Interpersonal Communication Skills for Frontline Workers

Reference Guide

2015
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Introduction

Within the framework of the partnership between the Center for Public Health Practice at Faculty of Health Sciences at the American University of Beirut (AUB) and the United Nations Children’s Fund (UNICEF) in Beirut, a training package on Interpersonal Communication for Behavior Change was developed for enhancing the capacities of governmental institutions and non-governmental organizations working in the field of humanitarian response to crises, to work more effectively with local communities to develop and implement educational activities that contribute to behavior change.

The training package is composed of the following:

- A reference guide that contains information on all aspects of behavior change communication in humanitarian crises, including concepts, methodologies, and related considerations.

- A Training manual that will support trainers to train field workers on content of the reference guide.

- A toolkit that contains supportive material that compliments the reference guide. It provides field workers with a set of tools that they can use when implementing behavior change communication activities, including techniques that help stimulate participation in awareness sessions and facilitate the process of raising awareness and addressing all issues effectively.

The reference guide contains information on the different aspects of behavior change communication and is composed of four chapters on Communication for Behavior Change, Behavior Change Communication in Humanitarian Crisis, Interpersonal Communication, and Community Mobilization. It contains some examples on how to apply and use behavior change communication methodologies in humanitarian settings. Field workers can use the information in this guide as a reference during the preparation of their programs. In addition, trainers can use it during the training workshops.
# Table of Contents

<table>
<thead>
<tr>
<th>Introduction</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Chapter One</strong></td>
<td>9</td>
</tr>
<tr>
<td>Communication for Behavior Change - Martine Najem</td>
<td>9</td>
</tr>
<tr>
<td>01 <strong>First:</strong> The Conceptual Framework for Behavior Change</td>
<td>9</td>
</tr>
<tr>
<td>A- Health Behavior</td>
<td></td>
</tr>
<tr>
<td>B- Social Ecological Model for Behavior Change</td>
<td></td>
</tr>
<tr>
<td>C- Stages of Behavior Change</td>
<td></td>
</tr>
<tr>
<td>02 <strong>Second:</strong> Behavior Change Communication</td>
<td>14</td>
</tr>
<tr>
<td>A- Definition of Behavior Change Communication</td>
<td></td>
</tr>
<tr>
<td>B- Behavior Change Communication Strategies</td>
<td></td>
</tr>
<tr>
<td>C- Communication Objectives in Behavior Change Communication Programs</td>
<td></td>
</tr>
<tr>
<td>D- Audience Analysis</td>
<td></td>
</tr>
</tbody>
</table>

| **Chapter Two** | 18 |
| Behavior Change Communication in Humanitarian Crises - Martine Najem | 18 |
| 01 **First:** Emergency Response in Humanitarian Crises | 18 |
| A- Vulnerability in Emergency Situations | |
| B- Humanitarian Response and Disaster Management | |
| C- Behavior Change Communication in Humanitarian Crises | |
| D- Principles and Measures that Support Behavior Change Communication Programs in Humanitarian Crises | |
| E- The Importance of Raising Awareness in Behavior Change Communication Programs in Humanitarian Crises | |
| 02 **Second:** Ethical Considerations in Behavior Change Communication Programs in Humanitarian Crises | 23 |
Chapter Three:
Interpersonal Communication - Dr. Rana Barazi

Introduction .................................................................................................................. 24

01 First: Interpersonal Communication .................................................................................. 24
   A- Definition
   B- Elements of Interpersonal Communication

02 Second: Using Interpersonal Communication Skills in Communication for Behavior Change Programs .......................................................................................................................... 35
   A- The Position of the Fieldworker with Respect to their Audience
   B- Strategy of Interpersonal Communication Used During Interactions with Individuals and Groups
      1. Follow the “GATHER” Methodology for Interpersonal Communication
      2. Apply the Appropriate Communication Strategy for Each Stage of Behavior Change

Chapter Four:
Mobilizing the Community - Nizar Rammal

Definition ......................................................................................................................... 42

01 First: First: Basic Principles ............................................................................................ 43
   A- Conditions for Success and Effectiveness
   B- Stages of Community Mobilization
   C- Mobilizing the Community and Change
   D- Proposed Tools to Mobilize the Community

02 Second: Second: Work Tools .......................................................................................... 49
This reference guide was compiled through a partnership between the Faculty of Health Sciences at the American University of Beirut (AUB) and the United Nations Children's Fund (UNICEF) in Beirut. This effort is aimed at developing a training program for Behavior Change Communication, which includes a set of activities designed to enhance the capacities of governmental institutions and non-governmental organizations working in the field of humanitarian response to crises, allowing them to work more effectively with local communities to develop and implement educational activities that contribute to behavior and social change.

The booklet was prepared by specialists who work in the field of health communication aimed at fostering behavioral change. It includes several topics about communication and behavior change in humanitarian crises, as well as interpersonal communication and community mobilization.

Based on the content of the booklet, we prepared a set of activity support tools to be used by fieldworkers while planning, implementing, and evaluating awareness and education activities in local communities. We also developed a training manual to be used in training courses for fieldworkers working with civil society organizations in various locations.

We hope that this reference booklet will contribute to activating the role of government and civil society when responding to crises. We look forward to a continued partnership and renew our commitment to reach all segments of society in our work.

Faculty of Health Sciences
American University of Beirut
First: The Conceptual Framework for Behavior Change

A- Health Behavior

Health behavior can be defined as a set of actions taken by individuals that affect their health and well-being. A multitude of factors affect an individual’s behavior, including personal beliefs, attitudes, and skills. Other factors also come into play as determinants of health behavior—these are related to family and social relations such as friends, peers, and colleagues; institutional elements such as the availability of health services and applicable laws; as well as the social environment, including norms, customs, traditions, and the existing political system.

This definition is compatible with a broad and comprehensive view of health, which can be defined as a state of complete physical, psychological, mental, and social well-being, and not merely the absence of disease or infirmity. In addition, the definition takes into consideration behavioral, social, and environmental influences on health, due to fact that the health of an individual cannot be attributed solely to genetic or physical factors.

Positive health behavior aims at improving health, and includes habits, activities, and patterns of living that enhance recovery, prevention, and protection from disease.

B- The Social Ecological Model for Behavior Change

An individual develops a desire to change a certain behavior based on their perception of the incentives and constraints associated with such an effort, as well as those associated with the adoption of the new behavior.

Such incentives and constraints are linked to personal, relational/communal, institutional, and social environmental aspects. The figure below shows the importance of providing incentives and overcoming obstacles at all levels in order to achieve sustainable change in health behavior.

Examples of Barriers:

- Financial situation of the family
- Misconceptions related to girls education
- Pressure from community members in relation to child labor, safety concerns, etc..
- Access issues like transportation cost
- Differences between Lebanese and Syrian Curriculum

Examples of Incentives:

- Free transportation
- Free registration
- Free stationary and books
- Healthy environment for children
- Better future for kids
This comprehensive model of addressing behavior change is intended to help practitioners working in the development field understand the close interrelation between all these levels of determinants, which may interact with each other to support behavior change. Thus, a deep understanding of the causes leading to the adoption of a certain behavior is a necessary prerequisite to changing this behavior. It is important to note here that every social environment has its own specific cultural considerations and system of beliefs, which often shape the attitudes and behaviors of individuals.
The perceived benefits resulting from behavior change play an important role in motivating further change; on the other hand, difficulties faced by individuals during the process may discourage or make them reluctant to continue. This means that the probability of changing behavior increases as the benefits outweigh the drawbacks, especially if this change has a clear and positive impact. This equation applies to the various levels of the social ecological model in the following way:

- **At the individual level:** Knowledge, attitudes, and skills, as well as self-efficacy, which is the extent or strength of one’s belief in one’s own ability to change behavior. All these factors contribute to strengthening the intention to change one’s behavior and commit to it. The more the desired behavior is attuned with an individual’s self-image, the higher the possibility of changing this behavior. As an example, a mother can fear vaccination because of a misconception she has based on a story she has been told in relation to a child who died from vaccination. Such personal misbelief will make her hesitant to adopt the behavior of administering vaccine to her child despite the many campaigns and incentives provided.

- **At the level of social relations:** There is no doubt that social support plays an influential role in changing the behavior of individuals. The family is the first context in which an individual learns and acquires habits and behaviors, which is directly linked to their health and growth since childhood. Social relations, such as friendships, also have a big impact on driving or impeding behavior change. The social relationships that most affect a person’s life are those of adolescence and early adulthood years, which include what is known as peer pressure. For this reason, many health and development initiatives aim to explore relations between peers to raise awareness and stimulate positive behavior, as well as prevent negative influences on adolescents and youths, which may result in risky behavior. For example, the attitude of grandparents and other relatives toward children vaccination greatly affect that of the child’s parents in either direction. In the same context, peer pressure among mothers can deter one mother from accepting the vaccination of her child if her friend keeps telling her that vaccines are harmful and God protects her child and not modern medicine.

- **At the communal and institutional level:** Local community-based organizations, or active institutions in the community such as schools, workplaces, health centers, and others can greatly affect and motivate behavioral change, as well as act as an obstacle toward achieving that change. The laws that govern the work of these institutions, for example, may constitute an important source of support. These institutions can be very effective because of their ability to attract large groups and specific segments of society. When it comes to motivating a certain behavior, the availability of health and educational services, for example, within the local community and relevant institutions can greatly help individuals to change and persist in their behavior. For example, administration of vaccines in schools catering for Syrian refugees makes it easy to reach those children and conveys credibility to parents who trust the school. Same applies for the health center in a certain community.

