasing access to family planning methods, it could be powerful to break down how many adolescent girls and young women demanded contraception in comparison to women of all ages.

It is now time to share your findings! For a survey, we recommend that you first go back to community members who participated in developing your Community Action Plan to discuss and verify the findings. For both surveys and petitions, it will be most persuasive to present findings and signatures directly to the target audiences in your action plan. Consider presenting during a Community Hearing or March. These are both great opportunities to publicly demonstrate demand for health and rights issues, especially if media is present.
The power and potential of a survey: White Ribbon Alliance’s *What Women Want* campaign

The *What Women Want* campaign provides an excellent example of the power of a survey—and of women’s and girls’ demands—to create meaningful change for the health and rights of community members. *What Women Want* asked women and girls one simple, open-ended question: *What is your one request for quality reproductive and maternal health services?* This allowed women and girls to set their own agenda, rather than being presented with a list of pre-determined options.

All told, more than one million women and girls from 114 countries responded. The top five global requests were*:

1. Increased, full-functioning, and close health facilities, including water, sanitation, and hygiene (WASH)
2. Increased, competent, and better supported health care workers
3. Respectful and dignified care
4. Free and affordable services and supplies
5. Medicines and supplies

While the global mobilization of women and girls is impressive, the biggest impact from the *What Women Want* campaign has been at the country and community level. White Ribbon Alliance affiliated Alliances in the countries with the greatest numbers of surveys created a *What Women Want* Advocacy Agenda, which take top asks and turns them into key action steps to bring about changes in services and programs that women will want and use. Using these agendas, Alliances have since achieved numerous policy changes that advance women’s demands, from adoption of the *Respectful Maternity Care Charter: Universal Rights of Mothers and Newborns* to increased budget allocations for family planning. Change has also come to the community. For example, in Niger State, Nigeria, where WASH was the top request, government funding for primary health care (PHC) has been channeled to provide running water in at least 10 PHC facilities. In Malawi, where privacy and confidentiality was a major request, a midwife in Ntchisi district used *What Women Want* demands to successfully advocate for installation of privacy curtains in her district hospital’s labor wards. In this way, a survey can be an impressive tool for creating change from a local facility all the way to the halls of power.

To see *What Women Want* top demands and Advocacy Agendas, visit: whiteribbonalliance.org/whatwomenwant

*In early 2021, White Ribbon Alliance launched a *What Women Want Dashboard*, a public repository for women’s demands. The dashboard allows anyone, anywhere to search what women want in their own words. It also automatically codes new demands that are added. To make the dashboard easy to use and update regularly, the original 60 codes used in 2019 to determine the top global requests were consolidated into 36 codes. Combining codes slightly affected the order and placement of the original top five global requests. However, the main story behind women’s top requests holds true. Women want to be cared for in a clean facility by the hands of a kind, respectful, and capable provider, without facing financial burden for services and supplies.*
ACTIVITY 5
March

What is a March?
A March is a public action taken by a large group of people who want to bring attention to a specific cause or concern. Marches consist of people walking or riding together on a planned route through a community. Many marches begin or end with a rally to hear speakers talk about an issue and demand change. However, rallies can occur separately from a march.

Why is a March important?
Marches give community members a highly visible way to show support for a specific cause. Marches provide an opportunity for people to unite on an issue, express their grievances, and publicly share the changes they want to see. Marches are also an effective platform to encourage duty-bearers and decision-makers to commit to taking action.

How do you organize a March?
There are four key steps to organizing a march.
1. Select a date and theme.
2. Recruit speakers, participants, and media.
3. Confirm logistics.
4. Conduct your march and rally.

Select a date and theme
While marches can seem like they come together spontaneously, there is a good amount of planning involved! Start by picking a date. Usually, this happens in one of two ways:
• **Plan ahead:** Pick a date in the future that has a connection to your specific cause or concern. For example, “special days” like International Women’s Day, which occurs every year on March 8th, are great moments to mobilize your community because the public is already paying attention to your issue.

