

7

MODULE

FACILITATING 'STAGES' OF CONVERSATION EVENTS



This module presents a selection of participatory facilitation processes and activities to guide participants through the critical 'stages' of Conversation Events, from building on participants' knowledge and understanding, to introspection and sharing of experiences, reflections, and ideas, to co-creating locally relevant solutions.

This module provides guidance on the following:

- Stage 1: Facilitating input and evidence on antimicrobial resistance (AMR) and One Health
- Stage 2: Facilitating the exploration of lived experiences of AMR
- Stage 3: Facilitating the process of ideation
- Stage 4: Facilitating the process of co-creation and prototyping
- How to ensure continuous improvement?
- How to monitor facilitation?

NOTE

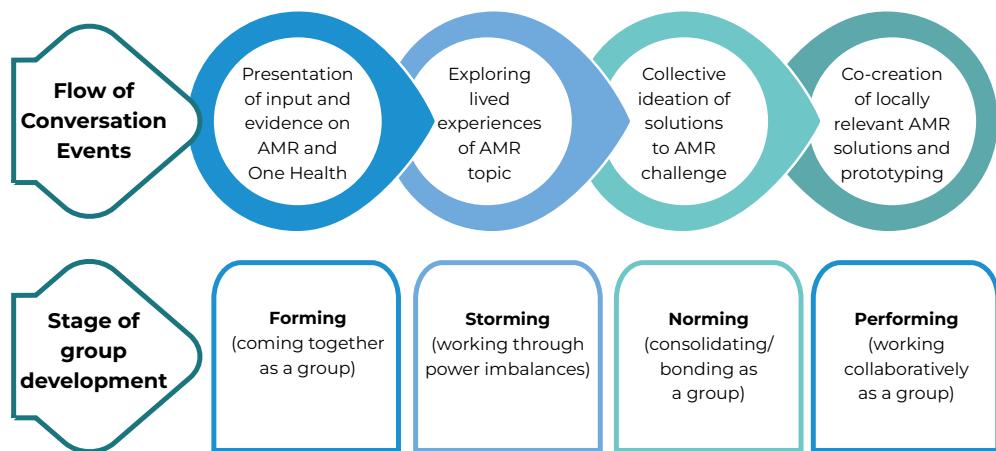
The module supports [Module 4, Planning Conversation Events](#), and should be read together with it.



As you facilitate the Conversation Events with each participant group, you might notice certain patterns of behaviour that the group itself displays at different stages as it develops, as shown in the diagram below.

This model of group development and the dynamics that groups show at different stages was proposed by the psychologist, Bruce Tuckman. [Ideas on how to manage these dynamics are provided in the sections that follow.](#)

The flow of Conversation Events and the stages of group development



NOTE



Although there is a certain 'flow' to the Conversation Events, it is still important to adapt the design of them for your context. See [Module 4](#) for more on planning and designing Conversation Events to suit each participant group and context.

Stage 1: Facilitating input and evidence on AMR and One Health

The first few sessions of the Conversation Events set the scene, environment, and mood for the sessions and Events that will follow. This will influence how subsequent sessions are perceived and received by participants.

In the initial Conversation Event, the group is still in the process of forming and getting to know each other, and participants might be hesitant to participate. The facilitation team may observe that there is a certain degree of formality, fear, and anxiety, as participants' roles and expectations are still unclear.

The facilitation team's role is to create a respectful and inclusive environment that builds trust so that everyone feels comfortable to share their opinions, experiences, and discuss potentially sensitive, emotional topics together. This is an ongoing process and can be reinforced by, for example, using specific ice-breakers and other interactive activities to develop meaningful rapport between the facilitation team and participants, and between participants themselves.

Participatory facilitation tips



- **Guide participants to set ground rules** for respectful communication, and to commit to adhering to these. Write up the rules; keep them up on the wall at each Conversation Event, and refer to them when necessary. Ask the group to decide on what happens if the rules are broken.
- **Clearly define the purpose and aims of the Conversation Events as a whole.** Explain the activities and processes that will be used to meet the aims. Clearly explain the aims of this Conversation Event and the agenda that will be followed.
- **Encourage equitable participation.** Validate diverse viewpoints and model active listening. Give each participant your full attention. Be completely present to what's happening.
- **Use interactive activities** that engage different senses to stimulate thinking and discussion.
- **Plan what information to introduce** in a sensitive yet informative and engaging manner.
- **Use small group work to build rapport** between different participants, and give sufficient time for discussions to really unfold.
- **Regularly sum up key points.** This allows participants to reflect on what is being said, and demonstrates that their contributions are being heard and understood.
- **Explain that external people may join** at various times to present information, listen and learn from participants, and with the groups' permission, participate in co-creating solutions. Explain the role that stakeholders could play in taking solutions forward. Discuss any challenges, feelings, and fears the group might have around external people being invited into the group, and ways of managing these.

