

This Unit describes how to initiate community mobilization, which is essential to the success of an emergency response plan.

The key to everything discussed thus far is the active participation of community members and leaders. Unit 3 provides a series of community mobilization tools and tips on how to do this, and highlights how the community needs to be involved from the very initial stages of the emergency response.

Having completed this Unit, you should will have the following tools to assist you in engaging communities to support your communication efforts during an emergency.

- [Worksheet 3.1: Analyzing the Problem](#)
- [Worksheet 3.2: Selecting Mobilizers and Spokespeople](#)
- [Exercise 3.1: Community Mapping](#)
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- [List of Community Mobilization Activities](#)
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What Is Community Mobilization?

Community mobilization is a process that aims to engage all sectors of the community to prompt individual, family and community action. It uses a variety of community engagement approaches to raise awareness and empower individuals and groups toward those actions, creating an enabling environment and effecting positive change. Community mobilization can include activities such as door-to-door outreach, public meetings, health fairs, participatory theatre and other activities. Importantly, mobilization efforts are community driven, and community members are active participants in defining the problem, generating solutions and evaluating the outcomes of those solutions.

Why Community Mobilization Is Important

Community mobilization increases the capacity of a community to identify and address its own needs while generating local solutions to problems. For instance, because of its participatory approach, community mobilization ultimately strengthens and enhances the ability of a community to work together towards a common goal. Through its emphasis on prompting reflection and dialogue about current barriers and facilitators, coupled with actions individuals and communities can take to achieve their goals for improved health and wellness, it also contributes to the sustainability of any given action.

Understanding how communities perceive and comprehend a problem is necessary to design adequate interventions. Engaging with community members is crucial to building trust and credibility so messages are accepted, and protective actions more likely to be taken.

Community engagement is the one factor that underlies the success of all other control measures – *Abramowitz et al, 2015*

Working with localized community groups, using existing structures, is highly recommended as the emergency efforts will build on an established network and trusted relationships and better ensures sustainability of emergency preparedness efforts. In Sierra Leone, during the Ebola response, emergency communication teams worked with the Village Development Committee, Family Member Committees and many youth groups.

Especially in the cases of contagious diseases, such as Ebola, integrating community mobilization into the emergency response allows for mobilizers to provide information regularly about what is happening in the community, the roles of emergency responders and, importantly, feedback information to the community about the status of the emergency and of loved ones who have been affected by the consequences of the emergency.

Key Steps for Effective Community Mobilization

1. Identify and Access Communities
2. Select and Train Community Spokespeople and Mobilizers
3. Establish a Formal Structure for Effective Information Flow
4. Identify and Implement Community Mobilization Activities

Identify and Access Communities

As indicated in the rapid needs assessment (**Unit 2**), communities most affected by the emergency may be found in some geographical areas only, or spread across the country.

In either case, when entering a community, it is essential to know the national and subnational protocols, both official and traditional. This knowledge will provide insight into who should be approached first in each community. This will likely be the local authorities and the traditional and religious leaders; however, ensure that you explore the government and the traditional systems accurately so as to follow the expected procedures when entering a community.

General guidelines for entering a community are listed below. Please note that these are general and you must verify expectations within your particular setting:

- Follow established protocol for working in communities. The Government plays a significant role in working with communities. You usually have to seek approval at the district, regional or county levels to enter communities. You might need to establish a service level agreement or memorandum of understanding prior to entering or beginning work in a community.
- Approach the key leaders, the gatekeepers of that community who have the ability to hamper or support your communication activities.
- In consultation with these key leaders and gatekeepers, identify the other important stakeholders who need to be brought on board for community mobilization. Consider local authorities, the health sector and related services, local associations and NGOs, as well as other influential individuals. These may be popular figures and charismatic personalities.
- Invite all identified stakeholders to an agreed location in the community and discuss the emergency, key facts that relate to the spread of the outbreak, important protective behaviors and the consequences of not being engaged in the emergency response.
- Explore with stakeholders how to move forward to stop the outbreak. Ensure that all discussions are participatory, that all members feel comfortable to ask questions and share ideas.
- As part of your discussion on how to move forward, identify community members who can act as spokespeople and mobilizers. Be sure to consider existing networks of mobilizers that are attached to local or international organizations and to health centers.

