

When you look at the Participatory Learning and Action Tools, you will see that they are all laid out in the same way.

- **Number.** Each tool is numbered to help you find the right tool quickly. The numbering on the tools does not mean that they should be used in this order!
- **What is it?** This gives a brief summary of the tool and what it can be used for.
- **Why use it?** This gives you an idea of what the tool is commonly used for. However, you are strongly encouraged to adapt the tool to suit your own circumstances and invent new ways of using it.
- **How to use it?** Each tool provides step-by-step guidance on how the tool can be used. But it is only guidance, not strict instructions! Remember to be flexible. If something doesn't work very well, we encourage you to use your own best judgment and adapt it to suit your own circumstances. Similarly, the questions you will ask will vary according to who you will be using it with, when and for what topic.
- **Facilitator notes.** This provides useful guidance on what to remember when facilitating the tool or alternative ways in which it might be used. Please feel free to add your own notes to help you.
- **Diagram or illustration.** Some tools have a diagram or illustration attached to it. These are examples only. You should not aim to recreate exactly the same diagram. And remember it is the discussion, learning and action which occurs while drawing the diagram that is more important than the diagram itself. So don't worry if the diagram looks different from the example provided.

It is a good idea to look through and familiarize yourself with as many tools as possible since you will need to match the right tool to the issues you will be addressing. There are no rules about which tools can be used for which issue. You also need to consider which tools work best with the people who will be using them. Some tools work best with people who share the same characteristics, for example same gender, age group and so on. Some tools work better in large groups, others in smaller groups. As a general guide, tools that require a lot of detailed analysis, or are of a very personal nature, are best used in small groups.

You also need to think about how much time you have available to cover all of your objectives. Some tools can deal with a lot of issues at once, while others concentrate on just one issue in depth. Time is the most important resource required in facilitating participatory learning and action. However, the poor who you are trying to engage are often very busy and suffer from "time poverty". Time spent away from their regular livelihood often means a loss of income. You need to be aware of people's schedules and time limitations when trying to plan a community activity (International HIV/AIDS Alliance, 2006).

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Tool 1: Transmission Routes

What is it?

This tool educates people about faecal-oral transmission routes using the F-Diagram and how controls can be used to block the disease transmission routes. The name “F-Diagram” only works in English and stands for feces, food, flies, fields, fingers, fluids, and face. Call this game Transmission Routes or something similar in another language.

Why use it?

This tool can help participants discover and analyze how diarrhoeal disease can be spread through the environment.

How to use it

1. Cut the F-Diagram into individual components, including the arrows, before starting the activity.
2. Introduce the topic and start with the pictures of feces and the child’s mouth. Explain that there are many ways in which pathogens can be “transmitted” from the feces to the mouth. Place the feces picture at one end of the table/floor and the mouth picture at the other end.
3. Divide participants into groups of 5-8 people. Ask the groups to place the remaining pre-cut cards, including the arrows, between these two pictures to show how pathogens can find their way to the mouth.
4. When the groups have made their diagrams, ask each group to show and explain its diagram to the other groups. Let them respond to questions raised by the other groups.
5. Discuss the similarities and differences between the various diagrams. Encourage discussion to find out why participants placed the pictures in the particular order and ensure everyone understands what a “transmission route” is.
6. Facilitate a discussion to help the group use this new knowledge to examine its own situation. Discuss and identify:
 - The transmission routes in the community
 - The problem areas and behaviours that are putting people at risk of infection.
7. Then ask each group to identify practices that can break the transmission routes. Have them place the following pre-cut cards on top of the arrows: latrine, water treatment technologies, hand washing, good hygiene practices, good food handling practices and safe water storage. It is useful to have blank paper and pens so that the group can create its own blocks if the pre-cut cards do not cover all situations.
8. When the groups have made their diagrams, ask each group to show and explain its diagram to the other groups. Let them respond to questions raised by the other groups.
9. Discuss the similarities and differences between the various diagrams. Encourage discussion to find out why participants placed the blocking cards where they did and ensure everyone understands how that barrier works.
10. Encourage discussion to ensure understanding.

Facilitator Notes

- The F Diagram only works in English so it should be called Transmission Routes or a similar name in other languages.
- Some participants may at first be shocked at the content of this activity. There may be some disbelief that feces can be transmitted to the mouth. The best way to deal with

this situation is to get the group working together as quickly as possible. Those participants who are more receptive than others will help the disbelievers to become more involved.

- Do not be concerned if the groups do not identify all the fecal-oral routes. It is enough if they have identified some of the routes.
- Do not prompt or direct the groups when they are trying to create their diagrams.
- If the whole group does not manage to clearly identify the transmission routes, try to find out why. It may be useful to hold a group discussion to evaluate the activity, which then can be tried a second time.
- It would be a good idea to put the diagrams on the wall so it is easy for everyone to see and refer to later on.
- This activity can be adapted to investigate other diseases such as intestinal worms, schistosomiasis, guinea worm disease, and dengue fever.

(Adapted from WHO, 1998)

Tool 2: Analyzing the Barriers

What is it?

This tool lets people analyze how effective the barriers are and how easy or difficult they would be to put into place.

Why use it?

This tool can be used to follow up Transmission Routes and Three Pile Sorting to help people identify barriers they can implement to prevent the transmission of diarrhoeal disease.

How to use it

1. Have groups sort all the blocking methods from the Transmission Routes activity or the good cards from the Three Pile Sorting activity into three piles: those that have a “big impact”, “small impact” and “no impact” on disease transmission. Keep the three piles separate.
2. Have people sort each pile of blocking methods into “easy to do”, “possible to do” and “difficult to do”. You now have a chart to rank the target behaviours.

	No Impact	Small Impact	Big Impact
Easy to Do			
Possible to Do			
Hard to Do			

These activities should be targeted first because people say they are easier to do and have a bigger impact.

Better to avoid these activities since they are harder to do and have little impact.

3. When the groups have completed the task, invite them to share their chart and discuss:
 - Which barriers the group would like to use in its community
 - The practicalities that would be involved in putting the barriers in place

Alternative Method

If the activity seems confusing, it may be done as follows. Divide the group in two and give each a complete set of barriers. Ask one group to do a three pile sorting for “impact” (i.e. big impact, in between, no impact). Ask the other group to do a three pile sorting for “how easy the barriers are to put in place” (i.e. easy to do, in between, difficult to do). Then compare the two sets of cards.

Another way of carrying out the activity is to do a three pile sorting of the barriers aimed at “impact”. Then take the “biggest impact” barriers and do another three pile sorting, this time aimed at “easy to do”. Repeat with a three pile sorting for “in between” barriers.

Facilitator Notes

- This type of chart may be a new concept for the group so it might be a good idea to explain it step by step. Make it clear that this is only an explanation; participants should make their own placements.
- If a group is unclear about the effectiveness of certain barriers, do not correct it. Instead, think of questions which might help it to come to a decision.
- Do not be concerned at this stage if the group does not know enough to be able to judge how effective the barriers might be. There will be opportunities later in the process to introduce additional information to increase the quality of decision making.

(Adapted from WHO, 1998)

Tool 3: Three Pile Sorting

What is it?

This activity allows participants to exchange information and discuss common water, hygiene and sanitation practices according to their good and bad impacts on health. The aim is not to test people's knowledge or to correct personal habits, but rather to provide a starting point for a discussion of local hygiene and sanitation beliefs and practices.

Why use it?

This tool can be used to:

- assess people's understanding of water, hygiene and sanitation practices and the impact on health
- provide a way to explore issues about water, hygiene and sanitation
- start discussions about local beliefs and practices

How to use it

1. If you intend to use this as a teaching activity with one group then one set of cards is suitable. If you intend to complete this using several groups at the same time, then print out as many versions as you need so that each group has a complete set of cards.
2. Give out the sets of three pile sorting drawings, and three heading cards – one with the word “good”, another with the word “bad” and third with the word “in-between”. (Symbols to represent these qualities are also printed on each card i.e.: smile, sad, no expression.)
3. Ask the participants to sort the pictures into three piles.
 - Good – those which they think show activities that are good for health.
 - Bad - those which they think show activities that are bad for health.
 - In-between - those which they think are activities that are neither good nor bad for health or which they are not sure about.
4. After 20 – 30 minutes ask the participants to explain their selections and why they made these choices. Let the group answer any questions that the other participants raise.
5. Facilitate a discussion on the way the participants have sorted the drawings. This discussion will provide a chance for participants to share what they know with the rest of the group. Clarify any misconceptions about disease transmission routes, and encourage the group to think carefully about the choices moving cards from one pile to another if necessary. The group may realize there are knowledge gaps and look for ways to fill these.
6. Ask the group to consider and discuss the common behaviours in its own community. Ask the group to consider whether these behaviours are similar to any of the good and bad practices it has identified.
7. At this stage or at a later session the group may start to discuss ways of eliminating the bad practices it has identified in its community. Encourage this discussion and have the group keep a record of suggestions made.

Alternative method

- If two or more sets of three-pile card sorting drawings are available and the group of participants is quite large, the group can be split into two or more subgroups. Each subgroup then carries out the exercise, and the facilitator encourages a debate between groups on why they made the choices they did.

Facilitator Notes

- It is good to include some drawings which can be interpreted in a number of different ways. This helps to make the activity more challenging and stimulates discussion.
- Don't prompt or direct the choices of the group by giving information. If people ask you specific questions, redirect the questions back to the group for a response. If the group is unable to interpret any one drawing, suggest that it is set aside.
- If the group wants to know how many people practice good and bad behaviours, The Pocket Chart can be used to help find this information.

(Adapted from WHO, 1998)

Tool 4: Sanitation Ladder

What is it?

The sanitation ladder helps people to identify options for improving sanitation in their community and realize that this can be a gradual process.

Why use it?

This activity helps participants to:

- Describe the community's sanitation situation
- Identify options for improving sanitation
- Discover that improvements can be made step-by-step

How to use it

1. Depending on how many people and/or groups you are working with, print out as many copies as you need so that each group has a complete set of cards.
2. Introduce the exercise to the participants. Give the participants the pictures depicting the various methods of excreta disposal. It may be useful to have some paper and pen so that participants can draw other methods which are not included in the set of drawings.
3. Ask the participants to sort the pictures into steps according to improvements in sanitation practices. Participants can take 15 – 20 minutes for this work.
4. When the groups have completed this task, ask the group to explain its sanitation ladder to the other participants.
5. After the presentations, encourage a group discussion covering:
 - The similarities and differences in the way the options have been arranged as steps.
 - The options that have been identified as best for the community
 - The advantages of each option
 - The difficulties or obstacles that would make moving up the ladder difficult
 - How these decisions were reached
6. Explain to the group that the next activity will help it to develop a plan to get from where it is now to the situation it would like to have in the future.

Alternative Methods

If the size of your group is almost the same as the number of illustrations you have (about 16) give one illustration to each participant. Have the participants arrange themselves in a line, in order from worst sanitation practice to best. Starting from the worst end of the line, ask each participant to explain to the group why their illustration is a better practice than the previous illustration. The group and the facilitator can discuss whether they agree with the order.

This activity can also be used to deal with other questions and other problems. For instance the sanitation ladder can be adapted to make a water ladder. The activity would be conducted in the same way, but using drawings showing different water options for improving quality, quantity and access to water supply. The options shown would need to range from most simple to the more complex. Drawings of unsafe or unprotected water sources and collection would have to be included since some communities would be starting from this step.

Facilitator Notes

- Before you begin this activity it would be helpful to have information on:
 - The design principles of different sanitation options
 - The effectiveness of different options
 - The use and maintenance of each option
 - The cost of different options
 - The durability and sustainability of each option
- The sanitation ladder shows that improvements can be made step by step. The idea that a community can progress up the ladder at different rates can be very appealing to groups. They realize that changes can be made over time, at a pace that is appropriate and manageable to them. When groups discover this, it can inspire them to become more involved.
- Some options are equally good. Two options can be placed side by side so the ladder has “branches”. The idea of progression and choosing for the future is more important than the shape of the ladder.

(Adapted from WHO, 1998)

Tool 5: Pocket Chart

What is it?

The pocket chart is a tool to help the group collect, organize and analyze information. A pocket chart can be set up in many different ways, depending on what the group wants to find out.

Why use it?

Use a pocket chart when:

- The group needs to collect information confidentially on what people are actually doing in the community.
- The group has a question or point they want to examine.
- The group wants to make a collective decision.

