

INTRODUCTION

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Introduction to Responsive Dialogues to address antimicrobial resistance

These Guidelines are written for people interested in facilitating Responsive Dialogues to address the challenges associated with antimicrobial resistance (AMR). They aim to provide guidance on how to implement Responsive Dialogues, particularly in low- and middle-income countries (LMICs).

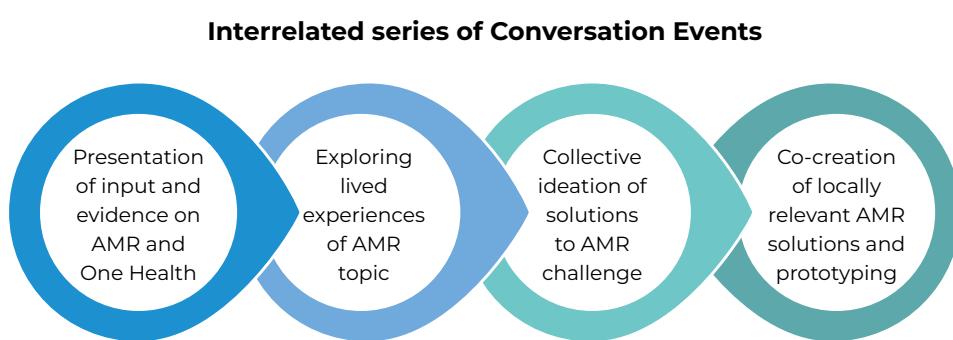
The Guidelines draw on the [Responsive Dialogues on Drug Resistant Infections Toolkit](#) developed by Wellcome, and further learnings from three Responsive Dialogues projects in Thailand, Malawi, and Zambia.

This section provides an overall introduction to Responsive Dialogues, to opportunities for using Responsive Dialogues from an ICARS perspective, and to the content of the Guidelines. It also includes practical information on how to use the Guidelines and the [short video](#) that accompanies them.

What is the Responsive Dialogues approach?

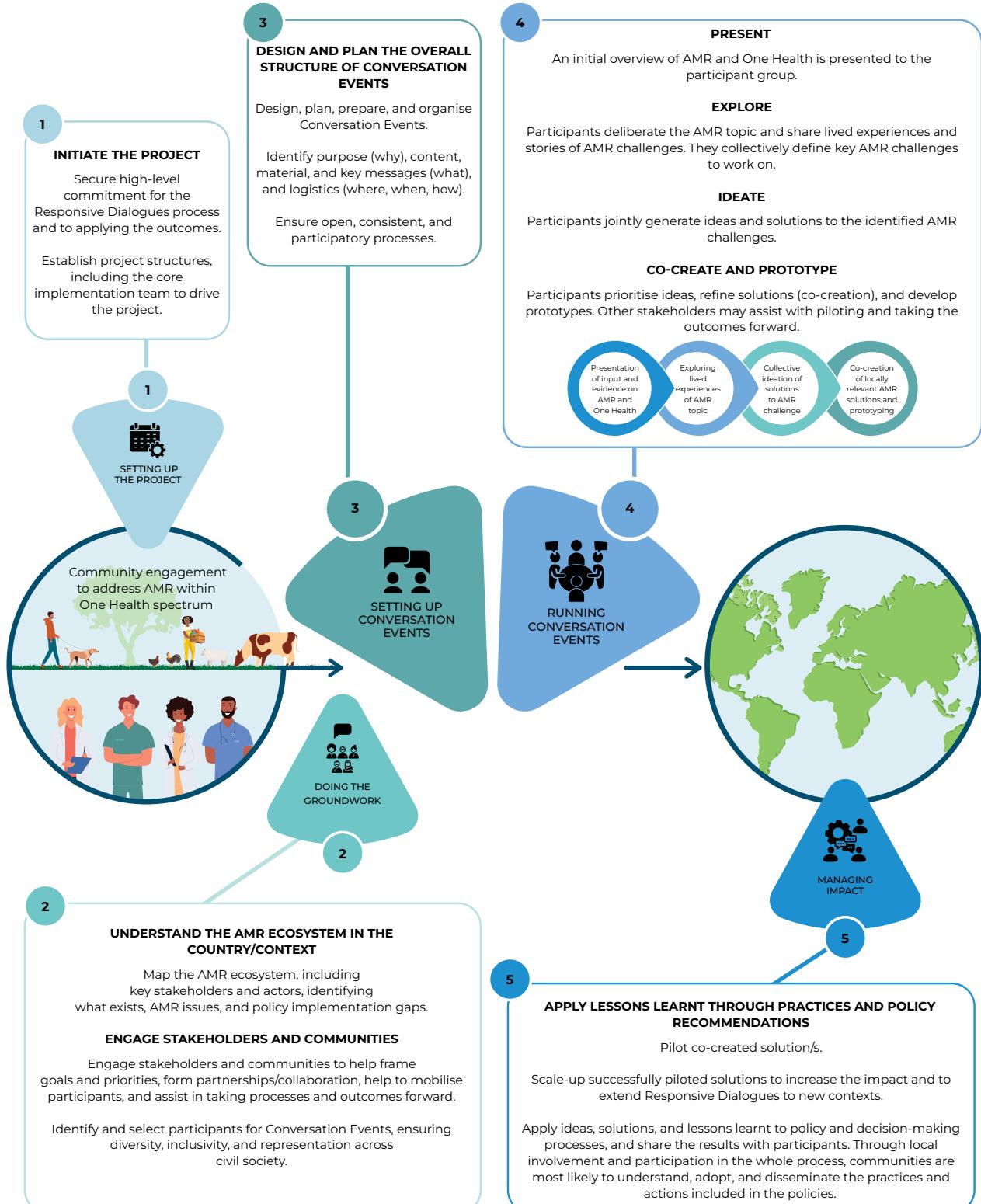
Responsive Dialogues is a **community engagement approach** developed by Wellcome to engage stakeholders, members of communities/public, and other people and organisations in a process that facilitates dialogue, learning, and the co-creation of solutions and policy recommendations that are grounded in local realities.