Exercise: Analyzing the Problem

Worksheet 3.1 provides some questions that can guide discussion during your initial meetings with the community. It aims to highlight how the problem is perceived by the community and the barriers and facilitators that exist to adopting protective behaviors. The resulting information will help inform community mobilization and behavior change activities.

Participatory approaches are helpful to gain an understanding of how the community perceives the issue, the barriers and facilitators that exist, and how and where community members can be reached. A **Sample Job Description**, **Ethical Principles** and **List of Community Mobilization Activities** in the Appendix provide other tools that can guide participatory discussions to inform your interventions, and references for further resources can be found at the end of this I-Kit.

Please note that the worksheets in this section are followed by a completed examples in the Appendix. The completed examples will likely include information about an emergency that during an actual event might not be immediately available. This was done to illustrate the full range of information to inform a strategic communication response. As more data becomes available, update this worksheet.

WORKSHEET 3.1: ANALYZING THE PROBLEM

Purpose: This worksheet is designed to be conducted at the community level should an emergency occur. It will help you analyze the problem related to the emergency and how it affects the community. The resulting information can be used to inform activities and objectives. It should give you a general overview of the problem and factors related to it.

Directions: Complete the worksheet together with key stakeholders and community members.

Please note that this worksheet is followed by a completed example that you can use as reference if necessary.

Problem being addressed by the emergency communication response: _____

What factors put community members at risk of the problem?	
What factors (behavioral and environmental) protect people from the problem?	
What behaviors (if any) caused or exasperated the problem?	
What behavior (or lack of behavior) caused or exasperated the problem (if any)?	
What behavior (or lack of behavior) maintains the problem?	
Who is most affected by the problem?	
Where are these people?	
What are the negative consequences of the problem for individuals affected by it?	
What are the negative consequences of the problem for the community?	
Who should share the responsibility for solving the problem?	
What key behaviors need to change to solve the problem?	
What conditions in the community need to change to solve the problem?	

Select and Train Community Spokespeople and Social Mobilizers

Part of the discussion with stakeholders in your introductory meeting with the community will explore potential avenues for supporting individuals and families to engage in protective behaviors that can manage the health emergency or eventually stop the outbreak. One effective way of doing this is to have a pool of trained spokespeople and mobilizers.

Spokespeople

A spokesperson should be a trusted individual of authority who acts as a point of reference and announces accurate and timely information about the emergency. Spokespeople generally conduct correspondence with the media, such as radio stations and the press, and communicate with the public about the emergency. They liaise regularly with the national and subnational communication mechanism to provide feedback on what is happening on the ground and to obtain information to share with the public.

Acting on behalf of others, spokespeople should be loyal to the issue being addressed and act as role models for what is being promoted. Often, spokespeople are admired leaders, members of respected authorities and institutions or popular national figures.

Mobilizers

A mobilizer is a person who can act as a catalyst. Mobilizers tend to work more directly with the community than spokespeople, providing information and support, engaging with community members in dialogue, monitoring how they respond to the outbreak and messages, and corresponding with the communication cells so as to continuously revise activities based on need. Mobilizers should be trusted members of the community.



Tips for Selecting Mobilizers and Spokespeople

- **Know the protocol** for selecting spokespeople and mobilizers within the community of interest. For example, selection may occur through an open election process where all community members are invited to vote, or it may be done through community leaders only.
- **Link with existing associations, civil society and NGO networks** that already utilize spokespeople and mobilizers, and assess how they are perceived by the community.
- **Consider networks both within the health sector, such as CHWs, and outside of the health sector.** Examples may include religious and traditional leaders, hygiene promoters in water sanitation programs, community mobilizers for gender equality, agricultural extension workers, microcredit groups and educational networks such as teachers, peer educators and village development committees.
- **Identify the trusted sources of information within the community** and include them in your mobilizer and spokespeople network.
- **Assess what the main characteristics of trusted sources of information are,** and use the information to help guide the process of selecting your spokespeople and mobilizers.
- **Include members of minority and marginalized groups and gender parity** in your network of spokespeople and mobilizers as this will help reach vulnerable individuals. If you are unable to access members of these groups, try to identify and select people who are credible and trusted by them.

Identifying and Selecting Spokespeople and Mobilizers

When identifying mobilizers and spokespeople, consult with local, religious and traditional leaders, and consider existing networks of community mobilizers, such as Community Health Workers (CHWs) or community mobilizers associated with local, national or international organizations. Individuals acting as spokespeople and mobilizers for existing structures are likely to have already earned the trust of community members and can be effective in imparting messages and delivering activities relating to the outbreak.

