



Mind-Heart Dialogue

Facilitators' Guide for Faith Engagement

Engaging faith leaders and organisations to influence attitude, behaviour and social norms change that protect and empower children, families and communities



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Acronyms

CORAT	Christian Organizations Research and Advisory Trust of Africa
FBOs	Faith-Based Organisations
FGM	Female Genital Mutilation
FPCC	Faith and Positive Change for Children, Families and Communities
IRC	Interreligious Council
JLI	Joint Learning Initiative on Faith and Local Communities
MEAL	Monitoring Evaluation Accountability and Learning
MHD	Mind-Heart dialogue
NGO	Non-Governmental Organisations
SBC	Social and Behaviour Change
UNICEF	United Nations Children's Fund

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Preface

What is Mind-Heart dialogue?

Mind-Heart dialogue (MHD) is the foundational method of the Faith and Positive Change for Children, Families and Communities initiative (FPCC), a global partnership originally coordinated by UNICEF, Religions for Peace, and the Joint Learning Initiative on Faith and Local Communities (JLI), in collaboration with other partners.

Mind-Heart dialogue is a reflective and experiential learning process, exploring faith convictions, lived experiences and knowledge to influence positive social and behaviour change. It supports faith groups and development partners to work together to protect and empower children, families, and communities.



Who is this guide for?

This Guide is for champions of Mind-Heart dialogue: faith actors and their institutions, and staff of organisations and agencies aiming to influence positive change for children, families and communities.

RELIGIOUS LEADERS

(congregation leaders; women/ youth leaders; designated facilitators; networks)

If you lead a group within a faith context or have any other relevant leadership role (formal or informal), Mind-Heart dialogue will enable your faith community to fulfil your mandate to protect vulnerable groups and empower them to co-create positive change.

FAITH-BASED AND SECULAR ORGANISATIONS

If you work in a development organisation, Mind-Heart dialogue strengthens your own practice in catalysing behaviour change and engaging with faith leaders to transform lives. It creates spaces for collaboration based on shared experiences, learning and feedback.

UNICEF AND OTHER (INTER)NATIONAL ACTORS

This Guide will equip teams working in Social and Behaviour Change (SBC) and on child-focused programmes such as protection, health, nutrition, education, WASH, gender, adolescent development and participation to apply the FPCC Journey of Change, moving from more instrumental, ad hoc modes of engagement with faith groups towards integrated, holistic and systemic programming for children's development, protection and empowerment.

All quotations and pictures are from FPCC participants (in WorkRocks, virtual sessions and more widely), including religious leaders, UNICEF staff and representatives of faith-based organisations. For credits, see page 2.

What is in this Guide?

In this Guide, you will find a mixture of activities that reflect on scriptures, draw in facts and engage people's life experiences and emotions. Mind-Heart dialogue (MHD) often involves a physical activity to deepen discussion, include diverse voices and strengthen experiential learning. Our usual discussions can lock us into patterns of thinking and reinforce existing unbalanced power relations and structures. Adding a visual and physical element through MHD helps people become less self-conscious and defensive, engage more actively and notice new things. MHD creates a space for more equal partnerships as everyone contributes, thus catalysing innovative and collaborative thinking.

This is version 2 (2024) of the original Guide. It adds a deeper theoretical framework for facilitators to better understand the behaviour change process expected as part of MHD. The Guide aims to help dialogue facilitators to be conversant with the change process, which is the basis of planning MHD sessions. It is designed to enable the facilitators to plan and facilitate dialogue sessions for different groups. In the Guide, the following aspects are presented in an easy and ready to adopt format. This includes:

- Change Model,
- Facilitation framework,
- FPCC Journey of Change,
- Relevant, reflective exercises and activities,
- Pertinent thematic issues affecting children, families, and communities,
- Sample programmes, planning, monitoring, evaluation, and reporting tools.



String Game, Regional Training of Trainers in Latin America and the Caribbean - Panama City - Panama, April 2024.

How was this Guide developed?

FPCC was conceived in 2018 by UNICEF's Social and Behaviour Change (SBC) Section to help UNICEF to move beyond single-sector, small-scale, ad-hoc and sometimes instrumentalist approaches of faith engagement in development work. FPCC recognises that faith groups also have a mandate and motivation to protect and empower children, families and communities, and that development and faith-based organisations (FBOs) need to work together as equal partners to facilitate transformation in communities.

In 2019, five countries across Eastern and Southern Africa, as well as Western and Central Africa piloted the Mind-Heart dialogue (MHD) approach through a series of 'WorkRocks',¹ which were documented in a draft toolkit. FPCC then facilitated a series of six virtual MHD sessions in Eastern and Southern Africa from 2020-21 to support faith leaders, FBOs and UNICEF to protect and support vulnerable groups during COVID-19.

¹FPCC coined the term 'WorkRock' to convey the idea of a process of engagement that is not a 'business as usual' workshop, but a collective effort to centre MHD as a new way of engaging, reflecting learning and co-creating shared priorities, values and planning, with a view to lay foundation for this engagement approach as a long-term partnership strategy for change.



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Incorporating outcomes from the WorkRocks and subsequent virtual sessions, as well as learning from other global faith-based resources and approaches, the original Mind-Heart dialogue Facilitators' Guide for Faith Engagement² was released in September 2021.