In the initial Conversation Event, input and evidence about AMR is presented. If this is done by an external expert, introduce the person and facilitate discussion. Make sure that everyone has an opportunity to ask questions and check that participants have understood the input. A good way to check understanding is for participants to discuss in pairs or small groups what they understood, what they still need to know/ask, and then to report back to plenary. See [Module 6](#) for more on briefing experts.

Examples from Responsive Dialogues projects



Many Responsive Dialogues projects used the **Drug Bag activity** in the initial Conversation Events to help participants explore antibiotic misuse in their context, which could lead to AMR problems. This activity allows participants to 'see' and 'hear' about antibiotics, and to actually touch them, and share their experiences of medicine usage in their own settings. See [Section 6](#) for the resource, *Examples of Participatory Activities for Conversation Events* for an example of the Drug Bag activity.



Participants engaged in the Drug Bag activity in Malawi.

Photo: Eleanor MacPherson.

By the end of the first set of Conversation Events, participants should understand and be comfortable with what Responsive Dialogues are, how they will run, and what the main topics will be. All expectations should be clear.

Stage 2: Facilitating the exploration of lived experiences of AMR

By this time in the process, participants will have a general understanding of the Conversation Events and be familiar with each other. Detailed and complex information about AMR is introduced in a step-wise fashion that allows participants to relate the information to their own lives and that of the communities they are part of.

Example of a Responsive Dialogues project



In the **Zambia** project, the facilitator, who was a healthcare worker, presented input on antimicrobials and AMR. He used both words and visuals to present the information in a way that participants could relate to.

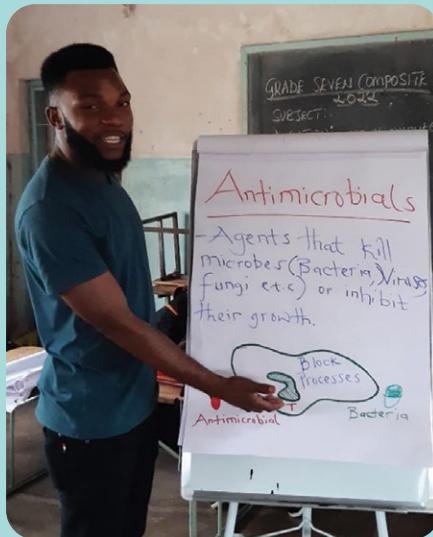


Photo: Jo Zaremba.

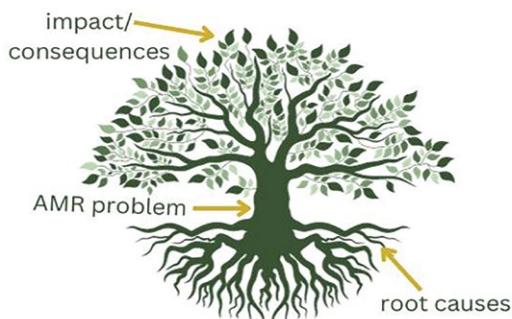
Sessions may become more lively as the group is busy establishing ways of working together which might include debate, exchange of opinions, and disagreement or conflict. [See Module 6](#) for more on addressing facilitation challenges.

It may be helpful to allow some time for individual reflection, as well as for sharing experiences in small groups. Include a mixture of presentation and facilitation styles which will engage a range of participants – from those who are more extrovert, to introvert people. Leave time and space for participants to ask questions, explore topics in their own words and ways, and interact with different participants in the group. If more or new information is introduced, try and make sure that it addresses participants' questions and builds on previous information – and does not confuse or overwhelm participants!

One of the core activities or discussions during this stage involves exploring the issues – or problems – as well as what the causes and drivers behind these problems are. Include activities that help people see this ‘causality’ visually – such as the Problem Tree Analysis (see below).

Examples from Responsive Dialogues projects

Many of the country projects used the **Problem Tree Analysis** to help participants identify what is the AMR problem, what are the root causes of that problem, and what are the consequences/impact. See [Section 6](#) for the resource, *Examples of Participatory Activities for Conversation Events* for an example of the Problem Tree Analysis.



