1 — SETTING UP THE PROJECT
2 — DOING THE GROUNDWORK
3 — SETTING UP CONVERSATION EVENTS
4 — RUNNING CONVERSATION EVENTS
5 — MANAGING IMPACT
6 — TOOLS AND RESOURCES
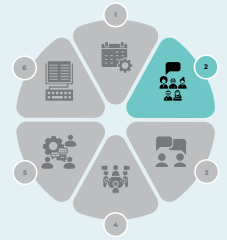
SECTION 2

DOING THE GROUNDWORK

This section sets out the activities that lay the foundation for a successful Responsive Dialogues process. The activities are grouped into three modules but some activities across the modules may need to happen in parallel with each other. Your engagement with the modules will depend on and be guided by previous research undertaken on AMR ecosystem mapping, previous stakeholder and community engagement, as well as the specific objectives and scope of your Responsive Dialogues project. See Section 1 for more on defining the objectives and scope of your project.

This section provides guidance on the following:

Module 1: Mapping the AMR ecosystem
Module 2: Engaging stakeholders
Module 3: Engaging the community

1

MAPPING THE AMR ECOSYSTEM

The AMR ecosystem is a complex network of interconnected parts including, for example, institutions, organisations, people, policies, projects, and issues related to AMR in a country. It also includes gender, social, political, and economic factors that affect people's beliefs and behaviours, which influence how AMR develops, and that impact on human, animal, and environmental health. Understanding your AMR ecosystem allows you to identify what exists in the AMR landscape that you can engage in the Responsive Dialogues process. It also allows you to identify gaps and challenges that might point to key issues to focus on.

This module provides guidance on the following:

- Why map the AMR ecosystem?
- How to map the AMR ecosystem?
- How to organise the information?
- How to monitor AMR ecosystem mapping?

NOTE

Your project might have already started mapping the AMR ecosystem. Use and build on this, and keep updating the research.

Why map the AMR ecosystem?

Understanding what and who is part of the AMR ecosystem provides an insight into the reality of our interconnected world, instead of just thinking about one thing causing another, as in a simple chain.

The objectives, scope, and context of the Responsive Dialogues project determine the focus and parameters of your AMR mapping exercise – be it at a local, district, or national level. Your aims are to gain an understanding of the following:

- **Existing work relating to AMR in your context**. For example, the systems and institutions already involved, such as the healthcare system, the pharmaceutical industry, agriculture and veterinary practices, regulatory bodies, research institutions, and public awareness campaigns.
- **Actors and stakeholders for Responsive Dialogues.** For example, healthcare providers, policy-makers, governmental officials, researchers, international organisations, funders, the private sector, agriculture and veterinary sectors, civil society and community organisations, patient advocacy groups, and the media. See Module 2 for more on stakeholders.
- **Potential communities and participants for Responsive Dialogues**. For example, community groups and civil society organisations (CSOs). See Module 3 for more on the community.

- **Social, cultural, political, economic, and environmental factors**. For example, all the factors that may affect people's experiences, attitudes, and behaviours that influence how AMR develops.
- **One Health.** For example, the links in your context between human, animal, and environmental health, and how the different parts influence each other and create a dynamic whole. See *Cross-cutting themes* for more on AMR and One Health.

It's really important to understand the 'whole picture', so that you know what to take into account to facilitate the co-creation of relevant solutions to address AMR challenges.

How to map the AMR ecosystem?

Multiple parties might be involved in helping to map the AMR ecosystem. Collaboration between these parties can lead to a more comprehensive and accurate assessment of the ecosystem. However, the core implementation team starts the process in the groundwork phase, and continues to lead this ongoing task as more people are involved and more information is gained.

Many different approaches could be used in the mapping task. Below are a few examples that can be used to gain rich insights into existing work on AMR and related topics, the actors, networks, and their relationship to AMR, problems and issues, stories, experiences, and perceptions.

BACKGROUND RESEARCH	
Data collection and analysis	**How to use the data**
Gather data from multiple sources about existing work, initiatives, and institutions relating to AMR. Review scientific literature and research papers, policy documents, databases, interviews, surveys, and case studies.	Analyse the data to identify trends, gaps, and areas of concern, for example, antibiotic usage patterns, resistance patterns, regulatory frameworks, surveillance systems, and public awareness initiatives. Build a comprehensive understanding of the AMR ecosystem in your context. Identify what exists to build on. Identify missing information which might point to key issues to focus the Responsive Dialogues on.
Analyse research and innovation	**How to use the data**
Review research initiatives and projects focused on AMR in your context. Assess the level of funding, collaboration, and translation of research into policies and practices.	Identify gaps in research priorities and in the dissemination of research findings.

Analyse surveillance data	How to use the data
Analyse available surveillance data on antimicrobial use and resistance patterns.	Identify trends, hotspots, and areas where resistance rates are high or increasing. Assess if surveillance systems are comprehensive, timely, and include data from different sectors (including One Health).
POLICY ANALYSIS/REGULATIONS	
Review policies and guidelines	**How to use the data**
Review policies and regulations related to AMR in your country/context to understand the objectives, strategies, and action plans outlined in these documents. Evaluate the implementation of existing AMR policies and assess if the policies are being effectively translated into action at various levels. Assess the regulatory framework surrounding antimicrobial use, availability, and distribution.	Assess the strengths of these policies, as well as their implementation and enforcement mechanisms. Identify weaknesses and barriers of policies and regulations, such as lack of resources, co-ordination issues, or limited enforcement mechanisms. Identify gaps in regulation, monitoring, and enforcement. Evaluate if regulations align with international standards and best practice. Identify areas where policy recommendations may be needed.
STAKEHOLDER MAPPING	
(see the examples from the Responsive Dialogues projects)	
Consult, interview, and/or conduct surveys with AMR stakeholders/actors	**How to use the data**
Collaborate with stakeholders across sectors. Engage in dialogues, workshops, and consultations with stakeholders to gain a comprehensive understanding of the AMR ecosystem.	Understand who and where the stakeholders are – roles, interactions, and relationships. Gather diverse viewpoints, insights, and perspectives, for example, on existing policies, implementation challenges, and potential gaps. Understand the dynamics and potential collaborations among stakeholders so as to facilitate effective stakeholder engagement. Identify gender and power dynamics in the factors affecting AMR.
EVALUATE HEALTHCARE PRACTICES	
Infection prevention and control	**How to use the data**
Assess the implementation of infection prevention and control practices in healthcare facilities. Look for gaps in hand hygiene, appropriate antibiotic prescribing, and adherence to guidelines.	Evaluate the availability of resources, training programmes, and support for healthcare professionals.
Assess antibiotic stewardship	**How to use the data**
Evaluate the implementation of antibiotic stewardship programmes in different healthcare settings. Determine if there are policies, protocols, and education programmes in place to promote responsible antibiotic use.	Identify barriers to implementing stewardship practices effectively.