How to make a pocket chart

A pocket chart can be made of paper, plastic, cloth or with jars. If made of paper, plastic or cloth, the most practical size is to use 1-1.5 metres square (3-4.5 feet square). A pocket chart of this size can easily be rolled or folded for transporting from one place to another.

1. Create a row across the top of the chart, with pockets in which drawings can be placed or pinned to. The drawings will represent subjects about which data needs to be collected, such as where people defecate or where people get their drinking water. There may be as few as three pockets, or as many as seven.
2. Create a column along the left side of the chart, with similar pockets where drawings can be placed. These might represent the different people who use the options, or other variables. There may be as few as five pockets, or as many as ten.
3. Attach rows of pockets across the chart so that there is one for each option, both up and down and across, to form a grid pattern.

How to use it

1. Explain to the group what a pocket chart is and how to use it.
2. Ask the group to identify which behaviours or practices it would like to know more about. When these are clear, set up the column and row headings on the pocket chart.
3. Provide participants with tokens or slips of paper for voting.
4. Participants vote by placing their token in the appropriate pocket that represents their choice or information. During voting, the pocket chart is turned away from the group or put in a separate room so that voting is confidential. If transparent pockets are used, a blank card is placed inside each of them. Participants then place their tokens behind this card.
5. When all the participants have given their information, the tokens are counted up by volunteers and the information is presented to the group. The tokens should be counted in front of the group so that everyone can see that the counting is done accurately. The tokens should be taped onto sheets of paper or directly onto the pocket chart to give immediate visual feedback of the results, and then counted so that none are lost or tampered with. If transparent plastic pockets are used, the tokens can be assessed visually by removing the card covering them.
6. Discuss what this information reveals about actual practices in the community.

Other ways to use it

Example 1: Defecation sites

- Drawings of different sites or facilities used for defecation are used to create the row across the top of the chart. The drawings can be taken from Three Pile Sorting.
- The column down the left-hand side shows a man, woman, boy, girl, etc.

Participants will identify themselves in the left-hand side column and then indicate the site or facility they normally use, and then place their token in the corresponding pocket.

Additionally, participants can carry out the activity for urination sites. Give them two tokens of different colours or shapes (one to represent urination and the other to represent defecation). They place the appropriate token to indicate the options they use for each option.

Example 2: Water sources and water uses

- The row across the top of the chart is created using drawings of places where of the means by which water can be obtained; for example spring, river, well, tap, pond, rainwater, water vendor, etc. The drawings can be taken from Three Pile Sorting.
- The column down the left-hand side shows different uses of water; for example, drinking, cooking, washing food, washing dishes, washing hands, bathing, watering garden, etc.

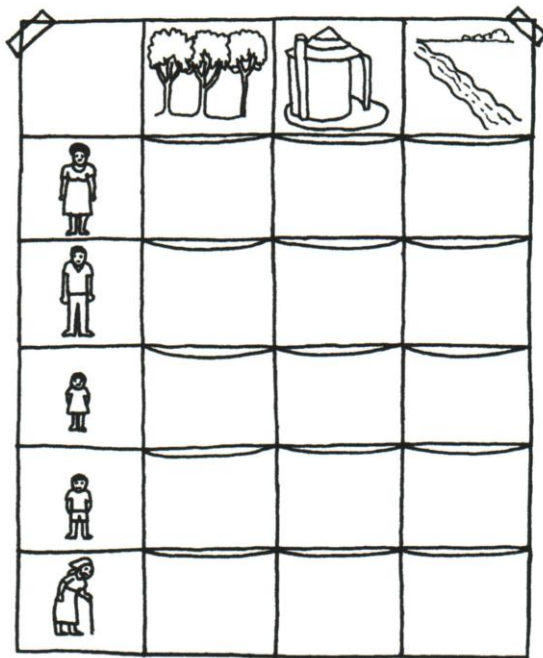
Participants will use several tokens to indicate the water source for each use applicable to them. For example, I drink water from the well, I wash my clothes with water from the river, etc.

Facilitator Notes

- Stress the need for people to be honest when placing their tokens, that this is a learning exercise and that, as such, it is important that the information collected be true to life.
- Make sure that the pocket chart is set up in such a way that participants can place their tokens without being seen by others. Ensuring confidentiality is important so that participants are honest about their responses.
- When the tool is being used for the first time, confusion can be avoided if only one drawing at a time is placed in the left-hand side column. Participants then place their tokens to identify their options. After this, the next drawing can be placed below the first one in the left-hand side column. Continue in this way until all the drawings in the left-hand side column are in place. This process will be slower than setting all the drawings up at once in the beginning.
- This activity can also be used to collect more information by asking more than one question and using more than one type, colour or shape of token. If the group, for example, wanted to know which options were used occasionally as well as which were used frequently, each participant could use one type of token (say green) to answer the first question, and a different type of token (say red) to answer the second question.
- Make sure the set of drawings reflects all the options present in the community. Be prepared to include or make additional drawings to represent other options mentioned or suggested by the group during the activity.
- Be prepared with ways to keep the rest of the group busy while members are taking turns to place their tokens, since this process can be quite long. Or else, do the pocket chart activity during a break.
- The pocket chart is a good evaluation tool. Information collected at an early stage of the project can be compared with information collected in the same way later on. By

comparing the two sets of information, the group can see whether changes in behaviour are taking place.

(Adapted from WHO, 1998)



Tool 6: Courage to Change

What is it?

This tool involves participants standing at different points along a line to show how easy or hard it is to make changes relating to water, hygiene and sanitation.

Why use it?

Using courage to change helps to:

- provide a non-threatening way to identify the changes that people need to make in their lives and community in relation to water, hygiene and sanitation
- assess how people feel about those changes, including which changes are easy or hard and why.

How to use it

1. Mark a line on the ground. State that one end means 'easy' and the other end means 'hard'.
2. Ask the participants to identify a way in which individuals or the community need to change in relation to water, hygiene and sanitation. Examples might include 'We all need to wash our hands after using the latrine' or 'We all need to stop defecating in the open'.
3. Ask a volunteer to stand on the line that you have drawn, according to how easy or difficult they think it would be for individuals or the community to make the change.
4. Ask the volunteer to explain why they have chosen to stand where they are. Ask them what support individuals or the community would need to make the change easier. Ask the other participants if they agree.
5. Ask the participants to identify another way in which individuals or the community need to change. Repeat the process for another six to eight changes.
6. Record what is easy and what is hard to change in a way that all participants can see.
7. When the activity is complete, encourage the participants to discuss what courage to change has shown.
 - What makes changes easy or hard?
 - What sort of support do individuals or the community need to make changes easier?
 - How could that support be provided?
 - By whom?

Facilitator Notes

- Talking about changes that need to be made can be difficult. Help participants to feel comfortable by agreeing that all information is confidential. Remind participants that the activity is about the changes that people like them can make. It is not necessarily about the changes that they, personally, must make.
- Instead of a line, you can use a 'secret vote'. This involves participants having voting cards and using a scale of one to five dots to show how easy or hard a change is. For example one dot (•) would show that it was very easy and five (•••••) that it was very hard. Read out an example of a change that is needed. Ask the participants to vote by putting dots on a card and putting it into a box or basket. Count up the votes and discuss what the total says about how easy or hard the change is.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 7: Hot Seat

What is it?

This tool is particularly effective for getting people to put themselves in others' shoes and think through the implications and pressures faced in different situations.

Why use it?

Using hot seating helps to:

- provide a lively way to explore issues about water, hygiene and sanitation
- identify what people already do and don't do about water, hygiene and sanitation
- explore how people feel about issues relating to water, hygiene and sanitation
- address myths and misunderstandings about water, hygiene and sanitation
- explore different strategies to address water, hygiene and sanitation issues.

How to use it

1. Before the activity, prepare four case studies for people to explore. These should be real-life dilemmas, written in the first person. For example, if you are exploring disease transmission a case study could read, 'I am a woman who gets sick because I ...'
Alternatively, ask participants to think of dilemmas.
2. Ask for a volunteer to sit in the 'hot seat'. This means to sit down in a chair or on the floor in front of all the other participants.
3. Ask the person to read out the case study as if they were the person in the case study.
4. Invite the rest of the participants to ask questions addressing the person in the case study as if they are that person's friend – for example, 'Why do you believe...?'
5. Where questions require information that is not provided in the case study, encourage the volunteer in the hot seat to fill in the details.
6. Repeat the activity with other volunteers and other case studies.
7. When the activity is complete, encourage the participants to discuss what they have learned.
 - Why was it easy or difficult to respond to the questions?
 - What choices did the person have?
 - What did the responses show about people's knowledge and attitudes?
 - How do these affect a person's risk of getting sick?
 - Clarify any misunderstandings that people may have.

Facilitator Notes

- Encourage a relaxed atmosphere. It can be less threatening if two people take the hot seat at once – for example, both the woman and her husband or child.
- Stress that the case study does not necessarily reflect the experience of that person.
- Don't pressure people to take the hot seat if they don't want to.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 8: Knowledge, Skills and Attitude

What is it?

This tool involves participants identifying the knowledge, skills and attitudes for a person involved in action on water, hygiene and sanitation.

Why use it?

Knowledge, skills and attitudes diagrams are particularly useful for deciding what kind of person can best carry out a particular role or action with regard to water, hygiene and sanitation.

- Knowledge means a person's understanding and information about key subjects, such as disease transmission or household water treatment.
- Skills means a person's practical, technical and 'people' skills, such as good listening or project design.
- Attitude means a person's feelings and approach, such as being empowering and non-judgmental.

How to use it

1. Explain the purpose of the tool to participants. Select a person who should be involved in action on water, hygiene and sanitation. Examples might include 'mother in a household', 'doctor' or 'community health worker'.
2. Draw a large picture of a person. Ask participants to think about the knowledge that person should have and write these around the head. Then get them to repeat this with skills written on the arms and attitudes on the body.
3. If participants leave out important knowledge, skills, or attitudes, contribute ideas yourself and explain why they are important.
4. When the activity is complete, encourage the participants to discuss what the diagram shows.
 - Was there agreement about the knowledge, skills and attitudes?
 - Which ones are most important?
 - How do knowledge, skills and attitudes link together?
 - How does the person compare to real people involved in action on water, hygiene and sanitation?
 - What support would help people to improve their knowledge, skills and attitudes?
 - Where can it come from?

Facilitator Notes

- Encourage participants to see that a balance of knowledge, skills and attitudes is needed for action on water, hygiene and sanitation to be effective. For example, a doctor might have a lot of knowledge about the importance of water, hygiene and sanitation, but without good listening skills their work will not be successful.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 9: Low Hanging Fruit

What is it?

Low hanging fruit is a tool that involves drawing a tree and its fruits. The tree represents the project. The fruits of the tree represent different activities or services within the project. If the fruits are 'low hanging', they will be easier to carry out. If they are 'high hanging', they will be harder to carry out.

Why use it?

- For project planning.
- To discuss why certain activities or services would be easier than others to introduce or carry out.
- To discuss both barriers and opportunities to carrying out or introducing new activities or services.

How to use it

1. Explain to participants the aim of the exercise: to identify which activities and services will be easier to start and which will be harder; and to discuss some of the barriers and opportunities to starting these activities and services.
2. Ask people to draw a tree which has both high and low branches.
3. Ask people to draw on separate cards new activities or services that they think should be introduced to tackle water, hygiene and sanitation.
4. Explain the idea of low hanging fruit: 'low hanging' fruit is the easiest fruit to pick from the tree and links with the idea that some services and activities would be easier to introduce and carry out. Fruit that is hanging higher on the tree would be harder to pick.
5. Ask participants to place the activities and services on the tree according to whether they think they are 'low' or 'high' hanging fruit.
6. Ask participants to discuss things that will get in the way of carrying these out and opportunities that exist to begin these activities or services. If after discussion they wish to move the fruit lower or higher up the tree, let them do so.
7. Ask one of the participants to present a summary of the tree and encourage others to ask questions and make any comments or suggestions.
8. If the tree has been drawn on something which cannot be kept – for example, the ground – it is useful for someone, when it is finished, to make a copy of it onto a piece of paper for future reference.

Facilitator Notes

- Ensure that people are given the opportunities to discuss both barriers and opportunities before placing their cards on the tree.
- This tool can follow any other tools that have been used to discuss the introduction of new projects and services.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 10: Back to Front/Front to Back

What is it?