Version 1 drew together materials from the country pilots and virtual sessions, as well as faith-based approaches globally. FPCC participants from each of the intended facilitator groups contributed ideas in focus group discussions on how to make the Guide accessible, the qualities and support facilitators would need, and how the approach could be integrated into existing activities.

Revised Guide (Volume 2)

The decision to update the original Guide was motivated by the experience of more than 100 MHD-trained facilitators, from Burkina Faso, Ethiopia, Ghana, Kenya, Malawi, Mali, Nigeria, Sierra Leone, South Sudan, Uganda, Zambia, and Zimbabwe, who went through a comprehensive four-day residential training on MHD approaches led by CORAT Africa in 2021-2022. Following the training, facilitators in each country conducted at least two MHD sessions of between one to three days in various spaces. This was followed by a virtual mentorship session where the facilitators shared their experiences, lessons learnt and suggestions for improving the original MHD Guide.

Through this process of experiential practice, learning and feedback, it became apparent that there was need to review and update the manual to:

- 1 Deepen facilitators' understanding of the change process that supports the FPCC Journey of Change,
- 2 Strengthen facilitators' skills and confidence in using the MHD approach in responses to various thematic issues that affect children,
- 3 Provide practical guidance on planning and coordinating MHD activities designed to influence behavioural outcomes and positive impact for children,
- 4 Incorporate mechanisms that enable planning, monitoring, and tracking of changes brought about by MHD in the FPCC.

The revision of the Guide is thus grounded in the practical experiences of the MHD facilitators and FPCC team, as well as behaviour change theory, skill-building, problem solving and action-oriented approaches.

² <https://www.faith4positivechange.org/mind-amp-heart-dialogue-resource-guide>

Why develop a Facilitators' Guide for Mind-Heart dialogue?

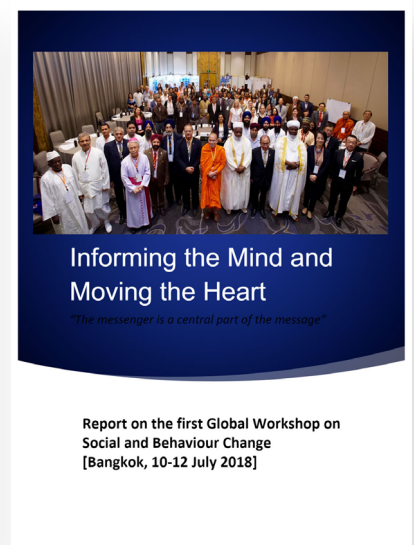
Today, faith actors increasingly find themselves engaged in work alongside development actors. Faith communities are social networks that can create and promote positive social norms aligned to children's rights. Faith communities can help to shift social norms that reinforce or enable harmful practices such as child marriage and female genital mutilation, among others.

This Guide was developed as a resource to help channel the influence of faith communities by providing a practical tool and faith-inspired methodology designed to strengthen engagement and find common purpose with development actors in the shared goal of promoting child rights. This Guide and the Mind-Heart dialogue (MHD) approach serve as a cornerstone of the Faith and Positive Change for Children (FPCC) initiative.



Alignment with other resources

This Guide is part of the FPCC package of supporting resources³. It is complementary to the FPCC Program Guidance on Faith Engagement,⁴ the FPCC M&E Framework, both of which are specifically aimed for UNICEF and other development organisation staff, the FPCC Thematic Guidance Documents,⁵ such as the COVID-19 Guides for Religious Leaders and Faith Communities), and the FPCC Global Evidence Resources⁶, which can be used by faith and development partners alike.



³All the FPCC resources are available at: <https://www.faith4positivechange.org/> or https://jlicf.com/resources/?_topics%5B%5D=727

⁴<https://www.faith4positivechange.org/mind-amp-heart-dialogue-resource-guide>

⁵<https://www.faith4positivechange.org/guidance-documents>

⁶<https://www.faith4positivechange.org/2018-workshop>

SECTION 1

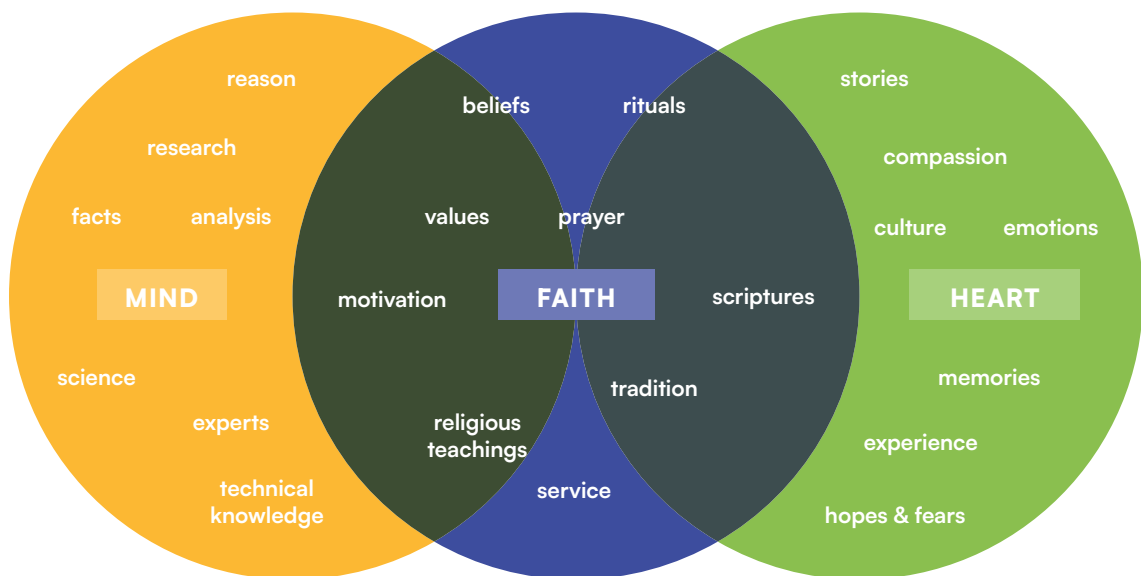
Introduction

What defines the Mind-Heart dialogue approach?