Consider public awareness and education	How to use the data
Evaluate the level of public awareness and education regarding AMR in your context. Assess the effectiveness of communication campaigns, educational materials, and initiatives aimed at promoting responsible antibiotic use and hygiene practices.	Identify gaps in public engagement and education efforts.
CONSIDER INTERNATIONAL COMMITMENTS	
Review international agreements	**How to use the data**
Research the agreements your country or organisation has made regarding AMR.	Assess progress made in meeting these commitments. Identify any gaps in implementation or co-ordination with international efforts.
SYSTEMS THINKING	
Apply a systems thinking approach	**How to use the data**
Explore how changes in one component of the system can impact other components and overall AMR dynamics.	Understand the interdependencies and feedback loops within the AMR ecosystem. Identify leverage points and opportunities for intervention.

Examples from Responsive Dialogues projects

In the **Zambia** project, the AMR ecosystem was mapped by desk review which identified and summarised stakeholders that were key members in creating Zambia's NAP on AMR. Meetings were held with these organisations, which identified more organisations.

In the **Malawi** project, the groundwork involved early consultation meetings with the National AMR Coordinating Unit at the Malawi Ministry of Health. These initial steps allowed the project to explore what AMR initiatives, policies, and national actions existed, and to establish connections with various stakeholders and actors involved. Initially, 30 stakeholders were identified. A further 22 were recruited through snowballing (asking stakeholders if there were any other individuals or organisations to include), making a total of 52 participants. These included representatives across the One Health spectrum.

Due to the second wave of COVID-19, individual conversations were held with 43 individuals. These were either in-person or over the telephone, based on the participant's preferences. Most participants preferred to have in-person conversations. The conversations explored:

- Stakeholders' knowledge about AMR
- Their understanding of drivers and consequences of AMR in Malawi
- Existing AMR activities in Malawi
- Key messages stakeholders felt should be communicated, to which participant groups, and in what medium
- Potential interventions to address AMR in Malawi.

The interviews allowed the project to discover in greater detail existing AMR activities, their objectives, who was involved, impacts, challenges, other interventions that could be done, and what stakeholders thought of Responsive Dialogues. This exercise was key to understanding if and how the project could contribute to the ongoing AMR work, and generated useful insights into critical issues that could be exploited.
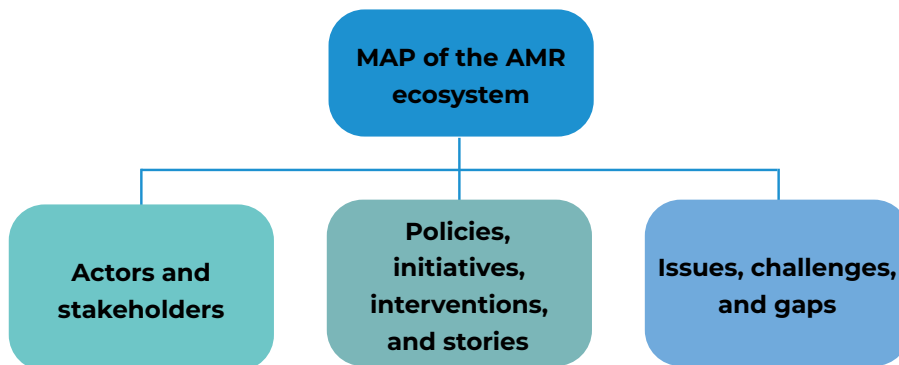
NOTE

If you have any difficulties finding national AMR policies, frameworks and action plans online, reach out to relevant government departments or agencies for assistance in obtaining these documents. See Section 6 for the suggestions, *How to find AMR policies, frameworks, and action plans.*

How to organise the information?