Active listening means listening with the eyes as well as the ears. This exercise reinforces this message by helping people to experience the difference between listening to someone with your back turned to them and listening to someone who is facing you.

Why use it?

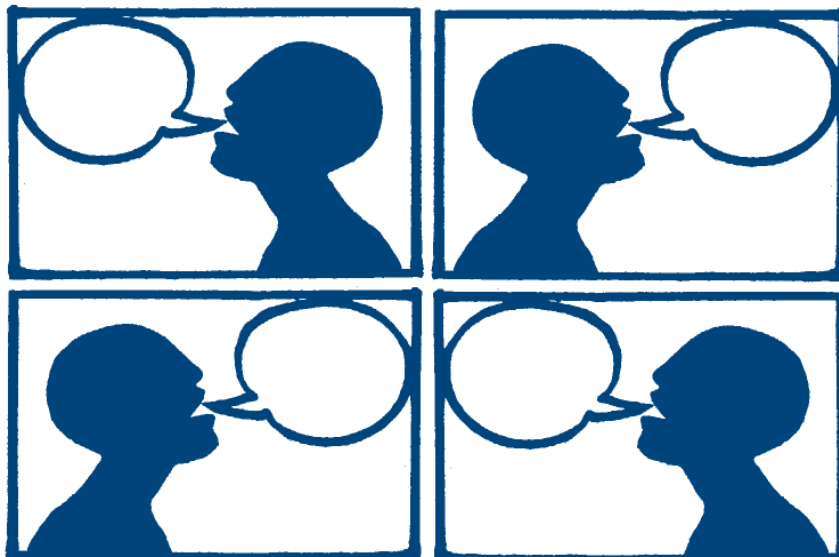
This exercise helps people practice active listening skills.

How to use it

1. Break participants into pairs. Ask the people in each pair to sit back-to-back.
2. Ask one member of the pair to speak (on any subject) for three to four minutes while their partner listens.
3. Then swap the roles.
4. Debrief participants by asking what it was like to listen to someone when you could not see them. Ask what it was like to be listened to by someone whom they could not see.
5. Go back into the pairs, but this time ask participants to sit facing each other. Repeat the exercise, with one person speaking and the other listening, and then swap the roles.
6. De-brief the participants by asking:
 - What were the differences between listening to each other back-to-back and listening to each other face-to-face?
 - What do these differences mean in terms of active listening and what it involves?

Facilitator Notes

- See section 4 of this manual for the key points of active listening.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 11: Bad/Good Listening

What is it?

This exercise makes the contrast between 'bad' listening techniques and 'good' listening techniques. It reinforces learning of the key points of active listening.

Why use it?

This exercise helps people practise and reinforce active listening skills.

How to use it

1. Explain that this section focuses on active listening skills.
2. Break participants into pairs. Hand out Person A and Person B role cards to the pairs, reminding participants to keep their role a secret.
3. Ask participants to play the role on their cards. Allow up to five minutes for the role play to take place.
4. When this is done, debrief by asking what it felt like to be with a 'bad' listener. Ask what the 'bad' listeners were doing or not doing. Examples include: turning away, looking bored, distracted.
5. Go back into the pairs and swap roles. This time instruct Person B to practice 'good' listening techniques.
6. When this is done, debrief by asking what it felt like to be with a 'good' listener. Ask the speakers what the 'good' listeners were doing or not doing. Examples include: smiling, nodding your head in agreement.
7. From this discussion, draw out the key points about active listening.

Facilitator Notes

- See Section 4 of this manual for the key points of active listening.

Role Play Cards

Person A: You have heard that Person B is really interested in ideas you have about why people are getting sick in your community and the need for safe drinking water. You see Person B at a community event and approach them to share your thoughts.

Person B: You are in a hurry to go somewhere and you are not really interested all the time that Person A is talking to you. You look at your watch, look to see if a taxi is coming, and don't really pay any attention to Person A.

(Adapted from International HIV/AIDS Alliance, 2006)



Tool 12: Margolis Wheel

What is it?

A margolis wheel involves participants consulting one another to find solutions to problems.

Why use it?

Using a margolis wheel can:

- Help come up with new ideas about a topic
- Give participants the opportunity to discuss real problems that they face
- Help participants who prefer to discuss problems in smaller groups
- Give participants the opportunity to find solutions to problems by talking to people who share their experiences and challenges
- Show that everyone in a group has something to contribute.

How to use it

1. This exercise works best with about eight to twelve people in each margolis wheel. So first divide participants up into groups of about this size.
2. Now divide each group into two equal halves, with an 'A' half and a 'B' half.
3. Have the 'A' half sit in a tight circle facing outwards.
4. Have the 'B' half sit in a wider circle around the 'A' half, with each person from the 'B' half directly facing another person in the 'A' half.
5. Ask each person to think of an issue that they are having difficulty with.
6. Instruct the 'A' half that they are going to be advisors to the 'B' half's different issues. They will have three minutes to listen to the issues of the 'B' half sitting opposite them and offer any advice.
7. When all of the 'B' half has decided on their issues, they can start explaining them to the 'A' half opposite them and the 'A' half can offer their advice back.
8. After three minutes, shout 'Change!' Ask all the participants on the outside circle (the 'B's) to move around one place to the right. The 'A's stay still where they are in the centre. Everyone should now be sitting opposite someone new.
9. Now repeat step seven and give participants another three minutes to explain their issues and offer advice to each other. Then shout 'Change!' again and repeat step eight.
10. Repeat steps seven and eight until everyone from the 'B' half has received advice from everyone in the 'A' half.
11. When this is done, reverse the whole process, with the 'B' half becoming the advisors and the 'A' half explaining their issues.

Facilitator Notes

- The inside circle stays still while the outside circle moves around!
- If the group agrees that the discussion is about private problems, make sure that there is no discussion after the work in pairs. Do not discuss problems in the large group.
- This exercise works well when participants have already had discussions of problems and constraints in a large group. Break up discussion by using the margolis wheel. This helps participants who prefer discussing ideas in private.
- It is important to record solutions, unless discussion is about private problems.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 13: Probing Deeper

What is it?

This exercise practices the skill of probing deeper into an issue by asking follow-up questions. Community Health Workers will begin a session with a set of key questions, but it is essential that they are able to respond flexibly to answers they are given and can use other questions to probe deeper.

Why use it?

This tool helps people to practice effective questioning skills, especially how to probe deeper to get to the heart of an issue.

How to use it

1. Give a short presentation on the six 'helper' questions (What? When? Where? Who? How and Why?) and their importance as open-ended questions.
2. Break into pairs. Ask one member of the pair to think of a story or incident that their partner does not know about. Explain that their partner is going to ask them questions about it. Their task is to answer these questions as briefly as possible.
3. Instruct their partner (the questioner) to try to use each of the six 'helper' questions at least twice to find out about this story or incident.
4. After five minutes, end the questioning and debrief what it was like to try to probe deeper.
5. Swap roles and repeat the exercise.

Facilitator Notes

- The most effective 'helper' question for probing deeper is to keep on asking, 'But why...?'
- See Section 4 of this manual for key points about effective questioning.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 14: Open and Closed

What is it?

Asking open-ended questions, which cannot be answered with a 'yes' or a 'no', is an important skill because it opens up discussion and helps in gathering more information. This exercise practices this skill.

Why use it?

This tool helps people to practice effective questioning skills – especially how to ask open-ended rather than closed questions.

How to use it

1. Prepare a brief (one-paragraph) case study of a typical local person living without safe drinking water, describing their life circumstances. Divide the participants into groups of six people.
2. Explain that in each group of six there will be two teams (A and B) of three people: in each team, there will be a local person, the questioner and an observer. Give the local person in each team a copy of the case study to read, and ask them not to show it to their team members.
3. Explain that in the A teams in each group, the questioner is only allowed to ask closed-ended questions and the role of the observer is to check that they do this. In the B teams in each group, the questioner is only allowed to ask open-ended questions and the role of the observer is to do the same.
4. Explain that the questioners have five minutes to find out as much as they can about the local person living without safe drinking water in their team.
5. At the end of the time, ask questioners in the A teams to tell the rest of the group what they learned about the person living without safe drinking water. Then ask the questioners on the B teams to do the same.
6. Compare the difference between information gathered from asking closed and open-ended questions, and discuss lessons learned about effective questioning.

Facilitator Notes

- See Section 4 of this manual for key points about effective questioning.
- If you want all participants to have a chance at practicing open-ended questions, prepare four more case studies.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 15: Sensitive Topics

What is it?

This exercise helps people to develop the skills necessary to ask good questions about sensitive subjects.

Why use it?

This activity helps people to consider what topics and issues might arise when working in communities, and to develop strategies to talk about sensitive topics with people.

How to use it

1. Ask participants to think which 'sensitive' issues may come up in session about water, hygiene and sanitation.
2. Make a list of these sensitive issues and group similar issues together into topics.
3. Identify three or four groupings of sensitive topics, and ask participants to break into smaller groups to look at one of these groupings.
4. Ask each group to discuss their sensitive topic:
 - What might make it hard to ask questions about it?
 - What would be good questions to ask?
5. Now ask each group to practice these questions in role plays
6. Bring the groups back together to discuss what was learned about asking questions about sensitive subjects.

Facilitator Notes

- It might be a good idea to make a 'sensitive questioning' checklist from the results of this exercise. People can then use this checklist during sessions in the field.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 16: Trust Game

What is it?

This exercise helps people to understand issues of confidentiality. It also helps people to gain trust in each other.

Why use it?

The trust game helps people to understand:

- the importance of confidentiality in participatory activities
- what it feels like to give people sensitive information about themselves.

How to use it

1. Ask participants to sit around in a circle. Explain to participants that this is a serious exercise about trust.
2. Ask participants to think of a secret they have which they would not want anyone else to know. Ask them to write this down on a small piece of paper, fold it up and not show it to anyone.
3. Now ask participants to pass their piece of paper with the secret in it to the person to their left.
4. Ask each person around the circle how it feels to have their secret in someone else's possession. You can record some of these responses on a flipchart if you wish.
5. Now ask each person in turn how it feels to have someone else's secret in their possession. Again, you can record these on a flipchart if you wish.
6. Now ask participants to give the pieces of paper with the secret on them back to the person the secret belongs to. Once this is done, tell participants that they can all destroy their pieces of paper and relax! No one has had to share their secret.
7. Debrief participants by asking them:
 - What does this tell us about confidentiality in PLA?
 - What kind of things might people share with us which should be kept confidential?
 - What rules should we have about confidentiality during PLA?

Facilitator Notes

- Remind participants that 'trust' is a verb! Trust is something you do rather than have. You have to earn and keep earning trust, and it can be taken away at any time if you break someone's trust. We all like to think that we are trustworthy because of who we are or our position. But people are unlikely to trust you automatically just because you are a doctor or some other professional. Whoever you are, trust has to be built and maintained.
- The point of this game is not for participants to share their secrets. If some do, that is up to them, but no one should feel pressured in any way to do so.

How I feel when someone has my secret in their possession:

- Nervous
- Anxious
- Trusting/not trusting that they will keep it a secret
- Unsure how they will use the information

How I feel about having someone else's secret in my possession

- Privileged
- Powerful – I know something others don't
- Trustworthy
- Unsure what to do – keep the secret or look at it?

What does this tell us about confidentiality?

- Carrying someone else's secret can be a burden
- When people give us their trust, we should keep it

What should be kept confidential?

- What people tell us confidentially
- Information which could increase stigma – e.g. a person's HIV status
- Information which could increase the risk of physical or emotional violence towards them
- Information which could increase discrimination against them
- Information which could be used by the authorities in a harmful way against them or others they know

What rules should we have about confidentiality?

- Keep confidential information to ourselves
- Keep confidential information safe: keep confidential information in a safe, or code information so that people's identities are kept secret
- Only let people share information which they wish to share – don't force people to share what they don't want to
- Develop a policy about what information should be shared with the authorities and what will be kept confidential

From training of PLA facilitators in Ukraine
(International HIV/AIDS Alliance, 2006)

Tool 17: Sabotage

What is it?

Sabotage is a tool to train people in some of the appropriate attitudes and behaviours required to facilitate participatory learning activities.

Why use it?

Sabotage helps facilitators to understand the different ways in which people can dominate or spoil an activity, and develop strategies for dealing with different personalities.

