Facilitator's Manual for Community Health Committees (COMM)

Session 6: Reporting Community Health Status

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SESSION 6: REPORTING COMMUNITY HEALTH STATUS

Part 1: Reporting and Discussing: Debriefing Meetings

Notes for the Facilitator

The debriefing meetings will be open to all stakeholders in the community health programme. It is a good way to share information about trends in community health, announcements, upcoming activities, to celebrate achievements, and to identify – and, as appropriate, address – grievances, and so forth. The information shared can also feed into community debriefings which take place across the programme area. It will be important for the COMM to participate in such meetings if they exist, in order to bring out integration and learning across different efforts that may be complementary to health, such as education, livelihoods and food security.

ACTIVITY 1: SHARING DATA VISUALLY

Inform the COMM that it will need to organise and conduct quarterly stakeholder debriefing meetings. The members should be thinking about the audience primarily as community members when they prepare information to present. The information should be easy to understand and visually appealing. Tell the COMM members to select three or four indicators and behaviours that they are tracking regularly and present the information as they would during the debriefing meeting (see the sample agenda in the following text box).

If they only have information from a root-cause analysis, this is what they will present. If they have information from both a root-cause analysis and the first quarter from CHWs (Q1), then perhaps they will want to show a comparison.

Many times they will be presenting the information as approximate percentages. There are many creative ways of representing percentages. The use of icons, colours, drawings of pregnant women, and so on may be applicable for the debriefing meetings. Distribute flipchart paper and give the group time to depict some of the data for the indicators. Encourage the group to think creatively about ways to display the percentages effectively.

ACTIVITY 2: SHARING DATA VERBALLY

Next, divide the COMM members into small groups and assign each group two to three indicators to discuss and come up with analogies or frames of reference to explain the data in ways that would be familiar and accessible to the community. Read the following examples to help them get started.

Frames of Reference
- A 12-month old baby would have to eat 16 chicken eggs to equal one vitamin A dose given at a health facility.
- A woman who walks four kilometres (round trip) to fetch water every day, from age 15 to 40, covers 36,500 kilometres. If she were to walk this distance in a single straight line, she would circle the earth one and a half times!

ACTIVITY 3: REVIEW THE DATA FOR CONFIDENTIALITY

When the COMM has finished compiling all of the information it wants to share at the debriefing meeting, have it review everything to make sure that there is nothing that would identify a particular person or family. If names, ages, genders, and so on are needed in order to share an illustrative story during a debriefing meeting, or to post on the community health board, for example, then use an alias with made-up personal identifiers.

ACTIVITY 4: INVITING ATTENDEES TO DEBRIEFING MEETINGS

Publicise debriefing meetings on the community health board. Attendees can also be invited by word of mouth. Discuss with the COMM methods of notifying and inviting the attendees, and make a list on flipchart paper. The attendees should include as many members of the community as possible, MoH and clinic staff, CHWs, FBOs, and other stakeholders, such as the supporting NGO or private-sector staff.

Sample Agenda for a Debriefing Meeting

The agenda should include the following items for every meeting, other topics decided upon by the COMM and any single-meeting or short-term topics. Write these agenda items on flipchart paper, and assign someone to take detailed minutes at each debriefing meeting for COMM review, approval and record filing.

Part 1: Opening
1. open with a recitation of the COMM's mission statement or code (optional)
2. introduce and welcome any outside visitors
3. review the minutes of the previous meeting.

Part 2: Presentation of Information
4. review current COMM activities (report against the Action Plan)
5. list issues or barriers addressed since the previous meeting
6. present data about select indicators
7. report CHWs feedback: successes and barriers
8. review adverse events in the community, if any
9. present grievances raised, if any.

Part 3: Plans for Next Quarter
10. discuss how to respond to new or unaddressed issues and barriers
11. announce plans for community sensitisation.

Part 4: Open Floor and Announcements
12. invite issues attendees would like to raise
13. announce COMM activities that will take place before the next debriefing meeting
14. invite pertinent announcements from the community.

Remember to celebrate successes of the COMM, the CHWs, the local clinic, the community, the MoH, and anyone who has positively contributed to community health since the previous meeting.

ACTIVITY 5: THE DEBRIEFING MEETING

Read the following to the COMM: 'The debriefing meetings are good opportunities for sharing information about trends in community health, making health-related announcements, highlighting upcoming activities, celebrating achievements, identifying and addressing grievances, and so on. The confidentiality of individuals and families must be maintained as this information is shared. Debriefing meetings are open to all stakeholders involved in the community's health.'

After the debriefing meeting, items that need to be acted upon must be noted, and the COMM will discuss them in its monthly meetings and incorporate them into its Action Plan. It may be useful for the COMM to plan a meeting directly after each debriefing meeting, since it is likely that items will have been raised that require COMM action. Collect and file the visuals the COMM has created for use during the next session.

Role Play

Following the sample agenda, have the COMM members carry out a practice debriefing meeting. Where the agenda calls for presenting information, they will share the data they have prepared, along with some of their stories using analogies and frames of reference. Provide feedback on their performance.

ACTIVITY 6: KNOWLEDGE ASSESSMENT FOR SESSION 6, PART 1

As you close Session 6, Part 1, ask the COMM to respond to each of the following statements as either 'true' or 'false' in order to assess the members' general understanding of the material. Allow the group time to discuss and agree on a collective response to each *before it answers*. If the group answers incorrectly, you will know that you need to revisit this information with the group before proceeding to the next session.