At the heart of Responsive Dialogues are a **series of Conversation Events** run with participant groups selected from relevant communities (see diagram below). In these Conversation Events, participants are taken through a process of sharing their lived experiences of AMR (e.g. antibiotic usage), and together generate ideas and co-create solutions to address AMR.



What do Responsive Dialogues to address AMR look like?

The steps summarised here outline the possible activities included in commissioning, designing, planning, running, analysing, and using the outputs from the Responsive Dialogues process. The steps are detailed in the Guidelines.



The Responsive Dialogues approach helps to address AMR as follows:

- It is aimed at engaging those **most vulnerable to AMR**, whose voices are seldom heard. The aim is to facilitate a change in attitudes, behaviours, policies, and practices towards the prevention and treatment of infections, which impacts human, animal, and environmental health.
- It brings together multiple stakeholders from a range of sectors and backgrounds, including **One Health**, the policy space, experts, academics, the private sector, the public, and communities for the duration of the process.
- It builds on existing country and local **One Health policies, National Action Plans for AMR**, and interventions.
- It engages people in a **deliberative process**, in which they carefully think about, discuss, and make decisions about the complex issue of AMR in their own context. This leads to a greater understanding of local attitudes and behaviours towards AMR, its causes, and consequences.
- It **empowers communities** to jointly generate ideas, feasible solutions, and policy recommendations to address AMR challenges in their own context.
- It promotes **piloting, scaling-up**, and **sustainability** of solutions.
- It facilitates **inclusive policy-making** that takes into account local realities.
- It establishes relationships that can lead to **sustainable change**.

The Responsive Dialogues approach is not the following:

- It is not a one-time engagement with a community, but takes place over time.
- It is not primarily about raising awareness on AMR and One Health.
- It is not a process of looking for short-term, quick fix solutions, without exploring what is needed for long-term sustainability.
- It is not a top-down, consultative approach in which ready-made solutions and policies are presented to communities for approval and implementation.
- It is not about using communities as research subjects.

See [Section 6](#) for a *Checklist of activities and outputs in Responsive Dialogues*.



Opportunities for using Responsive Dialogues from an ICARS perspective

This section provides guidance to ICARS partners or potential future ICARS partners on how Responsive Dialogues can be used in the context of ICARS projects and beyond. It might also provide insights on how Responsive Dialogues could be used in other projects and contexts.

