DEMONSTRABLY SUCCESSFUL CONCEPTUAL GAMES & TOOLS FOR THE P D APPROACH -

Paper Game

Purpose: To illustrate that some people are better at coping in situations with little (or decreasing resources) than their neighbours may be.

Length: Approximately 10 minutes.

Materials: Several large pieces of paper / cloth.

Steps:

1. Participants are divided into groups of 3-4. Ideally there should be a minimum of 3 individuals in each group.

The facilitator explains that each team will have to stand on their paper, with no part of their feet touching the floor. Whichever team manages to do so where the others fail wins.

Once the teams stand successfully on the paper, the facilitator congratulates them.

4. The facilitator asks each team to step off the paper, and direct them to fold   the papers in half   and repeats the exercise.

5. This step is repeated until the papers grow very small
The team that manages to stay on the paper wins.

6. The facilitator congratulates the winner group, and asks the participants to explain the relevance of the exercise to the PD approach….

Blind Game

Purpose: To encourage participants to brainstorm about their views on any given training
topic, particularly focusing on issues of trust, learning, and leadership.

Length: Approximately 5-6 minutes

Materials: None; (blindfolds optional)

Steps:

1. Participants are told that they are going to take part in a blind exercise. They
    are divided into pairs.

2. The facilitator explains that one member of each pair will be 'blind' and the
    other will lead them around the room. The blind person may not open their
    eyes (remove blindfold). There can be no talking. After 3 minutes, when
    instructed, they will switch roles.

3. The facilitator tells the participants to start. After approximately 3 minutes,
    the facilitator tells the participants to switch roles. After an additional 3
    minutes, the facilitator announces an end to the exercise.

4. The facilitator may also ask people how they felt when they were led/being
    led, and then when they were leading the blind to stimulate discussion.

5. The facilitator asks participants what the relevance of the game was to the PD
    approach.

Some themes that emerge: PD and Leadership role, Building trust, .

BUILDING TO THE SKY Game

PURPOSE: To illustrate the concept of sustainability
WITH WHOM: Group of community members (leaders, teachers, decision makers and other men , women), trainees
WHEN: At feedback session on PDI findings and action planning session; TOT in PD concept
HOW LONG: 5 minutes
MATERIALS: Bricks, books of the same size, or similar objects, telephone books or dictionaries at least 4 of the same category

STEPS
1. Facilitator divides the audience in a minimum of 3 teams, ask each team to stand together away for other teams.

2. Facilitator explain the assignment: each team needs to build the highest structure using objects available in the room in the shortest time. The team that builds the highest structure wins

3. To make it difficult the facilitator hands out to each team an object of the same size (a brick or book) and ask them to build on this base.

4. The facilitator sets the time : 3 minutes for the construction

5. After the time limit, facilitator congratulates winner team. TAKE A PAUSE and.

6. Then facilitator proceeds to remove the bases provided to build the structures, provoking theym to collapse

7. Facilitator ask the participants what happened?. What this has to do with PD

COMMENTS   This a fun game and powerful exercise to illustrate the need to build on a base that involves the partners from day 1. Illustrate concept of PD building on existing resources. Asset based approaches

NAME: VILLAGE BUILDING contributed by Dr. Tariq, Regional Health advisor

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PURPOSE: To illustrate the concept of Positive Deviance using a "3 dimensional tool" and to generate a discussion among the group
WITH WHOM: An assembly of community members, men's group and women's group
WHEN   At orientation meeting, 1st step of the PDI and at feedback session about the PDI findings
HOW LONG   20 to 30 minutes
MATERIALS: Small cardboard houses, different sizes of stones, bricks or mud balls to represent   houses; small pictures of healthy children (between 3 to 5) and unhealthy children (between 10 and 15), chalk or stick, magic markers, etc.

STEPS
1. Draw a boundary of a fictitious village, ask individual participants to place their homes using boxes
   or stones and draw other significant landmarks (road, river, bridge, religious building, school, etc.

2. Place pictures of children face down under some "houses" making sure that identified poor houses get a picture of a well-nourished child.

3.Explain to the community members that this is a village where most people share similar socio-economic   conditions. Say that in each of these houses (pointing to the one with a piece of paper) children under 3 years live. Most of them suffer from malnutrition.