Organising information in a structured way helps to reveal connections and patterns within the complex AMR ecosystem. Creating visual maps and diagrams can help to reveal the relationships between various stakeholders, issues, initiatives, and challenges. Here's an example of how to organise information related to AMR into different broad categories:

```
                    ┌─────────────────────┐
                    │  MAP of the AMR     │
                    │     ecosystem       │
                    └─────────────────────┘
         ┌───────────────────┼───────────────────┐
┌─────────────────┐ ┌─────────────────┐ ┌─────────────────┐
│                 │ │    Policies,    │ │                 │
│   Actors and    │ │   initiatives,  │ │ Issues,         │
│   stakeholders  │ │  interventions, │ │ challenges,     │
│                 │ │   and stories   │ │ and gaps        │
└─────────────────┘ └─────────────────┘ └─────────────────┘
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Mapping methods and techniques

Various mapping methods can be used to understand the AMR ecosystem. Each of these offers a unique perspective on understanding the complexities of AMR, as well as what and who exists in the ecosystem. Here is how each method can be used:

Issue maps: These are helpful for visualising the different issues, challenges, and causes related to AMR. Venn diagrams can illustrate overlapping problems, while geographic distribution maps can show where AMR is most prevalent. This approach helps identify common factors driving AMR and possible areas of focus for Responsive Dialogues.

Example of a Venn diagram
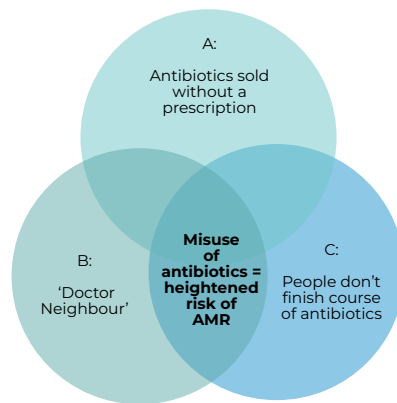
Causal maps: These include, for example, problem trees or causal-loop diagrams that can provide a deeper understanding of the relationships between different components within the AMR ecosystem. Problem trees help identify root causes and their effects, while causal-loop diagrams show feedback loops that contribute to the complex dynamics of AMR. Again, this approach helps to identify possible areas of focus for Responsive Dialogues.
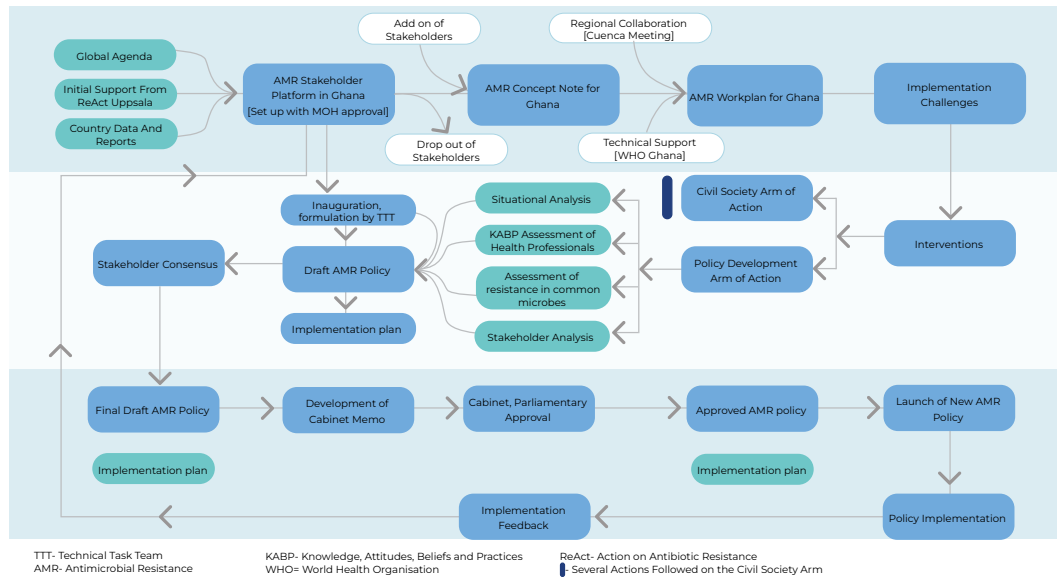
Example of a causal map
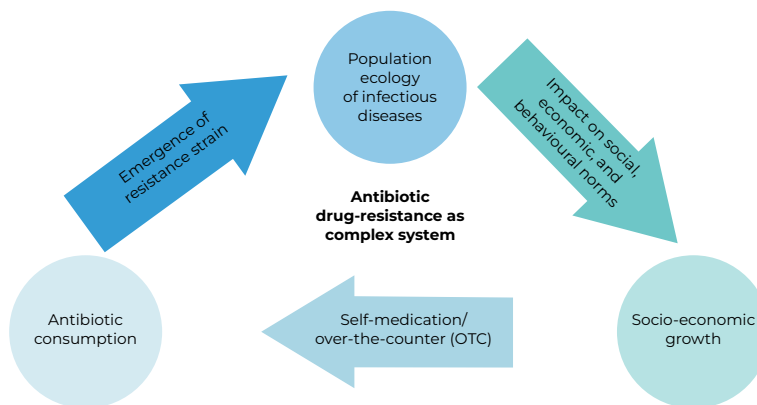
Source: Malik, B., Bhattacharyya, S. Antibiotic drug-resistance as a complex system driven by socio-economic growth and antibiotic misuse. Sci Rep 9, 9788 (2019). https://doi.org/10.1038/s41598-019-46078-y

Stakeholder maps: These help you visualise the various organisations, institutions, and individuals involved in the AMR landscape. They highlight relationships, collaborations, and the influence of different actors in shaping AMR-related behaviours and outcomes. They are especially important and useful for identifying the different types of stakeholders to engage in Responsive Dialogues. See Module 2 for stakeholder engagement and for an example of a stakeholder map.

Timelines: These offer a chronological view of the evolution of AMR-related issues – at the global, regional, national, and local level. This approach helps to track the progression of AMR awareness, policy changes, scientific discoveries, and public responses over time, revealing trends and shifts.

Information flow maps: Mapping information flows between different actors and stakeholders can shed light on how knowledge and awareness about AMR are communicated. This is particularly useful for understanding how the flow of information affects behaviours and decision-making processes related to AMR and antibiotic use.

Example of an information flow map

TTT- Technical Task Team
AMR- Antimicrobial Resistance

KABP- Knowledge, Attitudes, Beliefs and Practices
WHO= World Health Organisation

ReAct- Action on Antibiotic Resistance
▌- Several Actions Followed on the Civil Society Arm

Source: www.mdpi.com/antibiotics/antibiotics-11-00613/article_deploy/html/images/antibiotics-11-00613-g002.png

Mapping tips

- **Identify the focus:** Determine the specific aspect of AMR you want to map, for example, issues, stakeholders, causal relationships, timelines, or information flows.

- **Gather data and input:** Collect information from various sources, including experts, stakeholders, research studies, and existing data. Involve diverse perspectives to ensure a comprehensive and inclusive understanding.

- **Choose mapping tools:** Select appropriate mapping tools based on your focus. Use software or tools that allow you to create diagrams, charts, and visual representations effectively.

- **Visualise the connections:** Map the connections, relationships, and patterns based on the chosen approach. Use shapes, lines, colours, and labels to represent different elements.

- **Engage stakeholders:** Involve different stakeholders throughout the mapping process. Their insights and interpretations will enrich the maps and provide a well-rounded perspective.

- **Analyse insights:** Analyse the completed maps to identify key insights, trends, feedback loops, and potential intervention points.

- **Communicate findings:** Share the visual maps and their insights with stakeholders, decision-makers, and the public to gain further insights and foster understanding and support for AMR-related initiatives.

AMR ecosystem mapping in Responsive Dialogues enables you to gain a holistic understanding of what exists in the AMR landscape in your context, what is effective in responding to the challenges of AMR, and where there are gaps. These insights allow you to work with others in the AMR landscape to find locally relevant and feasible solutions to inform strategic interventions and policies that effectively address this critical global health challenge.

How to monitor AMR ecosystem mapping?

The example criteria below may help your project monitor your AMR ecosystem mapping on an ongoing basis as you gather more information. They are also a useful reminder of the important aspects to accomplish in the mapping exercise.

- Check the focus of the AMR mapping against project objectives, scope, and context
- Check that you have gathered information from diverse sources to ensure comprehensive and inclusive understanding
- Select appropriate mapping tools
- Identify visual tools to help show connections, relationships, and patterns
- Engage stakeholders in an ongoing way in the mapping process
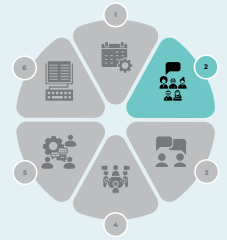- Communicate findings from the mapping to stakeholders and others involved.

Checklist of guidance in this module

Tick completed activities/tasks and those that still need completion.

Activities	Yes	To do
The importance of mapping the AMR ecosystem for successful Responsive Dialogues is understood		
Approaches for mapping the AMR ecosystem are identified		
Data collected to identify what exists and where there are gaps is organised		
Different techniques are used to organise the information collected to feed into Responsive Dialogues		
AMR ecosystem mapping (ongoing) is monitored and tracked		

2 ENGAGING STAKEHOLDERS

MODULE 2

The Responsive Dialogues approach is unique in that there is a central focus on establishing relationships for sustainable change. This includes identifying, engaging with, and building relationships throughout the course of the project, between stakeholders and the core implementation team, but more importantly, between stakeholders and the relevant community, so as to foster change and sustainability as an outcome of the Responsive Dialogues process.