Utilizing existing spokespeople and networks of community mobilizers who have already earned the community's trust may save you time and grant a trustworthy entry point into the community. Ensure, however, that you always liaise with gatekeepers and important stakeholders to follow community protocol when selecting your spokespeople and mobilizers.

The Qualities of Spokespeople and Mobilizers

Spokespeople and mobilizers need to have similar qualities to implement their work effectively. Some of these qualities are intrinsic, while others can be acquired through training. When selecting spokespeople and mobilizers it is crucial to ensure that the person is a trusted and influential source of information in the community and that he or she is able to act as a role model for the issue and the behaviors being promoted.

For more information about the qualities and characteristics of a mobilizer, see the **Sample Job Description** in the Appendix.

Exercise: Selecting Mobilizers and Spokespeople

Worksheet 3.2 has been developed to support you in the process of identifying appropriate spokespeople and mobilizers. It presents a list of desired characteristics for spokespeople and mobilizers, including skills, attitudes, knowledge and possible roles they can play in the community. The worksheet, completed in partnership with leaders and stakeholders in the community, can then be used to guide the process of identifying spokespeople and mobilizers as per community protocol.

WORKSHEET 3.2: SELECTING MOBILIZERS & SPOKESPEOPLE

Purpose: This worksheet provides a checklist highlighting some important characteristics of mobilizers and spokespersons. The list is not exhaustive and not all qualities may be relevant to all situations, but they can provide guidance in the process of selecting mobilizers. The worksheet should help you and the community identify the most important qualities you are looking for in your spokespersons and mobilizers.

Directions: Review and complete this checklist in partnership with community leaders and stakeholders from your community of intervention. Identify the relevance for each characteristic to the situation you are addressing and grade it from one to five (one being least relevant and five being most relevant).

Select those characteristics that have been noted as most important and use those to initiate a selection process with community members to elect mobilizers as per community protocol.

Role of a Community Mobilizer						
		Relevance				
<input type="checkbox"/>	Create trust	1	2	3	4	5
<input type="checkbox"/>	Bring people together	1	2	3	4	5
<input type="checkbox"/>	Create awareness by disseminating correct information and educating community members, liaising with services	1	2	3	4	5
<input type="checkbox"/>	Encourage participation of all community members, including marginalized and vulnerable groups	1	2	3	4	5
<input type="checkbox"/>	Work in partnership with community members and other stakeholders	1	2	3	4	5
<input type="checkbox"/>	Engage in an ongoing dialogue through the relevant communication mechanisms at local, subnational and national levels to provide information on the needs of communities and how are reacting to the emergency and response activities.	1	2	3	4	5
<input type="checkbox"/>	Encourage individuals to identify the needs of their community and support them in developing creative solutions to address those needs	1	2	3	4	5
<input type="checkbox"/>	Support emergency responders by facilitating the community entry process and providing feedback to community members	1	2	3	4	5
<input type="checkbox"/>	Commit the time to work with and engage their community	1	2	3	4	5
<input type="checkbox"/>	Conduct community surveillance	1	2	3	4	5
<input type="checkbox"/>	Monitor communication activities	1	2	3	4	5

WORKSHEET 3.2: SELECTING MOBILIZERS AND SPOKESPEOPLE (Continued)

Attributes, Attitudes and Values of a Community Mobilizer						
		Relevance				
<input type="checkbox"/>	Desire to examine and challenge one's own assumptions, opinions and beliefs	1	2	3	4	5
<input type="checkbox"/>	Respect for all community members and a non-judgmental attitude	1	2	3	4	5
<input type="checkbox"/>	Understanding and respect for the fact that different people have different views and perspectives	1	2	3	4	5
<input type="checkbox"/>	Belief that the community and its members are best placed to solve their problems	1	2	3	4	5
<input type="checkbox"/>	Trusted source of information for community members (e.g., be part of and known by the community)	1	2	3	4	5
<input type="checkbox"/>	Honesty	1	2	3	4	5
<input type="checkbox"/>	Respect for local cultural, traditional and social values	1	2	3	4	5
<input type="checkbox"/>	Dedicated commitment to the issue being addressed	1	2	3	4	5

WORKSHEET 3.2: SELECTING MOBILIZERS AND SPOKESPEOPLE (Continued)