How to use it

1. Ask participants to divide into groups of three.
2. Tell them that one person is going to interview another person (the interviewee) about an aspect of their life. The third person is going to try to sabotage the conversation in any way they can think of.
3. Give each person three minutes in their roles, then ask them to change roles.
4. Continue doing this until each person has performed the role of saboteur, interviewer and interviewee.
5. Debrief participants in a group discussion by asking:
 - How did it feel to be sabotaged?
 - How did it feel to sabotage?
 - What different strategies did the saboteur use to try to spoil the interview?
 - What different strategies did the interviewer and interviewee use to try to stop the saboteur?
 - What strategies can we use to sabotage the saboteur during an activity, without disempowering or excluding them altogether?

Facilitator Notes

- Ask saboteurs to use types of sabotage which they are likely to come across, rather than extreme examples.

Passive Sabotage	Facilitator Strategy	Active Sabotage	Facilitator Strategy
Gender	Divide up males and females	Speaking loudly or shouting	Ask all participants to remain in silence for one minute to consider a question
Looking bored	Do an energizer or give them a specific task	Unconstructive criticism	Have a conversation during a break and ask them for positive suggestions to improve the activity
Saying nothing	Ask them what their thoughts are, have a friendly conversation during a break to make them feel more comfortable and get to know them better	Interrupting or speaking all the time	Use a “talking stick” which only the person holding it can use
Constantly moving around	Do a lively energizer, then ask everyone to sit down and remain seated	Changing the topic	Bring people back to the main topic
Distracting body language	Ignore	Making irrelevant comments	Ask how that relates to the topic
Inappropriate setting	Ask participants to suggest a better place to meet	Refusing to participate	Ask them what would help them to participate
Inappropriate timing	Ask participants what time suits them best	Being late	Make them a timekeeper

(International HIV/AIDS Alliance, 2006)

Tool 18: Facilitation Challenges

What is it?

This is a fun activity in which people get a chance to describe how to deal with challenging situations that can happen while facilitating a participatory learning activity.

Why use it?

This tool helps people to consider different situations that may arise and discuss good facilitation practices with their peers.

How to use it

1. Explain to participants that facilitating participatory learning activities involves working with a range of different people. This activity focuses on challenging, but realistic, situations that can arise while facilitating and how to deal with these situations.
2. Divide participants into groups of four or five.
3. Give each group a set of facilitation challenge cards. One person in the group must choose a card and read it out to the rest. The others can suggest what course of action they would take to address the situation. The best suggestion wins the card. Groups continue in this way until all the cards are finished. The winner is the person with the most cards.
4. Debrief with the entire group. Discuss a couple of the situations that groups felt were the most problematic.

Facilitation Challenge Cards

At the start of the meeting community members seem reluctant to talk.

Some community members look very bored.

Some community members say they are embarrassed to role play in front of others.

Most of those who attend the meeting leave before the end.

At your first meeting, you are very nervous. You begin to stutter and lose your confidence.

Some of the poorer and less educated community members make suggestions. However, the local leader does not take their suggestions seriously.

Only the men are responding. The women are silent.

One participant keeps dominating the conversation and frequently interrupts others.

Participants complain that they can't hear your voice.

Create your own facilitation challenges!

Tool 19: Good Versus Bad Facilitation

What is it?

This is a fun role play in which people get a chance to practice their participatory facilitation skills in a relaxed and safe setting.

Why use it?

This tool helps people to:

- consider what are good and bad facilitation skills
- practise their facilitation skills and receive feedback from their peers
- learn how to 'embrace error' and learn from their mistakes without embarrassment.

How to use it

1. Ask participants to think about the best facilitator they know and list what made this person a good facilitator. Consider knowledge, skills, attitudes and behaviours.
2. Now ask them to think about the worst facilitator they have experienced and list what made this person bad at facilitation. Again, consider their knowledge, skills, attitudes and behaviours.
3. Now split participants into two groups.
4. Tell one group of participants that they are going to perform a role play of a participatory learning session. Two people from this group will try to facilitate the rest of the participants in their group to do a tool as best they can. They should bear in mind the good and bad practices previously listed.
5. The other group will sit around them and observe the two facilitators at work. If they think that one of the facilitators has made a mistake in some way, they should get up, tap the facilitator on the shoulder and take over facilitation. The original facilitator then joins the other group and becomes an observer.
6. Each time either one of the facilitators makes a mistake, one of the observers should take over. Let the role play continue until all of the observers have had a chance to step in and take over the facilitation.
7. Then swap group roles so that both groups have had a chance to facilitate, observe and be participants of the role play.
8. Debrief participants about what they have learned about being a good and a bad facilitator.

Facilitator Notes

- See Section 4 in this manual for key points about facilitation.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 20: Targeting

What is it?

This tool sorts cards to identify who is most affected by a problem, and discusses the benefits of focusing on activities with these people. It usually discusses problems identified during previous activities.

Why use it?

Using targeting helps to:

- identify those most vulnerable to unsafe water, poor hygiene and inadequate sanitation
- decide which groups of people most need assistance in coping with water, hygiene and sanitation
- explore how to increase the impact of activities on a problem.

How to use it

1. Agree the problems around water, hygiene and sanitation to be discussed.
2. Draw or write each problem on a separate horizontal line. Mark 'not affected by the problem' at one end of the line and 'very affected by the problem' at the other.
3. Write on separate cards all the different types of people in the community. You will need to make several copies of these cards.
4. Look at the first problem and discuss which types of people on the cards are affected by the problem, and to what degree. Go through each of the cards in turn, asking 'Is this person affected by this problem?' and 'To what degree are they affected by this problem?'
5. Place their cards on the line according to how affected they are. Participants may decide that more than one type of people is equally affected by the problem. This is OK.
6. You may also want to ask and record 'How are different types of people affected differently by this problem?'
7. Continue to do this for each problem, asking, 'Are they affected by this problem?' and 'To what degree are they affected by this problem?' and placing the cards on the line according to this.
8. Encourage the participants to discuss the benefits of targeting:
 - to the people targeted – for example, involving the people with the greatest need.
 - to the project – for example, the effective use of resources.
9. Encourage the participants to discuss any negative effects of targeting or concerns about targeting. Discuss how these can be overcome.
10. Decide which types of people should be targeted to help them cope with water, hygiene and sanitation, and how.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 21: Role Play

What is it?

Role play involves participants acting out a situation that might happen in real life and discussing the issues that have been raised.

Why use it?

Using role plays helps provide a fun and non-threatening way to explore real-life situations; use those situations to help people explore their feelings and share what they really feel; and practice new skills or improve existing ones. For example, in a role play people can practice their negotiation skills or demonstrate how to use and maintain a biosand filter.

How to use it

1. Be clear about the objectives of the role play. Ask participants to prepare an outline of a common situation they would like to role play. Alternatively, write a situation beforehand, and include brief details of the roles and situation for participants to act out.
2. Ask for volunteers to act out the role play and give them 15 minutes to prepare their role play.
3. Ask the volunteers to do the role play. Encourage the other participants to watch and listen carefully.
4. After the role play, ask the volunteers what it was like to act the parts, what they learned and how they felt. Then ask the audience what it was like to watch, what they learned and how they felt.
5. When the activity is complete, encourage the participants to discuss what they have learned. For example, what were the challenges of the situation? Who had the most power in the situation? What might have been the effects of the situation? What could have made the situation better?

Facilitator Notes

- Encourage the volunteers to develop a realistic, everyday story rather than an extreme one. This will help you to discuss real-life situations and issues.
- Role plays are not just about what people say, but what they do. Pay attention to the body language of both the volunteers and the audience.
- It can be useful to 'pause' a role play at an interesting point and have a discussion. You can then restart the story afterwards. Alternatively, audiences can suggest different actions or endings at this point.
- Role play often involves fun. This helps people to relax and talk openly. But sometimes the fun can take over and the point of the role play can get lost. Watch out for this and remind the group that the activity has a serious aim.
- It can be useful to have a series of role plays that focus on the same situation but are slightly different. For example, in the second role play the key characters might be women rather than men, be children rather than adults, have positive rather than negative attitudes, etc.
- It is always important to debrief participants after a role play.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 22: Story With a Gap

What is it?

This tool involves community members drawing a series of pictures to tell a story about water, hygiene and sanitation to highlight the issues involved.

Why use it?

Using a story with a gap helps to:

- provide a visual way to explore situations about water, hygiene and sanitation
- look closely at what those situations involve, including what leads a person to make certain decisions or to behave in certain ways
- identify what choices people have and the factors that affect those choices
- start to identify what would help people to make more positive choices

How to use it

1. Select a situation relating to water, hygiene and sanitation that community members might face. For example, 'using a latrine' or 'drinking safe water'. This will become the end of the story.
2. On the right-hand side of the page, ask participants to draw this situation. Encourage the participants to show who is involved, where it is happening, what is taking place etc. Label the drawing '5'.
3. Now ask participants to make another drawing at the left-hand side of the page showing how the story started. Label this picture '1'.
4. Now encourage the participants to think about the events that might have led to the situation in picture 5. Ask them to fill the gap in the story by drawing pictures 2, 3 and 4.
5. Starting from picture 1, encourage the participants to identify the choices that were available to the person at each stage of the story. Ask them to identify the factors that led the person to move on to the next stage in the story. Ask them to write those factors below the picture.
6. Repeat the process for pictures 2, 3, 4 and 5 until the story no longer has a 'gap' in it.
7. When the activity is complete, encourage the participants to discuss what the story shows.
 - Why do some people have few choices and other people have many choices?
 - How could people be given more choices?
 - What other choices could the person have made?
 - How would those different choices have changed the story?
 - Who has power during each step of the story?

Facilitator Notes

- Encourage participants to think of a typical story rather than an extreme or 'tragic' one. This will help make the activity more realistic and useful.
- Stories with a gap work best when the story leading up to picture 5 takes place over quite a short space of time (for example, hours or days) rather than a long one (for example, months or years).
- If using paper and pens, it may be easier to use separate pieces of paper for each picture rather than one big piece of paper.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 23: Case Studies

What is it?

A case study is a true story about a real situation or person. Sometimes, the actual person featured in the case study tells the story themselves.

Why use it?

Using a case study helps to:

- start discussion about topics relating to water, hygiene and sanitation
- explain how water, hygiene and sanitation affects the lives of real people, communities or organizations
- reflect on what lessons can be learned from other people's experiences
- provide an opportunity for people to reflect and talk about their own situations.

How to use it

1. Case studies work best with small groups of participants. Case studies may also be of organizations as well as people.
2. Before the activity, prepare a case study from real life.
3. Explain to participants why you are giving a case study.
4. Ask a participant to read out the case study. Alternatively, if there are several case studies, divide participants into groups and ask each group to read through a different case study. If participants are not literate, read the case study out loud to the group.
5. When this is done, encourage the participants to discuss the case studies.
 - What do the participants feel about the situation in the case study?
 - What are the main issues in the case study?
 - What helped the situation?
 - What caused problems?
 - How does this relate to their own situation?
 - Would participants have acted the same way in this situation?
 - What options are available to deal with the situation?
 - What other support would have improved the situation?

Facilitator Notes

- Always gain permission to use the case study from the person or organization it is about. They must be informed about how the case study will be used and agree to this.
- Sometimes, the person in the case study tells the story them self. If a person tells their own story, it is important that they understand the possible consequences beforehand. For example, participants may say things or ask questions that the person finds difficult or upsetting.
- Participants may find it useful and helpful to share their own personal experiences that are similar to those illustrated by the case study. However, do not pressure people to discuss personal issues if they do not want to.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 24: Community Drama

What is it?

This tool involves participants acting a drama to highlight the issues and challenges faced by real people in relation to water, hygiene and sanitation.

Why use it?

Using community drama helps to:

- provide a fun and non-threatening way to explore issues about water, hygiene and sanitation
- highlight real-life issues and challenges that community members face
- start discussions about what can be done about those issues and challenges.

How to use it

1. Divide the participants into three or four groups.
2. Describe three or four different community members whose lives are affected by unsafe drinking water, poor hygiene and lack of sanitation, example, 'parent caring or sick child' or 'community health worker'.
3. Give each group a description of one of the four different community members. Ask each group to develop a short drama about a day in the life of that person. Give them an hour to do this. Encourage participants to use the drama to show what happens to the person at home and in the community, who they see, what challenges they face and so on.
4. Ask each group to perform their drama.
5. When the activity is complete, encourage the participants to discuss what the dramas revealed.
 - What pressures and challenges were shown by the dramas?
 - Which community members faced the most pressures and challenges, and why?
 - What type of support would the community members need?
 - What can be done to increase that type of support?