- **At the environmental and social level:** Public policy and laws and regulations at the national and international levels are the umbrella that helps individuals achieve behavior change, by limiting the impact of individual factors, enforcing justice and equality in terms of access to services, and strengthening prevention and protection. For example, the policy issued by the Lebanese ministry of public health for a mandatory free vaccination of Syrian refugee children is an important environmental factor that incentivizes vaccination for all children among refugees. Another example could be religious norms that if misinterpreted by parents could deny vaccinations from a great number of children (it could be related to fasting season or to other considerations).
C- Stages of Behavior Change

Behavioral change is a complex process given that it is influenced by a variety of factors. It is not possible for all individuals to make the same progress, for they usually have varying levels of awareness and possess different attitudes and levels of confidence. Accordingly, behavior change is often described as a gradual developmental process that occurs in particular stages called "stages of behavior change."

Individuals may move gradually from one stage to the next, possibly even skip some, or regress to an earlier stage. The prospect of returning to the initial stage or falling back one is always a possibility. The following is a simplified explanation of the five stages of behavior change:

**Stage One:**
The individual is not aware of the problem. At this stage, the individual is not interested in changing their behavior, and is unaware of the need to change or the possibility of benefiting from such a change. A clear example relates to when parents allow their daughters to be married at an early age thinking they are doing it for her own good so that she has a home and family and to ease her financial burden on them. In this case, they are not aware of the mental and physical health implications of early marriage. While not acknowledging that early marriage is a problem or is harmful, parents do not feel the need to change this behavior or stop this practice.

**Stage Two:**
The individual is aware that there is a problem and is interested in behavior change. Recognizing the problem and gaining knowledge about it constitute the first step towards wanting and seeking behavioral change. This usually happens thanks to awareness raising sessions or health education sessions where participants start to realize that a certain behavior might be harmful when they start learning about the health and environmental impacts. It applies to problems like hygiene, nutrition, smoking, etc...

**Stage Three:**
The individual starts preparing for change. The intention to change behavior has crystallized, and the person concerned has made a decision or commitment to change. Preparation for behavioral change often results in a change in attitude, and the individual becomes more open to working towards achieving the required change, as well as more confident of its potential benefits. At this stage, the individual starts discussing the behavior change with friends, colleagues, and family members. He/she also starts making pledges or promises to adopt the new behavior.

**Stage Four - Action/Trying:**
The individual practices the new behavior. At this stage, the individual is completely convinced of the benefits of the new behavior, and is actively involved in improving their ability to achieve behavioral change. The individual starts to sense the positive aspects of behavioral change.

**Stage Five - Maintenance:**
The individual continues to practice the new behavior. After recognizing and acknowledging the need to change and taking practical steps to do so, the individual must then commit to sustaining this change through ongoing support and reinforcement. Upon reaching this stage of behavior change, the individual can play a leading role in motivating others to change their behavior as well.
Figure 2 below shows the five stages of behavior change along with the intervention strategies that can be employed at each stage. In the first stage, where individuals are not aware of the existence of a problem, efforts should be directed toward increasing their knowledge about it. In the second stage, when individuals become aware of the problem and demonstrate an interest in changing their behavior, they should be influenced to accept the idea of changing behavior and express their intention to do so. In the third stage, when individuals are preparing to change their behavior, it is necessary to focus on practicing the process by enhancing their skills. Thus, individuals will be ready to move to the fourth stage in which they practice their behavior. In the fifth stage, they can use their experience with behavior change to invite others to adopt new behaviors.

**Figure 2: Stages of behavior change and corresponding intervention strategies**

![Stages of Behavior Change Diagram]

The following is an example that helps explain how an individual goes through the various stages of behavior change:

- **The desired behavior:** vaccination of children against measles in refugee camps
- **Target group:** mothers in refugee camps
- **Stages of behavior change and corresponding intervention strategies:**
  
  **Stage One - Pre-contemplation:**
  The mothers in the camp are not aware of the risk of not vaccinating their children against measles and how it may impact the lives of their children. At this stage, field workers organize awareness sessions and distribute leaflets or posters about the dangers of contracting measles and the role of vaccination in protecting children.
Stage Two - Contemplation:
After the mothers are educated about the symptoms and impact of the disease and the importance of vaccination, they become interested in obtaining practical information regarding the cost of the vaccine (highlight if it's free), where it is available, reception dates, and the number of vaccines required for each child and at which age. They may also need to listen to testimonies of other mothers who lost their children due to measles as well as those who succeeded in protecting their children by adhering to the vaccination timetables. And so they begin to accept the idea of changing behavior by expressing an intention to secure the vaccine for their children.

Stage Three - Preparation:
Accepting to change behavior and demonstrating an intention to do so are but the first steps. At this point, it is the role of fieldworkers to help the mothers access vaccination centers or organize vaccination campaigns in places that are easy to reach. Here, the target group begins to experience the new behavior through practice.

Stage Four - Action:
After experiencing the new behavior, it is necessary to work on sustaining the behavior change. At this stage, fieldworkers should endeavor to reinforce this behavior by organizing support groups, developing communication networks, discussing challenges openly, and using visuals as a reminder of the vaccination dates. Thus, mothers become more convinced and maintain their behavior by giving the vaccine to their children on the designated dates. In turn, they play an active role in encouraging their relatives and friends to adopt this new behavior. Now they can move forward to the fifth stage, which is inviting others to change their behavior.

Second: Behavior Change Communication

A- Definition of Behavior Change Communication

Communication for behavior change is aimed at bringing about a change in the behavior of individuals, families, or communities. There are many forms of communication possible, such as direct communication (whether it is between individuals or in support groups), or indirectly through the various types of media available.

Communication for behavior change is a multi-level approach designed to promote positive healthy behavior and ensure its sustainability through the delivery of health-related messages via different channels of communication.

Based on this definition, behavior change communication includes listening, understanding, and negotiating with individuals or communities to achieve long-term positive health behavior. It is meant to bridge the gap between knowledge and attitudes on the one hand, and the desired behavior on the other.

B- Behavior Change Communication Strategies

In light of the social ecological model and the five stages of behavior change listed above, health and development programs may be ineffective if the complex social interactions and the impact of the general environment around them are not taken into account. Therefore, the challenges impeding behavioral change must be addressed, particularly those related to intent to make the required change and sustaining it, in addition to working to overcome societal, institutional, and environmental obstacles.
The main objective of outreach programs aimed at achieving behavior change should be to make the positive choice an easy option. To this end, communication programs for behavior change require the use of a variety of tools for each stage of behavior change. This is done through:

- Increasing knowledge
- Changing attitudes
- Improving skills
- Encouraging communities/groups to hold collective discussions
- Increasing or creating demand for information and services
- Providing support and motivation

Figure 3: Appropriate communication strategies for each stage of behavior change

### Making the Positive Choice an Easy One

<table>
<thead>
<tr>
<th>Group location in the pyramid of behavioral change</th>
<th>Possible communication strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not aware of the problem</td>
<td>• Provide information</td>
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<td></td>
<td>• Raise awareness through the media</td>
</tr>
<tr>
<td>Aware of the problem and interested in changing behavior</td>
<td>• Encourage and discuss how to change</td>
</tr>
<tr>
<td></td>
<td>• Discuss benefits and drawbacks</td>
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<tr>
<td>Begins preparing for behavior change</td>
<td>• Provide logistical information</td>
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<tr>
<td></td>
<td>• Offer clear guidance</td>
</tr>
<tr>
<td>Try the new behavior</td>
<td>• Emphasize capacity-building, social support, overcoming obstacles</td>
</tr>
<tr>
<td></td>
<td>• Encourage to continue by emphasizing benefits of new behavior</td>
</tr>
<tr>
<td>Continue to practice new behavior</td>
<td>• Reminder of the benefits of new behavior and provision of social support</td>
</tr>
<tr>
<td></td>
<td>• Emphasis on the ability to continue</td>
</tr>
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</table>
C- Communication Objectives in Behavior Change Communication Programs

Communication objectives are usually determined by the health or development goals set for this program. Thus, the communication objectives for behavior change communication activities focus on raising the level of awareness on health matters, changing attitudes, and motivating people to act. Here are some examples that show the difference between health or development objectives and communication objectives:

- **Examples of health objectives:**
  - Reducing the rate of unwanted pregnancies among families living in a particular area by 50%
  - Improving the quality of health services by 20%
  - Reducing cases of infectious diseases in the camp by 30%

- **Examples of communication objectives:**
  - Adopting family planning methods by 70% of couples of childbearing age
  - Improving the image of service providers by 40%
  - Raising awareness among parents on the importance of hygiene to prevent disease from 30% to 50%

After setting the desired objectives, a health awareness campaign is developed tailored to the target group. The campaign should be reflected in all materials related to the behavior change communication program, for they represent the main strategic goal on which the whole program is based.

D- Audience Analysis

Analyzing the target group is an essential component of a successful behavior change communication program, because it allows for the fashioning of slogans and activities that are compatible with the specific characteristics of the group in question.