PROBLEM TREE ANALYSIS

Participatory facilitation tips

- **Allow space for emotions.** Lived experiences can be distressing and painful to share, especially for those who have witnessed and/or cared for children, relatives, and friends experiencing the stress of illness and death. Remember that AMR also impacts many people's livelihoods, as livestock die or need to be culled. This calls for sensitive and empathic facilitation. It's important not to rush the sharing of these experiences.
- **Show empathy and caring.** Ask for help if a situation gets too uncomfortable for you. Another participant or a co-facilitator may be able to provide a participant with emotional support. If someone gets upset, allow them time to leave the group/room if they need to, and make sure someone caring is with them.
- **Listen and paraphrase.** Allow everyone to speak. Sensitively ask probing and clarifying questions.
- **Continue to build trust** as the group works through the ‘storming’ stage of development. This may mean working in smaller groups separated along gender, age, or in other ways that are most conducive to building trust. It may also mean managing challenges that arise as participants begin to voice diverse opinions, and assisting the group work through and shift power imbalances. See [Module 6](#) for more on addressing these challenges.

At the end of this stage, ensure participants are clear about any reflection with other community members that will be expected before the next Conversation Event is convened.

Stage 3: Facilitating the process of ideation

Participants should now be familiar with the AMR challenge, and should be starting to think about how it relates to their context, as well as why it is important to actually do something about AMR. The sessions now **move away from problems, towards finding ways to address these problems** and the root causes discussed in earlier sessions. Approaches are used that really open up participants' creativity and encourage contributions from everyone – no matter how 'wild or crazy' they are.

Allow time for participants to **build on each other's ideas**. When one idea is exhausted, move the conversation along to another idea. Make sure that everyone in the group has a chance to share their ideas and complement or thank every idea. At brainstorming stage *all* ideas are valid. Encourage participants to consider **gender and inclusivity issues** in their ideation. Allow this ideation process to continue until participants start running out of ideas, but keep the option open to keep adding ideas.

Once participants have listed all their ideas, help them to organise them through clustering or **running prioritisation activities**. Ask further probing questions about each idea to help the group filter out those that are impossible or difficult to implement, those that are practical, and those that are practical and easy to implement (see example below).

Prioritising ideas

| Difficult to implement (not feasible) | Very practical (feasible) | Easy to implement (feasible) |
|---------------------------------------|---------------------------|------------------------------|
| | | |

Ensure that all ideas and solutions are captured and stored safely so that they can be used and transformed into actions and interventions. Take notes and photograph the flipcharts. See [Module 8](#) for more on documenting and analysing Conversation Events.

It may be helpful to discuss the process for the next stage with participants and seek their input about whether or not to invite any other stakeholders to the co-creation session and if so, whom. These could include media specialists that could help to draw up realistic plans for local awareness-raising campaigns or local health officials who may be able to help identify touch-points where policies can incorporate messages from Conversation Events.

By the end of this stage, there should be an agreed set of three to five ideas that can be worked into prototypes or solutions. Invite participants to reflect on these ideas before the next Conversation Event.

Stage 4: Facilitating the process of co-creation and prototyping

This final stage involves creative processes as well as very practical thinking to **generate solutions that are locally and contextually relevant** and can be the foundation for impact. Local solutions, at community level, could involve households or key community groups or NGOs, while other solutions, such as policy recommendations, will involve high-level stakeholders and have a longer timeline.

Co-creation takes time, so think about how to divide participants into smaller groups to work on different solutions and, potentially, design part of these solutions. Allowing people to select the 'solution' they want to work on and then work on the solution they are most interested in, may help generate more detailed plans. For instance, some people may be naturally creative and come up with drawings/songs/enactments of a solution, while others will be better at identifying resources, funding requirements, actual activities, and steps involved.

Some Responsive Dialogues projects suggest **bringing in additional or new stakeholders** who can already help with the process of co-creation. For instance, inviting media specialists who can help draw up realistic plans for a local awareness-raising campaign; or local health officials who may be able to help identify touch-points where policies are translated into plans and who could incorporate messages from the Conversation Events into these plans.

If, with participants' permission, you have invited stakeholders into the co-creation process, who will be helpful in implementing solutions, be sure to brief them properly so that they do not dominate the discussions or hijack them to achieve their own agendas. See [Module 6](#) for more on briefing stakeholders.