Skills of a Community Mobilizer						
		Relevance				
<input type="checkbox"/>	Oral communication skills and the ability to translate complex scientific information into simple language that is easily understood by the general public	1	2	3	4	5
<input type="checkbox"/>	Facilitation skills to support communities to reflect on an issue and challenge dominant norms	1	2	3	4	5
<input type="checkbox"/>	Active listening skills	1	2	3	4	5
<input type="checkbox"/>	Decision making skills	1	2	3	4	5
<input type="checkbox"/>	Negotiation skills	1	2	3	4	5
<input type="checkbox"/>	Ability to help communities mobilize resources	1	2	3	4	5
<input type="checkbox"/>	Ability to link needs with local services.	1	2	3	4	5
<input type="checkbox"/>	Program management and planning skills	1	2	3	4	5
<input type="checkbox"/>	Basic advocacy skills	1	2	3	4	5

WORKSHEET 3.2: SELECTING MOBILIZERS AND SPOKESPEOPLE (Continued)

Knowledge of a Community Mobilizer					
	Relevance				
Knowledge of the community structure and organization	1	2	3	4	5
Knowledge of the community mobilization process	1	2	3	4	5
Knowledge of the facts relating to the issue being addressed	1	2	3	4	5
Knowledge of the cultural belief systems, beliefs and practices	1	2	3	4	5
Knowledge of ethical principles relating to working with individuals and communities	1	2	3	4	5

Most Relevant Skills for Mobilizers & Spokespeople in Our Community	
Roles	
Attributes, Attitudes & Values	
Knowledge	

Spokesperson and Mobilizer Training

Once the spokespeople and mobilizers have been selected, you will need to consider their training needs. Below is a list of areas to consider for capacity building; however, we acknowledge that specific training needs have to be assessed for individual situations.

- Training on **the issue that is causing the emergency**. This should contain correct, factual information on the issue and protective behaviors to halt the spread of the outbreak. Attention should be given to how to convey potentially complex information in simple, understandable language, using illustrations where appropriate.
- Training in behavior change **communication, facilitation and listening skills** to promote dialogue and exchange, rather than one-way communication.
- Training in **public speaking and talking to the media** to make official announcements or raise awareness among large groups.
- **Community mobilization skills** that may include community entry activities, recruiting community members and getting them engaged and involved.
- **Project management training** that may also include managing time, planning, surveillance and monitoring of activities.
- Training in **ethical principles and guidelines** when working with communities. This should include the principles of respect, impartiality, confidentiality, accuracy and do no harm. For more information about each of these five principles, see **Ethical Principles for Community Spokespeople and Social Mobilizers** in the **Appendix**.

Mobilizers and spokespeople who are trained in essential areas can then deliver activities and share messages in consultation with the communication cells. Some basic recommendations that can guide their work are summarized in **Table 4** below.

Table 4: Do's and Don'ts of Mobilizers and Spokespeople

Do's	Don'ts
<ul style="list-style-type: none"> • Promote and sustain community engagement • Empower communities by engaging them in collective, constructive dialogue to develop action plans • Reinforce messages using multiple channels • Include a range of people, groups and institutions, as well as vulnerable and marginalized groups • Stimulate critical thinking and challenge dominant practices and norms that may be harmful • Adopt participatory, two-way communication with community members • Acknowledge the community's contribution to ending the outbreak • Address stigma and rumors • Inform the community regularly on how the outbreak is evolving • Provide factually correct information • Be compassionate, empathetic and trustworthy • Tell the truth • Offer follow-up on questions and issues that cannot be addressed immediately • Illustrate points with examples or stories • Respect cultural and traditional values • Dress appropriately according to the context 	<ul style="list-style-type: none"> • Deliver one-off or ad hoc activities • Use power over others, in particular over vulnerable community members • Create divisions between people and groups • Exclude certain groups or individuals • Deliver top-down information • Lecture, preach or teach individuals and groups with one-way communication • Tell people what you think rather than what you know to be correct • Make up information you are unsure of • Judge, blame or shame any group or individual • Act in isolation • Go beyond the scope of your responsibilities and provide support or information that does not relate to your duties or expertise • Use jargon and complicated, scientific terms • Disregard cultural norms, practices and expectations • Address people in ways that are not considered appropriate for the context • Fail to update community members on how the outbreak is progressing