There are a number of audience analysis methods for target groups within behavior change communication programs. Some are traditional, i.e. based on analyzing the communication behavior of a certain group (ways they access the media, communication habits, social networks) or based on their demographic and geographic background (age, sex, social status, income level, education, place of residence, availability of services). Others are more modern, such as analyzing behaviors, practices, needs, values, lifestyle, level of exposure to risk, in addition to an accurate description of tendencies, opinions, attitudes, and beliefs.
The questions below can be used to assist in audience analysis. They take into account the various levels of the social ecological model for behavior change and facilitate the process of identifying the stages of behavior change within the target group.

- Is the target group aware of their vulnerability to health problems and that the results are dangerous?
- Do they know that changing their behavior would reduce the risk of exposure to health problems, or prevent them?
- Do they know that the benefits of changing the behavior outweigh the challenges?
- Do they intend to adopt the new behavior?
- Does the target group have the skills required to adopt the new behavior?
- Is the target group confident in its ability to adopt the new behavior?
- Does the target group believe that the new behavior is compatible with their beliefs and principles and does not contradict their view of themselves?
- Is the audience aware that the social environment around them supports the adoption of the new behavior?
- Is the target group facing obstacles that should be overcome to adopt the new behavior?

Answers to these questions allow organizers of behavioral change communication programs to prepare activities and focus their efforts on the most influential factors in order to achieve behavior change.
A- Vulnerability in Emergency Situations

Emergencies can be defined as events or incidents that require action, which is usually urgent and often non-routine. Emergencies may be human-induced such as wars and armed conflicts, or can result from natural forces such as floods, droughts, earthquakes, fires, and other such disasters. In such situations, serious risks may arise necessitating a quick and effective response to address them and reduce their impact on the health and safety of the communities affected. Emergencies often result in migration, displacement, asylum, homelessness, destruction, exclusion, impoverishment, loss of lives, and disintegration of families, among others.

“Vulnerability” is defined as the decreased ability of individuals or communities to prevent, anticipate, or respond to dangerous events, or even recover from them. Cases caused by physical, social, economic, and environmental factors increase the risks to communities due to the scarcity of resources and inability to ward off dangers. Vulnerability grows during humanitarian crises among individuals or groups that are marginalized groups, whose needs are neglected due to resulting chaos and the lack of readiness by stakeholders to respond effectively.

Emergency situations resulting from natural or human factors can leave the affected population vulnerable to poverty, violence, exploitation, and sexual abuse. At various levels, emergency situations eliminate all forms of preventive support that may be available to the community, further exacerbating existing problems. In this case, health and education services, supplies, and basic materials may not be available. Thus, individuals are left without access to all kinds of health information and services, which exposes them to greater risks.

B- Humanitarian response and disaster management

The literature related to disaster management and humanitarian response focuses on two basic principles that are central to relief work:

- The population affected by disasters or conflicts have the right to a decent life.
- The need to take all possible measures to alleviate the human suffering caused by disasters or conflicts.
- In this context, the institutions concerned with emergency situations, including United Nations agencies, civil society groups, international organizations, and government agencies must make all efforts to manage disasters and provide relief to the affected population. These efforts are organized within four sectors that, in coordination with one another, ensure the proper execution of an organized response.

- The first sector: water supply, sanitation, and hygiene promotion (WASH)
- The second sector: food security and nutrition
- The third sector: shelter, settlement and non-food items
- The fourth sector: health action
C- Behavior change communication in humanitarian crises

Behavior change communication plays a major role in responding to crises of any kind. Research shows that the biggest mistake usually committed in humanitarian response programs was neglecting dangerous practices, poor habits, and the communication needs of different target groups. This carelessness was a direct result of the lack of funding for behavior change outreach programs, poor coordination, and the lack of evidence-based intervention planning that takes into account findings of audience analysis. This led to the failure of such programs in creating awareness and increasing demand for services and emergency supplies to the families and communities affected by crises.

Based on lessons learned from past experiences, a set of principles relating to behavior change communication during humanitarian crises was laid out by UNICEF, the United Nations Children's Fund. These principles should be applied as follows:

- Before the humanitarian crisis:
  - Design a communication program for behavior change and planning for it in advance, including the material and human resources that need to be secured to ensure proper implementation and follow-up.
  - Invite all partners to participate in the planning process
  - Interact with the local community and involve it in the preparations for the crisis
  - Conduct research and analyses to determine information gaps and set a monitoring and evaluation plan
  - Prepare information, education, and communication materials
  - Determine roles and responsibilities related to communication and information sharing between stakeholders
  - Train service providers on the proper use of interpersonal communication skills

- During the humanitarian crisis:
  - Set up a center for communication and coordination to avoid duplication of work
  - Conduct surveys related to the four sectors that regulate crisis response, in order to obtain the necessary information to develop a behavior change communication program
  - Assess communication methods, channels, and available resources to determine the possibility of mobilizing and directing them to serve behavior change outreach programs
  - Develop a simplified behavior change communication plan

The above steps constitute a general framework for behavior change communication programs. The practical steps to design similar programs during humanitarian crises are as follows:

**Step 1:** Invite all concerned stakeholders to work together to plan for the program  
**Step 2:** Program planning and audience analysis  
**Step 3:** Identify the target group, set goals, and identify the desired outcomes  
**Step 4:** Identify communication strategies based on the desired behavior change  
**Step 5:** Implement behavior change communication programs  
**Step 6:** Develop a monitoring and evaluation system
D- Principles and measures that support behavior change communication programs in humanitarian crises

- General principles for protection:
  - Avoid activities that may cause further damage to people
  - Participants in the humanitarian response field should take necessary steps to avoid or reduce negative effects that may result from interventions, in particular the increased vulnerability of people to danger or the violation of their rights
  - Ensure that people have equal access to humanitarian aid, commensurate with their needs, and without discrimination. This includes not withholding aid from those who need it, and providing access to humanitarian agencies when necessary
  - Protect people from physical and psychological harm resulting from violence and coercion, and not subjecting them to coercion or forcing them to work against their will
  - Help people claim their rights, seek available solutions, and recover from the negative effect on their health and well-being. This includes assisting the affected population in claiming their rights to information and documents, and to help them seek solutions. People should be given proper support in order to recover from physical, psychological, and social effects resulting from violence and other violations.

- Important principles in the field of water supply, sanitation, and hygiene promotion (WASH):
  - Populations affected by disasters should receive the necessary supplies, and they must be encouraged to use them to maintain their personal hygiene, health, dignity, and comfort.
  - All populations should receive adequate amounts of water for drinking and cooking, and be able to maintain their personal and household hygiene in a safe manner. Public water distribution sites should be close enough to families to allow them to meet their minimum basic needs of water.
  - The water should be potable and of quality for drinking and cooking, used in maintaining personal and household hygiene, and should not constitute a threat to health.
  - The environment in which people live, the dwellings, the food production areas, the public centers, and the areas surrounding drinking water sources, in particular, should be safe from pollution and human feces.
  - Decent and appropriate toilets acceptable to people and close to their homes should be provided, so they can be used quickly and safely at all times, day and night.
  - The environment of the affected population should be free of solid waste, including medical waste, and they should be able to dispose of their home waste properly and effectively.

- Important principles in the field of food security and nutrition:
  - People have the right to obtain food aid to ensure their survival, preserve their dignity, prevent the depletion of their assets, and improve their chances of survival.
  - It is necessary to address all forms of malnutrition.
  - The distributed food items should be acceptable to the beneficiaries, so that they can be used efficiently by the family.
• Important principles in the field of health action:
  ○ All people should receive standard high-quality health services that conform with acceptable rules and guidelines.
  ○ Health services are to be provided by trained and competent workers with varied and appropriate knowledge and skills to meet the health needs of the population.
  ○ It is necessary to secure a continuous supply of medicine and consumables.
  ○ It is necessary to be alert and detect potential disease outbreaks, identify their causes, and fight them quickly and effectively.
  ○ All children aged between 6 months and 15 years should be vaccinated against measles, and they should receive periodic services by the Expanded Program on Immunization (EPI) once the situation is stable.
  ○ People should receive priority reproductive health services under the Minimum Initial Service Package (MISP) at the beginning of emergency situations, and comprehensive reproductive health services once the situation is stable.
  ○ People should receive basic treatments to reduce morbidity and mortality cases resulting from serious complications or due to the exacerbation of chronic diseases.

E- The importance of raising awareness in behavior change communication programs in humanitarian crises

Raising awareness is an important component in behavior change communication programs during emergencies, and it can significantly reduce the impact of the humanitarian crisis. Raising awareness relies on the education, training, and rehabilitation of communities to enable them to deal with potential problems by depending on personal capabilities, as well as on the unity and solidarity among its members. The role of governmental and non-governmental organizations and trained volunteers in the field of awareness raising is important here, by disseminating health information and promoting good habits in several areas, such as nutrition, hygiene, environment, and prevention of non-communicable and communicable diseases through seminars and workshops and the use of brochures and pamphlets and other publications.

It is advisable to use positive messages and entertaining methods to spread awareness to encourage behavioral change, rather than exploiting natural fear around disease and death.