The Mind-Heart dialogue (MHD) is a methodology which invites the individual to draw from their experience and reflections on a particular issue and relate that to present day challenges facing children. It uses social and behaviour change approaches to analyse social, cultural and religious beliefs, practices and norms and compare these with the recommended scientific, technical information, with a view to reinforce positive norms and practices for the wellbeing of children, families and communities.

MHD is an evidence-based approach that penetrates deeper than traditional messaging and awareness-raising to surface the emotions and beliefs that can help or hinder lasting transformation. It encourages open and authentic communication among individuals within a group setting.

As the diagram (below) shows, faith underlies engagement of both the mind and heart:



Although the diagram depicts three circles representing mind, heart, and faith, these elements may manifest differently across various religious traditions. We encourage you to reflect on how this diagram can aid in understanding the interactions and interconnections between these concepts in a way that resonates with you.

FAITH

Explores spiritual beliefs, values and motivations (whether linked to a particular religion or not), creating space to reflect on and positively interpret faith teachings and practices and to integrate prayer, meditation or other faith-based practices into processes of change.

MIND

Draws on technical knowledge, resources, tools, processes and people to provide evidence of what works, why and with whom, and show the benefits of adopting new or adapting existing positive practices or abandoning harmful ones.

HEART

Reflects on experiences and emotions to unpack underlying drivers of behaviours and develop empathy and personal motivation for change; analyses culture and power to identify the norms that underlie unequal opportunities and to reinforce positive and reject harmful practices; and releases local skills and resources for practical action.

Why Mind-Heart dialogue?

The evidence shows it is needed and works

The Faith and Positive Change for Children initiative (FPCC)⁷ demonstrates that moving beyond messaging and information is vital. It brings together evidence of the effectiveness of Mind-Heart dialogue (MHD) as a foundational approach for locally-owned, lasting change.

Examples of evidence from across the world on the effectiveness of MHD and faith engagement on maternal and child outcomes (from the FPCC Global Evidence Review 2018⁸):



In **Ghana**, an evaluation of a “Council of Champions” programme, conducted after one and a half years of implementation, showed that 24% more women in the intervention area were accessing early antenatal care, whereas the same indicator had decreased by 21.5% in the control area.⁹



In **Liberia**, a programme of faith leaders from Muslim and Christian communities using a Facts, Association, Meaning and Action Learning–Dialogue approach demonstrated that after two years, girls and women in the intervention areas who experienced gender-based violence (GBV) were 13% more likely to report it and seek support.¹⁰



In **Iraq**, a study found that local religious leaders played an important role in resolving disputes, including those around early marriages and protection of children, as well as in addressing violence against women.¹¹



In **Angola**, a NetsForLife programme with religious leaders and other community members in Malaria-prone areas helped increase the number of children under five sleeping under long-lasting treated nets by 85%.¹²



In **Rwanda**, after one year of implementation, a programme that mobilised religious leaders and networks to promote family practices for prevention of malnutrition showed that 52% of households in the intervention districts began storing water in closed containers, as opposed to 44% in the control group.¹³

⁷<https://www.faith4positivechange.org>

⁸<https://www.faith4positivechange.org/2018-workshop>

⁹John Hembling, Elena McEwan, Mohammed Ali, Anna Passaniti, Paul Armah Aryee, and Mahama Saaka, “Mobilising faith-based and lay leaders to address antenatal care outcomes in northern Ghana,” *Development in Practice* 27, no. 5 (July 21, 2017): 634-645.

¹⁰Kirsten Laursen Muth, Chou Nuon, Vanessa Pizer and Abiy Seifu, “Can Faith Leaders Prevent Violence Against Women and Girls (Episcopal Relief and Development, 2017).

¹¹Trang and Oonagh O’Brien, “Who Can I Turn To? Mapping Social Connections, Trust and Problem-Solving among Conflict-Affected Populations.” (Teddington; Edinburgh: Tearfund; Queen Margaret University, 2018).

¹²Abigail Nelson, “Large Scale Engagement of FBOs for Development,” Religion and Sustainable Development Conference, (Washington DC, 2015).

UNICEF Eastern and Southern Africa Region, “C4D Works! Partnering with religious leaders in Rwanda to accelerate stunting reduction through family empowerment.” <https://www.faith4positivechange.org/evidence-and-publications>.

¹³<https://www.faith4positivechange.org/case-studies>.

It fulfills our mandate

Children and women have the right to be protected from harmful behaviours and practices, such as child marriage or violence, and to have the best chance to develop to their fullest potential.¹⁴ This right does not need to clash with people's rights to engage in their cultural and religious practices.¹⁵ Mind-Heart dialogue (MHD) enables communities to come to a deeper understanding of themselves, their faith and culture, so they can co-create locally-appropriate ways to address social challenges and support life chances for all, including the most marginalised.