1. Ask volunteers to pick-up the stones or bricks to see what they find there.

2.   Ask each one what they have found in this house. They will say a well-nourished or malnourished child.

3. Have the volunteer count the number of malnourished children and the number of well-nourished ones. Then say: "In this village we have many malnourished children. How can we solve this problem?".

4. Listen to villagers' suggestions and highlight if the right answer comes from them or suggest it if they don't this way: :"We can learn from the families who have well-nourished children what they do TODAY to keep their children healthy to make the other malnourished children healthy as well"!.

5. Invite villagers to make comments. And make allusion how we can learn the same way for the problem at hand.

COMMENTS

NAME : LIGHTING THE CANDLES Contributed by the SC Afgan Refugee Camp field staff

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PURPOSE: To illustrate how individuals can learn from each other and disseminate new practices among the community (strengthening horizontal learning)
                 To initiate action plans after the PDI; i.e. to elicit from participants how the PD behaviors can be made accessible to all and practiced by all.
WITH WHOM: Group of community members (leaders, teachers, decision makers and other men and women)
WHEN: At feedback session on PDI findings and action planning session
HOW LONG: 3 to 5 minutes
MATERIALS: 25 to 30 candles and a box of matches

STEPS:

1. Facilitator distribute candles throughout the audience

2. Facilitator identifies 2 or 3 active community members from the audience and light their candle

3. Each identified community member then turns to their neighbors on each side and light their candle

4. They in turn light candles of others around them, and so on.

5. Facilitator asks participants to explain what the activity means

COMMENTS: This activity can be repeated at the end of each monthly support groups' meeting to illustrate participants' commitment to disseminate what they have learned to others (relatives, friends, etc.
This activity can also illustrate the idea of progress "from darkness to light", especially if carried in the evening

VARIANTS   #1 ILLUSTRATION OF PD CONCEPT IN ADVOCACY
Instead of having the facilitator strike the match and light a few candles from community members 2 or 3 individuals in the audience carry a candles and matches (PD individuals with PD behaviors**).**
Each of them light their candles and then turn to their neighbors and light their candles.

#2 COMPARISON OF MOH OUTREACH AND COMMUNITY BASED SYSTEM (training)
                 The identified outreach worker (LHW, LHFPV, HV) lights her candle
                 then proceeds to light each candle among the community assembled. The
                 exercise is repeated with the original version described above

**Community Meeting Following FGD and PD and NPD home viits (PDI).
Contributed by Dr. Hien, Dakrong district health services, Viet nam**

Purpose of Activity: To develop "community ownership"
To enable community members to define the problem, and identify strategies to overcome malnutrition which are demonstrably accessible TODAY to all in the community.
With Whom: Parents of children < 3 (or other target age group)men and women from formal or informal networks, health cadre, village leaders, etc.

Materials: Giant color coded growth chart with all children plotted on it, drawing, flipchart paper and magic markers
Note: Growth chart has a star or a figurine representing each child weighed 2 weeks earlier. Children from "poor" families are represented by a black star or figurine, children from "\well-off families" by a yellow star.
Prepare ahead of time 4 packet of strips of paper with behaviors/practices found during visits to PD and non-PD families regarding. health seeking, caring, feeding or hygiene practice)
Time frame: 2 hours

Step 1: Facilitator asks villagers to review the giant growth chart they had prepared at previous meeting for identification of PD children, i.e well-nourished children from poor families
Participants review the significance of the chart,by coming up to it, and pointing out the different channels, AND the fact that although most of the children from poor families were malnourished, there were several poor families whose children were "well nourished"!
Tip: Facilitator had several people come up to the chart and repeat the explanation in order to confirm that everyone really understood.

Step 2: All participants are divided into 4 groups and given two flip chart size papers each, one with a picture of a "well-nourished" child, the other, a picture or a malnourished one.
Participants in each group are given a packet of paper strips with one behavior/practice written on each. Each behavior/practice had been "discovered" in the village, either during a visit to a PD or Non-PD family.
The facilitator carefully explains that the behaviors/practices written on the strips they have, were **taken from families in their community**.
Assignment: The facilitator then asks the groups to go through the behaviors, and using tape place each behavior on the flip chart with the well nourished, or malnourished child depending on their opinion of which health status the behavior contributed to. (i.e. a "good behavior" would be placed on the chart with a "well nourished child", a "negative behavior" on the chart with the picture of the malnourished child.