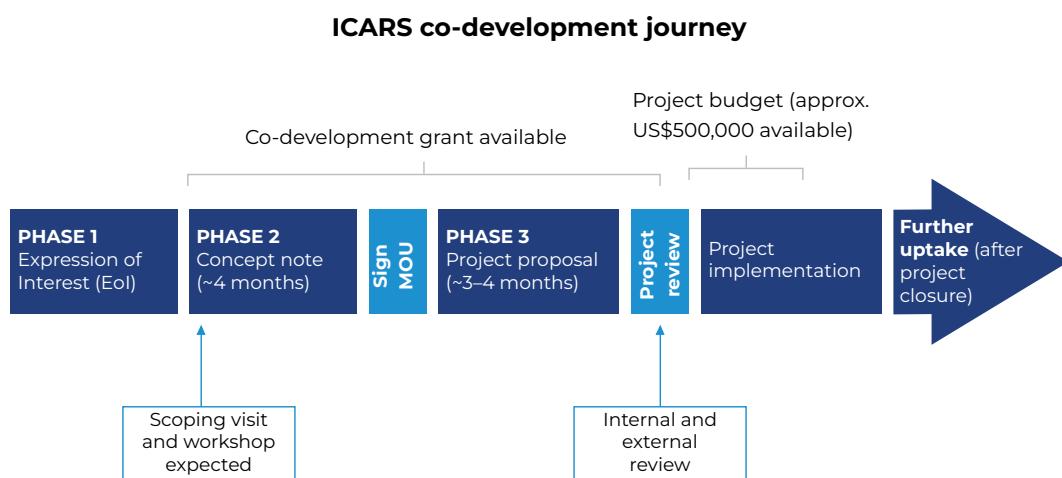
ICARS' mission is to partner with ministries and research institutions in LMICs to co-develop and test cost-effective, context-specific AMR solutions with potential for scale-up across the One Health spectrum, building on National Action Plans (NAPs), and informed by intervention and implementation research. Responsive Dialogues can strengthen a bottom-up approach across the ICARS project

cycle. When complemented with the ICARS' process, it provides a unique value proposition of translating and amplifying the effect of community-led interventions for 'real world' impact – both into local policy and programmes, ultimately leading to sustainable change.

Specifically, the following opportunities have been identified where Responsive Dialogues can serve ICARS and ICARS partners:

1. Informing the expression of interest by a country to work with ICARS
2. As part of the co-development process of an ICARS project
3. Co-creating solutions with communities as part of an ICARS project and implementing them within the project timeframe
4. Informing ICARS project scale-up and the ICARS project exit strategy.

In the following section, some of these opportunities are presented in more detail. While some information and references to ICARS processes is provided, more detailed information of the ICARS framework for engagement can be found on the ICARS website: icars-global.org.



Informing the expression of interest by a country to work with ICARS

Ministries in LMICs can initiate a partnership with ICARS by submitting an Expression of Interest (EoI). The EoI represents the first introduction to the country's AMR National Action Plan (NAP) and the priority AMR-sensitive and AMR-specific challenges/problems that the country would like to address with ICARS support. The EoI also provides the opportunity to highlight interventions that would potentially address these challenges and problems.

In the EoI phase, Responsive Dialogues can be used to do the following:

- Identify priority AMR-sensitive and AMR-specific challenges/problems relevant to the suggested community
- Identify interventions that would potentially address these challenges and problems.

In case of limited time and capacity, limited sets of Conversation Events could be run, with the ambition to up-scale the approach during the ICARS co-development process. In any case, Responsive Dialogues would ideally continue to be used in the next ICARS project phase, to make the process more inclusive.

Responsive Dialogues as part of the ICARS co-development process

The ICARS co-development process is divided in two phases:

Phase 1: Development of the concept note

Phase 2: Development of the project proposal

Responsive Dialogues can be used in both ICARS project co-development phases, ideally already informing the development of the concept note and subsequently the development of the project proposal. This could, for example, mean running Conversation Events Sets in preparation of and/or in parallel to Stakeholder Engagement Workshops. If Responsive Dialogues have already been used to inform the development of the EoI, then activities in the ICARS project development phase would benefit from and build on these groundwork activities and Conversation Events Sets.