Experiences gathered by the facilitators of MHD show that the approach is pertinent in promoting the following:

- 1 **Enhanced Understanding:** MHD allows individuals to express their thoughts, opinions, and emotions openly, fostering a deeper level of understanding among group members. It encourages active listening, empathy, and respect for diverse perspectives, leading to a more comprehensive understanding of complex issues.
- 2 **Balanced Decision-making:** By integrating mind and heart approaches through a faith perspective, groups make more balanced and informed decisions.
- 3 **Conflict Resolution:** Group dynamics often involve disagreements and conflicts. MHD provides a safe space for individuals to express their emotions, concerns, and frustrations, facilitating the resolution of conflicts through open dialogue, empathy, and mutual understanding.
- 4 **Promotes Collaboration:** Groups explore win-win solutions together.
- 5 **Increased Trust and Cohesion:** MHD builds trust and strengthens relationships among group members. When individuals feel heard, understood, and respected, it creates a sense of psychological safety within the group. This, in turn, fosters cohesion, collaboration, and a willingness to support and cooperate with one another.
- 6 **Innovation and Creativity:** By encouraging the expression of diverse ideas and perspectives, MHD promotes innovation and creativity within groups. When individuals feel comfortable sharing their thoughts and emotions, it opens opportunities for unique insights and out-of-the-box thinking. Combining analytical thinking with emotional intelligence can lead to innovative solutions and approaches.
- 7 **Personal Growth and Development:** MHD provides individuals with an opportunity for self-reflection, self-expression, and personal growth. It helps individuals develop self-awareness, and better communication skills. Through active participation in group dialogue, individuals can expand their perspectives, challenge their assumptions, and learn from others.



Mind-Heart dialogue as a Change Model

A Change Model is a framework that illustrates the process of how a particular intervention can create a desired change. An appropriate change model that engages the **Mind**, listens to the **Heart**, and has the conviction and hope of **Faith** is necessary to respond to important issues concerning children, families, and communities.

The aptly-named Mind-Heart dialogue (MHD) was thus designed as a change model to honour, incorporate and harness these essential elements of life and belief for powerful transformation and change. It is grounded in theoretical principles and incorporates a problem-solving and action-oriented approach, such as Gerard Egan's "The Skilled Helper"¹⁶. The Mind-Heart dialogue can be best understood as a three-stage change model designed to identify the issues, create alternatives, and formalise an action plan.

¹⁴CRC; CEDAW. *Joint General Recommendation no. 31/General Comment no. 18 on harmful practices* (adopted 14/11/14). CEDAW/C/GC/31-CRC/C/GC/18.

¹⁵UN Committee on Economic, Social and Cultural Rights (CESCR). *General comment no. 21, Right of everyone to take part in cultural life* (adopted 21 Dec) E/C.12/GC/21.

¹⁶ Gerard Egan, *The Skilled Helper* (Brooks/Cole, 1998). More information on Egan's Skilled Helper model can be found in Appendix 9.



STAGE 1
Problem Exploration
and Clarification



STAGE 2
Developing New
Perspectives



STAGE 3
Setting Goals and Translating
Commitments into Action

The change process can be observed as we move from one stage to the next. It is important to note, however, that these stages are not necessarily linear, and individuals and groups may move back and forth between them as they navigate the change process. MHD Facilitators should use appropriate questions and activities at each stage to help participants explore their thoughts, beliefs, emotions, and actions related to the change. This mindful facilitation will support the participants along their journey while helping to enable their transformation.

More information on Egan's Skilled Helper model can be found in Appendix 9.



STAGE 1

Problem Exploration and Clarification

The focus of this initial stage is on clarifying the problems or challenges at hand and gaining a deeper understanding of their impact on individuals, families, and communities. During this stage, the MHD Facilitator creates a safe and trusting space for dialogue, and guides participants through activities of self-reflection and expression. Group discussions, sharing of perspectives, and active listening are encouraged during this stage in order to create open and constructive dialogue, which is essential for problem clarification. This process enables participants to acknowledge and accept their present reality, recognise and clarify the problem they are seeking to address, and better understand how their personal situation or experience might influence their perspective on the identified problem. This stage also seeks to identify any overlooked issues and challenge any preconceived biases.

At the end of this stage, the core problem will be clarified and agreed upon, and participants will have expressed themselves, heard from others, and begun to consider that there may be different ways of looking at things. From this basis of renewed clarity and understanding, we are now ready to move on to Stage 2.



STAGE 2

Developing New Perspectives

The focus of the second stage is on exploring alternative perspectives and behaviours. During this stage, the MHD Facilitator will create a safe space that promotes interaction and collaboration, and lead participants through activities designed to help challenge old ways of thinking and critically evaluate new possibilities. Debates, exchange of ideas and discussions encouraging open, honest conversations that promote tolerance and understanding while sharing diverse perspectives are encouraged during this phase. Participants should be motivated to draw from the wells of their faith. Gradually, participants will form a new picture of their desired outcome and generate new ideas to address the identified problem. Through this process, participants begin to think about and set meaningful goals aligned with this preferred outcome or solution.

At the end of this stage, participants will have envisioned a different future and made a commitment to take action towards achieving it. From this strengthened position of hope and intention, we are now ready to move on to Stage 3.