1. Debriefing meetings should be held once or twice each year. *(Answer: FALSE)*

2. As many community members as possible should be invited. *(Answer: TRUE)*

3. The COMM's presentation of information is the main purpose of the debriefing meetings; if CHWs or community members do not have time to share due to the COMM's agenda; that is OK. *(Answer: FALSE)*

Part 2: Reporting: Community Health Board

Facilitator Preparation

Before this session tell the COMM members to imagine that they are going to share some important health information in a public place. Ask them to find pictures, brochures, posters, newspaper articles, announcements about health events, or any other informative item related to health. They should bring these to this session.

ACTIVITY 1: INTRODUCTION TO THE COMMUNITY HEALTH BOARD

Begin this session by asking each of the members to take turns showing and discussing the health information items they brought, describing what each item is and why they chose it. Next, briefly explain that they are going to create and maintain a Community Heath Board. Depending on the administrative level at which the COMM is operating, it may have more than one board to create and maintain, one for each community. These boards will be used for sharing:

- announcements or notices (such as health outreach events)
- information gathered from their data
- recognition of CHWs
- success stories
- anything else the COMM deems appropriate.

Write the list above on flipchart paper. Ask for input from the COMM members about other appropriate items to post on the Community Health Board and add their ideas to the list.

If they have not mentioned it, remind them again to celebrate successes. Just as it is encouraging in the appreciative discovery process to determine which trainings are needed, people are encouraged by good news. The community can be inspired to act or to continue working on something it has started if it receives positive feedback about things that are going well.

The information on the board should be updated at least quarterly, if not monthly. Timely and urgent announcements (such as disease outbreaks) should be posted immediately.

ACTIVITY 2: ORGANISING DATA FOR DISPLAY

Data can be organised for display in various ways. One simple way is to use a table with the basic information about the community at the top, icons representing health issues, and the indicators for each issue and data in monthly or quarterly columns. The COMM can colour code the cells for those who are illiterate. For an example, see Tool 6-1, Our Community's Health.

Point out that when they make their Community Health Board, they can cover the board with an interesting background colour or decorate the borders with designs or images to attract attention. There are endless ways of making the board attractive and intriguing.

For the content, they will need to keep in mind the literacy level of the community members. They may need to post all critical information in pictorial form so it will be accessible to everyone.

ACTIVITY 3: MAKING A DISPLAY

Now the group members will use the items they have brought in and combine them with the visuals they made in Part One in order to make a sample Community Health Board. They can be creative in how they lay out the items. If

they use a collage to make the Community Health Board eye catching, they need to ensure that nothing important is covered by something else.

ACTIVITY 4: CREATE AN ACTION PLAN AND USE IT TO MONITOR PROGRESS

Distribute Tool 6-2, COMM Action Planning and Monitoring Tool: Reporting Community Health Status. Review the goals. The group should indicate the activities it will undertake in order to prepare for, organise, and carry out the quarterly debriefing meetings. It should also think through the steps for creating and maintaining the Community Health Board. All of this should be added to the Action Planning and Monitoring Tool. The COMM secretary or a volunteer will be responsible for keeping this version updated.

Once again, you, as facilitator, should request a copy of this form every quarter so that you, too, can track the group's progress.

ACTIVITY 5: KNOWLEDGE ASSESSMENT FOR SESSION 6, PART 2

As you close Session 6, Part 2, ask the COMM to respond to each of the following statements as either 'true' or 'false' in order to assess the members' general understanding of the material. Allow the group time to discuss and agree on a collective response to each before it answers. If the group answers incorrectly, you will know that you need to revisit this information with the group.

1. The Community Health Board should contain public, community-level information only; it should have nothing about individual CHWs or community members, even if positive or celebratory. *(Answer: FALSE)*

2. The information on the board should be updated at least quarterly, if not monthly. *(Answer: TRUE)*

3. The COMM should be as creative as it deems appropriate in order to make the data visually appealing and clearly communicated to the community members at large. *(Answer: TRUE)*

TOOL 6-1. OUR COMMUNITY'S HEALTH

Our Community's Health

_____
(Community Name)

Total Population: _____

Children under age 2: Girls _____ Boys _____   **Children age 2–14:** Girls _____ Boys _____   **People age 15 and over:** Girls _____ Boys _____

Icons	Indicators	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
	Take iron folate for at least 6 months				
	Consume locally available, iron-rich foods				
	Seek/demand tetanus toxoid at the right time				
	Sleep under LLINs every night				
	Receive standard IPTp				
	Receive local, iron-rich foods or fortified foods				
	Receive immunisations at a health facility				
	Health card is updated at every visit				
	Children 12–24 months receive periodic de-worming tablets				
	Children wear shoes once able to walk				

TOOL 6-2. COMM ACTION PLANNING AND MONITORING TOOL: REPORTING COMMUNITY HEALTH STATUS

REPORTING COMMUNITY HEALTH STATUS

Name of COMM: _____   **Year:** _____   **Quarter: Q1** _____ **Q2** _____ **Q3** _____ _**Q4** _____

Instructions: Fill out the table below with the activities the COMM will undertake to report the results of its work and the health status in the community. Tick the boxes under 'Goals' only when the activities are complete and the goals have been achieved.

Goals

☐ We held a debriefing meeting this quarter.

☐ We created or updated a community health board this quarter.

COMM Activities	Who	Resources	Planned Date to Complete	Date Actually Completed	Comments

(Tool 6-2 continued)

COMM Activities	Who	Resources	Planned Date to Complete	Date Actually Completed	Comments

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