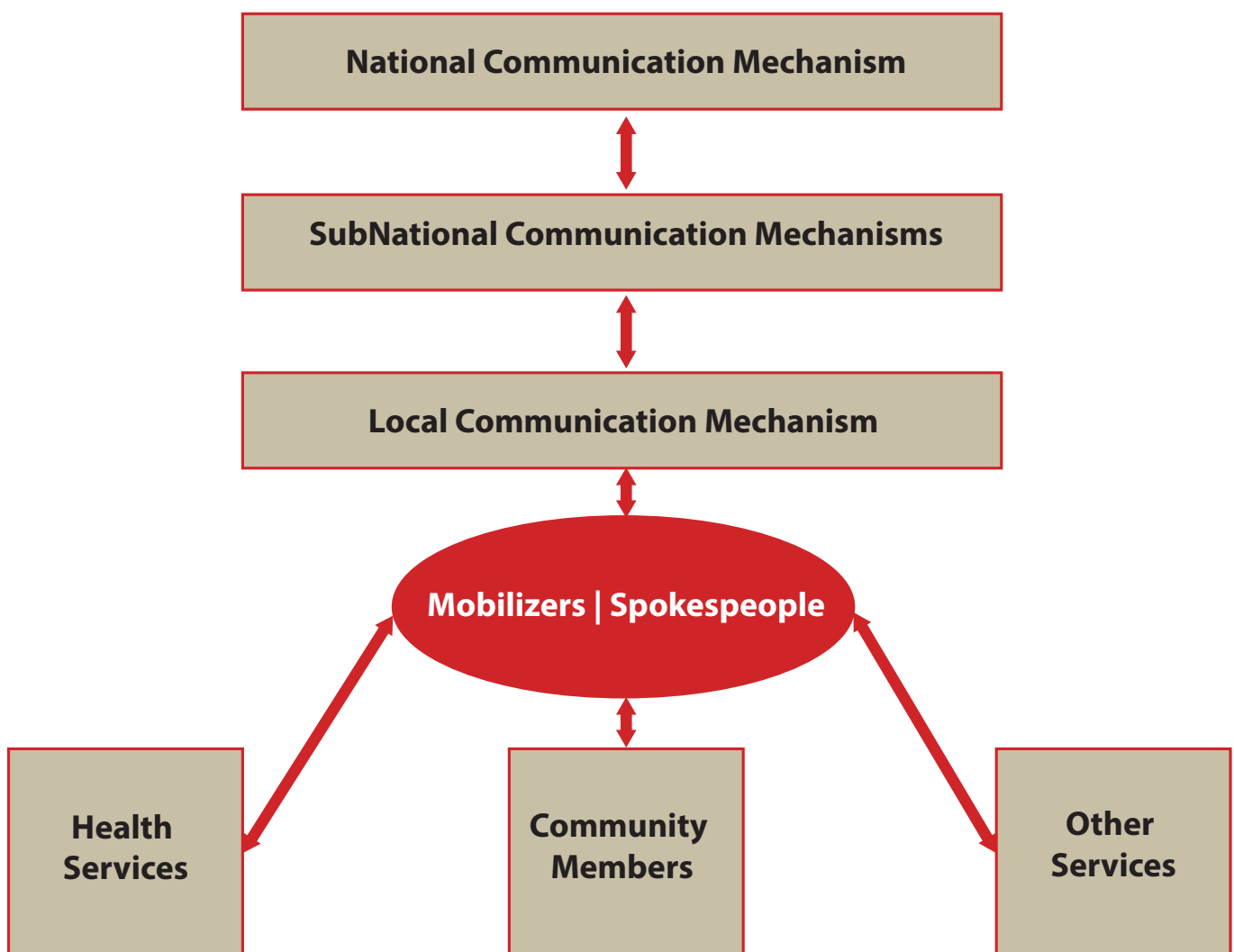
Establish a Formal Structure for an Effective Flow of Information

One of the strengths of using spokespeople and mobilizers is that they allow for continuous monitoring of how the community is responding both to the emergency and to the activities aimed at curbing it. For continuous monitoring to be effective, however, mobilizers and spokespeople need to liaise regularly with community members and services, as well as with the local, subnational and national communication systems. These issues have been explored in **Unit 1**.

The communication between the community, the mobilizers/spokespeople and the communication cells, needs to be a regular, two-way process. It is a feedback loop that allows mobilizers to provide vital information to service providers and to the communication cells on community perceptions of services and activities; how messages are being received; and social and cultural practices that can inhibit an individual's ability to engage in protective behaviors. This is particularly important for detecting rumors and arising barriers early, and thus addressing them promptly.