STAGE 3

Setting Goals and Translating Commitments into Action

In the third and final stage, participants work together to determine concrete actions to address the identified problem. During this stage, the MHD Facilitator leads participants through participatory activities designed to help them make collective decisions and collaboratively develop action plans which consider the specific steps required to bring about the desired change. Ongoing dialogue, effective communication and collaboration are crucial in translating goals into actions, and should be modelled and embraced during this stage, as well as moving forward, to ensure that commitments are shared and implemented.

At the end of Stage 3, participants are prepared mentally, emotionally and spiritually to implement their plans, actively engaging in the actions they have designed and committed to.



What changes will Mind-Heart dialogue help bring?

Mind-Heart dialogue (MHD) will contribute to lasting change for children, whether in their education, health, participation, spirituality and ethics, protection or in creating a safer environment for them to thrive. These outcomes are brought about and sustained through attitudinal and behavioural change at different levels: from personal, faith group or organisational change; to faith groups working with communities; and interfaith and other partnerships. This is an iterative process that could begin at any level and ripple through others.

The following are some of the specific results that can be expected from engaging in MHD:



- Breaks negative mindsets of dependency, judgement and fear that form significant barriers to change,
- Supports faith groups and organisations to create a safe space to discuss sensitive issues,
- Includes and responds to the voices of those often left out,
- Promotes better identification and use of local resources, opportunities, and skills,
- Motivates groups to fulfil their faith mandate and mission to protect and empower the vulnerable,
- Brings to the surface both positive and harmful beliefs that influence behaviour,
- Strengthens and adopts good practices and stops harmful ones,
- Uses local services and resources more effectively,
- Enables children, adolescents and young people to grow in confidence to speak and act,
- Creates a shared basis for jointly identifying and better understanding common problems,
- Provides a process for agreeing on multifaith and faith-secular collaborative action in partnership with others,
- Contributes to processes that bring change in policies, institutions and systems.

Session by Master Trainer Yash-RFP with children in Dehli, 2024

What are essential qualities of a Mind-Heart dialogue facilitator?

An effective Mind-Heart dialogue (MHD) facilitator demonstrates these core qualities:

SKILLS AND KNOWLEDGE

Facilitators should acquire a range of skills and knowledge to effectively facilitate MHD. These may include:

- **Effective Communication:** Facilitators should possess excellent communication skills, enabling them to convey ideas clearly, ask insightful questions, and encourage meaningful conversations within the group. This includes both verbal and non-verbal communication techniques.
- **Emotional Intelligence:** Understanding and managing emotions, both their own and those of the participants, is crucial. Facilitators need to recognise and address emotional dynamics within the group, ensuring a supportive environment that fosters trust and respect. A solid understanding of human behaviour and the factors that influence change can greatly enhance a facilitator's ability to guide individuals through the MHD. This knowledge helps them appreciate the complexity of human experiences and supports their decision-making throughout the process.
- **Conflict Resolution:** Facilitators should be adept at managing conflicts that may arise during the dialogue process. They should possess skills in identifying underlying issues, promoting understanding, and facilitating constructive resolutions.

ATTITUDE OF SERVICE

A facilitator's attitude plays a vital role in establishing a positive and supportive environment for MHD. They should approach their role with empathy, compassion, and a genuine desire to assist participants in their personal growth and transformation. A non-judgmental attitude, respect for diversity, and the ability to create a safe space for vulnerability are essential qualities for an effective facilitator.

SELF-AWARENESS

The facilitators must appreciate their emotional state as they facilitate. They should also recognise their own strengths and limitations in understanding the scientific and technical information. It is highly recommended that inputs of technical experts be sought where needed.

ESTABLISHING SUPPORTIVE RELATIONSHIPS

The relationship between the facilitator of the MHD and the participants during MHD activities should be directed towards helping the participants to make their own decisions given the pertinent issues that affect children in their own areas. It should be professional and ethical.

Some ways to gain familiarity or experience with Mind-Heart dialogue approaches include:

- 1 Participation in FPCC Facilitators' Guide-based orientation videos, virtual orientation, or in-person training (as available),
- 2 In-person training in other, ideally faith-based participatory approaches¹⁷ (although training in secular participatory approaches can also be helpful)
- 3 Online training in other Mind-Heart approaches.¹⁸

¹⁷ Such as the following: <https://www.wvi.org/faith-and-development/channels-hope>; <https://learn.tearfund.org/en/how-we-work/what-we-do/church-and-community>; <https://tctprogram.org/> ; <https://www.participatorymethods.org/>

¹⁸Such as: <https://coramdeo.com/>, which is based on a Christian perspective but may be relevant for others.

SECTION 2

Spaces for Mind-Heart Dialogue

Mind-Heart dialogue (MHD) is a reflective and experiential learning process that provides a purposeful way to approach faith engagement to catalyse meaningful social and behavioural change. It pierces beneath the surface to expose genuine doubts, tensions and motivations. It also equips facilitators to respond effectively to gaps or issues that faith groups need to address within a safe and shared space of influence.

Behaviour change is a journey that takes place over time. The first part of this chapter sets out ideas of existing spaces in which faith communities can integrate MHD. These spaces might be meetings, conferences, trainings, gatherings, networks, youth groups etc.

The second part provides example structures for MHD sessions of different lengths. Facilitators can fill in the relevant structure with activities from Chapter 3 appropriate for their context (or draw on others they know).