The following are examples of the role of awareness raising around specific topics that are more common in humanitarian crises:

• Awareness about hygiene in humanitarian crises

Raising awareness about hygiene may contribute to the prevention of diseases during crises. The most important message of awareness-raising activities around health is that cleanliness protects against infections that cause diarrhea. Diarrhea is one of the most common health problems among children under two years, and causes about 80% of deaths of children in humanitarian crises. It is very important to focus on hygiene practices, such as hand-washing techniques, how to dispose of sewage, and the maintenance of toilets. In this context, the availability of water is an essential element and fundamental for the preservation of health and human dignity. The lack of sufficient quantities of water to meet the basic needs of populations under difficult circumstances results in serious health problems, given that the scarcity of water makes it difficult to maintain hygiene and increases the risk of drinking contaminated water.
• Awareness about breastfeeding in humanitarian crises

Breastfeeding is the most important, safe, and effective form of child nutrition. It becomes especially important in humanitarian crises as it is directly related to children's health and development in the short and long term, and both on the physical and mental levels. It also contributes to building and strengthening their immune system, and thus protects children from infections. As is the case with hygiene, essential communications should be conveyed, particularly those that would help mothers adopt this behavior by clarifying common misconceptions, training them with the necessary skills, and responding to breastfeeding challenges faced by mothers.

• Awareness about vaccination against measles and Vitamin A supplementation

Vaccination immunizes children against contracting measles in humanitarian crises. Measles is particularly dangerous and may lead to death in children who suffer from malnutrition, as is the case in poor communities and settlements resulting from humanitarian crises. Vaccination campaigns against measles are usually accompanied with Vitamin A supplementation campaigns because Vitamin A deficiency increases the risk of death among children who have measles.

Raising awareness in behavior change communication programs about vaccination in crises requires the following initial steps: First, the provision of information about the symptoms so parents can identify the onset of the disease early on, as well as information about the available services related to prevention and treatment, including date and time, and the number of times that a child should be vaccinated. Second, develop a plan for how to deal with an outbreak of measles in the camp or a settlement during humanitarian crises.

• Awareness about safe motherhood in humanitarian crises

During crises, pregnant women may suffer from exhaustion and malnutrition, due to stress-induced anemia, lack of food and water, or mobility in difficult and unsafe conditions. These are all risk factors that may lead to complications during pregnancy or after birth, and may adversely affect the safety of the mother and fetus. This is why it is important to raise awareness on this subject in behavior change communication programs during the crisis, whereby there should be a focus on certain practices that have proven to be effective in the reduction of infant and child mortality rates. The most important of these is involving other decision-makers in the life of the mother, such as the spouse, her mother, mother-in-law, or other members of the family, due to their potential role in facilitating access to prenatal and post-natal services to the pregnant woman. Also, it is necessary to emphasize positive messages about child and mother health and safety.

• Awareness about child protection in humanitarian crises

Child protection is an important part of behavior change communication programs in crises that cause the displacement and disintegration of families, even existing value systems. As a result, social services that usually protect children from violence and exploitation no longer become available, in addition to the high risks to which children are exposed, be they physical or psychological.
Raising awareness about this topic may include various activities such as the creation of a safe environment to learn and play, educating the population about the importance and means of protection, activating monitoring channels, and reporting violations against children. Consequently, the objective of raising awareness through behavior change communication programs is to reduce child trafficking, abuse, exploitation, and violence by working with parents and service providers to secure learning and entertainment activities for children, and enabling children through life skills and knowledge about their rights.

**Second: Ethical considerations in behavior change communication programs in humanitarian crises**

As is the case with all health and development programs, it is necessary to take into account ethical considerations in behavior change communication programs in humanitarian crises. Due to the fragile conditions, the absence of monitoring systems, and fierce competition over the few available resources during emergencies, the likelihood of discrimination, exclusion, and ill-treatment of individuals and groups increases. Many behavior change communication programs implemented during humanitarian crises fall into the trap of overlooking ethical considerations under the pretext that they are operating in a state of emergency, with a lack of resources, urgent priorities, and other arguments that contribute to aggravating problems instead of offering solutions. Therefore, it is necessary to focus on general ethical principles that govern the work in emergency situations:

- Respect the dignity and rights of all individuals—children, elderly, women, or men—under all circumstances, while showing respect at all stages of the behavior change communication programs.
- Maintain privacy and confidentiality when conducting interviews, writing reports, and collecting information during individual sessions or with small groups, especially given that private and personal information are often disclosed to fieldworkers due to the trust they have among the population they are serving.
- Involve individuals of all age groups in all decisions that affect them.
- Protect the target group from any harm that may affect them as a result of their participation, because the audience in these kinds of programs is more vulnerable to harm than others. Therefore, fieldworkers must be careful to avoid any psychological harm or other damage, and should express sympathy and respect people's feelings.
- Publishing stories or pictures, especially involving children, should not be allowed if there is even the slightest possibility that it would expose them to danger.
- Obtain the approval of the individuals concerned, including children, before filming, recording, or performing any activity.
- Adhere to the principles of social justice while dealing with the target group, by preventing discrimination, be it due to sex, race, or sect, in the delivery of services.
- Strive to reach the most vulnerable and needy people in an effort to avoid exclusion due to challenges that can be overcome with patience and sincere efforts.
Introduction

Interpersonal communication is an interactive process that is carried out every day by individuals with relatives and strangers alike, through face-to-face meetings, or by using other means such as telephone or e-mail. Interpersonal communications enables people to build, develop, and maintain formal and informal relationships, to meet their social needs, and to achieve personal goals or other general goals. Communication between individuals in the context of these relationships is based on sending and receiving messages to and from one another. These messages carry meanings that produce certain effects and changes, and this consequently contributes to shaping their knowledge, attitudes, skills, values, beliefs, and social norms.

Interpersonal communication hence plays a crucial role in influencing individuals and small groups in the context of behavior change communication programs. Changing the knowledge, attitudes, behavior, and norms of individuals usually takes place within the framework of a communication for behavior change strategy which also involves the participatory input of the society, institutions, and policy.

Communication is the transfer of information from one party (person/side/place) to another party.

Communication may be classified into different categories depending on the following criteria:

1- The number of people participating in the process of communication (individuals or small groups / communities / mass audiences or the general population)

2- Communication channels used (visual, e.g. posters / audio, e.g. telephone or radio / audio-visual, e.g. television / multi-channel, e.g. face to face)

3- Means of expression during communication (verbal / non-verbal / written / picture or graph)

4- The extent of interaction, exchange of meanings, ability to exert influence in order to effectuate a change among the people involved in the communication process (interpersonal communication / non-interpersonal communication).

5- Other categories, such as: Communication based on the degree of formality in the relationship (formal or informal), or which occurs in certain environmental conditions or contexts (e.g. workplace or home), or other criteria for categorization.

First: Interpersonal Communication

A- Definition

Interpersonal communication is a process of exchanging information, ideas, and feelings through verbal and non-verbal messages between two or more people who are aware of each other’s presence. The process results in a specific outcome, which is based on each party’s understanding of the meanings of the messages conveyed by the other party.
B- Elements of interpersonal communication

Interpersonal communication is characterized by seven important elements:

1. Two speakers (sender and receiver)
2. Message (verbal and non-verbal)
3. Communication Channel
4. Feedback
5. Noise
6. Context
7. Effect
1. Two speakers: sender and receiver

The two speakers take part in an interactive process during which messages are exchanged at the same time and in both directions:

The sender talks (using verbal and non-verbal messages) while the receiver listens (and responds through verbal and non-verbal messages) to the content of the messages. During the process of talking and listening, both sender and receiver send feedback through non-verbal expressions (facial expressions, body movements, and eye contact), as well as by using verbal expressions (spoken words and sounds).

The speakers’ ability to effectively send and receive messages and feedback is largely dependent on their interpersonal communication skills. These skills are centered on the verbal and non-verbal contents of the messages.

2. The message

The message is the content of the interpersonal communication process. Messages take place in two directions, and contain two main components: verbal messages and non-verbal messages. However, the content of the message in interpersonal communication may also be sometimes conveyed in writing (written messages) or by graphic representation (graphical message).

- **Verbal messages**
  They are the spoken verbal elements through which information is transferred in the form of words. They represent the cognitive content of the message.

- **Non-verbal messages**
  These are everything that is expressed through interpersonal communication, with the exception of words. Non-verbal messages are also called "body language" and include:
  - Body movements: hand gestures, nodding, repeated leg shaking
  - Body stature: standing, sitting, bending of the body or head, crossing arms, leaning
  - Eye contact: positive or negative looks, concentrating the gaze on the face area, looking down or away from the eyes of the speaker
  - Paralanguage: pitch and tone of voice, speed of talking, mumbling, stuttering, periods of silence, or hesitation in talking
  - Distance between speakers (proxemics): approaching or keeping a distance from the other party
  - Facial expressions: smiling, pouting, blinking, winking, lip pursing
  - Physiological changes: sweating, shivering, becoming pale, or blushing.

- **Written messages:**
  These are the written words in verbal elements of communication (email or mobile phone chats)

- **Graphic messages:**
  These are messages made up of images, graphics, tables, etc. These may also include some written verbal elements.
Important

The presence of the verbal and non-verbal elements in messages and the continuous exchange of messages during the interpersonal communication enable both parties to have an in-depth awareness of the meaning of information, thoughts, and feelings that are embedded in the messages. This is what distinguishes the effect of a message during interpersonal communication, as the meaning affects both parties and induces a change in them. And this makes the relationship between them, whether official or unofficial, progress in a determined direction that leads to a certain result.