It is possible to request funding for the ICARS co-development phase. The justification could include costs associated with the running of the Responsive Dialogues process. There will likely be limited time and capacity for the planning and running of Conversation Events during the co-development phase. As in the EoI phase, this could mean that only limited sets of Conversation Events are run, potentially with the ambition to up-scale the approach during ICARS project implementation, i.e. by integrating Responsive Dialogues in the project proposal.

Responsive Dialogues as part of an ICARS project and informing ICARS project scale-up

Running the Responsive Dialogues process can be part of an ICARS project, either by building up on related activities in the EoI and/or co-development phase, or by only starting the process in the implementation phase. In either case, this requires integrating Responsive Dialogues into the project proposal, last but not least because of budgetary implications. This means that a definition of key parameters for running Responsive Dialogues is required, including the objective of using the approach, the available timeline, and desired outcome. Considering the likelihood that a distinct implementing team will need to be responsible for the implementation of the Responsive Dialogues process, it can be useful to structure related activities in a separate work package.

If the Responsive Dialogues process only starts during ICARS project implementation, the groundwork phase will benefit from the ICARS project co-development phase. Further, the aim will generally be to co-create solutions with communities that are complementary to the interventions incorporated in other work packages and to pilot some within the project timeframe.

Building up on related activities in the EoI and/or co-development phase can be achieved by either extending the Conversation Events to more communities and/or by diving deeper into Conversation Events with communities that have already been involved in the Responsive Dialogues process. In this latter case, the aim would be to explore a particular issue or topic more deeply, refine the 'solution', and proceed with the piloting phase. The emphasis would be more on the 'impact' or piloting and stakeholder engagement to prove the concepts and generate evidence and strategies for scaling successful solutions.

About these Guidelines

These Guidelines provide guidance on how to implement the Responsive Dialogues approach to address AMR, particularly in LMICs. Starting with setting up a Responsive Dialogues project, guidance is provided for the Responsive Dialogues process, as outlined in the [Responsive Dialogues on Drug Resistant Infections Toolkit](#) developed by Wellcome.

How are the Guidelines structured?

The Guidelines are organised into the following sections:

Section 1: Setting up the Responsive Dialogues project

Section 2: Doing the groundwork

Section 3: Setting up Conversation Events

Section 4: Running Conversation Events

Section 5: Managing impact

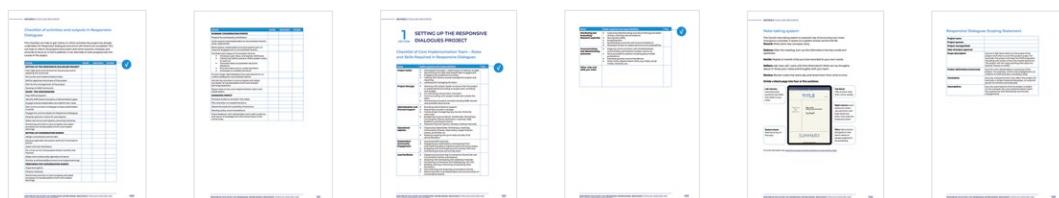
Section 6: Tools and Resources



Sections 1 includes information about important aspects to consider when setting up a Responsive Dialogues project, such as governance issues, defining project objectives and scope, setting up the core implementation team, and developing a Monitoring and Evaluation Framework.

Sections 2 to 5 are organised into modules, which are loosely aligned with the phases of Responsive Dialogues – from doing the groundwork for the project, through to managing the impact of the project. However, even though the modules in this section are numbered, this does not mean that they need to be followed step by step. Not all modules will be needed in each project context. In addition, several modules may overlap and some may be relevant throughout the process, such as Module 2: Engaging stakeholders.

Section 6 includes tools and resources to use and adapt, such as templates and checklists.



How to adapt and contextualise the Guidelines?

The Guidelines provide a structured, modular process that is adaptable and flexible to the needs and purposes of the specific project, people involved, country context, and available resources and budget. For example:

1. Projects can decide on their own entry and exit points (see more on this below).
2. They can decide which modules will be most beneficial for them to use, and in which order.
3. They can print individual modules and tailor them to their specific requirements or context.
4. Modules can be used as standalone guidance. For example, depending on their role, each team member does not need to read the whole document. They may decide to only read those specific sections that apply to them, for example, on facilitating Conversation Events or about the logistical preparation of Conversation Events. This is particularly relevant when the Responsive Dialogues process is broken up into steps or activities that are led by different team members. Cross-references in each module lead users to relevant guidance in other modules, and in this way ensures that no key element of the Responsive Dialogues process is overlooked.