Facilitator Notes

- There are many other ways to do community drama. Some examples include:
 - Tell the participants a short story about a community member. Ask them to add their own details and to act out the story.
 - Divide the participants into three or four groups. Tell each of them the same story, but with a slightly different ending. Ask them to act out the story and to compare their dramas.
- Encourage participants not to act out their personal experiences as this can be too difficult and emotional. Instead, ask them to develop stories about 'typical' people and situations in their community.
- Drama can be good fun. But it can also bring out emotions in people, including anger and hurt feelings. Be aware of this and provide plenty of time for discussion and debriefing.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 25: Participatory Photography

What is it?

This tool involves people learning how to use cameras to illustrate how water, hygiene and sanitation affects their lives.

Why use it?

Using participatory photography helps to provide:

- a non-threatening way for people to express their opinions, ideas and feelings about water, hygiene and sanitation
- a powerful way to allow people affected by unsafe water, poor hygiene and lack of sanitation to show the reality of their daily lives.

How to use it

Participatory photography usually has five phases:

1. **Training in using cameras.** People are trained in how cameras work and how to compose a picture. They can start by looking at photographs from newspapers and magazines, and discussing what makes a good or bad photograph. Good photographs usually tell a story all by themselves.
2. **Deciding what to photograph.** Here photographers plan who or what they will photograph, where and how they will photograph and who they will present them to.
3. **Photographing.** Photographers go out into the community and photograph according to their plan.
4. **Sharing and reflecting on the photographs taken.** Photographers develop their photographs and allow each other to show what they have photographed and why. Photographers share what their photographs mean to them as individuals, identify the common themes emerging, and lessons they have learned about how water, hygiene and sanitation affects their community.
5. **Presenting the photographs to others.** This can be done in different ways. For instance, an exhibition can be given in a public place like a school, hospital or workplace, or a book can be made of the photographs and sold to raise funds for the cameras or water, hygiene and sanitation projects.

Facilitator Notes

- Photography is an art, although children and adults can use cameras quite easily. For the best results, asking a local professional photographer to train participants is a good idea.
- Always ask permission before taking someone's photograph and ensure that the person knows what that photograph will be used for.
- Cameras can be expensive, but cheaper cardboard cameras are now available in most big cities. Alternatively, people can share cameras.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 26: Participatory Video

What is it?

This tool involves people learning how to use video cameras, storytelling and role play to illustrate to others how water, hygiene and sanitation affects their lives.

Why use it?

Using a participatory video helps to provide:

- a non-threatening way for people to express their opinions, ideas and feelings about water, hygiene and sanitation
- a powerful way to allow people affected by water, hygiene and sanitation to show the reality of their daily lives
- a fun way for people to make their own information, education and communication materials.

How to use it

Participatory video usually has seven phases:

1. **Training in using cameras.** People are trained in how video cameras and sound equipment work, and how to make a film. Video making can be quite a skill. For the best results, asking a local professional video maker (like a wedding cameraman) to train participants is a good idea.
2. **Training in writing film scripts.** Participants are trained in how to write scripts and scenes – see Storytelling and Picture Story.
3. **Deciding what to film.** Here participants plan:
 - the key messages they want to show.
 - who or what they will film and why (participants may act in it themselves,
 - make a diary of their lives or film aspects of other people's lives).
 - where and how they will film it.
 - who they will present the film to.
4. **Filming.** Participants make and edit their video according to their plan.
5. **Sharing and reflecting on the film taken.** Participants premiere their film to an audience of key stakeholders to show what they have filmed and why.
6. Copies of the film are made and distributed to organizations.
7. The film is shown to key groups and communities who may benefit from the film. This is a good way to start a discussion about the issue shown.

Facilitator Notes

- Always ask permission before recording someone on film and ensure that the person knows what that film will be used for.
- Video cameras and editing equipment can be very expensive to buy, but it is possible in many places to hire or borrow this equipment.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 27: Picture Story

What is it?

This tool involves participants drawing a series of pictures to tell the story of a 'typical' community member and a situation related to water, hygiene and sanitation.

Why use it?

Using a picture story helps to:

- provide a non-threatening way to identify the challenges and options that community members face in relation to water, hygiene and sanitation
- explore how those challenges and options are or are not the same for all community members
- begin to identify what can be done to address the challenges.

How to use it

1. Explain the purpose of the tool and divide large groups up to draw different picture stories.
2. Describe different 'typical' community members – for example, a '14-year-old school girl from a poor rural family', a '30-year-old male teacher in a village' or a '40-year-old woman with 3 children'.
3. Select three or four issues that might affect all of the 'typical' community members. Examples might include 'having diarrhoea' or 'not having a latrine available'.
4. Ask participants to choose one of the issues. Ask them to draw pictures telling the story of what might happen to the community member if they tried to address the issue.
5. Repeat the activity for the other problems.
6. Repeat the process for different 'typical' community members (or ask different groups to draw stories about different 'typical' community members).
7. When the activity is complete, encourage the participants to discuss what the picture stories show.
 - Which community members have the most options for seeking help?
 - Who has the least?
 - How are different people treated when they try to get help?
 - Why is that?
 - What could be done to improve the situation?

Facilitator Notes

- Remind participants that the quality of their drawing does not matter. The activity is about sharing ideas and learning.
- Encourage the participants to spend only a short time drawing their pictures so that they have much more time to discuss what the pictures mean.

(Adapted from International HIV/AIDS Alliance, 2006)



Tool 28: Storytelling

What is it?

Storytelling involves participants discussing 'typical' stories about water, hygiene and sanitation in order to identify the issues involved and what can be done about them.

Why use it?

Using storytelling helps to:

- provide a non-threatening way to identify the types of real-life situations and issues that affect people in relation to water, hygiene and sanitation
- explore how people feel about those situations and issues
- begin to identify how to take action on those situations and issues.

How to use it

1. Before the activity, prepare a 'typical' story about water, hygiene and sanitation in the community. For example, it might be about the 'open defecation in our community' or 'people living with water related illness, such as diarrhoea'. Make sure that the story includes lots of detail (about the people, places and situations involved), but leave it without an ending.
2. Share the story with the participants. Encourage them to listen carefully.
3. Ask the participants what they think about the story. For example, is it realistic? How does it make them feel? What issues does it highlight?
4. Divide larger groups of participants into groups of eight or less. Ask each group of participants to come up with an ending to the story. Encourage them to use speaking, singing, drawing and/or acting to communicate it.
5. Ask the groups to share their endings.
6. When the activity is complete, encourage the participants to discuss what the story showed.
 - What did the story show about relations between people in the community?
 - What did it show about people's attitudes?
 - What did it show about the biggest challenges facing the community?
 - How could the situation be improved?

Facilitator Notes

- The storyteller can dress up and use props or different voices to make the story livelier.
- There are many different versions of this tool. For example, you can:
 - Ask participants to make up their own 'typical' story about water, hygiene and sanitation in their community. Encourage participants to include lots of detail about the situation, people, places and attitudes involved.
 - Share the first two to three sentences of a 'typical' story about the community. Then ask a volunteer to suggest the next two to three lines. Then ask another volunteer to suggest the next two to three lines. Keep going until the story reaches an end or has covered several important points.
 - Divide a 'typical' story into three parts. Share the first part with the participants. Then stop and ask questions, such as, 'How is the character feeling?' 'What do you think about what is happening?' Then repeat the process for the next two parts.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 29: Production of Information, Education and Communication Materials

What is it?

This tool involves participants producing their own information, education and communication (IEC) materials by themselves and for themselves and their peers. IEC materials aim to inform, educate and communicate specific knowledge, skills or attitudes to people. This tool is particularly effective with key populations.

Why use it?

Participatory IEC helps to:

- produce effective IEC material for specific groups or communities
- build new skills, knowledge, confidence and social capital in individuals and groups
- advocate for changes – for example, no open defecation, hand washing
- provide general health information.

How to use it

1. Ensure everyone understands what IEC materials are and why they are used. Show examples.
2. Discuss the purpose of the IEC material the participants are about to produce, and brainstorm the following questions:
 - Audiences – who will be the specific audience for the IEC product?
 - Topics – what specific issues and topics should the IEC products cover? Which solutions should it address?
 - Medium – what form of product would be most appropriate for that audience and topic?
3. Record the results in a table. See the example below.
4. Split the groups up into teams to plan the content of each product in detail: the exact message, roles and responsibilities, materials required and where the activities will take place. Facilitators should ensure that the messages are technically accurate.
5. Produce the material by writing, drawing posters or pictures, filming, community drama, photographing, and so on.
6. Display, reproduce and disseminate the products:
 - Products can be displayed or performed for an invited audience.
 - Visual products can be professionally reproduced for wider distribution.
 - Video and audio products can be put on CD or DVD for targeted distribution that may include television and radio stations, NGOs, government agencies and so on.

Facilitator Notes

- The IEC products belong to the participants who produced them, not the organization that facilitated or paid for the process. Ask participants for permission to use any IEC materials, and respect their wishes.
- Experience has shown that participatory IEC materials do not need to be further field-tested if they have been produced by the same cross-section of a specific group who will use them.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 30: Setting Learning Expectations

What is it?

This tool allows facilitators to find out the learning expectations of the participants and link these with the objectives of the activity.

Why use it?

Participants have the opportunity to state what they hope to learn from the activity which allows them to take ownership of their learning. The facilitator can make sure that their expectations are reasonable and demonstrate that the participants' needs are being met.

How to use it

1. Welcome participants to the session and introduce the facilitators.
2. Ask participants to introduce themselves to the group. There are different ways that this can be done. See Appendix 3 for different ice breakers.
3. After the introductions are completed, ask participants to discuss with a partner "When you were invited to this session, what did you hope that you would learn?"
4. Ask each pair to share one or two learning expectations with the entire group. Write these on a flipchart or board.
5. Ask if anyone's expectations have been left out and write any additional points on the list.
6. Talk about each of the expectations that have been written down and explain how it will be addressed in the session or whether it is outside the scope. If the expectation is not going to be met, provide the participant with alternative ways to learn about that particular topic (e.g. future sessions, book, internet, etc).

Tool 31: Making Ground Rules

What is it?

Participants create the ground rules for how the group is expected to work together during the session.

Why use it?

Setting expectations ahead of time is a proactive tool to create a positive learning environment for all participants.

How to use it

1. Introduce making ground rules by explaining these are expectations created by the group that will govern the session.
2. Ask participants to suggest ways to create a positive learning environment for everyone. Check to see if the participants agree with what has been said.
3. Write the expectations on a flipchart or board.
4. Ask if anyone's expectations have been left out and write any additional points on the list.
5. If nothing is forthcoming from the participants, the facilitator may provide some suggestions, such as:
 - Respect what other people say
 - Only one person to speak at a time
 - It is OK to ask questions if you don't understand
 - Turn off cell phones during the session
6. Post the ground rules in a visible location for the entire session. Conclude by saying that these are the group's expectations for working together. It is OK to add to the ground rules if other suggestions are brought forward later on during the session.

Facilitator Notes

- Refer back to the ground rules if the group or an individual is not meeting the expected behaviour.

Tool 32: Writing Aims and Objectives

What is it?

The tool helps to write aims and objectives for a project.

Why use it?

Writing aims and objectives help to:

- identify and summarize the purpose of a project or activity
- identify and summarize what a project hopes to achieve
- provide a framework for planning
- provide information for monitoring and evaluation.