• **Respond quickly:** When an unacceptable health rights violation happens, work with community leaders to pick the soonest possible date to organize a march. For example, say a pregnant woman in labor traveled 10km on foot to the closest health facility, only to find that there was no on-duty midwife or doctor, and both mother and baby passed away. Your community may decide to organize a march that weekend to express outrage and demand for more health workers or transportation options for pregnant women.

Next, confirm the theme of your march. It should come directly from your **Community Action Plan**. For example, if your community is being charged for services that should be free, and you want to show decision-makers that the public knows it should be receiving free services but isn’t, “We want our free health care!” would make for a strong theme. If you are a person with a disability and want disability-friendly access in social service offices, gather others who want and support the theme of “Accessibility for Me!” to join your march. Develop slogans, banners, signs, chants, messages, and talking points based on your theme that you can share with participants, speakers, and media.

**Recruit speakers, participants, and media**

Marches are most effective when they are widely attended and have motivating speakers who inspire people to act. When you are starting to organize a march, reach out to other organizations to see if they are interested in planning with you.

**Speakers**

Identify speakers who are knowledgeable and inspiring about the subject of your march. These include:

• Individuals who can share a personal testimony, including women and girls.
• Energetic community organizers working on your cause.
• Health workers or social service staff who want to see improvements in their systems.
• High-profile champions, like a local celebrity or First Lady, who can attract attention to your issue and bring a crowd.
• Duty-bearers and decision-makers who can share what they are currently doing and make additional commitments to strengthen healthcare and social services.

Determine if you want the speakers to speak at the beginning or end of the march and for how long you want them to speak.
Participants
Identify participants by getting the word out about your planned march. Post signs, create a Facebook group, ask a local radio station to make an announcement, use WhatsApp, and speak to community members at the market, at school, after worship, and during other events where people gather. Tell people why you are marching, what you want the march to achieve, when and where it will be located, and if any well-known people will be attending. Encourage people to make and bring signs to the march that show support for the cause.

Media
Identify local and national media outlets (TV, radio, newspaper, community journalists) to cover the march and amplify your message. Media is a great way of increasing your influence on policy decisions and attracting public interest to your efforts. Media will help capture photos and videos of the march, and talk to people about why they are marching and what change they want to see. In addition, identify 1-2 people or Community Journalists (see Activity 6) from your planning team to use their phones or cameras to capture important moments throughout the march and rally, which you can use in follow-up communications and activities.

Confirm logistics
Whether you are working as a small team or with other networks, groups, volunteers, or organizations, have a planning meeting before the march to ensure everyone is clear on roles and responsibilities. These responsibilities include people who will:

- Check for and secure permits.
- Identify the route you will take.
- Hand out informational materials during the march.
- Reach out to speakers.
- Reach out to participants.
- Ensure the safety and security of marchers.
- Coordinate signage and what you will wear, such as a unifying color or t-shirt.
- Serve as peacekeepers.

HELPFUL HINT:
If applicable, choose one hashtag for your march that people can use when posting their photos, videos, and comments to social media like Twitter and Facebook. This will help you see how many people are commenting on your issue and collect additional photos and videos. Examples of hashtags include: #HealthRights4All & #WhatWomenWant

HELPFUL HINT:
Try to ensure marchers keep the peace and do not break laws that may result in arrest. One way to do this is to identify volunteers to serve as peacekeepers. Peacekeepers must be knowledgeable about your rights to march and feel comfortable speaking and negotiating with police and law enforcement. Peacekeepers can also help diffuse tense situations. For example, if a participant starts throwing objects, a peacekeeper can be the first responder to ask that person to stop or leave the event.
**Conduct your March and Rally**

Your meeting point, route, and rallying location have all been confirmed. Now it is time to march! Use the example agenda below as a loose guide for what your march and rally can look like.