This module provides guidance on the following:

- Which stakeholders to engage?
- What roles do stakeholders play?
- How to engage and build relationships with stakeholders?
- How to manage stakeholder challenges?
- How to monitor stakeholder engagement?

Which stakeholders to engage?

Stakeholders are individuals, groups, or organisations that have a vested interest or stake in Responsive Dialogues, the specific AMR issue/topic, the community being targeted, or the outcomes of the process. They may be directly or indirectly affected by the decisions made in the Responsive Dialogues process, for example:

- Their stake in the process might be related to the development or redevelopment of AMR policies, plans, and other efforts already underway in the country and/or local area.
- They might have an interest in advancing human, animal, and environmental health in the country and/or local area.
- They might have some other direct or indirect concern around, for example, finances, moral, legal, personal, or community-based matters.

> Responsive Dialogues are developed through the establishment of relationships for sustainable change. They include equitable interaction, collaboration, and partnerships between the public and different stakeholders.

Stakeholders could be drawn from specific geographical areas, systems, institutions, interest-based groups, or identity communities. They may be, for example, members of the public, government ministries and departments, from across the One Health sector, the private sector, from local and/or international funders, non-profits, healthcare facilities, or universities.

This inclusive definition means that *anyone*, including citizens and members of a specific community who hold an interest in the topic and approach, may be considered a stakeholder. However, recognising the diverse range of stakeholders acknowledges the potential for conflicts between local and broader interests, as local communities often bear the immediate and personal consequences of decisions made in the long-term interest. (See below for suggestions on managing stakeholder challenges.)

What roles do stakeholders play?

Stakeholders will be involved in the process in different ways, depending on the specific focus of the Responsive Dialogues and the stakeholder's role. Some will be involved in advisory roles, some in setting up or contributing directly to the Conversation Events, and others will have important roles in sustaining the Responsive Dialogues initiative and taking AMR solutions to policy level. The table below lists some stakeholders and describes the variety of roles and contributions they could make to the process.

Stakeholders and their possible contributions to Responsive Dialogues

Stakeholder	Role
Government/policy-makers/decision-makers	Provide insights on shared and department-specific goals and priorities, for example, from the National Action Plan (NAP) for AMR
Academics/researchers	Provide insights on evidence needed to drive existing or new local AMR research
NGOs, international networks, and organisations	Provide input for programme structure from previous experience, facilitation of Conversation Events, and access to funding
Private sector	Provide insights on existing trends and strategies
Civil society organisations (CSOs)	Provide input on public engagement and priorities
Public engagement experts	Provide input on public engagement and perspectives for programme structure
Community leaders	Help with community mobilisation, entering a community, awareness raising, and community acceptance
Donors/funders	Provide funding and expertise

Which stakeholders are key?

Some stakeholders will play key roles in the Responsive Dialogues process, others supporting or local roles. Consider the following:

- **Some stakeholders are decision-makers.** They include, for example, policy-makers, funders, and researchers. They have influence and the capacity to take the outcomes of the Responsive Dialogues forward.
- **There might be different levels of stakeholders at national and local level.**

Important questions to bear in mind in your engagement with each include, for example: Will you engage them together or separately? What can each contribute to the process? What will be most effective to help achieve the project objectives? Who will be critical to driving the solutions forward?

- **Some stakeholders are experts.** You may engage them for specific purposes at different times, for example, to give input into AMR.
- **Some stakeholders are from the wider community.** They can assist with community engagement, entry, and to take the outcomes of the Responsive Dialogues forward.

At the beginning of the Responsive Dialogues process, map out who the stakeholders are and categorise the different groups in a way that serves the purposes of your Responsive Dialogues project. This will guide you with the level of engagement you can expect to have with each stakeholder at different stages of the process, including with longer-term outcomes.

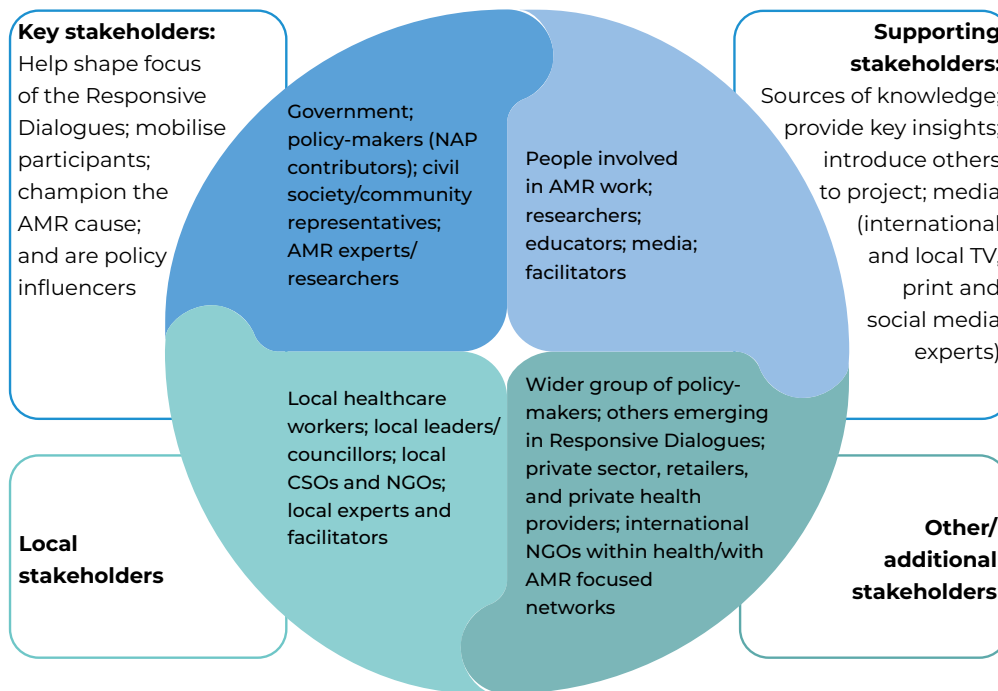## *Guidance on stakeholder mapping and engagement*

Questions to assist with the stakeholder mapping task and to prepare to engage with different stakeholders:

- What are the different types and categories of stakeholders in our context?
- Which sectors do they come from?
- What role do they play in the AMR ecosystem?
- What is the purpose of this stakeholder in our Responsive Dialogues process? What role could they play?
- What type or scale of influence does each stakeholder have?
- Are they important for our short-term, intermediate-term, and/or longer-term project objectives?
- How can each stakeholder help move the process forward?
- How can each stakeholder help foster sustainability and change?
- Should this stakeholder be engaged throughout the process, or at different stages? For example, at various points in the Conversation Events you might consider bringing in decision-makers to experience local realities first-hand. However, this has enormous implications for power dynamics and would need to be carefully managed. See *Cross-cutting themes* and Module 6 for more information on addressing facilitation challenges.

Categorise stakeholders into the different roles and ways in which they will be involved in your Responsive Dialogues project. See the example that follows.

Example of stakeholder mapping

Key stakeholders: Help shape focus of the Responsive Dialogues; mobilise participants; champion the AMR cause; and are policy influencers

Government; policy-makers (NAP contributors); civil society/community representatives; AMR experts/ researchers

People involved in AMR work; researchers; educators; media; facilitators

Supporting stakeholders: Sources of knowledge; provide key insights; introduce others to project; media (international and local TV, print and social media experts)

Local healthcare workers; local leaders/ councillors; local CSOs and NGOs; local experts and facilitators