3. The communication channel

There are various channels for interpersonal communication. A channel is the physical means through which a message is transferred, and is linked to the five senses that are used to receive the message.

Examples:

Communication methods associated with the **visual** channel:
- Face-to-face interview
- Posters, pamphlets, leaflets, flyers, and other types of publications
- Demonstrations
- Text or SMS messages exchanged via cell phones.
- Videos

Communication methods associated with the **audio** channel:
- Face-to-face interview
- Speaking over the phone

Communication methods associated with other channels (senses):
- **Touch**: Patting on the shoulder to encourage, or to alleviate pain
- **Smell**: Wearing perfume or deodorant when receiving guests
- **Taste**: Accepting to eat or drink what the host offers the guest
Important
References may differ in their definitions of “channel of interpersonal communication”

- Some, for example, refer to communication channels as being interpersonal communication activities such as counseling sessions, home visits, support groups, school visits, telephone hotlines, and meetings with influential community members.

- Others refer to communication channels as being the different levels of communication, such as interpersonal communication (in which messages are transmitted face-to-face) or communication at the level of the community (in which local radio stations and public seminars are used to communicate), and at the level of the general public (in which mass media such as television, public radio, and newspapers are used).

- Other references refer to channels of communication as the way in which the content of the messages is expressed (verbal, non-verbal, written, and graphic messages)

Whichever ways communication channels are referred to, all references eventually depend on how the message is received through the five senses.
4. Feedback

Feedback consists of the messages by which the receiver responds to the sender. These messages inform the sender how accurately their message has been transmitted to the receiver, and also convey the reaction of the receiver. These responses allow the sender to organize, modify, or repeat the message for the purpose of improving communication and ensuring that the receiver understands the message.

Receiving feedback reassures the speaker and facilitates communication by encouraging more openness and honesty.

4.1 Interpersonal communication skills

The receiver provides feedback through the processes of listening, and showing interest, understanding, and empathy towards the messages sent, which are referred to as interpersonal communication skills. These skills are acquired through practice and experience, even though in many cases, they are used spontaneously in the context of informal communication. It is worth noting that the most important skill for feedback is listening.

4.1.1 Listening

Listening, which is also referred to as active listening, is the main component in effective interpersonal communication. It is an active process which involves all the senses and not only the hearing of messages.

The process of listening requires a conscious decision to fully focus on listening and understanding the message of the speaker. It also necessitates that the listener maintains a neutral and a non-judgmental attitude to what the speaker is saying, while remaining patient during moments where the speaker expresses silence, slow-paced speaking, or mumbling.

Moreover, during the process of listening it is very important for the listener to show respect, and genuine interest in understanding the message, while clearly indicating that they understood the message and showing empathy.

4.1.2 Showing respect, interest, understanding, and empathy

There are many ways of delivering feedback during interpersonal communication that can be used by the listeners to show the speakers that they are carefully listening to what is being said, to show sincere interest and respect, and to demonstrate that they are absorbing the meaning of the message, while sympathizing and empathizing with the speaker.

Providing feedback includes verbal and non-verbal messages

- **Non-verbal feedback messages**
  - **Smiling**: Indicates acknowledgment, encouragement, and approval.
  - **Eye contact**: Shows interest and attentiveness to what the speaker is saying. It is important to not over exaggerate the eye contact or to give judgmental stares for that will have a negative impact on the speaker’s message.
○ **Body language:** Take a body position that reflects concern, or an open relaxed posture like leaning to the front (rather than backwards, which suggests indifference). The head should be approximately at the level of the speaker’s head, or slightly tilted to the right or the left in order to demonstrate an intention to focus on what is being said.

○ **Body movements:** Nodding the head indicates understanding. One should not fumble around with things like papers for example, or look at their watch, play with a pen, or scratch their head, because such behavior may be interpreted as boredom or lack of interest. One should also avoid getting distracted, losing focus, or showing disrespect for the other person.

○ **Facial expressions:** One should respond with facial expressions that mirror those of the speaker as a way to show compassion, understanding, and empathy toward the situation of the speaker.

- **Verbal feedback Messages**
  ○ **Remembering:** If the two parties had previously been engaged in a conversation, it would be beneficial for the listener to show that they remember some important points that were brought up in that initial communication (or at least the name of the speaker), and to mention them to the speaker. One may choose to take notes during the interview in order to remember specific points later on or to use them in a second interview. This would give the speaker the impression that the listener is concerned with following up on the topic. However, taking notes should be carried out delicately, for the speaker should not be made to feel that the communication has become formal with the use of a notebook.

  ○ **Positive reinforcement:** Positive reinforcement includes short and motivating phrases like "Hmm...yes, yes...Continue, I am listening." Using motivating phrases while listening facilitates communication and encourages speakers to continue to express themselves, especially when they are feeling worried, embarrassed, shy, scared, or sad. This approach also reassures the speaker that the listener is actually listening and comprehending what is being said.

  ○ **Clarification:** It is an approach used by the listener to ensure that they understood what was said by the speaker by raising questions intended for clarification to what was not understood, or by asking open-ended questions.

    For example:
    - "I am not sure I understood what you said..."
    - "The issue is still unclear to me..."
    - "Could you please repeat what you said?"

- **Important**
  It is important to phrase the questions in a non-judgmental way and avoid questions such as:
  "Are you saying that you are against this idea?"
  "It seems that you do not like to be visited by fieldworkers, why is that?"
  Instead, replace them with questions such as:
  "Could you please clarify your stance on this idea?"
  "How do you feel about the fieldworkers visits?"
4.1.3 Reflecting
The listener repeats what the speaker has said, but by expressing it in their own way. Using this approach, the listener will have reflected (like a mirror) the meaning of the message both in terms of verbal content and emotional content. The listener then awaits for the speaker’s comment (feedback) on the reflection to indicate that what was said (reflected) was indeed accurate.

This process aims:
- To allow the speaker to listen again to the ideas in a different form and to concentrate on what is said and felt.
- To allow the speaker to feel that the listener is attempting to see the "world" through their eyes.
- To allow the speaker to make sure that the message was understood.
- To encourage the speaker to continue talking.

For example:
Speaker: "Since we arrived here (to the camp), I have had trouble sleeping, getting by with just one to two hours of sleep a night. In the morning at breakfast, I feel like the food is stuck here (points out to his throat). I drink an entire bottle of water to wash it down."

The listener then reflects his understanding of what the speaker said, and responds: "So, since the beginning of the crisis, you have been dealing with insomnia and difficulty in swallowing your food, which is relieved only after drinking plenty of water."

4.1.4 Summarization
Summarization is the use of brief phrases and sentences recapping the conversation. One can resort to it in the following cases:
- To review what was discussed in previous visits.
- To summarize the main points discussed by the speaker at the end of the interview.
- To channel the conversation in a certain direction when it goes off its original course.
- To politely transition from one topic to another without causing awkwardness.

Summarization allows both sides to correct any misunderstanding in the points mentioned or discussed during the interview or visit, as well as make them feel that their points of view were accurately and truly understood.
4.1.5 Acknowledgment

Acknowledgment is the way the receiver shows that they actually accept the sender’s views, expressions, and actions or any changes related to them, as being real or true. By doing that, the receiver encourages the sender to continue an honest and open conversation, reinforces their self-confidence, and strengthens the trust in the relationship between the receiver and the sender.

Acknowledgment may be expressed by the receiver through the use of a motivating sentence, or a phrase that conveys appreciation or approval of the sender’s actions or that indicates that the receiver acknowledges that the messages sent by the sender are true, and genuinely reflect the sender’s experience. For example: "I understand that, yes...That is what is needed!...Definitely, how could it not be?...Indeed...Certainly...Absolutely...100%...Well done...You have done a good thing."

4.1.6 Empathy

The ability to identify with another’s situation as if it were one’s own, while showing understanding of the situation by saying words or sentences suitable for the situation or the circumstance.

For example:

**Situation:** Fieldworker visiting the house of a mother of three children to remind her of the next vaccination date.

The mother: "After my husband died, I could not do anything, not even take care for my children, so they stayed with my sister, who looked after them during that time. I think that their vaccination cards got lost, and I do not remember if I had given them to my sister or placed them somewhere here; I am not sure..."

Non-empathetic fieldworker: "Have you searched for them recently?"

**Empathetic fieldworker:** "May God have mercy on his soul; how did he die? (Awaits answer) This must have been very painful for you and your children. It is alright, we can issue new vaccination cards for your children."

5- Noise

Refers to any factor that disrupts the transfer of the message among those partaking in the conversation, or that leads to the distortion of the meaning of the message, wherein the message received is different in meaning than that initially intended in the initial message.

Thus, noise is not only the physical form of noise, like the sound of an electrical generator that obstructs hearing, but also includes a number of other factors that distract attention from or affect how the message is received by the receiver. These factors have internal and external sources.