Example agenda for a rally followed by a march:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00</td>
<td>The organizers arrive early to set up, including any audio-visual equipment.</td>
</tr>
<tr>
<td>11:45-12:05</td>
<td>Greeters welcome people as they arrive.</td>
</tr>
<tr>
<td>11:45-12:10</td>
<td>Lead the crowd in cheers and chants, including sign language.</td>
</tr>
<tr>
<td>12:10-12:15</td>
<td>Start the event. Provide an overview of why you are there and explain the route and timing of the march.</td>
</tr>
<tr>
<td>12:15-12:20</td>
<td>First speaker (introduced by organizer)</td>
</tr>
<tr>
<td>12:20-12:25</td>
<td>Second speaker (introduced by organizer)</td>
</tr>
<tr>
<td>12:25-12:30</td>
<td>Third speaker (introduced by organizer)</td>
</tr>
<tr>
<td>12:30-12:40</td>
<td>The organizer wraps up prepared statements.</td>
</tr>
<tr>
<td>12:40-13:40</td>
<td>March along your planned route with a lot of chanting and cheering!</td>
</tr>
<tr>
<td>13:40-13:50</td>
<td>Organizer thanks people for coming and emphasizes action points</td>
</tr>
<tr>
<td>13:50-14:30</td>
<td>Speakers and organizers available for press interviews</td>
</tr>
</tbody>
</table>

After the march ends, schedule a follow-up call or meeting with your partners to discuss how it went and update your Community Action Plan as needed. Follow up with participants to thank them for attending, share outcomes, and promote activities they can get involved with in the future. Lastly, capture key details from your march in the March and Rally After Action Template (see Annex 2) so you can refer to them later as evidence and share with partners.

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**Special considerations for route planning**

Before reaching out to speakers and participants, review all laws and policies that enable or prohibit groups to mass mobilize in the area where you want to hold the march. If you are holding a march in a public space, you may need to get a permit from local or district decision-makers or law enforcement officials.

When planning your route, decide where you want your march to begin and end, and what roads or paths are the best to march. For example, if there is a health facility that is making community members pay for services that should be free, you could rally outside of the facility and then march to the office of the individual(s) who oversee the health facility. Or you could start and end in the same health facility but march through a specific part of your community (for example, past where decision-makers work, past other health facilities, or near markets where many people gather). After you have settled on your route, appoint individuals to guide participants along designated spots throughout your route. We recommend one guide for every 50 marchers.
ACTIVITY 6

Community Journalism

What is Community Journalism?
Community Journalism is when everyday people collect, analyze, and share news and personal stories about health and rights. Community journalists connect with mainstream media representatives to publish their stories on radio, TV, and print media to reach far and wide.

Why is Community Journalism important?
Community Journalism helps people’s powerful stories be heard or seen by a wide audience to inspire change. This includes duty-bearers and decision-makers that you are trying to influence in your Community Action Plan. Community Journalism is also a way to increase community members’ confidence in telling and sharing personal stories that may be emotional or hard to talk about.

Community Journalism is easier than ever given the development of various Internet platforms. New media technology, such as social media platforms and media-sharing websites, in addition to the increasing availability of cell phones, have made Community Journalism more accessible to people wherever they are in the world.

How to become a Community Journalist
There are three key steps to Community Journalism.
1. Identify and gather a compelling and accurate story.
2. Create media relationships.
3. Develop and publish your piece.
Identify and gather a compelling story

First, review the priority issues and solutions in your Community Action Plan. You want to identify what kind of story will put a “human face” on the most urgent health problems defined by your community. For example, if your priority issue is long wait times at health facilities, you may want to highlight a grave consequence due to long wait times, such as that of a woman forced to give birth on the floor and unattended.

Identify someone whose story can be told. You may already have someone in mind, or you may need to ask community members to come forward. Whoever’s story you highlight, make sure individuals understand how it will be used and are comfortable telling their story.

Determine how you will capture the story.