How to use it

1. Review the set of problems identified during a previous activity.
2. Discuss the meaning of the word 'aim' (the overall purpose of the project).
3. Look at all the problems. Discuss and agree the overall improvement that the project hopes to achieve by addressing these problems. Ask a participant to turn this into a short sentence. Ask other participants if they agree with this. Once agreement is reached, record this as the project aim.
4. Discuss the meaning of the word 'objective' (a statement about specific activities of a project and what a project will achieve through these activities).
5. Explain how objective writing helps to answer the following questions:
 - What will change as a result of the activity?
 - Who will be most involved in the activity? Who will benefit most from these changes?
 - How much will the activity change a problem?
 - When will the activity be completed?
 - Where will the activity take place?
6. Explain that objectives should be SMART: specific, measurable, achievable, relevant and time-bound:
 - Specific – an objective should say exactly what will be achieved, with who, how, when and where.
 - Measurable – so you are able to tell exactly when the objective is achieved.
 - Achievable – it must be realistic given the circumstances you are working in and time you have available.
 - Relevant – it must relate to the problem being addressed.
 - Time-bound – it must be achieved by a certain date and not go on and on.
7. Take one problem at a time. Using the 'What?' 'Who?' 'How?' 'When?' 'Where?' questions, decide on an objective that would address the problem.
8. Ask a participant to put the objective into a short sentence. Ask other participants if they agree with this. Record this as one project objective.
9. Repeat this process for each problem until a list of objectives is created.
10. Read out the objectives one by one. Make sure that each objective will contribute towards achieving the aim.

Facilitator Notes

- It is important to be as precise as possible in the wording of objectives.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 33: Monitoring Matrix

What is it?

A monitoring matrix is a chart that shows what activities are working well and what needs improving according to those who are participating in it.

Why use it?

A monitoring matrix is useful to:

- Monitor the progress of activities with members of the community or project
- Understand what different people think about activities that were done
- Explore the positive and negative results of activities
- Explore who has been involved in activities, who has benefited from them and why
- Explore what could be improved about the activities
- Start to identify what other activities might be needed

How to use it

1. Small or large groups can make a monitoring matrix. Divide larger groups into peer groups to explore different views.
2. Agree what activities are to be discussed. Show the activities down the left-hand side of the chart (pocket chart, paper, or on the ground).
3. Agree on important questions to be discussed about the activities. For example:
 - Has the planned activity taken place?
 - Have they happened according to the timeline?
 - Have all the people who wanted to be involved in the activity been involved?
 - Has attendance increased?
 - Has the activity had the effect people wanted?
4. Show these questions at the top of the chart.
5. Discuss each question for each activity listed on the left-hand side.
6. Participants can use counters to score the degree to which an outcome has been achieved for each activity. For example, scoring out of 10, with 10 being “completely achieved” and 0 being “not achieved at all”.
7. Discuss what is shown on the chart and the following questions:
 - Are there activities which were planned but not have taken place?
 - What is the most positive change?
 - What is the most negative change?
 - How can we improve activities?

Facilitator Notes

- If this tool is used to develop a community-level analysis, it is important to make sure that different views are well represented.
- Discussing negative views as well as positive views will help show how to improve the activities. Discuss ideas for new activities.
- If participants know less about the activities than expected, explore the reasons for this.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 34: Structured Observation

What is it?

Structured observation is a systematic technique for observing and recording particular practices.

Why use it?

To obtain useful and timely information by observing what people do, to help make decisions on improving project performance, or for generating insights and findings for more focused studies. This method complements collected data and can be used to understand the context in which information is collected and can help explain results.

How to use it

1. Set the guidelines for what needs to be observed and the information required.
2. Choose an appropriate observer or group of observers.
 - Observers can be community members and project staff who live and work full-time in the project area. These observer should be trained in observational skills
 - Observers can also be people from outside the community. Note that outsiders may need more time to know what is significant. On the other hand, they sometimes notice significant issues that local people no longer see or take for granted.
3. Collect and record the data.
4. Organize a time to discuss the recorded observations.

Facilitator Notes

- This method is also known as “participant observation” and is a common research method for social issues and processes.
- People often forget this simple method. Everyone observes automatically. But you can make observations more effective by viewing it as a valid method and structuring its use. Much can be learned by watching what people actually do. Useful information and new insights can often be gained from observation that would otherwise not be obtained.
- Observation can be used to cross check responses received by other methods.
- There is always the potential to introduce bias into the results. Asking several people to undertake observations in the same way can help to confirm the results and improve the quality of the data.

(Adapted from IFAD, nd)

Tool 35: Focus Groups

What is it?

Focus groups are an effective way of gathering information on people's ideas, beliefs, practices and behaviour. They gather together people with similar backgrounds for a detailed discussion about a subject.

Why use it?

To collect general information, clarify details or gather opinions. It can also be used to build consensus. Focus groups are good for assessing opinions of change, assessing the quality of project services, and identifying areas for improvement.

How to use it

1. Select the participants (four to eight people is ideal). Depending on your purpose, you can work with a group of people that are similar or different. Alternatively, use a number of focus groups, each one fairly the same, but the groups being different from each other. This allows interesting comparisons.
2. Introduce yourself to the group and explain very clearly the object of the exercise and that you hope everyone will learn from each other. Explain that there are no right or wrong answers to the questions. Stress that people should try not to interrupt others when they are talking, and that everyone's point of view will be valued.
3. Present the group with a broad question. For example, What impact do you think a particular intervention has in changing the community's behaviour?
4. Discuss this question for a time period agreed upon beforehand. There should be minimal intervention by the facilitator other than to make sure that everybody has a say. Perhaps you might need to repeat the question using different words from time to time or to probe if something is not clear.
5. Take detailed notes of the discussion. Focus groups are best facilitated in pairs – one person to facilitate the discussion and the other to take notes. The discussion can also be recorded to ease the review process, but only if the participants have consented and are comfortable with it.
6. Bring the session to a close when you feel the subject has been exhausted (maximum of 1.5 hours). If problems have been identified try also to get people to consider any possible solutions and how they intend to implement them.
7. Thank the participants for their time and participation.
8. During analysis, take out any important quotes to emphasize certain points.
9. Prioritize, summarize and analyze the information.
10. Organize a time to discuss the results.

Facilitator Notes

- If facilitated well, this method can bring out detailed information. However, facilitation of focus groups requires considerable skill – both in moderating the group and in adequately recording the responses. They are less useful in the hands of a person who does not know how to actively listen or effectively ask open and probing questions.
- This method can generate insights more quickly and generally more cheaply than through a series of structured interviews or surveys.

(Adapted from IFAD, nd and Ferron, 2000)

Tool 36: Interviews

What is it?

Conducting interviews is a way to explore what people think about an issue without the formality of a questionnaire or survey. The interviews are open-ended and use a discussion guide, such as a checklist.

Why use it?

To gain information from an individual or small group, using a series of broad questions to guide the conversation, but allowing for new questions to come up as a result of the discussion. Interviews can be especially informative when conducted with key informants, such as community leaders, health workers, teachers, government officials, etc. They are helpful for assessing unintended impacts, opinions about the quality of project services, etc.

How to use it

1. Set the guidelines for what information is required and create an interview checklist of open-ended questions. The questions should be such that interviewees can express opinions through discussion. A logical sequence to the questions will help the discussion flow.
2. Select who should be interviewed, how many are required, and whether interviews should be with individuals or in a group.
3. Choose appropriate people to conduct the interviews. Interviews are best facilitated in pairs – one person to perform the interview and the other to take notes.
4. Make an appointment at a suitable time for them.
5. Prepare beforehand what you want to find out, but try not to read out questions during the interview.
6. Take notes of their answers.
7. At the end of the interview, ask the person being interviewed whether they have questions to ask you. Be prepared to answer these as best you can, and when you don't know the answer, offer to find out and return with a response.
8. Summarize what you have discussed and agreed at the end of the interview and thank them for their time and participation.
9. Produce a short summary of what each person said, including the main points.
10. Look over the responses and once you have looked at about 25% of the interviews, note the points most frequently mentioned. Then read the remaining responses and record how many interviewees have responded to each of these main points. Alternatively, divide the responses into those “for” and “against” a certain issue or divide them to show various degrees of enthusiasm about an issue.
11. Take out any important quotes to emphasize certain points.
12. Prioritize, summarize and analyze the information.
13. Organize a time to discuss the results.

Facilitator Notes

- Open-ended information is more difficult and time-consuming to synthesize well enough to obtain clear results. It can be difficult to keep interviews focused, making different interviews difficult to compare properly

(Adapted from IFAD, nd and Ferron, 2000)

Tool 37: Questionnaires and Surveys

What is it?

Questionnaires and surveys are used to gather data from a large number of people in a structured way. The terms questionnaire and survey are often used interchangeably but can be distinguished as follows:

- A questionnaire is a form with questions used to gather information from people.
- A survey is a more general term that might be one or two simple questions to be answered or could even be a long questionnaire.

Why use it?

Questionnaires and surveys allow for focused data collection that can be used for statistical analysis. They can provide precise answers to carefully defined questions.

How to use it

1. Agree on the purpose and information needs.
2. Decide whether a questionnaire or survey format should be used. The formats can range from being very simple to quite complex.
3. Create your questionnaire or survey. They can use a very specific and structured set of closed questions (yes/no or multiple choice) or they can also include open-ended questions. Closed questions are good for gathering data that needs to be statistically analyzed. Open-ended questions are good for determining people's feelings or attitudes. For example,
 - Closed question (yes/no answer): Do you have enough water to satisfy your family's needs?
 - Open-ended questions: Where do you get your water from? Do you have enough water for your family today? This week? How many months of the year do you have a water shortage? What do you do during this time?
4. Determine who should be questioned and how many people should be included in the sample.
5. Decide on the most appropriate manner of questioning. For example, a mailed out written form, telephone survey, individual interviews.
6. Collect and analyze the information.

Facilitator Notes

- Often projects make the sample too big and ask too many questions. This makes analysis a tedious job and loses its usefulness. Long questionnaires and surveys are also time consuming for the respondent to complete.
- Answers which must fit a certain set of options or format will also fail to pick up on deviating answers and opinions. Be aware that you might be missing out on important details and variations to the questions.

(Adapted from IFAD, nd)

Tool 38: Most Significant Change

What is it?

The most significant change tool is a story that describes an important change that has happened due to project activity, and what a person thinks about this change.

Why use it?

The most significant change tool is useful to:

- understand the impact the activity or project is having on people
- understand what, if anything, has changed as a result of project activities
- understand the reasons for this change
- explore what people think about this change, for example, do they think it is a good change or a bad change?
- identify what changes are seen as significant by communities and what are not
- identify how to improve project activities.

How to use it

1. Agree how often to use the most significant change tool and with whom. For example:
 - at the end of the project with primary stakeholders to evaluate the impact of the activity
 - every three or four months with the all project stakeholders to monitor progress.
2. Ask a stakeholder (or small peer group) to identify what they feel has been the most significant change related to the project during the time period.
3. Ask the stakeholder to describe the significant change. Asking them to draw pictures of the most significant change can be used to help the discussion. Ask why the person thinks this change is significant.
4. To find out about specific changes, you can also ask stakeholders what they think is the most significant change for:
 - themselves as individuals
 - the peer group they belong to
 - the community as a whole
 - the services in the community.
5. You can use how people define significant change to set community-based goals for the project. For example, if people say that a significant change for them was 'the community works closer together now', then 'the community works closer together' can become a new goal of the project.
6. Share most significant change stories with different people involved with the project.

Facilitator Notes

- Describe time periods according to local calendars.
- Encourage participants to tell stories about negative changes or frustrating experiences in order to build up a balanced view.
- If people have trouble identifying changes related to project activities, explore the reasons for this. Perhaps there have not been any significant changes.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 39: Before and Now Diagram

What is it?

A before and now diagram is a diagram that shows change. This might be change in a situation since a significant event, such as the start of a community initiative.

Why use it?

A before and now diagram is useful for:

- exploring change over time in a particular situation, and the reasons for change. For example, changes explored might include changes in behaviour, knowledge and attitudes in a community
- exploring the consequences of a particular event – for example, an important change in law
- assessing the effectiveness (impact) of a community initiative
- exploring how significant events have affected people differently.

How to use it

1. Explain the purpose of the diagram to participants.
2. Agree what time period is described by 'before'. This might be the time before an important event or development – for example, before an important change in law, before the start of a community initiative, or before safe water in the community.
3. Draw or write about the situation as it was before the event or development. Examples of what participants might want to think about are changes in individuals' attitudes and behaviours, the community, services, policies and laws, the economy or environment.
4. Now ask participants to draw or write about the situation as it is now.
5. Ask participants to compare and present the two drawings or descriptions. Discuss what has changed, what has not changed, and the reasons for this.

Facilitator Notes

- When discussing change at community level, it is important to make sure that different views are well represented, as people will have experienced change differently.
- The before and now diagram is a useful tool for monitoring or assessing change – for example, what has changed as a result of community action?
- Encourage a balanced assessment by discussing what has not changed, as well as what has changed.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 40: Brainstorm

What is it?