Factors that affect the facilitation of activities using the MHD approach:

GENDER

The experiences and views of life of boys and girls, men and women often differ.; Each perspective is very rich and needs to be valued. It is important in MHD these dialogues to allow participants to examine their reality in groups that allow free expression of all members. Many people using the process with mixed groups have found it helpful to have dialogues for boys and girls, men and women dialogues separately at first, with participants; they then come together to share the insights gained. The ability to dialogue on sensitive subjects in mixed gender groups will vary with age, culture and location.

AGE

The process can be used with groups of people of all ages. It is essential that the dialogue design considers both the age and the level of existing knowledge and skills of the participants. Each programme needs to be tailor-made for the group, bearing in mind that there is no one right way to engage in the process. Different age groups may require different levels of information and sensitivity, especially about sexuality, faith, culture and traditional beliefs etc.

CULTURE

When preparing a dialogue for groups composed of different people from different cultures, or people whose culture differs from that of the facilitators, it is essential that possible cultural implications be kept in mind. This is especially, but not exclusively, true in relation to values and traditions related to children, gender, sexuality and culture.

TIME AVAILABLE

The process and its underlying philosophy can be used in any setting, regardless of the time available. It has been successfully used in sessions of a few hours, one day, a few days and one week. It has also been used for regular short (one to two hours) sessions held on a weekly basis. Experience has shown that the key is to make the best use of the time available. Short sessions need to be limited to fewer issues in order to reach the end of the process in the time available. These issues should be the ones most relevant to the group. The goal is always to plan concrete action.



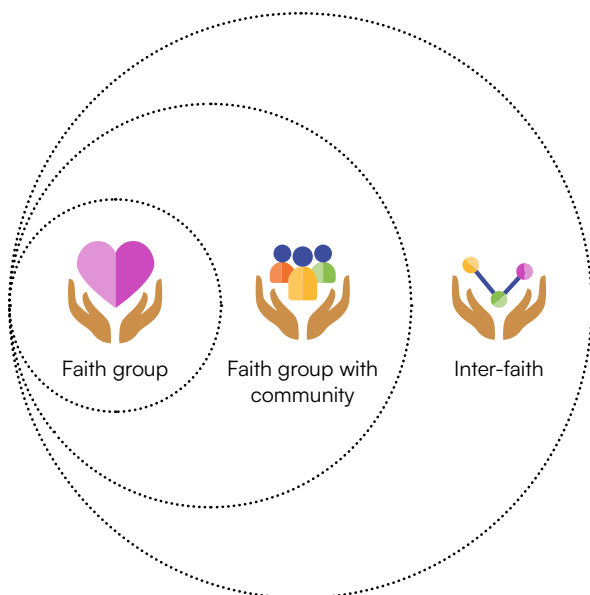
Mind-Heart dialogue session in Pakistan, 2022

AVAILABILITY OF ONGOING INDIVIDUAL HELP

There is a need for the facilitators to be alert to the fact that sensitive issues may be looked at, some of which may result in distress for participants. The facilitator needs to watch for signs of adverse reactions and know how to assist the person in the moment (for example, by offering a break) or where to refer the person for professional help.

NUMBER OF PARTICIPANTS

The model has been designed for use with groups of various sizes. There is no rigid number of participants. A very small group may lack enthusiasm and limit the activities that can be used; too large a group may result in loss of control of the group dynamics and poor participation levels. At times, it may be beneficial to split up a large group into several smaller groups, provided there are sufficient facilitators and adequate space for activities.



What spaces and opportunities exist for Mind-Heart dialogue?

To be most effective, Mind-Heart dialogue (MHD) should be championed within faith groups; between faith groups and communities; and across faith groups — as well as within organisations and other structures. Individually and collectively, all people have underlying beliefs that help or hinder long-term change for children, their families and communities. Effective collaboration cannot occur without internal change in all the actors involved.



FAITH GROUP

Each faith group has its own scriptures, traditions or other opportunities for integrating MHD into existing practices. Each group also has its own structure, with different roles and power relationships, and this will need to be taken into consideration carefully when creating open, safe spaces for dialogue and empowering different parts of the membership to take action. Below are examples of such spaces:

Space	Time	Option for MHD
Congregational gatherings	Varied	A section within the regular meeting, e.g. <ul style="list-style-type: none"> to mobilise response to violence against children and women to encourage appropriate actions to address a public health emergency
Congregational events/ festivals e.g. Ramadhan, Easter, Diwali, weddings, funerals	Varied	A section within the event, e.g. <ul style="list-style-type: none"> to engage people in initiatives working with vulnerable groups to promote hygiene and sanitation related practices in the context of a cholera outbreak to explore the vision of the group for a specific issue
Group gatherings e.g. of children, youth, women, mem	1.5 - 2 hours	A series of meetings to engage people around a specific issue, to plan group activities or to explore the group's mission, e.g. <ul style="list-style-type: none"> to address child marriage to develop a vision and action plan for the year
Full-day meeting e.g. AGM, annual review, strategic planning days	2 hours - 3 days	A section of the day to focus on a specific topic or the full day designed through a MHD approach, e.g. <ul style="list-style-type: none"> to mobilise a collective response to protect children to prioritise goals for the year