• One typical way is to conduct a brief interview. This can be done face to face or virtually. If done in person, consider conducting your interview during one of your other community organizing activities, such as a Community Hearing, March, or facility assessment for the Community Scorecard. Brief the person being interviewed on the topic you are focusing on and ensure they are comfortable. Obtain their consent to record the conversation and for their story to be published by you and/or a media house, explaining the many ways their story could be used. Do not publish content that the person told you off the record without getting their permission in advance.

• Another way to collect a story is to ask a person to submit their story in writing, along with any relevant photos or videos that bring the issue to life. Make it clear that you may edit the piece, as needed, to make it more suitable for publication. If you do edit their story, make sure that they approve any changes you made.

Create media relationships

Strong media relations can help you grow visibility and awareness of your priority issues among different target audiences. Media relations do not happen overnight, however. It takes time. But building relationships with media can have a lot of impact. In a media house, you will need to identify the key individuals who are relevant to your issue. In your case, this will likely be news editors, because they decide which stories are told and how, and health reporters, who are familiar with the issues you are advocating for.

After you have collected stories, your next step is to identify which journalists from print media houses, radio stations, or TV stations are relevant for your story based on its focus. How do you create these relationships?

• You can reach out to your local White Ribbon Alliance who can connect you with journalists, help you place your stories, or even share your content on White Ribbon Alliance channels.

Tips for conducting an interview:

Interviews can be intimidating for both interviewees and interviewers. You want to make sure that you treat the person being interviewed and their story with respect while also encouraging them to talk openly. Here are a few tips:

• Be conversant with the cultural issues in your community prior to the interview. For example, if your community is predominantly Muslim, allow women to speak or to be interviewed while wearing their Hijab.

• Thank the person for their time, make sure they understand how their interview will be used and get their consent to proceed.

• Ask questions that do not have a simple yes or no answer. Tell me about your experience…. Describe what the health facility looked like that day…. What do you most want people to know about…?

• Always end the interview by asking if there is anything else they want to add.
• Your friends or colleagues who already have connections can introduce you.

• You can introduce yourself, what you do, and what support you would like from the media houses. This could mean visiting a media house office; reaching out to specific journalists through social media platforms, social media tagging, or direct messaging; inviting them to your events and introducing yourself and your community organizing efforts; or organizing a media roundtable to interact and engage with media to understand their way of working and how you can work with them.

• Ideally, you can call upon any media representatives who were invited to help develop your Community Action Plan or who participated in a Community Hearing.

As you build relationships with journalists from mainstream media, you will also likely need to identify and pitch which format will tell your story most effectively. For example, you may realize that a newspaper or online magazine will give you more space to share your story than a 30-second slot on television or radio. In this case, pitch for both, but prioritize print. You should always keep your target audience in mind. If stakeholders read more newspapers than listen to community radio, then pitch your story to print media houses. Most media outlets have pitch guidelines, so make sure you are familiar with any parameters they would like you to follow. Common formats are shown below.

### Table: Media Formats

<table>
<thead>
<tr>
<th>Media outlet</th>
<th>Format of media piece</th>
<th>Author/producer</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Print media</strong></td>
<td>News article</td>
<td>Media house staff</td>
<td>A short piece covering the basics of a current event.</td>
</tr>
<tr>
<td></td>
<td>Feature article</td>
<td>Media house staff</td>
<td>A longer and more in-depth piece than a regular news article. Covers one subject from multiple angles.</td>
</tr>
<tr>
<td></td>
<td>Editorial</td>
<td>Media house staff</td>
<td>An article offering the viewpoint of the media house on a current event.</td>
</tr>
<tr>
<td></td>
<td>Op-ed (opinion piece)</td>
<td>Member of the public, usually a well-known or influential person</td>
<td>An article expressing the opinion of members of the public on an issue or current event. Op-eds are generally 800 words. Check with the print media house on word limits.</td>
</tr>
<tr>
<td></td>
<td>Letter to the Editor</td>
<td>Member of the public</td>
<td>A brief statement of opinion from a concerned community member on a current event. Letters to the editor are generally around 150-200 words. Check with the print media house on word limits.</td>
</tr>
</tbody>
</table>