This tool involves participants sharing their opinions, feelings and ideas about a topic.

Why use it?

Brainstorming helps to:

- provide a non-threatening way for people to express their opinions and feelings
- allow participants to explore new ideas
- identify where there is, or is not, agreement about issues relating to water, hygiene and sanitation.

How to use it

1. Divide the participants into four groups and give each group a different coloured pen.
2. Think of four challenging situations relating to water, hygiene and sanitation in the community. Examples might include 'people are open defecating in the community' or 'children suffering from diarrhoea'.
3. Write each of the situations on the top of a large piece of paper. Put the pieces of paper up on walls or trees in different places in your work area.
4. Ask each group to stand by a piece of paper. Ask them to write down as many ideas as possible about how to improve the challenging situation. Before they start, stress to participants that at this stage any and all ideas should be written down without anyone judging them.
5. After five minutes, shout out 'Change!' and ask each group to move to another piece of paper. Ask them to add to the ideas written by the previous group.
6. After five minutes, shout 'Change!' again. Repeat the process until all of the groups have added to all of the pieces of paper.
7. Bring the participants back together. Read through what they have written on the pieces of paper and ask them to explain anything that is unclear.
8. When the activity is complete, encourage the participants to discuss what they have learned.
 - How difficult was it to think of ideas?
 - Did the groups have similar or different ideas?
 - Which of the ideas could be put into practice quickly?
 - What resources would be needed?

Facilitator Notes

- Brainstorms aim to help people to express themselves freely and openly. So it is important to create a 'safe space' where people will not be judged for what they say.
- If some participants have difficulties with writing, ask all participants to use symbols.
- There are many other ways of doing brainstorms. Some examples include:
 - Unfinished sentences: ask participants to suggest a way of finishing a provocative sentence; for example, 'One thing our community could do to improve the situation is ...'
 - Picture galleries: ask each participant to draw a picture of what a particular issue means to them. Display the pictures on the wall or on trees. Encourage people to ask each other about what they have drawn and why.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 41: Card Sorting

What is it?

This tool is a simple way to sort issues when there is a lot of information.

Why use it?

Using card sorting can help to sort and organize information into categories. This might include:

- organizing information gained during an assessment into manageable quantities
- sorting activities according to how feasible (do-able) they are
- examining which activities have a risk of disease transmission and which activities have less risk.

How to use it

1. Card sorting works best with smaller groups of people.
2. Agree the issue to be explored – for example, what helps mothers improve their hygiene practices in the household?
3. Ask participants to write down or draw on separate cards all of the different things which relate to the issue
4. Ensure all the cards are face up so that all the cards can be seen by all the participants.
5. Now ask participants to sort the cards into different categories according to their own criteria about the issue to be explored. For example, categories of things which help mothers to improve their hygiene practices might include good health, social support, education, and so on.
6. When the activity is complete, discuss what it shows.
 - What is in each category and why?
 - Why did people use these categories?
 - Discuss how to use the information.

Facilitator Notes

- For information gathered from participatory assessments, participants can use the same technique to sort information by the assessment objectives – for example, people's knowledge about proper hygiene, their attitudes towards it and their behaviour towards it.
- For assessing feasible (do-able) activities, participants could sort them into different categories, from easy to very difficult.
- For assessing risk of disease transmission, different activities can be sorted into categories, from high to low risk. The number of ways card sorting can be used is limitless. Think how you could use it.
- Allow participants to come up with their own categories if these have not been established yet. This may look disorganized and slow at first, but have trust that they can do it!

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 42: Vision Diagramming

What is it?

In vision diagramming, people draw a picture of a positive future they imagine for their community. This tool is useful when people are working together to identify new activities, services and resources.

Why use it?

Using vision diagramming helps to:

- imagine a positive future – a vision – where the water, hygiene and sanitation situation is improved
- identify services, activities and resources that will help achieve this vision
- identify who might be involved in providing these services and activities
- identify possible difficulties in bringing about the vision
- discuss how to solve these difficulties.

How to use it

1. Vision diagramming works best with groups of up to 12 people.
2. Ask participants to think about the current water, hygiene and sanitation issues in their community. Who is affected, and how? What services exist? What is the quality of these services?
3. Encourage participants to close their eyes and imagine a future in which all of the community has access to safe drinking water, proper hygiene and basic sanitation. In this future, people are preventing illness and supporting all community members affected by unsafe drinking water and lack of sanitation. Everyone in the community is involved in responding to the issues.
4. Ask each participant to draw this vision. What services exist? What would their role in this vision be? What would other people's roles in this vision of the future be?
5. Ask the participants to share their pictures with each other in small groups.
6. Encourage the participants to discuss their visions in detail, using the following questions:
 - In the visions, what new activities, services and resources exist?
 - Who is involved in carrying out the activities or services?
 - What would each of their roles be in this vision?
 - How did the vision come about?
 - In the visions, what difficulties were there in implementing these activities and services? How were these difficulties solved? What made things easier?
7. Ask the small groups to share their visions and discussions with the larger group. Encourage participants to ask questions about the drawings and make any comments or suggestions.

Facilitator Notes

- It is important that participants feel relaxed in this exercise and that they take the time to imagine a very positive future.
- Encourage participants to be as imaginative as they can. Remember that it may be difficult for people to imagine a service or a project that they have never seen.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 43: Problem Wall and Solution Tree

What is it?

These tools are drawing tools that look at problems and solutions related to a particular topic.

Why use it?

Using a problem wall and solution tree helps to:

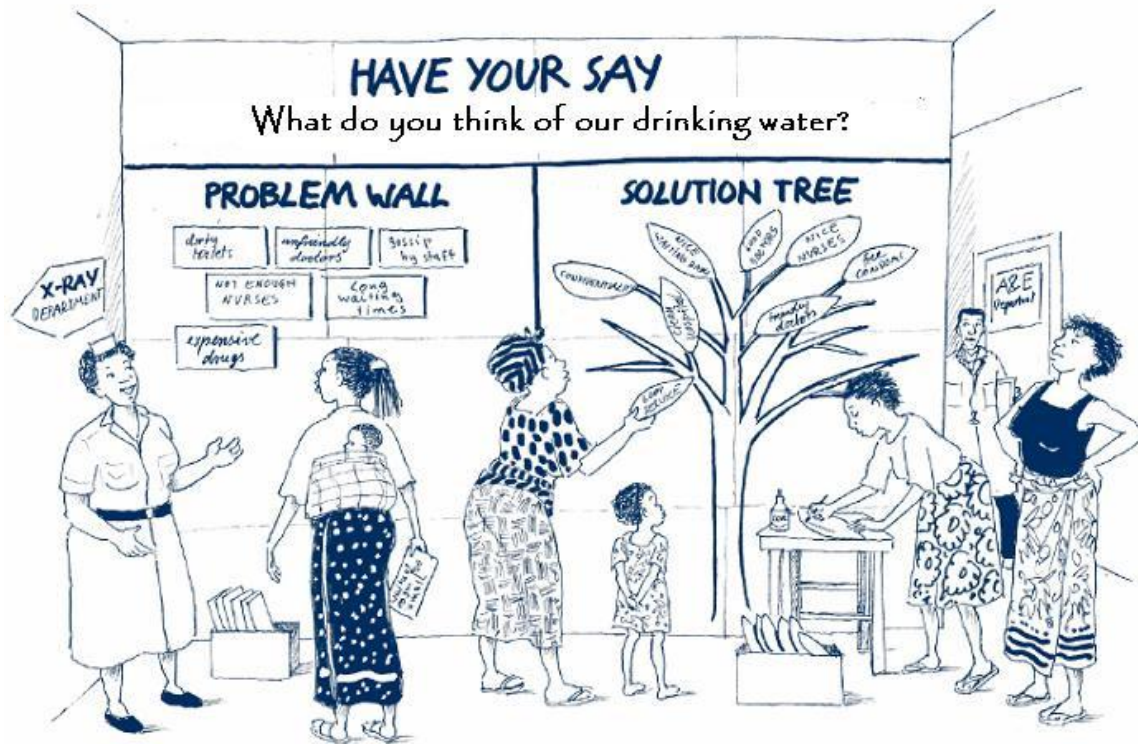
- identify and discuss problems related to a particular topic
- group together similar problems that may have the same solution
- identify and discuss possible solutions for the problems.

How to use it

1. Problem walls and solution trees work well with large groups of people in public places.
2. Cover a wall with paper and title one half of it 'problem wall'. On the other half draw a large tree and title it 'solution tree'.
3. Agree a topic. For example, 'What do you think of our drinking water?' Put this title of the topic at the top of the wall.
4. Cut up lots of 'brick-shaped' pieces of paper and 'leaf-shaped' pieces of paper. Put these in separate piles, with the bricks by the 'problem wall' and the leaves by the 'solution tree'. Put something nearby for people to be able to stick the leaves and bricks to the wall, such as glue or tape.
5. Invite people to think about the topic and write problems on separate 'bricks shaped' pieces of paper and stick these on the problem wall.
6. Ask participants to group similar problems on the wall.
7. Now ask people to consider these problem bricks and think of solutions to them. Invite people to write solutions on the 'leaf-shaped' pieces of paper and stick these on the solution tree.
8. Group together any solutions that are similar.
9. If this tool is being used in a workshop setting, agree which solutions would be easy to do and those that would be difficult to achieve alone. Use Low Hanging Fruit to help with this activity.
10. Summarize the main points of the discussion.

Facilitator Notes

- These tools are very easy to set up and can be left for participants to complete anonymously. They can be left in places like health facility waiting rooms, at bus stops or any other place where people congregate and have a little time to spare. Clear instructions left by the problem wall and solution tree will help people to do the exercise themselves.
- Use symbols instead of words if people are not confident writers.



(Adapted from International HIV/AIDS Alliance, 2006)

Tool 44: Action Planning

What is it?

This tool uses a simple matrix to plan who will do what, by when and with what resources. It is especially useful for planning with communities and groups of individuals.

Why use it?

Action planning helps to plan:

- which activities to do
- who will implement the activities
- when the activities will be done by
- what resources will be required to implement the activities.

It is an especially useful tool to use after objectives have been set.

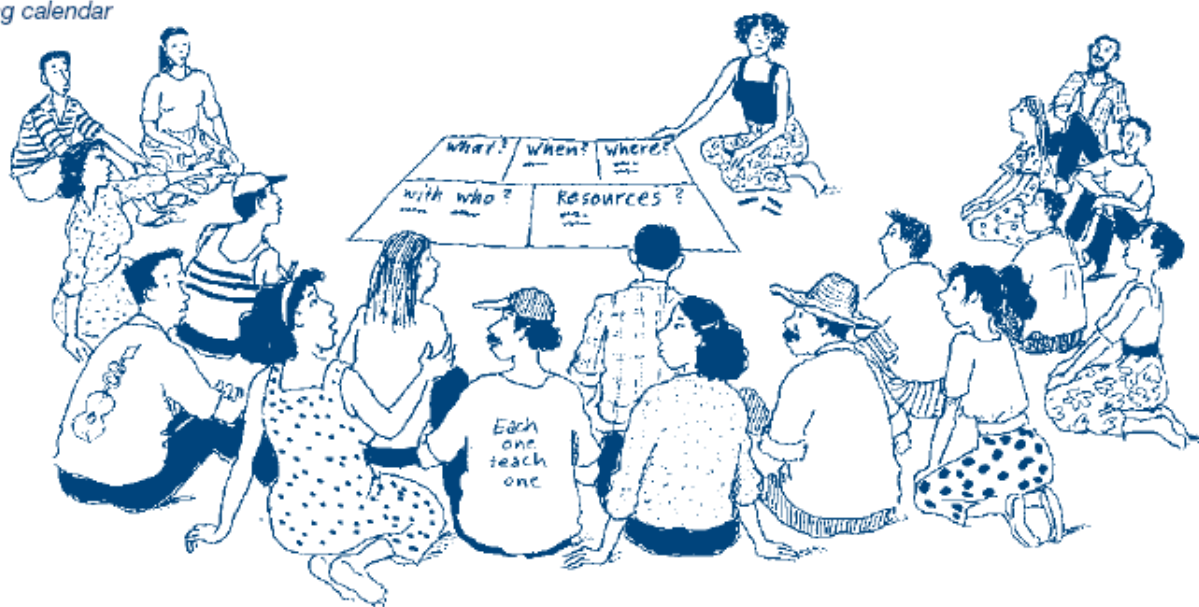
How to use it

1. Draw an action planning matrix (see illustration).
2. Ask participants to identify solutions and objectives to address a problem.
3. Ask participants to think about potential activities which will make those solutions come about, and put these in the left-hand column.
4. For each activity, ask participants who should carry it out. Should it be done by them alone? With others? Or by other people or organizations? Write the names of each person or organization in the appropriate column.
5. Now ask participants when each activity should be done by. Should it be done straight away (now)? Soon (within weeks/a few months)? Or later (a few months later)? When they have decided broadly when it will be done by, ask them to write a specific date in the appropriate column.
6. Now ask participants to consider what resources will be required to implement each activity successfully. These could be physical (for example, tools, materials, transport), or financial resources. Write these resources in the last column.
7. Agree with participants which individual people will take the lead responsibility for each activity to make sure it is done. Write the names of these people next to each activity.
8. Ask participants to look at the action plan as a whole. Does it make sense? Is anything missing? Is it realistic?