Wider group of policy-makers; others emerging in Responsive Dialogues; private sector, retailers, and private health providers; international NGOs within health/with AMR focused networks

Local stakeholders

Other/ additional stakeholders

How to engage and build relationships with stakeholders?

Remember the importance of establishing relationships with stakeholders throughout the course of the Responsive Dialogues process. This relationship-building process should not only be between the core implementation team and the different stakeholder groups, but importantly also among stakeholders themselves, and between stakeholders and the communities you engage. It is through these relationships that change and sustainability are fostered as an outcome of the Responsive Dialogues process.

The methods you use to build up relationships with different stakeholders will depend upon the stakeholders and your familiarity with them. For example:

Tap into your own networks. This can have a snowballing effect – where you ask these stakeholders if there are any other individuals or organisations to include in the Responsive Dialogues.

Your first point of contact will probably be by email, phone, or at an in-person meeting. Include information about the project, about Responsive Dialogues, and a request for their involvement.

Following up by arranging a time when you can share more details with stakeholders and get their commitment to be involved. This could be through one-on-one meetings, existing meetings, for example, AMR committees, district, or regional health meetings, or through a specific stakeholder meeting.

Tips for gaining stakeholder buy-in

- Engage stakeholders **early**.
- Provide a **clear introduction** to Responsive Dialogues.
- Find a **'hook'** that matches the stakeholder's interests.
- Explain how Responsive Dialogues will help **address** this interest.
- Speak their **language**.
- Make your **expectations** clear.
- Organise a **Stakeholder Workshop** to mobilise stakeholders, inform them about the project, and engage them in the focus and goals of Responsive Dialogues.

See Section 6 for practical information on *Organising and Running a Stakeholder Workshop.*

Small group of stakeholders discussing and prioritising AMR issues and messages, Malawi.

Photo: John Mankhomwa.

The table below outlines the advantages and disadvantages of the various ways in which stakeholders could be engaged. It's important to take these into consideration as you move forward with your plans.

Advantages and disadvantages of various ways to engage stakeholders

	One-on-one meeting	Existing meeting, for example, AMR committee	Responsive Dialogues stakeholder meeting
Advantages	Fairly easy to set up	Several key stakeholders may be in attendance; may assist with regular information sharing and longer-term sustainability	Focused on the specific project; time to explain details; brings various stakeholders together
Disadvantages	Individual meetings are time consuming	Other items on agenda, so time may be short to engage with stakeholders	Logistically difficult to arrange suitable venue and time; costly

Examples from Responsive Dialogues projects

In the **Malawi** project, the stakeholder engagement was broad and involved policy-makers from the ministries of health, agriculture and environment, scientists working on AMR, medical professionals, veterinary officers, NGO representatives, private sector stakeholders, including drugstore owners, media, visual artists, and local leaders (village chiefs). This broad group took part in the initial workshop that focused on project design, and the dissemination workshop towards the end of the project.

Stakeholders that formed part of the Conversation Events included local leaders, medical professionals, drugstore owners, and veterinary officers. Local leaders were key in negotiating the implementation of solutions in the community. Health professionals and drugstore owners provided information about antibiotic prescribing and usage practices.

In the **Zambia** project, stakeholders were initially identified through the NAP for AMR, and this was followed up with meetings with those whose current work aligned with the goal of the Responsive Dialogues project, that of Urinary Tract Infections (UTIs) in women. In addition, health facility staff, particularly the nurse-in-charge, community members, and volunteers helped to map out key stakeholders in the community.

Generally, stakeholders who were engaged in the Responsive Dialogues process were enthusiastic about assisting their communities and played a crucial role in getting their buy-in.

Building relationships with stakeholders

"Stakeholders engaged at this stage may also go on to provide critical input throughout the Responsive Dialogues, for instance, formulating or delivering evidence or messages, or as participants in the events" (Wellcome, 2021).

Keep all stakeholders, and most especially the key stakeholders, regularly informed about the Responsive Dialogues. Apart from maintaining enthusiasm and commitment to the project, this also builds buy-in to take outcomes and outputs forward.

Building relationships with stakeholders is an ongoing process throughout the course of the Responsive Dialogues project, because it can foster change and sustainability, amongst other things.

Tips for building stakeholder relationships

- Set up an **email list** of key stakeholders and use this to regularly inform them about progress (allocate this responsibility to a member of the core implementation team).
- Get a **slot at existing regular meetings**, for example, of an AMR committee or community health committee, to present updates on the Responsive Dialogues.
- Identify ways to **piggy-back meetings** with groups of stakeholders at other events in the country, for example, AMR meetings and conferences, and district/regional health meetings.
- Follow up **individually** with key stakeholders that you haven't been able to engage, and with alternative and new stakeholders.
- Plan follow-up feedback **Stakeholder Workshop/s**.
- Plan a final **Stakeholder Dissemination Workshop** to take place after the Conversation Events. See Module 11 for more details.

Example from a Responsive Dialogues project

In the **Zambia** project, stakeholders played a significant role throughout the project. For example, stakeholder engagement in the groundwork phase included:

- Individual consultations with approximately 28 AMR stakeholders
- Running two Stakeholder Workshops
- Engaging with a wide range of stakeholders from human health and from different sectors in the Responsive Dialogues process.

A follow-up Stakeholder Workshop was held after the wrap up of all Conversation Events. A final dissemination Stakeholder Workshop was held after a major two-day AMR Conference that took place in Lusaka, knowing that many of the stakeholders would be there.

Example of stakeholder engagements throughout the course of the Responsive Dialogues project

When	Example engagements
During groundwork	Individual consultations with stakeholders
	Stakeholder Workshops (as many as necessary to identify and engage stakeholders)
Conversation Events	Engage a wide range of stakeholders from different sectors throughout the course of the Conversation Events