**Radio and TV**

<table>
<thead>
<tr>
<th>Format of media piece</th>
<th>Author/producer</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>News segment</td>
<td>Radio or TV station staff</td>
<td>A live or recorded program that covers a current event or human-interest topic.</td>
</tr>
<tr>
<td>Interview</td>
<td>Radio or TV station staff</td>
<td>A live or recorded conversation between the program host and the interviewee in which the host gathers information, opinion, and emotion from the interviewee.</td>
</tr>
<tr>
<td>Call-in</td>
<td>Radio or TV station staff</td>
<td>A segment where listeners or viewers are invited to call in and share their live comments on a given topic.</td>
</tr>
</tbody>
</table>
Sometimes, journalists will be inspired by your story and will want to conduct their own reporting. If this is the case, great! Your written or audio recorded stories, pictures, or videos will simply be options to include with the story prepared by the journalist, such as a news article, feature story, or radio or TV news segment. Other times, journalists may want you to develop the piece yourself. For example, they may ask you to write an opinion piece or a letter to the editor. While this means more work for you, it gives you more control over the messages and the final product.

Develop and publish your piece

Once you know that the media outlet is interested, it is time to develop your story. If you are developing the piece yourself, be sure to follow any guidance given to you. For example, op-eds and letters to the editor usually have word limits and other editorial guidance. Pictures and videos may also have a file size limit and will need proper attributions.

As you work on the piece, make sure to connect the personal story with the larger issue that you are advocating for in your Community Action Plan. Let us return to the example referenced above about one woman’s upsetting account of giving birth on the floor because of long wait times and non-attentiveness at a facility. Be sure to point out this is one instance of a much larger issue that happens to women across your district or sub-county when there are not enough trained and motivated health providers available. Revisit your Community Action Plan and clearly highlight your community’s proposed solution to the problem. In this case, you would put forth your community’s solution that more midwives are hired and placed in health centers throughout the district. As you finalize the story, it is good practice to share it back with the people who initially told you their stories to make sure that everything is presented correctly. Then, submit your final piece by the required deadline. For guidance on how to prepare a good opinion piece, see the Basic Op-ed outline below.

Congratulations, your piece was published! Share it with the storytellers, with your community members, and with the duty-bearers and decision-makers you are targeting in your Community Action Plan. Do not assume that your target decision-makers will automatically see your story. Bring it to their attention by sending it by email, text, social media, or even handing over a hard copy. Remember to thank again the people who shared their stories for their courage and contribution to your cause. Finally, fill out the Community Journalism Tracking Form (see Annex 2) every time a piece is published.
Basic Op-ed outline

The best way to structure an op-ed is to first write an outline. Review your interview notes, pictures, or video clips. Then write down ideas for the following sections. Remember, this is just a foundation upon which to write your opinion piece.

1. **Lead sentence:** Get your reader’s attention right away by starting off with a powerful, emotional sentence.

2. **Introductory paragraph:** Provide a brief background on the problem and the proposed solution and/or the advocacy win that arose from your community organizing.

3. **Two to four main body paragraphs:**
   a. Go into further detail about the problem. In addition to verifiable facts and figures, highlight evidence of the problem using quotations or excerpts from your interviews. For each problem raised, offer a solution or way forward. Again, use quotations or excerpts from your interviews when describing the solution and why it matters to the community.
   -OR-
   b. Go into further detail about the advocacy win, why your solution works, and the community organizing effort behind it. Use quotations or excerpts from your interviews about what this advocacy win means for individuals and the community at large.

4. **Conclusion:** End with a call to action. Clearly state what you hope duty-bearers, decision-makers, and/or the community will do to carry forward your proposed solution.