**External sources** of noise are the surrounding environment, including scenery, sounds, smells, or other such factors such as temperature, humidity, or overcrowding.
Internal sources of noise are:

- **Verbal noise**: This serves as an obstacle in understanding the language, i.e. a foreign language or technical terms.
- **Physiological noise**: This is caused by sickness, discomfort, or physical disability in the sight, hearing, speech, or memory.
- **Psychological noise**: This is caused by anxiety, confusion, bias, excitement, or anger.
- **Intellectual/Cultural noise**: This leads to excess or scarcity in the information that was sent or received, especially when there is a large difference in the intellectual and cultural levels to which the speaker and listener belong. Either case results in difficulty in taking in or understanding the message.

### 6- Context

Interpersonal communication is affected by the context in which the communication process is taking place. The context is comprised of several dimensions that should be taken into account for they are capable of affecting the outcome (effect) of communication.

#### 6.1 Environmental context

It is the physical space in which communication is taking place, as well as characteristics related to the space, such as the overall appearance of the location, its structural features, and the physical effects such as lighting, temperature, etc.

For example: Airport, camp, clinic, garden, or street.

#### 6.2 Situational context

The situational context includes most life situations experienced by an individual, namely the following settings:

**Social setting**: This is linked to the roles (doctor and patient), responsibilities (mother and child), and social rank (manager and employee) to which the speakers belong. For example, a relative difference in the employment ranking could lead to power differential between the speaker and the listener, which may negatively affect the flow of communication. The social setting also affects the way an individual acts in general, for example, the way doctors speak among their colleagues is different than the way they speak with their family members, or with their patients.

**Psychological/Emotional setting**: Communication is also influenced by the emotional and psychological status of the speakers, especially if the messages exchanged are charged with emotions resulting in an individual losing control over their flow of expression, which are factors that hinder individuals from understating the message.
6.3 Cultural setting

The cultural setting is comprised of the set of values, beliefs, and principles associated with the development and flow of communication between the two sides. When the cultural setting differs between the different sides, this may lead to misunderstanding or to lost opportunities for understanding the meaning, for learning, and for benefiting from effective communication in general. This could result in cultural noise as was mentioned above.

7. Effect (Outcome of interpersonal communication)

The continuous interaction through exchange of messages and feedback has an effect on all sides involved. The effect could be on the emotional, material, cultural, intellectual level, or all of them together. The effect may be either positive or negative, depending on the perceptions of the sides involved. Whatever the type of outcome, communication always results in some form of change for the individuals involved.

The effect that interpersonal communication has on the speaker is thus a sort of reward in itself, even when the outcome is negative, because the communication process was intended for a specific purpose, that is, achieving goals, whether personal or general, strengthening relationships, engaging in discussion, learning new information, entertainment, discipline, reinforcing a position, obtaining reassurance on the state of someone special, etc.

Hence, the outcome contributes to the development of relationships and improves the quality of life in one way or another.
Second: Using interpersonal communication skills in communication for behavior change programs

A- The position of the fieldworker with respect to the audience

The role of the fieldworker in communication for behavior change programs is often centered around awareness-raising, motivational, or behavior reinforcement activities among audiences comprised of individuals or small groups. These activities include house visits, awareness-raising sessions, and may be part of workshops, support groups, or school visits. They may also consist of talking to individuals via a hotline, offering counseling advice to individuals, couples, or small groups, or carry out discussions among particular groups such as peer education groups, as well as other communication activities.

Usually, the decision to engage in such activities is based on consultations and agreement between the fieldworkers and other participating stakeholders including administrators, planners, and activists in the program. This is to secure coordination and harmony between all the communication activities at all levels among the targeted groups, starting at the level of individuals, and onto the group, community, and general population levels.

During the coordination process, the general goals of the communication for behavior change program are revealed, as well as the strategies that will be used to reach these goals. Through it, the fieldworkers gain clear information about the relevant topics, the activities, and the messages that they will be delivering to the audience.

However, it is the fieldworkers’ responsibility to be prepared to fulfill their field duties and activities by:

1- Setting specific goals for the planned activities. For example: Carry out a specific number of house visits during a particular time frame, training peer education groups belonging to a specific age cohort, and visiting all the vulnerable schools in certain areas to offer awareness sessions related to change in a certain behavior.

2- Preparing for what they will be doing during the communication activities: What are the specific goals to be achieved from the planned activity?

   a- Possess interpersonal communication skills (refer to the section on interpersonal communication skills under “Feedback” on (page 28)
   b- Knowledge of the concept of “Stages of Behavior Change”
   c- Knowledge of communication strategies for each of the stages of behavior change.
   d- Adopt the GATHER methodology while presenting the behavior change message (refer to the GATHER methodology on (page 36)
   e- Knowledge of the behavior change message: A solid knowledge and precise understanding of the message and all related topics, including the benefits in behavior change, the obstacles that impede its progress, the expected difficulties, and the misconceptions surrounding the topic.
   f- Preparing educational materials such as posters, pamphlets, and all other tools needed to deliver a training session on certain skills that may be required to effectuate the behavior change. This should be coupled with a solid knowledge of the message content of the materials and the way to use them.
g- Knowledge of basic information about the target audience, such as common traditions, way of dressing, beliefs, attitudes, and social circumstances.

h- Knowledge of the services that will be offered as part of the communication for behavior change program, and how the fieldworkers can provide support to the individuals they are communicating with in order to allow them to benefit from those services.

i- Familiarity with the location that will host the communication activity and a background knowledge of its location, divisions, and landmarks, as well as built structures, such as mosques, churches, dispensaries, bus stations, etc.

3- Principles for carrying out effective interpersonal communication sessions between fieldworkers and their audience

a- Acceptance and tolerance of the individuals involved and refraining from being judgmental. Acknowledgement that individual's knowledge, attitude, principles, beliefs, and culture are based on their own life experiences, which may differ from those of the field workers, but does not make the latter more qualified or valuable.

b- Allowing individuals to be independent to the largest extent possible, such that they will take more control of certain domains in their life, such as health, safety, work, and providing children with education. Maintaining the individual's independence during behavior change may be supported by encouraging them to make their own decisions, rather than relying on fieldworkers to offer solutions, or by motivating them to come up with their own ideas, while respecting their suggestions even if they are unusual.

c- Communicating in an atmosphere of cooperation, trust, and openness to the opinions and views of others, even if the fieldworker does not agree with them. Furthermore, exchange of information and reinforcing the idea of learning from others should be encouraged. It is also important to ensure that all participants in the session are given an equal chance to engage actively in the communication process.

d- Communicating in a positive atmosphere that allows individuals to feel good about themselves by commending them on their achievements and on the positive progress in their behavior, while supporting them in facing challenges and difficulties.

e- Fieldworkers should adopt the role of a facilitator and not that of an expert as they carry out interpersonal communication activities, and should adopt an informal approach when dealing with individuals.

f- Flexibility in addressing the priorities of the target audience by taking into consideration the topics proposed by them first, even if briefly, before beginning with the intended behavior change message.

g. Ability to adapt to challenges arising unexpectedly which may require changes in the activity and goals, or the reformulation of the communication strategy altogether.
h. Ethical Principles

- Make sure to demonstrate a respectful attitude throughout the session.
- Maintain privacy and confidentiality while collecting information during the one-on-one and small group sessions. This is important since a significant amount of individuals’ private matters is revealed to fieldworkers.
- The groups targeted are more sensitive and vulnerable than others, because they are in a hardship situation. Fieldworkers should be careful not to add to the psychological trauma, while continuing to show compassion and courtesy towards their audience’s feelings.
- Adhering to the principles of social justice when dealing with the targeted group, and refraining from discriminating among different groups when offering services, or alienating a group and preventing it from receiving services based on ethnic or sectarian grounds.
- Persistent attempts to cater to the most vulnerable or needy individuals, and to avoid excluding them from services, through patience and a sincere effort.

i. Making sure to thank the individuals who participated in the sessions.

B. Strategy of interpersonal communication used during interactions with individuals and groups

1- Applying the GATHER Methodology for Interpersonal Communication

Setting a particular methodology to be adopted during interpersonal communication sessions facilitates the mission of the fieldworker and increases the chances of success in effective interpersonal communication. The sessions may be in the form of house visits, discussions among small groups, or one-on-one meetings in the form of counseling, guidance, or health awareness sessions.

The GATHER methodology has been adopted repeatedly in the course of delivering such sessions as part of behavior change communication programs. It has also been adopted by international organizations in a number of countries. This methodology offers six steps that should be followed during the communication sessions, which seek to cover all aspects of the behavior change process in question. The 6 main steps for conducting the meeting can be summarized in the acronym "GATHER", in which each letter of the word corresponds to the objectives of each step:

G- Greet
A- Assessment / Ask
T- Tell
H- Help
E- Explain
R- Return
GREET

Communication starts between the fieldworker and the individuals targeted (or the “audience”) as soon as they enter the venue (the individual's home, a room in an aid organization, or a classroom).

The following suggestions go a long way to creating a comfortable atmosphere to begin the session:

- Greeting while making eye contact
- Using the same or similar greeting terms as those used by the audience
- Using a positive tone of voice and friendly facial expressions
- Sitting calmly in the place assigned to the fieldworker
- Introducing oneself and profession (fieldworker), in addition to the institution that is carrying out the communication activities, its mission, and the issues that concern it without using complicated terminology
- Starting the conversation with a general and simple sentence related to the subject matter. For example: "There are many issues that we can discuss in such difficult circumstances; however, we can cooperate and learn from each other about the best ways to address them with the limited sources available."