Step 3: After 10-15 minutes all 4 groups return to the bigger group, where they share their findings with all the participants.

For example, the group whose packet of strips contained behaviors/practices related to feeding, (such as use of colostrum, non-use of colostrum, immediate breast feeding after delivery, or initiation of breast feeding after 4 days, etc) explained why they had decided to put each behavior on one chart or the other.

Step 4: After each group shared their analysis with the whole group, the facilitator asks all participants to discuss the findings, and either agree, disagree, or amplify. It is important to note, that using the experience/wisdom of the entire group helped to correct the few errors made by the smaller group. *For example, using colostrum had initially been identified as a negative practice, (i.e. placed on the chart with the malnourished child.) However, after discussion the entire group decided it was a good practice and belonged on the chart with the well nourished child.*
After all 4 groups had presented their findings, with lots of animated discussion from the larger group, the facilitator re-emphasised that "all of the practices you listed have come from families in THIS community!"

Step 5: The facilitator, next asks one person from each group to come up to the chart with the picture of the well nourished child and the selected "good practices" and put a black "X" under those practices which a poor family could do/use, and a red "X" under those practices that only rich families could do/use.

Note from Viet nam: this was not a perfunctory exercise as the groups identified a few behaviors which ONLY rich families could do/use such as the use of soap for washing clothes, and providing ample warm clothes for the child in winter. All the other behaviors/practices were identified with both a black and a red "X" signifying that they were ACCESSIBLE TO EVERYONE IN THE COMMUNITY.

Step 6: Plan of Action:
Finally the facilitator asks the participants what they want to do about the malnourished children in the community. They all agreed that they wanted the children who were malnourished to become well nourished. The facilitator then asks the participants h**ow** they could use the newly created charts of behaviors leading to a "well nourished" child to improve the health/nutritional status of all children in the community.

Example from Viet nam: Initial brainstorming from participants focused on getting the poorly nourished families to visit the well nourished ones and learn what they were doing to have healthy/well nourished children. Villagers also, with a bit of prompting, added that it was more important/useful to get villagers to PRACTICE or DO the new behaviors, than to just hear about them.

The full meeting took about 2 hours and was a brilliant demonstration of how the collective ideas, experience, knowledge of a community can be tapped and utilized to solve its own problems with existing resources. The facilitator repeatedly referred to the fact that the weighing of the children, the creation of the large GM chart and discovery of the fact that it was possible for a poor family to have a well-nourished child were all

done by the community. Similarly, the discovery of good behaviors enabling even poor families to have well nourished children, were all based on behaviors/practices discovered in the homes of members of their community! The highlighting of these facts resulted in a true sense of "community ownership" for defining the problem, and identifying strategies to overcome malnutrition which were demonstrably accessible TODAY to all in the community.

Make your own conceptual games and share them with others

NAME
PURPOSE
WITH WHOM
WHEN

HOW LONG

MATERIALS

STEPS

COMMENTS

VARIATIONS

WORKSHOP ON TOOLS FOR COMMUNICATION

Objectives of workshop

1. To share experiences in using interactive conceptual games/tools for community mobilization through practice
2. To build on participants' experience and skills
3. To create new tools together and practice them

Schedule

8:30-8:45 am	Introductions, objectives
8:45- 9:30 am	Sharing a few tools through practice
9:30- 10:30 am	Exploring skills for community mobilization and practice
10:30-10:45 am	Tea break?
10:45-11:45 am	Creating new tools and practicing them

Introduction: lighting the candles

Part 1: Sharing of experiences.

1.1 Brainstorming in 2 groups: A generic recipe for effective community mobilization

Activity 1: each team is given a pot and must find ingredients to give the best recipe.Shared goal sense of /purpose, Good facilitation
- Interactive activities during meetings (conceptual games, PRA tools, ice breakers, etc.)

1.2 Activity 2: each team presents or rather "act out" a tool with the help of some participants .
After each presentation, participants discuss the tool:
1. Purpose, its possible other applications, variants, with whom, constraints

1.3 Characteristics of these tools: brainstorming (fun, invite reflection, interactive, make concept easy to understand, immediacy of understanding concepts

1.4 Level of community participation in projects