5. **Optional:** Hyperlinks and audio-visual materials. Include or attach any relevant website links for more information, and any supporting photographs, video, or audio footage.
The above list of activities is just the beginning! There is a great deal of room for creativity and innovation in community-organizing tactics that will make change. You know your community and the targets to influence best. Please share and celebrate your activities and your wins widely as you...

Power On!
Annexes

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Helpful Facilitation Tips

You are here because you want to brush up on facilitation. That is great! Good events and meetings almost always use effective facilitators and techniques. The activities included in this toolkit where facilitation will be especially important include Community Action Planning meetings, Community Hearings, Community Scorecards, and Listening Sessions. We’ve identified three areas to help make your facilitation shine.

These include:
• Finding an effective facilitator.
• Using different strategies to ensure everyone’s voice is heard.
• Understanding how to facilitate group decision-making.

Effective facilitators

Strong facilitation starts with the person facilitating. That might be you or it might be someone from your community. Remember, effective facilitators come from all walks of life. The best facilitator is not always the highest-ranking individual, the oldest community member, or the person with the most schooling.

When choosing a facilitator, look for someone who:
• Is comfortable in front of a group.
• Is organized and prepared.
• Is friendly and upbeat.
• Is open to hearing many perspectives.
• Encourages critical thinking.
• Supports people to come to their own conclusions.
• Requests and uses feedback.

A facilitator has three main areas of responsibility when guiding a meeting, event, or activity:

1. Ensure objectives are met. Perhaps the most important job for any facilitator is to make sure that objectives are met and tasks are completed. The facilitator should be familiar with the agenda, timetable, and expected outcomes and work to stick to them. At the same time, the facilitator needs to be flexible with the schedule. For example, the facilitator must feel confident making real-time adjustments to let important conversations continue if they are driving the group forward or cut them off if they are taking you off track.

2. Manage group dynamics. Another key responsibility for the facilitator is to create opportunities for every voice to be recognized and heard. This is so important that we have included a separate section below. Additionally, the facilitator must actively manage broader group dynamics. This includes having a plan for when difficulties arise. Before the event, it helps to understand the dynamics among individuals, whether good or challenging, and try to work with them. Should difficult behaviors come up, the facilitator’s goal is to reduce or stop disruptive behavior without hurting participants’ self-esteem and ability to contribute. One way to do that is to talk to people in private about their behavior and its impact.

3. Communicate effectively. The facilitator must communicate clearly, both verbally and non-verbally. Effective verbal communication includes providing clear instructions, knowing when to use open or yes/no questions, and using summarizing and paraphrasing to reflect to people that they are being heard. Effective non-verbal communication includes maintaining eye contact with those who are speaking (if culturally appropriate), using professional body language, and being enthusiastic and engaging for the entire event.
Strategies to ensure everyone’s voice is heard

Every person comes with different identities, experiences, abilities, and styles for learning and communication. And every person’s opinion and voice matters equally. It is the facilitator’s job to create a welcoming environment and identify concrete ways for all individuals to participate in a way that feels comfortable. We have several tips to help.

Create a safe space for conversation. A safe space is an environment where all people feel free to share their hopes and struggles, ask questions, explore ideas, and challenge assumptions without being judged. It can be helpful to have a set of guidelines to foster a safe space to which everyone agrees. Guidelines may include:

- Everyone is respected, and no one is judged.
- Everyone has equal worth, and all perspectives are equally valid.
- Experiences, stories, or feelings that are shared in a safe space are not repeated to people outside of the safe space.
- No topic is off limits.

Use different types of facilitation techniques to help get everyone involved in collective thinking, conversation, and activity. This is particularly important for participatory gatherings like Community Action Planning meetings, Community Hearings, and Listening Sessions. People have different personalities and learning styles. Some will respond well to certain facilitation techniques and others will not. And that is normal! Therefore, it is important to include a mix. Recommended techniques include:

- Brainstorming exercises.
- Facilitated discussions in large plenary and small groups.
- Using flip charts or poster paper.
- Using PowerPoint slides (if feasible).
- Role plays or community theater.
- Small group collaboration on handouts/worksheets.