Facilitator Notes

- It is important to be very specific when discussing activities. Help participants to break down large activities into small ones.
- Remember, if a stakeholder is not present when their roles and responsibilities are being discussed, they must be fully consulted before plans are finalized!

Project planning calendar



Activity	By who?			By when?			Resources required
	On our own	With others	By others	Now	Soon	Later	
Activity 1							
Activity 2							
Activity 3							
Activity 4							

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(Adapted from International HIV/AIDS Alliance, 2006)

Tool 45: Road Blocks

What is it?

This tool involves participants identifying the barriers (road blocks) to something, and identifying solutions to the most important barriers.

Why use it?

Using road blocks helps to:

- identify the different barriers to something
- explore how those barriers can be grouped and how they relate to each other
- begin to identify solutions to the most important barriers.

How to use it

1. Select a subject in relation to safe drinking water, hygiene and sanitation which might present barriers – for example, ‘funding for our project’ or ‘lack of support from the local government’.
2. Ask the participants to identify the different barriers to that subject.
3. Fold pieces of card in half and draw or write one barrier on each piece of card.
4. Place the pieces of card in a row on the floor, so that they look like a series of road blocks.
5. Walk along the road blocks, and discuss why each barrier has been identified.
6. Agree how to group the barriers. Examples of groups might include: organizational barriers, financial barriers, physical barriers (for example, lack of equipment), social barriers (for example, people’s attitudes), political barriers and so on.
7. Draw a chart with a column for each group. Place each barrier on the chart under the heading that suits it best.
8. Encourage the participants to identify the most important barrier of those listed. Ask them to write the barrier in the middle of a large piece of paper.
9. Encourage the participants to identify possible solutions to that barrier. Ask them to write those solutions around the outside of the paper, with arrows linking them to the barrier.
10. When the activity is complete, encourage the participants to discuss what they have learned.
 - How do the different types of barriers link together?
 - Which are the largest barriers?
 - Which can be addressed most easily?
 - What type of people and organizations need to address the barriers?

Facilitator Notes

- Encourage participants to be specific about the barriers. For example, rather than ‘lack of resources’, they might write ‘lack of tools’, ‘lack of money’, ‘lack of electricity’.
- This tool can be overwhelming if it results in long lists of barriers. Emphasize that something can be done about every barrier and even small successes can make a big difference.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 46: Seasonal Health and Disease Calendars

What is it?

Seasonal health and disease calendars show seasonal patterns of health and illness. The diagrams show when different illnesses are most common.

Why use it?

Seasonal health and disease calendars are useful to:

- identify common illnesses and the relationship between well-being, illness and seasonal changes
- explore different perceptions of illness and health
- identify community priority health concerns
- explore access to treatment and different health-seeking behaviours.







































How to use it

1. Small or large groups can use seasonal health and disease calendars. Divide larger groups to explore seasonal health and disease patterns for different people, such as men, women and children.
2. Discuss what calendar and seasonal landmarks are used locally – for example, months, dry or rainy seasons, festivals, religious ceremonies.
3. Draw a horizontal calendar line (from left to right) marking seasonal landmarks.
4. List illnesses at the left-hand end of the calendar line and show when each illness is most common. Participants can use counters to score the frequency of each illness.
5. Discuss what is shown on the calendar. Discuss what different people do when they become ill.
6. Ideas for useful questions include: When are illnesses are most common? Why? What do people do for treatment when they have an illness? Are there times of the year when illnesses are more common? Why? What illnesses are most serious? Are there times of the year when certain illnesses are more common? What do people do when they are ill? Are there times of the year when children are ill more often? What are the reasons for this? How do illnesses at different times of the year affect people and their families – for example, do they stop people working?

Facilitator Notes

- It is important for participants to use their own local calendar and seasonal landmarks.
- Discussing key signs and symptoms of illnesses can help establish a common understanding of the illnesses that participants talk about. Local concepts of illnesses do not always match medical doctors' definitions.

(Adapted from International HIV/AIDS Alliance, 2006)

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
WEATHER												
FOOD												
DIARRHOEA												
FEVERS												
COUGHS												
HUNGER												

Tool 47: Division of Labour Chart

What is it?

This tool involves identifying what activities people carry out at different times of day. In particular, it helps to show how roles and responsibilities are divided between different people, such as women, men and children.

Why use it?

Using a division of labour chart helps to:

- identify how roles and responsibilities are divided between different community members, such as women and men or old people and young people
- explore how different activities link to water, hygiene and sanitation
- discuss the relationships between different community members (such as men and women) and how they link to water, hygiene and sanitation.

How to use it

1. Explain to participants the purpose of the tool.
2. Divide participants into groups of the same sex, age, and so on.
3. Ask the participants to identify symbols to represent different stages in the day. For example, a sun might be dawn and a moon might be evening. Draw these symbols down the left-hand side of the chart.
4. Encourage participants to describe a typical day in the community, including what activities they do at what times. Ask them to write or draw the activities on the chart next to the appropriate symbol.
5. Bring different groups of participants back together and encourage them to compare their division of labour charts.
6. Encourage the participants to discuss what is shown on the charts. For example:
 - What activities take up most of their time?
 - What activities do they like most or least?
 - How do the charts vary – for example, between women and men?
 - What activities are connected to water?
 - What would happen if roles and responsibilities changed – for example, if a person, or several people, in a household became sick and others had to perform their roles?

Facilitator Notes

- Rather than using symbols, participants can write the hours of the day down the side of the chart.
- The division of labour is likely to vary not only by gender, but also by age, ethnic group, wealth and so on. Sometimes it is useful to draw charts for several different types of people in order to get an overview of the community as a whole.
- It is important to record when people are carrying out several tasks at once. For example, a woman might be working in the fields while also looking after children. This helps to give an overview of people's full roles and responsibilities.
- Sometimes, it is useful to ask participants to do a chart for the 'other' group. For example, you can ask women to do a division of labour chart for men. When each has done this, they can share what each thinks the other does – this usually leads to some humorous discussions!

- This activity can also be carried out by drawing pie charts, either on pieces of paper or on the ground. This involves dividing the pie into different-sized slices to show how much of each day is given to each type of activity. For example, eating might be a small slice, while sleeping might be a large slice.

Time	♀ Women ♀	♂ Men ♂
6:00–6:30	Wake up, bathe, pray	Wake up, bathe, pray
6:30–8:30	Domestic duties (breakfast, housework)	Farm work
8:30–9:00	Food preparation	Farm work
9:00–11:30	Water collection	Rest
11:30–1:00	Farm work	Rest and pray
1:00–2:00	Lunch preparation	Rest
2:00–3:30	Eat lunch, rest, pray	Eat lunch
3:30–5:30	Collect water and firewood	Farm work
5:30–6:00	Farm work	Meet friends in the bar
6:00–7:30	Collect vegetables	Rest
7:30–8:30	Dinner preparation	Rest and pray
8:30–10:30	Bathe, eat dinner, pray	Bathe, eat dinner, pray
10:30	Go to bed	Go to bed

This chart was used to explore the division of labour among men and women in a village in Rwanda. It shows important information: women do most of the work and are in a larger number of different places throughout the day.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 48: Problem Tree

What is it?

This tool involves participants using a drawing of the trunk, roots and branches of a tree to identify a problem relating to water and the causes and effects of the problem.

Why use it?

Using the problem tree helps to:

- Provide a visual and non-threatening way to look closely at problems relating to water
- Identify the main causes and effects of the problem
- Identify the issues that lie behind the main causes and effects
- Begin to identify what can be done to address the causes and reduce the effects

How to use it

1. Explain the purpose of the tool and ask participants to identify a problem related to water. For example, 'A lot of water-related diseases'.
2. Make a large drawing of the trunk of a tree and draw or write the problem on the trunk.
3. Encourage the participants to identify all the main causes of the problem. Draw these along large roots of the tree, indicating that they are 'root' problems.
4. Select one of the main causes. Ask, 'Why do you think this happens?' This question will help participants identify the 'secondary' causes. Draw or write the 'secondary' causes as small roots coming off the larger root of the tree.
5. Repeat the process for each of the main causes.
6. Encourage the participants to identify the main effects of the problem. Ask them to write each effect as large branches of the tree.
7. Select one of the main effects. Ask the participants, 'Why do you think this happens?' to encourage them to identify the 'secondary' effects. Ask them to write the 'secondary' effects as small branches coming off the larger branch of the tree.
8. Repeat the process for the other main effects.
9. When completed, discuss what the problem tree shows. For example, how do the causes and effects relate to each other? What are the root causes of the problem?
10. Summarize the discussion.

Facilitator Notes:

- This tool can be used with the Solution Tree tool to identify the solutions to the root causes of the water-related problem.

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 49: Solution Tree

What is it?

This tool involves participants using a drawing of the trunk, roots, and branches of a tree to identify solutions, such as what will bring about that solution and what effects that solution will have. It is usually used to identify solutions to problems that have been identified using problem trees.

Why use it?

Using the solution tree helps to:

- Provide a visual and non-threatening way to identify solutions for water-related problems
- Identify what will bring that solution about
- Identify what effects that solution will have on a problem

How to use it

1. If you have done a problem tree for an issue, participants can easily turn it into a solution/objective tree by turning the negative statements of the problem tree into positive statements. For example, the problem of 'poor quality water' at the trunk becomes 'improved quality water'. This becomes our objective.
2. To understand how that objective can be achieved, participants can look at the root causes and turn negative statements into positive ones. For example, if one of the root causes was 'lack of knowledge among end users', it can be turned into a positive statement, or objective, like 'enhanced knowledge among end users'.
3. We can continue down the roots until the 'root' solutions/objectives to creating 'poor quality water' have been identified
4. We can now look at the possible effects that 'poor water quality' will have by (again) turning negative statements into positive ones.
5. If you have not yet done a problem tree, ask participant to identify a goal they have for improved water quality in their community, such as 'household water treatment use among end users'. Ask participants to make a large drawing of a trunk of a tree and draw or write the aim on the trunk.
6. Encourage participants to identify all the things which will bring about that aim. Draw these along large roots of the tree, indicating that these are the main 'root' solutions/objectives which will make them achieve this overall goal.
7. Select one of the main 'root' solutions/objectives. Ask, 'But how does this happen?' This question will help participants identify the secondary 'root' solutions/objectives required to bring about the overall goal. Draw or write the 'secondary' solutions/objectives as small roots coming off the larger root of the tree.
8. Repeat the process for each of the other main 'root' inputs.
9. Now encourage the participants to identify all the effects that fulfilling the objective will bring about. Ask them to write each effect as a large branch of the tree.
10. When completed, discuss what the solution/objective tree shows. For example, what activities can be done to make the solution/objective tree happen?

(Adapted from International HIV/AIDS Alliance, 2006)

Tool 50: Design Your Own Tool

What is it?

Here is a chance for you to be creative and invent your own participatory tool. If you want to share it with others, send it to CAWST and we will publish it in the next edition of our Community Health Worker manual!

Why use it?

(Explain what this tool helps to do.)

This tool helps to:

-
-
-

How to use it

(Provide step-by-step instructions on how to facilitate the tool.)

- 1.
- 2.
- 3.
- 4.

Facilitator Notes

(What are your top tips for facilitating this tool?)

-
-
-

See Also

(What other tools are similar to this or carry out the same role?)

-
-
-