ASK/ASSESSMENT

During this stage, the fieldworker explores the conditions of the individuals, their needs, their priorities, and the extent to which they know about the topic of the session, and to which stage of the behavior change continuum they belong. The fieldworker gathers information about the general situation, in addition to the principles and beliefs of the relevant population.

The following points help in developing an accurate assessment:

Allow the individuals to talk first and disclose the matters or the issues that they deem as a priority, without asking questions or imposing opinions at the start of the session.

Starting slowly, paving the way for the main topic of behavior change, then asking some relevant questions, by using open-ended questions as much as possible (see “Open-ended Questions” box below). Close-ended questions can also be used to inquire about specific information, such as age, number of children, the number of times they had diarrhea, etc..

Don't forget to:

- Give adequate time for the questions to be answered, being patient throughout
- Listen carefully
- Make sure to:
  - Maintain eye contact with the speaker, except during an embarrassing situation or a situation that necessitates some privacy, such as when a mother is preparing to breast-feed her infant
  - Sit at the same level as the speaker
  - Pay attention to what is being said with appropriate body positioning (active relaxation), nodding the head, responding with motivating words, changing the facial expression to be in tune with the emotional situation being expressed by the individual, while maintaining liveliness in the conversation
  - Refrain from interrupting and respect the views of others, even if they are not based on facts
  - Maintain a keen sense of observation. Focus on all participants in the session and pay attention to the surrounding environment, which can reveal many things that are not being said.
Based on the findings of the assessment, the field worker begins by presenting information on the topic of the session that is appropriate to the needs of the individuals, while building on their previous knowledge.

Allow the individuals to ask questions and make inquiries.

Answer them by using simple, clear language and refrain from using technical terminology and judgmental comments.

If the fieldworker is unable to answer a certain question, they should openly tell the participants.

Encourage the sharing of opinions to know the extent to which the individuals are willing to change their behavior (To which stage of change do they belong?)

Correct any misconceptions and provide clear alternatives.

**Important**

**Types of Questions**

**Open-ended questions** are exploratory questions that allow room for expressing opinions and describing experiences. These questions start with “How, Why, What if. Let us talk a little about ...” It is preferable to start the session with an open-ended questions, as this people comfortable allowing people to express themselves in a more spontaneous manner, making the opening of the session more comfortable.

**Close-ended questions** are used to gather specific information such as age, blood type, date of birth, number of children, number of injuries, etc. The scope of expression is limited to Yes/No, or to a few words.

**Judgmental questions** include judgment in their content. For example “Do you have any bad habits such as smoking cigarettes, or drinking alcohol?” Such questions do not encourage an honest answer, because they impose “undesirable” labels on the person, and for this reason they should be avoided.

**Suggestive/leading questions** carry their own answers, as they include a clear hint to the desired answer. For example: “You really want to stop such practices, don’t you?” These questions do not help in establishing
HELP
At the end of the assessment phase and the collection of information about the individuals' knowledge, attitudes, and beliefs, and after providing them with basic data about specific issues related to the behavior change in question, the fieldworker can then provide support to the individuals based on the resources available and motivate them to make decisions and set serious goals. This may be achieved by:

- Presenting possible options and their potential outcomes, then discussing them with the individual. For example: "If you chose ... you will be able to/ to become..." "If you choose ... you might be forced to ...
- Helping the individual to get acquainted with realistic goals and how to achieve them. In other words, helping them to set goals that are compatible with their capabilities, convictions, and life circumstances. Using hand-washing behavior as an example: "If you start the day by preparing food and after that changed the baby’s diapers, would that be in your opinion a better/more economical option for you regarding the amount of water used?"
- Giving them hope with regard to the availability of ways to achieve a better future and develop a greater capacity for self-determination

EXPLAIN:
This step is a detailed explanation of the process of behavior change and of the available resources. If the individual expresses a willingness to change after presenting them with options, the fieldworker can then explain how to bring about change in behavior in a more accurate and detailed way. At this stage, the fieldworker can use the available educational resources (posters and pamphlets) to reinforce the new information acquired and to train the audience on the specific skills required for adopting the new behavior.

RETURN:
Repeating visits to check on the course of events strengthens the trust of the individual toward the fieldworker and encourages them to persevere in achieving their goals.

2- Applying an appropriate communication strategy for each stage of behavior change
The fieldworker should adopt the most appropriate intervention to cater to the individual or group according to their readiness for change. This is based on the stage of change that they are in at the time.

- Unaware of the problem
  When the individual is at a stage where there is no desire or intention to change, the fieldworker may:
  - Raise the level of the individual's awareness to the dangers of the current behavior and the benefits of changing it
  - Give information in the form of facts, in a simple and non-judgmental manner. It is important here to avoid the approach of lecturing and preaching, as it is usually seen as unpleasant and tends to make people reluctant to open up..
• **Aware of the problem and desires to change it**

At this stage, the individual remains uncommitted to the idea of change, and is not fully dedicated yet, despite being aware (even if partially) of the disadvantages of the current behavior. At this stage the fieldworker may:

○ Continue to raise the level of awareness of the benefits of changing the behavior while stressing the dangers of the current one

○ Help the individual to identify a number of options based on the new information with the purpose of supporting them in the process of making an appropriate decision. The fieldworker should then leave the individuals to make the decision on their own without rushing them.

• **Preparation for change**

At this stage, the individual will have already taken the decision to change, and is in the process of planning to implement the change. At this stage the fieldworker may:

○ Discuss ways to set an adequate plan that suits the options and expectations that were previously discussed during the assessment (phase "A" of the GATHER methodology)

○ Offer advice about the best way to adhere to the plan set by the individual

○ Encourage them to move forward with the steps to achieve change

• **Trying the new behavior**

At this stage, the individual will have actually achieved behavior change, but may at times revert back to the old behavior. Here the fieldworker may:

○ Offer help in reinforcing the needed skills to implement the plan

○ Encourage the individual to remain motivated to change

○ Prepare the individual for the possibility of relapse and advise them not to lose hope in such a case

• **Continues to practice the new behavior**

The individual will have adopted change for the long term, and this change in behavior is apparent in different ways. At this stage the fieldworker may:

○ Promote the new position/attitude adopted by the individual, while focusing on the strengths that enabled the individual to succeed

○ Reinforce the individual’s resolve in confronting any difficulties or challenges that may come with the change in behavior.
**Chapter Four: Mobilizing the Community - Nizar Rammal**

**Definition**

Mobilizing the community is a form of an organized collective, "political," and "scientific" action that seeks to provide suitable solutions for a specific problem.

And/or

Building a societal consensus on a specific matter (right, problem, health message, student movement, protest).

And/or

Putting pressure on those seen as responsible for this problem.

And/or

Supporting anticipated projects or development programs and ensuring their implementation and sustainability.

In the case of working in the areas hosting Syrian refugees in Lebanon, it can be redefined as follows: Mobilizing the surrounding and hosting Lebanese community to support relief and development operations targeting Syrian refugees. Also, mobilizing the Syrian refugee community to be part of organized groups that seek to spread specific information related to a health issue or behavior, while motivating the community to come up with solutions.

Furthermore, one can propose organizing the refugees in specific groups based on their age or sector in an effort to communicate with the decision-makers in international organizations in order to pressure them to endorse a demand or a specific right.

It is also important to careful when dealing with women in these groups due to cultural reasons. Therefore, many social activists will group women and children together so as to overcome this issue, while others assign women to deal with them.

Finally, it is worth noting that allowing refugee and Lebanese women in rural communities to participate in decision-making and other activities of a social or political nature is limited due to the reasons above. It is however important to focus on enhancing women's participation as much as possible in order to achieve the goal without causing any harm.
First: Basic Principles

A- Conditions for Success and/or Effectiveness

1- Preparation:
Does the community acknowledge the presence of a problem and the need for change?

For example:

Is there a collective sense among people, of the importance of not burning garbage and how dangerous that is to people’s health and the environment, for that could lead to harm far more than keeping them without being burnt?

Do people share the idea that the sewer pits without a sealed bottom is a source of epidemics on the mid and long run? Do the majority of the people believe that there is a need to change the way they use service water, wherein the current adopted approach is wrong and leads to many problems, mainly scarcity in water, its pollution, and turning it into a source of infectious and communicable diseases? Are the refugees of a certain gathering ready to talk about the issue?

If the answer is no, then the initial effort should be diverted toward highlighting the preparations by spreading relevant information by all means available.

2- Activating Factor:
Is there an incident or person that can motivate or stir the desire for change now?

For Example:

The stench of garbage that recently piled up in the streets of Beirut ignited intense protests by various segments of society.

The murder of a woman in cold blood at the hands of her husband on the street and before the eyes of the public ignited strong protests and a wave of sympathy that contributed to passing the Domestic Violence Act in Lebanon.

After the spread of a contagious skin disease in one of the refugee communities, the municipality contacted the Ministry of Health and requested from it to provide the necessary medicine. Then the municipality distributed them to the refugees and trained them on how to use them, with the help of the Lebanese Red Cross. (The spread of the skin disease was the activating factor because it sparked serious concerns in the surrounding community of the possibility that the infection might affect them, and as a result they were prompted to pressure the municipality to take action).
3- Supporting Environment:
Do the current political, legal, security, and social systems help in bringing about the desired change?