Space	Time	Option for MHD
<p>Conference/retreat</p> <p><i>e.g. congregational, leaders across congregations</i></p>	<p>1/2 - 1 day or 3 - 5 days</p>	<p>A 1/2 day to full day section to focus on a specific topic or the full conference designed through MHD approach e.g.</p> <ul style="list-style-type: none"> to explore the scriptural mandate for social justice to create a collective vision for the future
<p>Courses</p>	<p>Any length</p>	<p>Sections within the course to go deeper or the full course designed through a MHD approach, e.g.</p> <ul style="list-style-type: none"> marriage preparation/parenting preparing for rites of passage respecting children's rights (e.g. promoting alternative rites to female genital mutilation)



FAITH GROUPS' WORK WITH LOCAL COMMUNITY ACTORS

Faith groups already work in many different spaces in their local communities. Using existing structures and groups, and involving a wide variety of local stakeholders in the MHD (such as other faith and traditional leaders, development partners, local government officials, vulnerable groups and civil society networks) strengthens impact. It helps avoid divisions and ensure that the MHD and resulting action address the wider issues that affect child well-being.

Space	Time	Option for MHD
<p>Support group</p> <p><i>e.g. HIV/AIDS, children living on the street, children with disability</i></p>	<p>Regular 1.5 - 2 hours</p>	<p>A series of sessions for vulnerable people around a specific issue, to plan group activities or to explore the group's mission e.g.</p> <ul style="list-style-type: none"> to plan collective advocacy for change to recognise and use existing skills and resources
<p>Trainings</p>	<p>Any length</p>	<p>Community trainings on a specific topic, e.g.</p> <ul style="list-style-type: none"> parenting / gender equality

Space	Time	Option for MHD
Community gatherings	2 hours - 1 day	Community dialogues, meetings, awareness raising events,/ focus group discussions on any related topic, e.g. <ul style="list-style-type: none"> • <i>public health emergencies response</i> • <i>promoting demand for specific vaccines or routine immunisation in under-served communities</i> • <i>child marriage</i>
Community radio or other media	30 mins - 1 hour	One-off programme or series of programmes on a specific topic



MULTIFAITH AND WIDER PARTNERSHIP SPACES

Collaborative spaces beyond one specific faith group may be interfaith, multifaith and/or involve partnerships with FBOs, government, UNICEF, or others. Even within countries where one faith is predominant, it is important to ensure that sub-groups, less established denominations and traditional groups are included. Working with existing multifaith bodies to identify spaces to incorporate MHD will help to bring transformation on a larger scale.

These spaces could include:

- 1 Multifaith coordination mechanisms integrating MHD into meetings, conferences and other events
- 2 Training of trainers, e.g. equipping a multifaith facilitation team with skills in MHD
- 3 Sectoral planning meetings where MHD is used to focus a section on a specific topic - or go deeper, with the entire meeting taking a MHD approach

It is also possible to create a specific space or gathering if an appropriate one does not currently exist. For example, one could an interfaith conference on child marriage and child protection.



Power Walk Activity, MHD Facilitator Training in North East India - Assam, India March 2024

How can Mind-Heart dialogue be integrated into existing spaces?

Mind-Heart dialogue (MHD) is an adaptable methodology with a variety of activities that can fit into the time and space available.

Integrating one activity

Even if there is only time to integrate one Mind-Heart activity into an existing meeting or gathering, it can transform the atmosphere by engaging people more deeply in new ways of thinking. Most of the activities work alone, although they tend to be more effective as part of a process. It is about selecting the most appropriate one for any given situation.

1–2-hour session

The outline below is based on a two-hour session. If there is only one hour, it would be advisable to keep 45 minutes for the main activity, with a brief framing at the beginning and action-planning at the end. A series of sessions over time is most effective, but a one-off dialogue can still surface attitudes and beliefs to bring change.



NB: the numbered activities correspond to the list of MHD activities presented in Chapter 3.

Timing	Process / content
Pre-session	1. Journey of childhood or 3. Scripture Reflection
15 mins	Icebreaker: fun time to connect
10 mins	Scene-setting: introduction to MHD, session aims and agreeing how to create a safe space for everyone to contribute
20 mins	Connecting / community-building activity — small group MHD activity and feedback. Examples: 3. Scripture Reflection or 5. Personal Testimony
50 mins	Main MHD activity Examples: 13. Power Walk or 21. Stories of Change 1
20 mins	Action planning: 26. Bicycle Planning ; and facilitating with others
5 mins	Closing reflection and 25. Individual Commitments to action
Post-session	Implementing action plan; further listening

1-day session

This outline captures the key elements that a one-day MHD session might include. It could focus on a specific issue, such as child marriage, sharing learning and identifying actions that can be done together. This structure could also work well for a planning or review session.