The **Figure 6** below provides a representation of how this feedback loop can look, placing the community spokespeople and mobilizers at the center of the process.

Figure 6: Information Flow between Mobilizers, the Community and Communication Cells



The information flow diagram can help determine the feedback loop between the community and the communication cells. It is likely, however, that every location will have its own systems and requirements for how this should look, and defining the flow of information should be done in consultation with the community and the country's structures.

Identify and Implement Community Mobilization Activities

Community mobilization involves engaging community members to participate actively in defining the problems that affect them and generating solutions. As discussed previously in this Unit, entering the community is the first step of community mobilization. Once initial contact has been made and key concerns have been explored, a range of community-based activities can be used to raise awareness, encourage reflection, improve self-efficacy and promote behavior change.

In this Unit we outline five channels linked to community mobilization and recommended when developing activities. These five channels are: radio, large-scale community-based activities, interpersonal communication, community-based surveillance and mobile phone technology.

Each of these channels is in the **Unit 7** Communication Channel Quick Reference. For each channel, the advantages and disadvantages are listed, as well as a series of tips on when and how to use it.

M&E and Continual Assessment

Once your team of mobilizers and spokespeople is in place, ensure you develop a plan on what messages they will need to deliver and how, as the emergency unfolds and how these should be delivered. This will not only ensure that mobilizers and spokespeople relay correct information, it will also allow your program to harmonize messages and to monitor if these are being delivered as planned.

See **Channels for Community Mobilization** in the Appendix for a detailed description of how the various communication channels can be used for community mobilization. You will find a list of different community mobilization activities under each of these five channels.

Any campaign needs to make use of a variety of communication channels to reinforce messages at multiple levels and increase the likelihood that messages are being heard and understood.

EXERCISE 3.1: COMMUNITY MAPPING

Objective: This participatory exercise identifies the areas and structures within a community that are of importance to community members.

In the case of an emergency, it can be used to highlight the facilities that support people affected by the emergency, areas where there is higher risk and locations that are important for community members.

Materials Required: Large flip chart paper and colored marker pens

Time Required: 20 to 30 minutes

Instructions:

Divide participants into groups of five to eight people, all living in the same neighborhood.

Tell them that they will need to think about where they live and draw a map of their neighborhood. The map should include major landmarks, important resources, roads and transport routes.

When drawing the map, ask participants to think in particular of the following issues related to the emergency (adjust according to your specific context and situation):

1. Where are the health facilities?
2. Where are other services that people would go to if affected by the emergency?
3. Where are the points that can increase the risk of being affected by the problem/outbreak? (for example latrines in the case of cholera, crowded spaces in the case of Ebola)
4. Where are the areas where people gather? (for example churches, markets)
5. Where are the schools?

Give the groups 15 minutes to draw the maps.

When the groups have completed their maps, ask them to place them on the wall in an exhibit.

Ask each group to describe their map.

Discuss in a plenary what these maps tell you about the problem being addressed. Areas of discussion can include:

1. Where are the places that people turn to if affected by the problem? Are there any important gaps?
2. What are the places where people are at greater risk of being affected by the problem? Do you see any patterns? Are there any ways that this can change?
3. Where can important information be shared with community members to reach many people at the same time?

EXERCISE 3.2: MAPPING AN INFORMATION FLOW FOR COMMUNITY MOBILIZATION


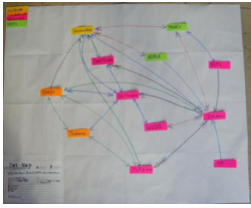
Objective: This participatory exercise identifies how information flows in a country (e.g., national and local level) and which stakeholders are the most influential to ensure information will be well-received by the appropriate audiences. Knowing this information will help countries avoid chaos while trying to rapidly communicate important health messages in the face of an emergency, which can lead to rumors and misinformation, and even more deaths.

Materials Required: large flip chart paper and colored marker pens.

Time Required: 2 to 2.5 hours

Instructions:

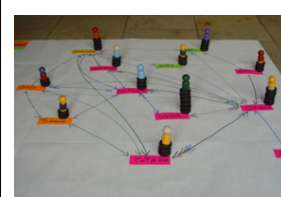
1. If possible, interview stakeholders who are knowledgeable about the systems in your country before you conduct the exercise.
2. Convene national and local level stakeholders familiar with how health communication flows among national and local level audiences. Include no more than 30 people.
3. Examine and explore the information flow among national and local stakeholders using the steps below.¹
4. When you have completed your stakeholder map, discuss the implications for your emergency communication plan.
5. Validate this information with authorities at the national and local levels, including within the Ministry of Information and the Ministry of Health.