	Invite some key stakeholders to co-creation stage
	Build up contact and the relationship between stakeholders and the relevant community to foster sustainability of solutions
	Regularly report back to key stakeholders on Conversation Events and progress of the project
Post-Conversation Events	Follow-up Stakeholder Workshops after the wrap up of all Conversation Events
	Final dissemination Stakeholder Workshop

How to manage stakeholder challenges?

As you engage with stakeholders you may experience several challenges. It is helpful to be aware of potential areas in advance so you can plan how to navigate them in the best way possible. See *Cross-cutting themes* and Module 6 for more on managing power dynamics.

Some key challenges you may encounter include:

- Stakeholders capturing or diverting the Responsive Dialogues agenda to their own interests
- Power dynamics especially between hierarchies, for example, national-level experts and community leaders; as well as cultural, gender-related, social, and age-related structural ranks
- Conflicting evidence from different stakeholders
- Availability of stakeholders to participate in workshops or other activities
- Payments for stakeholders to take part in activities like workshops or providing input in other ways.

Tips for managing power dynamics

- **Take time to prepare** for Stakeholder Workshops.
- Develop a **design and agenda** and review these. A well-designed and prepared workshop can minimise power dynamics.
- Put **strategies** in place to minimise dominant negative impact on a workshop, for example, break into small groups or pairs to encourage participation by all.
- **Brief dominant stakeholders** beforehand about the importance of hearing every voice in the room. See Modules 6 and 7 for more about briefing experts and stakeholders.
- Ensure that stakeholders are clear about and agree to the **workshop purposes and outcomes**.
- Engage stakeholders in setting **ground rules** which include respect for different points of view, without judgement or critique.
- Take on a more **facilitative role** by encouraging the input of quieter people, summarising comments, and posing questions to deepen input.
- Use written **brainstorming**, make decisions using different types of **voting**, and **record ideas** using flipcharts.

How to monitor stakeholder engagement?

Document and record each step and process you use in the stakeholder engagement process, from the pre-engagement stage, to the engagement stage, to the post-engagement stage! You can, for example, use an Excel sheet to keep track of who has been contacted, by whom, and their responses and follow up actions. This will assist with ongoing monitoring and evaluation (M&E) and help to measure and track progress.

Spend time regularly reflecting on how the stakeholder engagement is progressing, and to ask if there are other things you can do to maximise their involvement to meet the objectives of the Responsive Dialogues. This will form part of your M&E process.

Example questions to stimulate reflection

Identifying and selecting stakeholders
- Have we successfully identified all the key stakeholders we want to involve in the Responsive Dialogues? Who is missing?
- Do we need to follow up again with some stakeholders or identify alternatives?
- Have any other stakeholders emerged that we should invite to participate in the Responsive Dialogues process?

Mobilising and involving stakeholders
- Have all identified stakeholders responded to our invitation to participate in the Responsive Dialogues?
- Did they attend Stakeholder Workshops/other events we organised?
- Which stakeholders do we need to reach out to again and what is the best way to inform them about Responsive Dialogues?

Working together
- Which stakeholders have we successfully involved in the Responsive Dialogues process so far?
- Which other stakeholders can we reach out to, to leverage their expertise in the Responsive Dialogues process?

Informing and motivating stakeholders
- How are we communicating with our stakeholders? Which ways are effective (emails, meetings, workshops, WhatsApp groups)? Frequency (how often)?
- What are the improvements we could make with our communication strategy?
- How are stakeholders engaging in taking solutions to policy level?

Checklist of guidance in this module

Tick completed activities/tasks and those that still need completion.

Activities	Yes	To do
A range of stakeholders who are key to the success and sustainability of Responsive Dialogues are identified		
The role each could play in the project and process is determined		
Ways to engage stakeholders and build relationships are explored		
Managing challenges with stakeholder engagement is planned		
Ongoing monitoring of stakeholder engagement is planned and implemented		

3
ENGAGING THE COMMUNITY
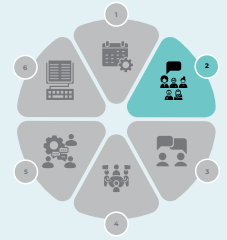
Engaging with relevant communities is a way of bringing local perspectives, understanding, and knowledge to the complex issue of AMR. However, it is important to define what is meant by 'the community' and how you plan to engage with specific communities in Responsive Dialogues.

This module provides guidance on the following:

- Who is 'the community'?
- How to identify communities for Responsive Dialogues?
- How to inform and ask for consent to participate?
- How to monitor community engagement?

Who is 'the community'?

> *"Communities are groups of people that may or may not be spatially connected,but who share common interests, concerns or identities. These communities could be local, national or international, with specific or broad interests"* (WHO. (2023). 7th Global Conference on Health Promotion: Track themes).

'The community' is made up of people who have something in common that unifies them, for example, they are from the same geographical area, are part of the same system, share common interests and affiliations, have shared identities. See *Cross-cutting themes* for more on community engagement.

Defining 'the community'

There are many ways to define or describe a community, for example:

Geographic community
Here 'the community' is based on people's physical location or proximity to each other – where they live in a region, zone, or area. They are a community by virtue of the space they share, and also because of their local relationships and collective identity.

Systems community
'The community' is viewed as a complex interconnected system (think of a human body). This community is made up of individuals, groups, organisations, and institutions that interact and influence each other, within a specific geographical area or around a shared interest, such as the healthcare system in Lusaka, Zambia.

Interest-based community

'The community' forms around a shared interest, hobby, profession, or affiliation. People come together based on common passions, causes, or activities. Interest-based communities relevant to AMR may include: local farmers, such as backyard poultry or pig farmers united around animal health and livelihood issues; healthcare providers involved in prescribing or dispensing antibiotics; and environmental experts, such as ecologists and conservationists whose knowledge can guide efforts to preserve biodiversity and mitigate environmental risks. See *Cross-cutting themes* for more on AMR and One Health.