Example from a Responsive Dialogues project



In the **Malawi** project, the co-creation phase had trial sessions where an additional mix of local and national policy-makers/stakeholders were invited to review the solutions earmarked for co-creation prior to the actual co-creation meeting with more key stakeholders.

Facilitate the **prioritisation of promising AMR solutions**, collectively analysing why each solution is important, and what contribution or impact it could make in the community. See [Section 6](#) for the resource, *Examples of Participatory Activities for Conversation Events* for more on prioritising ideas and solutions. In this way, participants begin to narrow down several solutions until they reach a decision about one or parts of one solution to take forward. For each solution, ask probing questions, such as:



- Is this solution really community-based and is it possible for your community implement this alone?

- What would the community think about it? Which 'champions' or other stakeholders could take it up?
- Is this solution valuable for informing national level policies?
- Are there solutions which can be applied at the regional (provincial/district/administrative) level?
- What resources will you need to implement this, for example, people, equipment, money?
- Where could you get these resources?
- Would additional stakeholders be helpful to develop these ideas into more concrete solutions?
- How can we involve them in the co-creation process?

Assist participants to plan out how a solution will be taken forward, for example, using artistic tools to design visual or audible specific solutions, such as messages or a radio broadcast, or a particular policy recommendation. Planning templates like the one below can be helpful to guide participants through the different aspects that need to be considered to translate ideas into pragmatic solutions. Also, allow space to reconsider ideas that turn out to not to be practical and even drop them!

Planning template

| Idea/solution | Steps/activities to carry out the solution | Who is needed to carry this out? Which stakeholders? | Resources needed and who will provide them? | Change that solution will make/generate |
|---------------|--|--|---|---|
| | | | | |
| | | | | |

It is important to remind ourselves to include gender as part of the guidance or criteria that participants use to select ideas and then prioritise and vote on solutions. (Gender consultant to Zambia Responsive Dialogues project)



Funding is a key resource and it is important to **identify potential sources of funding and resources** in the co-creation process. This could be local church or school funds (for instance, to develop and produce posters about antibiotic use), community or NGO funds (for instance, local challenge funds), as well as in-kind resources (for instance, 'free air time' at a local radio station). This is a good time to review the AMR ecosystem (see [Module 1](#)) and to introduce the idea of key stakeholders who could help identify sources for community level funds. If these sources require a formal application procedure, introduce this in the Conversation Event and let participants agree who would be involved in the application/proposal process.

Examples from Responsive Dialogues projects



In the **Malawi** project, promising and practical ideas and solutions were initially decided by the participants as a group before they went into smaller groups to begin to narrow down the solutions. Participants had first ranked the AMR problems based on their potential scale/severity, and this ultimately served as criteria for deciding which ideas and solutions were needed to address the AMR challenges.

In the project in **Zambia**, each participant individually voted on the top two solutions they felt were most feasible. From this process, the top five to six solutions created the 'Prioritised solutions' list. The facilitation team created the following criteria to guide participants' prioritisation process:

- Is the idea affordable?
- Does this idea have a specific target community?
- Has this solution identified the right partners/stakeholders?
- Does this solution have the right activities and timelines?
- Is this solution impactful?
- Is this solution scalable?

The most feasible solutions were disseminated on radio and TV.

Support participants to make the identified co-created solution or an aspect of it as real as possible through **prototypes**. A prototype is like an early model of a solution. It may involve visualising an intervention or strategy or role-playing an aspect of the solution. The prototype should be tangible or demonstrable, it should only include basic elements (low-fidelity), and have low or no costs.

GLOSSARY



Prototypes: To use tools, such as paper models, role-plays, mock-ups of flyers, and so on to make solutions as real as possible. The aim is to use these on a small scale to evaluate specific features of the co-created solution.

Each solution requires a different prototyping process. For example, participants may work in small groups on their prototype, and then share their work and developments with others, who provide them with feedback to make improvements to enhance the solution. Experts and stakeholders might also play an important advisory role in this process.

The prototyping indicates whether to move forward with the solution, develop it further, or dismiss it and begin the prioritisation process again with another co-created solution.

By the end of this stage, participants have narrowed down their identified solutions, and decided on one solution or parts of one solution to take forward, with the help of identified key stakeholders.



Example from a Responsive Dialogues project

In the **Malawi** project, solution prioritisation depended on what was promising and practical. Promising meant that a solution was addressing a critical issue and was likely to have impact, whereas practical meant necessary resources (including social demand) were available.