For Example:
The current Lebanese political system continues to be unsupportive of the goals of the protests against the spread of garbage on the streets.

There was a draft law on domestic violence with the relevant parliamentary committee, and after the incident mentioned above, the committee stepped up its efforts and passed the law.
The issue of sewage reservoirs is being pursued by municipal authorities with clear support from the local councils to end the violations.
The international agreements oblige the Lebanese government to cooperate for the purpose of admitting refugees in the country and allowing the relief organizations to directly work with them.

Important!
Note that the work mentioned above is restricted to the refugee community and is likely to face difficulties when it tries to include the host community in the process due to tensions between the two sides.

B- Stages of Community Mobilization
The process of community mobilization is comprised of five stages:

1- Knowing the community
2- Spreading information related to the topic and forming a working group
3- Communicating with the local community for the purpose of building trust and partnership
4- Setting different work plans
5- Building alliances, amending work plans, enforcing them, and then starting the work

The following is a breakdown of each stage:

1- Knowing the community by:

- Creating a map of the area illustrating its main features. Here, one can use already existing maps that can be obtained from official sources (Geography Directorate in the Lebanese Army, the local municipality, or private companies that sell maps). It is also possible to create a map of the area with the help of members of the community through “participatory and collective mapping of the community.”
- Gathering specific information about the residents, such as population size, age groups, educational level, prevailing beliefs, quality of the infrastructure.
Here, it is essential to use the method of participatory research, namely: (1) Communicating with the youth from the refugee communities through official entities such as UNHURT, UNICEF, or any international organization active in the camp or its vicinity, with the condition that it enjoys a good reputation and credibility among the refugees; (2) Forming a joint working group with young refugees and local activists with the task of gathering information; (3) Planning and reporting, along with youth team, the approach that will be used to gather information; (4) Implementing the research; (5) Analyzing the information while the working team prepares the report.

This method has a number of benefits: It is a good way to build up trust with the target population as well as allowing them to gain confidence in themselves due to their participation in researching and drafting the final report.

- Identifying influential figures in the community, i.e. official and non-official dignitaries
- Gathering detailed information about the subject at hand

**Important!**

In this context, it is important to note that many Syrian refugee communities are an extension of communities that were present prior to the crisis in their country, including agricultural and construction workers. In many cases, these communities simply invited their families and relatives to join them once as the violence intensified. The resulting refugee communities are a reflection of towns and villages back in Syria.

2- Spreading the Information and Forming a Working Group

The process of spreading information requires preparations and gearing up the community to work on the topic. **For example:**

Environmental organizations and activists have spread information on the appropriate way to sort and dispose of garbage, using all types of media available to get their message through.

It is important here to work with both female and male youth refugees to spread information about their environment. One can prepare them to do it in a relatively short time. This will facilitate the horizontal spread of information in quickly and at a reasonable cost. It will also allow the refugee community to trust the work of the organization and pave the way for a trusting relationship.
3- Communicating with the Local Community to Build Trust and Partnership

For the purpose of building trust, it is important to first communicate with the community hosting the refugees, and then with the refugees themselves.

The following is a list of those that can be contacted: Local authorities (municipality, governor, mayor, police station, governorate or district, educational district, Development Services Center of the Ministry of Social Affairs, and Health Center of the Ministry of Health, non-governmental organizations (director of a local school or university, family representatives, civil organizations, clubs, etc.). Also, international and local organizations active in the targeted refugee camps and the persons responsible for the camp.

The approach for meetings is as follows: (1) Introduce yourself, (2) introduce the project, its goals, duration, activities, source of funding, and staff; (3) present the possibility of cooperation in specific areas. (For example: If the meeting is with the municipality, the project can propose the possibility of using the municipal hall for the purpose of hosting seminars.

Another example: If the meeting is held with an organization that is active in the refugee camp and its Lebanese periphery, one can propose the idea of employing volunteers from among the refugees as well as the hosting community for a symbolic amount of money, while making note of this joint cooperation in the media.

A joint event to officially inaugurate the campaign could also be held, during which representatives can makes short statements about the project.

Based on the principles of joint work and its methodologies, and lessons learnt from working in a number of Lebanese areas as well as Palestinian and Syrian refugee camps, it is important to:

- Form a joint working group that includes members of the targeted communities.
- Assign the team to plan different activities, implement them, and then assess them.
- Conduct periodic consultation meetings with the community (people, dignitaries, peers) to modify the work plan and improve the quality of the activities.

5- Building Alliances, Modifying Work Plans, Setting Them Up, and Commencing Work

In reference to point number (4), the joint work team will modify plans through consultation mechanisms (official and non-official) with the people (refugees and the community host), as well as the social institution directly concerned with the topic.
The results of the work in the previous stages will provide the necessary information and essential data to start with this stage.

The following are the elements of this stage:

**Knowledge and exchange of information:** The partners should set the basis of the relationship and work on enforcing mutual trust and affinity.

**Exchange of resources:** After trust is built, the partners might decide to exchange resources (financial, human, material, technical).

**Joint goals, different programs:** The partners could be working to achieve the same goals through different programs or projects. Also, they could be working for different goals as part of the same project, or to attain different goals from different projects; however, all serve the same joint strategic vision.

### C- Mobilizing the Community for Change

The process of mobilizing society requires change either at the level of individuals, groups, or both individuals and groups. The process of mobilizing the community is the means and not the end itself (refer to the definition above).

For this reason, it is beneficial to know the elements that help in the process of embracing change by understating the reasons that are prompting the individual or group involved to resist this change. With regards to the refugee community, the process of change is both easy and difficult.

It is difficult because they are living in an unstable and unsafe situation, and are, to a large extent, uncertain of what the future holds. Therefore, it would be difficult for them to transition from a “familiar” situation to an “unknown,” one even if it were promising.

On the other hand, it is easy due to their great willingness to generate change, and move to a safer, more stable situation. This will only happen if they were sure that the change is in fact possible and that its benefits outweigh the current situation.

Below is a summary of the reasons why people resist change. Dedicated attention must be given to working with people passing through difficult circumstances such as asylum or forced displacement.

**At the individual level:**

- Because everyone naturally seeks safety, any factor that threatens it will lead a person to resist.
- As we grow older, we tend to resist change more. However, this rule cannot be generalized and is closely related to the character of the individual.
Kinds of reactions shown by people when they encounter change:

- They resist because change because they are familiar with their current situation, and change may lead to something worse.
- They accepting change because they have nothing to lose.
- In the case of the refugees, the fear factor is greater because of the general economic and political insecurity they are experiencing.

Factors that facilitate change:

- The persons targeted are concerned about making the decision to change.
- Active participation in searching for new and effective approaches to attain change.
- Awareness of the importance of change that is founded on the willingness to improve one’s life.
- Benefits of the proposed new situation exceed those of continuing in the current situation.

At the Group Level:

The approach adopted to present the proposed change:

- If the approach is heavy-handed, resistance will be strong.
- If the approach takes place in an atmosphere of freedom, resistance weakens.
- If change is proposed by a group affiliated with the local community, it has more credibility, thus weakening resistance.

The person who proposes change:

- If the person enjoys some kind of authority, resistance to change would be dependent on the way the target individual views this person.
- If the person is admired, resistance would lessen.
- If the person is disliked, resistance would be greater.

The level to which change is targeted:

Change could target the high-ranking issues, such as values, or low-ranking ones, by touching upon trivial issues. Here it is worth to note that the more important the issue, the higher the level of resistance.

Reasons that facilitate the process of change:

- Growing pressures.
- Limiting the issues that require change.
- Holding the group responsible for the acquired change.
Some reasons that might contribute to the non-participation of people in a certain activity

- Difficulty in reaching the venue
- Time of the activity does not suit the targeted segment (before noon for workers or afternoon for housewives)
- Pressures from family members and relatives
- Individuals believing that the activity will not benefit them as much as others
- Fear of talking and expressing themselves (example: Female Syrian refugees refraining from talking in a parents meeting at a school situated in a village, to which some members fighting in Syria belong)
- Rejection of the campaign from the sect, party, or family to which the individual belongs
- When including housewives from among Syrian refugees or the host community in rural areas, we should expect them to come with their children. The organizers should be prepared for this
- Transport costs
- Sensitivity about the location due to the type of venue in which the activity is being held

<table>
<thead>
<tr>
<th>House Visits</th>
<th>Public Meetings</th>
<th>Dialogue Sessions</th>
<th>Cultural Seminars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Art and Theatre Shows</td>
<td>Lectures</td>
<td>Festivals</td>
<td>Exhibitions</td>
</tr>
<tr>
<td>Marches</td>
<td>Contests</td>
<td>Publications</td>
<td>Posters</td>
</tr>
<tr>
<td>Radio</td>
<td>Television</td>
<td>Promotional Material</td>
<td>Facebook</td>
</tr>
<tr>
<td>Twitter</td>
<td>SMS</td>
<td>Trips</td>
<td>Celebrities</td>
</tr>
<tr>
<td>Delegations to Lobby Officials</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Second: Work tools

1. Tools to create community maps
2. Tools for building trust
3. Tools to analyze the points of strength and extent of influence

(Work tools are provided as part of the activity.)