Identity-based community

'The community' forms around a shared identity or identities, such as gender, culture, ethnicity, religion, or being part of a marginalised group. Identity factors and common experiences unite people into an identity-based community.

Each perspective of 'the community' offers unique insights into the forces and dynamics that might operate in that community, and provides a valuable lens through which community engagement strategies can be developed to effectively involve and empower members of each type of community.

The communities and community members you engage are at the centre of Responsive Dialogues. Their stories, perceptions, and real-life experiences of AMR are the important evidence that feeds into the **co-creation** of feasible and effective solutions to AMR at the local and policy level.

> **GLOSSARY**
> **Co-creation:** A process that leads to the refinement of jointly generated ideas into concrete, tangible solutions that can be tried and applied in local contexts.

A summary of the steps involved in engaging the community

Identify communities for Conversation Events

Define participant selection criteria and processes

Recruit, select, and confirm participants

Inform fully and ask for consent to participate

How to identify communities for Conversation Events?

The communities that are involved in Responsive Dialogues, and specifically in the Conversation Events, will depend on the objectives, scope, and focus of the project. This varies from project to project, as shown in the examples below.

Examples from Responsive Dialogues projects

In the project in **Zambia**, 'the community' referred to women and men of reproductive age (16–45 years), pregnant women and their partners, a male group, and three female groups. Three districts and five areas were involved.

In the **Malawi** project, 'the community' and participant groups for Conversation Events were from one geographical area – in and around Blantyre, and covered three diverse interests – smallholder chicken farmers, medicine prescribers, and male community members.

In the **Thailand** project, the aim was to be as inclusive as possible and to maximise the chance of having a diverse community. Conversation Events were run in four geographic regions – North, Northeast, Central, and South – each of which was defined as a 'community'. National Conversation Events with adult participants were held, following which the project discovered that the solution was not tangible. They therefore decided that the most suitable way to proceed was to run the Conversation Events online with young people.

THAILAND:
North, Northeast, Central, South

MALAWI:
Chikwawa

ZAMBIA:
Lusaka, Ndola, Livingstone
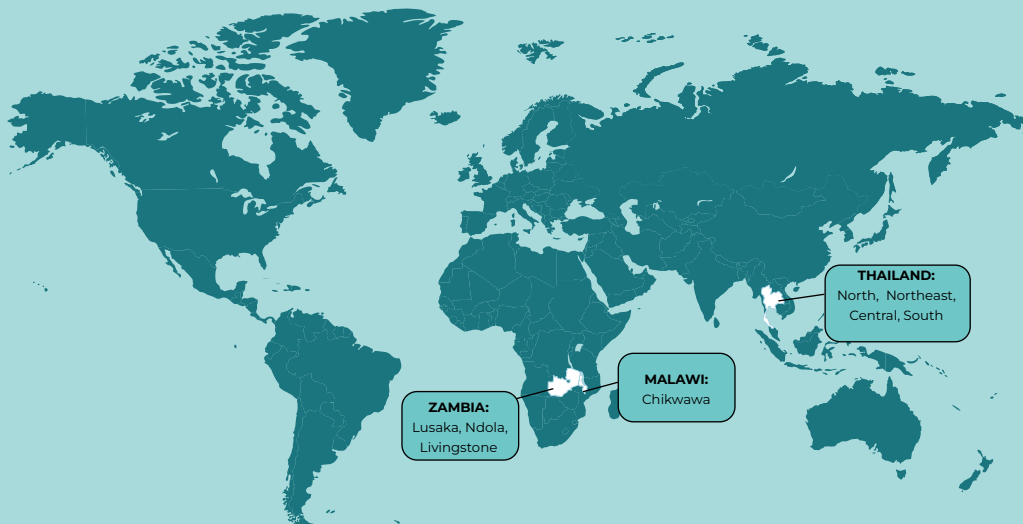
Identifying target groups

Within each community, it is important to identify specific target groups from which you can draw people to participate in Conversation Events. Some target groups already exist, such as women's groups, church groups, local community groups, or other special interest groups. In other cases, target groups are formed specifically for Conversation Events.

The type of target group from which you draw participants may shape the structure and facilitation of the Conversation Events. For example, a pre-existing church group might be easy to identify and reach, but their diversity may be limited.

Tips for identifying target groups

- A key element of Responsive Dialogues is the **potential that participants have to reach out to others** around them, to share what they have learnt in the Conversation Events, gather opinions, experiences, and insights from others, or influence others. Consider the following:

  - The potential reach participants have in their local community/communities
  - The potential participants have for national reach
  - The potential reach participants have in places where they live and work.

- Consider issues of **inclusivity and diversity**, gender sensitivity, people with special needs, or from underrepresented and marginalised groups, key populations, sex workers, and so on. See *Cross-cutting themes* for more on gender sensitivity and inclusivity.

Defining participant selection criteria

Once you have identified the target groups, decide on the criteria and methods you will use to select participants who will take part in the Conversation Events. The specific selection criteria may vary depending on project objectives and the targeted community or group. The important point is to define, document, and communicate what your selection criteria are and why you have decided on them – this relates back to your project objectives and scope. The criteria below are a starting point to develop your own selection criteria for the participants of your Conversation Events.

Example criteria to consider

Criteria	Issues to consider
Socio-demographic diversity	Consider age, sex, ethnicity, marital status, parental status, income level, employment status, profession or occupation, housing, education, location.

Criteria	Issues to consider
Inclusivity See *Cross-cutting themes* for more on inclusivity.	Consider accessibility for people who are differently abled, those needing transport and accommodation, childcare, key populations, language and translation needs, those people with special needs relating to AMR, and those affected by AMR, such as farmers, patients, pharmacists, people working with natural resources, etc.
Knowledge, awareness, and experience of AMR and One Health See *Cross-cutting themes* for more on AMR and One Health.	Do you want to cluster participants with a similar level of knowledge, awareness, or experience of AMR and One Health, or deliberately mix them up for more diversity? For example, pharmacists or prescribers in one group, and patients in another. Your decision depends on your purpose and aims.
Power dynamics See *Cross-cutting themes* for more on power imbalances and gender sensitivity.	Power as control and domination can create barriers to participation in Conversation Events in terms of deciding who can participate and how this happens. For example, in mixed gender groups, women may share less because of the dominance of male participants. Consider the role that gender plays in decision-making and influencing attitudes, beliefs, behaviours and practices, and in framing solutions.
Capacity of participants	Consider level of awareness, sensitivity, confidence, and ability to engage in and bring different perspectives to conversations.
Reach and influence	Consider the potential of participants to reach and share their learning and experience with the local or broader community, and to bring in other local perspectives, insights, and experiences.

Recruiting, selecting, and confirming participants

Selection processes will depend on the local context and the specific project objectives. The core implementation team may decide to consult local community representatives about the selection process, as well as other stakeholders, including researchers.