Try different approaches when you need to solicit an opinion from every person. Some people are naturally chatty and others are reserved. Some may not feel comfortable putting themselves out first or before others, which may be especially true for women and girls who are socialized to be deferential. Here are a few strategies to create opportunities for everyone to provide input:

- Have each person write down or draw an idea on a small piece of paper. Collect everyone’s response and have a volunteer read them all out loud.
- Ask participants to pair up with the person beside them to share a story, discuss a question, or offer an opinion.
- Break into small groups of 6-8 individuals for a focused discussion. Have one person volunteer to take notes and another volunteer to report back major highlights to the full group.
- If having a discussion in full plenary, consider asking a rapid-fire question with a one-word answer. For example, the facilitator might go around the room and ask each person “What is one word to describe how you feel about this proposed solution?”

Adapt facilitation techniques as needed for participants who are differently abled. Facilitators should do their best to be mindful of people with disabilities and proactively identify ways to enhance their participation. Ideally, the facilitator should get a sense ahead of a meeting or event what accommodations will be needed. It is also a great idea to partner with a disability justice organization or individual leader to advise on physical set up of the event and necessary adoptions of facilitation strategies and tactics.
Facilitating group decision-making processes

During community action planning, community members will need to make joint decisions to prioritize problems, solutions, and advocacy activities. Collective decisions also need to be made during implementation of some advocacy activities, such as facility assessments, where scoring teams must arrive at a single “score” for a facility.

There are several ways to handle group decision-making. The one that works best will depend on how many people are making a decision, the dynamics among the decision-makers, and how much time is available for decision-making.

- **Consensus.** This form of decision-making tries to combine input from all people into a single idea or solution that is acceptable to all. Consensus is achieved when everyone either fully supports the decision or accepts the decision, even with concerns, because the decision reflects the wisdom and best interests of the group. Consensus is often important when a community comes together to identify priority challenges and solutions.

- **Voting.** Voting is a quick and efficient way to make group decisions. Decide up front how results will be determined. Most often, results are based on a simple majority vote (at least half of votes) or supermajority vote (at least two-thirds of votes). Some people may prefer to express their preferences more privately. One way to do that is by handing out colored dot stickers/pieces of paper and asking people to put a colored dot sticker/piece of paper next to the ideas they are voting on that are written on a large piece of paper or wall.

- **Decisions by committee or working group.** Sometimes, it may make sense to assign decision-making to a smaller group of individuals who can arrive at a decision on their own time. For example, when developing a Community Action Plan, consider having a small task team working on the plan to make decisions about which activities will be included.

For information on more detailed facilitation techniques, contact info@whiteribbonalliance.org.
## Issue Matrix

<table>
<thead>
<tr>
<th>A. Health/social services guarantees and rights</th>
<th>B. Specific gap or challenge</th>
<th>C. Priority issue</th>
</tr>
</thead>
<tbody>
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</table>
## Community Action Plan

1. Issue (problem)

2. Solution

<table>
<thead>
<tr>
<th>A. Activity</th>
<th>B. Action Step</th>
<th>C. Target (person/people)</th>
<th>D. Responsible</th>
<th>E. Timeline</th>
<th>F. Resources</th>
<th>G. Status</th>
</tr>
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</table>
## Community Hearing Minutes

### Basic Details

<table>
<thead>
<tr>
<th>Hearing date:</th>
<th>Hearing topic (advocacy issue):</th>
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<tr>
<th>Hearing time:</th>
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<table>
<thead>
<tr>
<th>Hearing location:</th>
<th>Key organizing partners:</th>
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<table>
<thead>
<tr>
<th>Number of attendees:</th>
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### Big wins

(Note if a target duty bearer or decision-maker made a commitment or if a big action was taken, like handing over a petition.)