Some of the identified and prioritised solutions included increasing AMR and proper antibiotic usage awareness, strengthening regulatory frameworks, increasing health system capacity (including diagnostic and essential supply capacity), supporting farmers working in cooperatives (to boost capital and access better markets), and researching organic farming techniques (to reduce antibiotic dependence).

Each solution contained specific details about what was needed to make the solution work. Of these, raising awareness was most practical and immediately implemented through the Ministry of Health incorporating the AMR messages from the Conversation Events into the national AMR awareness campaign, and through the participants and local leaders sharing with peers and wider communities. The rest of the solutions were shared with stakeholders in a dissemination workshop. [See Module 12](#) for more on dissemination.

How to ensure continuous improvement

At each stage of the Conversation Events, seek feedback from participants and use this input to make adjustments to subsequent Conversation Events so that they more effectively and appropriately lead to achieving their purposes and goals. This critical part of Conversation Events allows participants time and space to reflect and comment on what was presented and covered (content), as well as how it was presented – including the deliberative processes and activities used. [See Section 1](#) for more on the Monitoring and Evaluation (M&E) Framework.

Through their feedback, participants become co-creators of subsequent Conversation Events and sessions; and facilitators receive important observations and input about what went well and what did not, which they can then use for the improvement of the next Conversation Events and sessions. This feedback loop is the basis for the iterative and ongoing improvement of Responsive Dialogues.

For this continuous feedback loop to work effectively, the team needs to build in enough time to collect input from participants and to make the necessary adaptations to the agenda and session plans, leading to ongoing improvement.

Feedback on key issues may be collected verbally and/or in writing. It might include questionnaires, feedback forms, reflections on 'ah ha' moments, and/or journals. Facilitators can include any activities and tools that will help to encourage full and equitable participation, especially of those participants who may be shy or afraid to express themselves.

REMEMBER

Time is built in between each Conversation Event so that participants can reflect on their experience and share information with others, and so that they can informally gather responses to feed back into subsequent Conversation Events. This is another way of ensuring continuous improvement of Conversation Events and of Responsive Dialogues. See [Module 4](#) for more.

Example from a Responsive Dialogues project

In the **Thailand** project, during and after each Conversation Event, participants provided feedback, which fed into the next Conversation Event. Some feedback, for example, resulted in adding an extra Conversation Event where needed, and even asking one participant from one Conversation Event to participate in another Conversation Events Set, as an 'expert'.

Some key issues on which to receive feedback:

- **Content:** For example, how relevant is the input, evidence, materials, and resources to participants' experience of AMR? Is it sufficient (too much/too little)? Is it provided in a locally relevant manner?
- **Power dynamics:** For example, how power imbalances are addressed and managed between:
 - Facilitators and participants
 - Participants themselves
 - Experts and participants
 - Stakeholders and participants.
- **Quality of participation:** For example, how do facilitation, processes, and activities ensure inclusivity and equitable participation by all?
- **Valuing of participants' contributions:** For example, do participants feel that their contributions are valued, listened to, and considered in the deliberation process?
- **Time:** For example, is there sufficient time for presentation, interpretation, questioning, dialogue, reflection, and feedback from participants?
- **Co-ideation and co-creation:** For example, is the process of joint participatory generation of ideas and solutions inclusive, participatory, and realistic?

How to monitor facilitation?

The core implementation team uses their M&E Framework to outline questions to ask about the process of facilitating the Conversation Events, how these questions should be asked, and who will ask them. For example, if an external, independent person is used to monitor the facilitation, make sure that they are briefed and if in the room, properly introduced to participants. If any questionnaires or surveys are used, be clear that these are for monitoring purposes only, and not, for example, as a 'test' of any sort and that all responses are anonymised. Remember to always seek permission from the participant group for any additional people or activities which they may not be expecting. See [Section 6](#) for the *Example: Questions Used to Monitor Facilitation* and *Example: Question Guide for Follow-up Evaluation*.



Checklist of guidance in this module

Tick completed activities/tasks and those that still need completion.

| Activities | Yes | To do |
|---|-----|-------|
| The facilitation team understands the type of participatory facilitation activities to use in each 'stage' of Conversation Events | | |
| Participant feedback and continuous improvement of Conversation Events is planned | | |
| Facilitation processes are monitored | | |



Photo: Thailand Responsive Dialogues project.