The selection method is most likely to be focused and purposeful, but could also include random selection. Commonly used selection methods include:

- **Through a participatory selection process:** Community members are involved in helping to select participants, using the selection criteria.
- **By invitation:** Participants are directly invited to participate in Responsive Dialogues.
- **By gatekeepers:** For example, a community leader, workplace manager, or official of an organisation. Gatekeepers can work for or against Responsive Dialogues:

  - If they think Responsive Dialogues are beneficial to their community, they can use their influence to open doors and persuade others to participate.
  - However, if they do not think Responsive Dialogues have merit, they can refuse to support the initiative and make it difficult to access community members.

> **GLOSSARY**
> **Gatekeepers:** *". . . members of a community and as such, understand its cultural and political environment. Their deep connection to community is acknowledged either by a formal position, such as an elected leader, or a person to whom the community turns to 'get things done.' Either way, a gatekeeper is a person of influence"* (Gatekeepers: The politics of community, Notes from the Co-operative Innovation Project – September 2015).

Careful negotiation is needed to make sure that participants not only come with different opinions, views, and perspectives, but that they can express these freely and openly without any negative consequences for them or their families.

Screening and selecting participants

The selection criteria you develop help you to screen potential participants before there is any formal agreement about participation in the Conversation Events. The screening may be conducted in person, over the phone, via internet, online, or through a written questionnaire. It is also important to begin the informed consent process at this point (see below).

Once participants have been selected, the core implementation team may send them an invitation by letter, email, or in person, together with information about the purpose and goals of Responsive Dialogues. Participants who were not selected are also informed, with a brief explanation about why.

If possible, meet with participants in advance of the actual Conversation Events. Such a meeting may involve briefing participants about the process before they agree to be involved. Discuss time commitments, as well as the compensation that will be provided depending on funds available, for example, for travel expenses and meals.

How to inform and ask for consent to participate?

The informed consent process begins during the screening and selection stage. It includes carefully explaining to potential participants the following:

- What Responsive Dialogues and Conversation Events are
- How their contributions will be used and how they will be asked to give specific consent for their words (quotes), or photos, or other outputs to be used
- How participation is voluntary and anyone may withdraw at any time without giving a reason, and without any adverse consequences
- How and why confidentiality is important in Conversation Events
- How every person's rights (including legal, social, etc.) must be respected
- How appropriate referral pathways will be shared with participants who need support during or after the Conversation Events, particularly for sensitive matters that have been shared.

Participants should only agree to the informed consent when they fully understand what is required of them. If a person is unable to read or write, an impartial witness

can be present to observe the consent process and to co-sign the consent form. Other methods can be explored, such as voice recording of the consent, visual images to explain the process, or brail where necessary. For more on accessible contracts, including consent contracts, see https://creative-contracts.com/.

Example from a Responsive Dialogues project

In the **Thailand** project, participants were invited in writing to participate in the **evaluation** component which was conducted at the end of each Conversation Event. An informed consent process was used for only those participants who agreed to participate in the evaluation (i.e. it was not used for participation in the Conversation Events). Only those participants who agreed to participate in the evaluation were provided with all relevant details, which included:

- Participants were given a *Information Sheet* which explained the relevant details.
- Participants were given as much time as they needed to consider the information and to ask questions.
- Each participant was informed that they had the right to withdraw at any time without giving any reason. Withdrawal meant that their data would be excluded from analysis. The parts of audio and/or video recordings and written data that captured their views would be deleted.
- When participants were ready, they decided whether or not they were willing to allow their information to be collected and recorded.
- If they agreed to participate in the evaluation, they were asked to sign and date an Informed Consent Form.

See *Cross-cutting themes* for more on ethical considerations.

How to monitor community engagement?

Below are some key questions to include in your monitoring and documenting of community and participant engagement:

Defining and identifying 'the community'
- How was 'the community' that would be part of your Responsive Dialogues project defined?
- Were the project objectives, scope, and focus used to identify the community?
- Within the community, how was the target group identified?

Selecting participants
- Were participant selection criteria clear, transparent, and inclusive?
- Was the screening process transparent and inclusive?
- What participant selection method/s were used (e.g. gatekeepers, invitation, participatory selection)?

- Was gender taken into account in the selection process?
- Were people with special needs, or from underrepresented and marginalised groups, key populations, sex workers, and so on, considered?
- Was a diverse group of participants invited to engage in the Conversation Events?
- Are the invited participants well-suited as members of the Conversation Events?

Seeking informed consent
- What informed consent process was used?
- How were participants informed about their rights as participants?

See Section 1 for more on the M&E Framework.

REMEMBER

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Document and record each process you use in the community engagement and participation selection processes. Note down why any specific decisions were made about the recruitment and selection process. Store your documents in a systematic way.

Checklist of guidance in this module

Tick completed activities/tasks and those still needing completion.

Activities	Yes	To do
What is meant by 'the community' is defined		
The community for the Responsive Dialogues project is identified		
Participants for the Conversation Events are selected and recruited		
The process of informed consent is set up		
Community engagement is monitored		

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Zambia Responsive Dialogues project.

Photo: Framaja Photography.