<table>
<thead>
<tr>
<th>Commitment made or action taken:</th>
<th>Commitment made or action taken:</th>
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<table>
<thead>
<tr>
<th>By whom:</th>
<th>By Whom:</th>
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### Media and champions:

<table>
<thead>
<tr>
<th>Media outlets present:</th>
<th>Social media hashtag used (if any):</th>
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<table>
<thead>
<tr>
<th>Community journalists who took photos/videos (to follow up with them later for footage):</th>
<th>New champions for your cause (did anyone new attend your Hearing who can help you reach your goals in your Community Action Plan?):</th>
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### Community evidence, quotes, and memorable moments

(Include compelling stories, evidence, and quotes that speak to your advocacy issue. Note what was said and who said it.)

- **Community evidence:**
  - **Quotes:**
  - **Memories:**

### Next steps

1.
2.
3.
## Listening Session Minutes Template

<table>
<thead>
<tr>
<th>Women's demands</th>
<th>Women's solutions</th>
<th>Decision-makers and other key stakeholders’ responses/ commitments</th>
</tr>
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<tbody>
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</tbody>
</table>
# Community Scorecard Template

<table>
<thead>
<tr>
<th>A. Issue being scored</th>
<th>B. Questions to ask</th>
<th>C. Names and roles of persons being interviewed and their responses</th>
<th>D. Responses and observations</th>
<th>E. Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1 = very bad</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>2 = poor</td>
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<td></td>
<td></td>
<td>3 = okay</td>
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<tr>
<td></td>
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<td></td>
<td></td>
<td>4 = good</td>
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<tr>
<td></td>
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<td></td>
<td>5 = very good</td>
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</tbody>
</table>

**Date of assessment:**

**Facility:**

**Name of person conducting assessment:**
## Survey Template

<table>
<thead>
<tr>
<th>Name of survey:</th>
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<tbody>
<tr>
<td><strong>Surname:</strong></td>
<td></td>
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<tr>
<td><strong>Given name:</strong></td>
<td></td>
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<tr>
<td><strong>Sub-country:</strong></td>
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<tr>
<td><strong>Country:</strong></td>
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<tr>
<td><strong>Age:</strong></td>
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<tr>
<td>Consent to participate obtained (tick off):</td>
<td>☐</td>
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</table>

**Survey question:**

**Answer:**
Petition Template

<table>
<thead>
<tr>
<th>Petition name</th>
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<table>
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<th>Petition summary and background</th>
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<table>
<thead>
<tr>
<th>Action petitioned for</th>
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<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Signature</th>
<th>Address (can be district or county)</th>
<th>Age</th>
<th>Comment</th>
<th>Date</th>
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</tbody>
</table>
## March and Rally After Action Template

### Basic Details

<table>
<thead>
<tr>
<th>March date</th>
<th>March theme (why you are marching):</th>
</tr>
</thead>
<tbody>
<tr>
<td>March time</td>
<td>Key organizing partners:</td>
</tr>
<tr>
<td>March location</td>
<td></td>
</tr>
<tr>
<td>Number of attendees</td>
<td></td>
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</tbody>
</table>

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<table>
<thead>
<tr>
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<td>Commitment made or action taken:</td>
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<th>Social media hashtag used (if any):</th>
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<tbody>
<tr>
<td>Community journalists who took photos/videos (to follow up with them later for footage):</td>
<td>New champions for your cause (did anyone new attend your March who can help you reach your goals in your Community Action Plan?)</td>
</tr>
</tbody>
</table>

### Next steps

1.
2.
3.
## Community Journalism Tracking Form

<table>
<thead>
<tr>
<th>Title of Media Piece</th>
<th>Date of Publish</th>
<th>Author</th>
<th>Media Outlet</th>
<th>Hyperlink (If available)</th>
<th>Number of views, shares, likes (if known)</th>
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