Entry points: The checklist in Section 6 guides projects on their starting point, and also on the modules and activities to potentially read to meet their objectives, without skipping any essential activities. For example, if a project has already researched the AMR ecosystem, their entry point might be engaging stakeholders (Module 2), and engaging the community (Module 3), to plan the Conversation Events. [See Section 6, Checklist of activities and outputs in Responsive Dialogues.](#)



Exit points: It is ideal if projects can take Responsive Dialogues through to the end, into the intervention and/or the policy space. However, some projects might not have the capacity or funding to do this. Their exit point might include working with key stakeholders, for example, policy-makers, civil society organisations, and/or funders, who can take the outcomes forward. Other projects might foresee several iterations of the Responsive Dialogues process, with the first project phase, for example, only aiming at informing a project proposal, and then, only if funding is secured, the approach would be up-scaled as part of project implementation.

NOTE



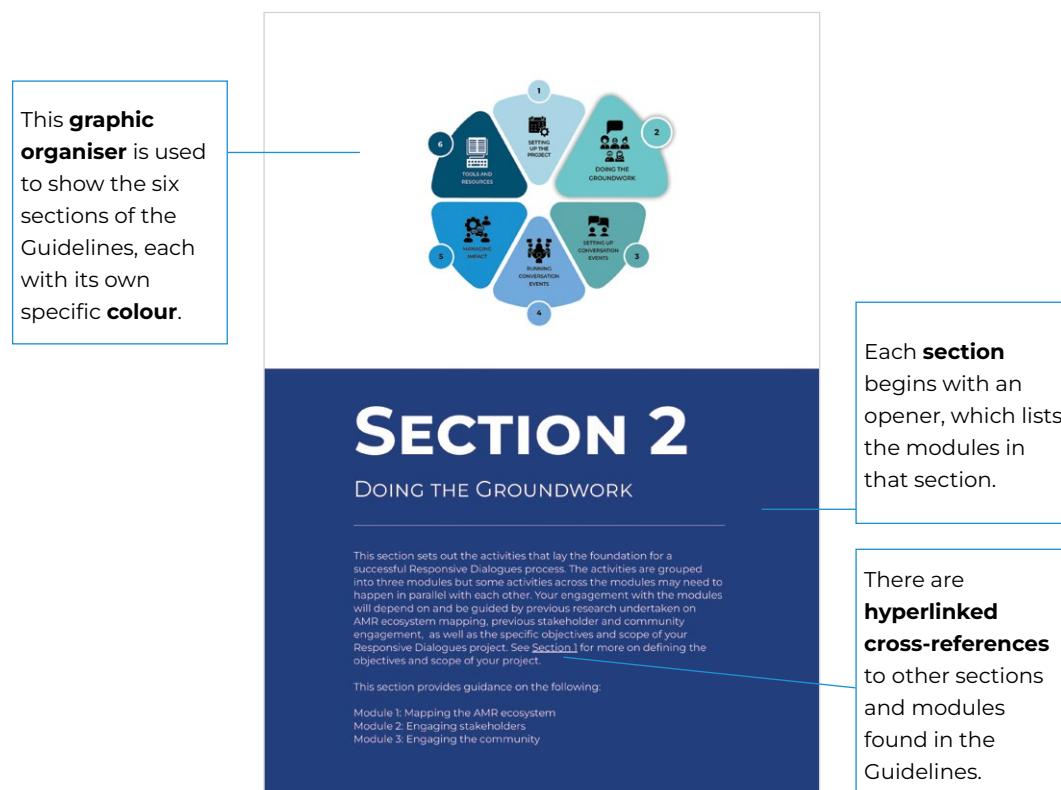
Identifying your project's entry point is a crucial task that is not as straightforward as you might think! It is best to make this your first activity once you have identified that using the Responsive Dialogues approach can help to achieve your overall project objective. [Section 1: Setting up the Responsive Dialogue project](#) provides guidance that might help you to gain clarity on your specific project context/parameters, and therefore also to identify your entry point.