Steps to Develop a Stakeholder Map Identifying an Information Flow:	
<p>Step 1: Who is involved? Write actor names on colored sticky notes, colored by groups (e.g., government offices, donors, civil society groups, and others who influence the flow of information at the local and national level).</p> <p>Note: You can start with separate maps for national and local level stakeholders and then join them later.</p>	
<p>Step 2. How are they linked? Draw lines indicating how critical emergency response information (including messages) flows among these stakeholders. Include arrows and indicate one-way or two-way flows.</p>	

¹ Adapted from the Net-Map Toolbox: Influence Mapping of Social Networks, developed by Eva Schiffer, International Food Policy Research Institute, Washington, DC, USA, <http://netmap.wordpress.com>

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Step 3. How influential are they? Indicate how strongly they influence the flow of information. Build towers or draw circles to indicate the size of their influence (e.g., small to large)



EXERCISE 3.3: VENN DIAGRAMS

Objective: Venn diagrams can be used to find out which people and organizations are important within a community.

In the case of an emergency, it can be used to identify who and what is believed to be important for the spread or curbing of an outbreak, to see what institutions operate together and how they interact with each other, or to illustrate the influence that people and institutions have on the life of the community.

Materials Required: Flipchart paper, colored papers, marker pens, scissors, tape or glue

Time Required: 60 to 75 minutes

Instructions:

Select the issue you want to address with the group depending on your needs. Examples relating to an emergency can include:

- The influential people and institutions that can contribute to bringing the emergency to an end
- The different factors perpetuating the outbreak (e.g., hygiene and sanitation)
- The people who are most affected by or at-risk of the problem
- The behaviors that contribute to perpetuating the outbreak

Divide participants into groups of four to eight people and tell them that they will describe visually the importance of the issue being addressed.

Explain that first they need to think of all the people/institutions/behaviors (depending on the factor being discussed) related to that issue.

Once they have identified these, tell participants they need to rank them in terms of importance. The importance of each factor will be presented visually by cutting a circle from the colored paper. The larger the circle, the more important the factor. All group members need to come to a consensus.

Ask participants to glue the different sized circles onto the flipchart paper and to place close together, overlapping those that are linked or connected, while those that are not linked or connected should be placed further apart. This will show the level of connection and interaction that exists between factors.

Once the groups have completed their Venn diagrams, ask them to place them on the wall in an exhibit.

Ask each group to describe their diagram.

Discuss as a group what these diagrams tell you about the problem being addressed. Areas of discussion can include:

- What are the most influential factors affecting the problem? Are they linked?

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- Who in the community is most affected by these factors?
- Who are what institutions have the most decision-making power and influence to help address the issue?
- How can this information be used to develop activities that can address the problem?

EXERCISE 3.4: TOP-OF-THE-MIND EXERCISE

Objective: This exercise allows you to explore people’s perceptions and immediate associations with a particular topic.

In an emergency this can be used to understand community perceptions about the issue causing the emergency, about activities being delivered, about services and providers and about control measures.

Materials Required: Flipchart papers and marker pens

Time Required: 15 to 20 minutes

Instructions:

1. Select the topic you want to explore with the group. For example, “isolation.”
2. Explain to the group (of approximately six people) that you will say a word and they will have to tell you what are the first associations with that word that come to their mind. Tell them they do not have to think too much and that they should say the first association that comes to their mind. Provide some examples to illustrate your point. For example:
“Isolation” —> “fear,” “loneliness” and “sick people”
3. Start by telling the chosen word to the group and ask them about the first thing that comes to their mind. Then ask them to say the second, the third and so on until no more associations come up.
4. Write the associations on the flipchart paper.
5. Once associations have been exhausted, discuss with the group what these results tell us about how the issue is being perceived.
6. Ask participants to explain the associations to further understand the group’s perceptions of them.
7. Look to see if there is consensus among the group or if there are areas of disagreement.
8. This exercise can also be done on a one-to-one during an interview or when meeting with people. It can provide a rapid insight into what people are thinking and feeling about the issue, highlight any major differences in perceptions, and help define behavioral objectives and activities.