Not only are entry and exit points flexible, it is also key that the guidance provided in the Guidelines is **adapted to suit your objectives and context**. This might include, for example:

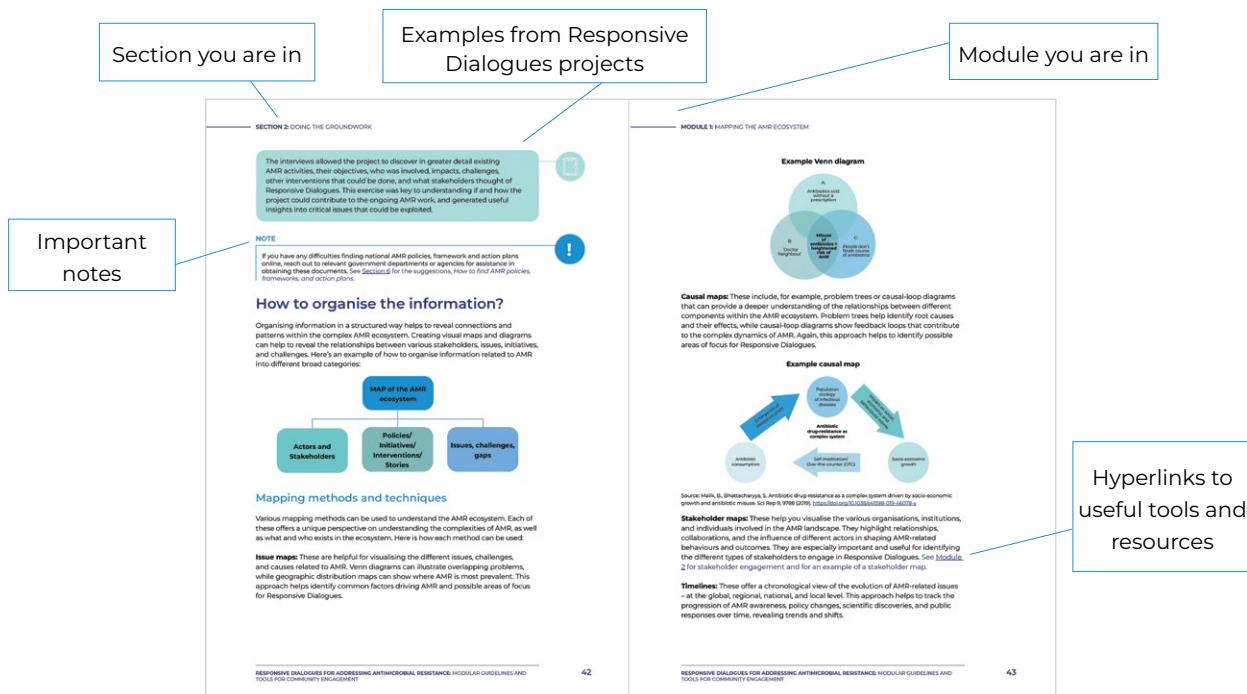
- **Tailoring the language** – using familiar and local words and terms
- **Translating** if necessary
- **Adapting activities** for each participant group, for example, for those with varying literacy levels, or for single or mixed-gender groups
- **Adapting the number and content of Conversation Events** to suit the needs of participants, for example, those familiar with AMR may need less time grappling with this topic than those for whom the topic is new
- **Using participatory activities** with participant groups that have worked well for you in the past and which will achieve the same objectives
- **Customising templates and tools** so that they are relevant to your context and needs.

How to navigate the Guidelines?

Specific features are used to help projects navigate their way through the Guidelines.



The visual below shows the different features used to help you navigate through the Guidelines.



The following icons are used for easy reference:

 Glossary	 Examples from Responsive Dialogues projects
 Tips	 Collecting and storing documents/evidence
 Important notes	 Online downloadable resources and the introductory video, on the ICARS website
 Cross-cutting themes	
 Monitoring and Evaluation	

A [short introductory video](#) provides an overview of these Guidelines and guidance on how you can select the modules and tools most applicable to your needs, which will depend on the scope of your Responsive Dialogues project.

These Guidelines are also downloadable as a PDF document in sections and as individual modules. [Tools and resources](#) are available to download as MSWord documents which can be adapted and tailored to individual project requirements.