Timing	Process / content
Pre-session	1. Journey of Childhood if session is one-off or 3. Scripture Reflection <i>Ask everyone to come with a story of positive change linked to the issue</i>
15 mins	Icebreaker: fun time to connect
20 mins	Scene-setting: introduction to MHD; session aims; hopes and fears; and agreeing how to create a safe space for everyone to contribute
1 hour	MHD activity to explore vision/calling/why the topic is important (corresponding to Stage 1 in the Change Model) Examples: 3. Scripture Reflection or 7. Listening to Children <i>In a review or planning day, it is vital to reconnect to the overall vision/ aims</i>
10 mins	Explain 'Significant Stories of Change' and groups for after the break
20 mins	BREAK
40 mins	21. Significant Stories of Change in groups — outcomes for children <i>In a review day, this should be related to activities during the year; if part of a planning day, just effective stories of change</i>
1 hour	22. Significant Stories of Change in plenary - our contribution to lasting change
1 hour	LUNCH
1 hour	Main participatory activity to go deeper/identify gaps (corresponding to Stage 2 of the Change Model) Examples: 13. Power Walk <i>If a review day, select a MHD activity to reflect on hindrances/ challenges. Examples: 10. Bean Ranking from Stories; 26. Bicycle Planning; or mapping influences with 18. Flipchart Activity</i>
20 mins	23. Case Studies — Reflecting on Good Practice
1 hour	Responding in Action (corresponding to Stage 3 of the Change model) Examples: 25. Individual Commitments ; 26. Bicycle Planning ; 27. Interfaith Planning
10 mins	Closing reflection and sharing commitments to action
Post-session activity	Implementing action plan; further listening



Preparations for Simulation Session, Regional Training of Trainers in South Asia - Kathmandu, Nepal. Nov 2023

How can Mind-Heart dialogue be embedded in programming?

Mind-Heart dialogue (MHD) for faith engagement can be embedded into social and behaviour change programming through a Journey of Change (traditionally known as Theory of Change).

The FPCC Journey of Change

A Journey of Change is a tool or framework that assists in programme planning, implementation, monitoring and evaluation by providing a structured approach to achieving desired outcomes. Through clearly defining the pathways, assumptions, and logical connections, a Journey of Change helps organisations and stakeholders to make informed decisions and track progress toward their goals. The Journey of Change framework developed for the FPCC Initiative can be seen in [Appendix 1](#) of this guide and in the FPCC Global Programme Guidance for Faith Engagement¹⁹ on pages 19-20.

Its essential elements are the following:

FRAMEWORK PURPOSE

The FPCC Journey of Change serves as a roadmap for guiding actions within FPCC initiatives. It helps in understanding how specific actions are linked to achieving particular outcomes.

LONG-TERM GOALS

The framework begins by identifying the desired long-term goals or outcomes that FPCC initiatives aim to achieve. These could be related to specific areas or objectives within the initiatives, and particularly for children, families and communities.

CAUSAL PATHWAYS

The Journey of Change maps out the causal pathways, which means it outlines the sequence of events, or steps, required to move from the current state to the desired outcomes. This involves identifying how different activities are connected and how they contribute to the overall goal.

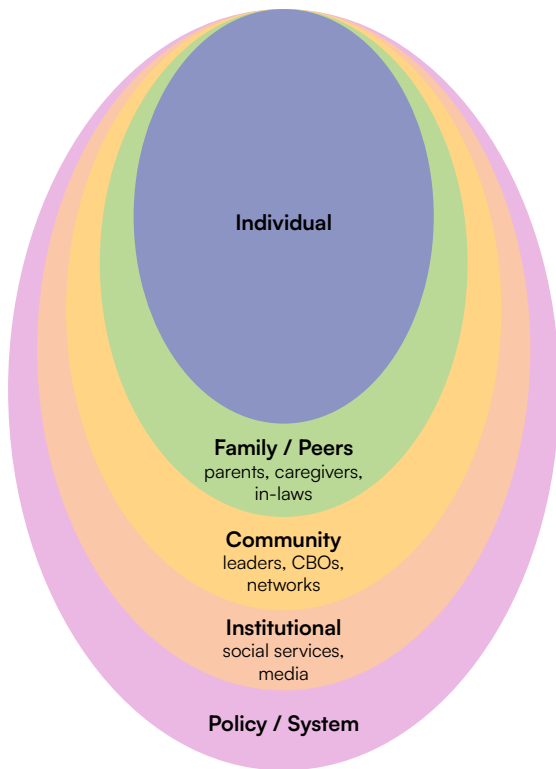
NECESSARY CONDITIONS

The Journey of Change highlights the underlying assumptions and conditions that need to be in place for change to occur successfully. These conditions can include resources, stakeholders' cooperation, policy changes, and more.

LOGIC OF CONNECTIONS

The framework emphasises the logical connections between various components of the programme or interventions, including activities, outputs, outcomes, and impacts. This helps stakeholders understand how each step contributes to the overall goal

¹⁹ <https://www.faith4positivechange.org/mind-amp-heart-dialogue-resource-guide>



The FPCC Journey of Change also helps identify the different levels of faith influence for social and behaviour change, as seen in the illustration below.

Long-term change is most likely when faith actors and partners seek to influence change at all levels, including the individual, family, community, institutional and policy level. Change begins within individuals. MHD can help break mind-sets of dependency, judgement and fear that often form barriers to change, surfacing both positive and harmful beliefs that influence behaviour. Evidence shows that attitudes of individuals are difficult to change without also influencing their peers and families. Similarly, change at family level is unlikely if the desired behaviours are not supported by social norms at the community level. Communities are usually influenced by the practices and expectations of institutions, which are governed by policies and the wider system.

Transformation Tree

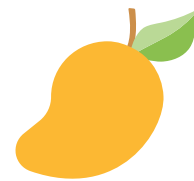
One way of looking at a journey of change process can be to see it as a symbolic Transformation Tree. A Transformation Tree shows the different parts of the process that enable faith actors to effectively support lasting change for children.



The trunk represents the **foundational approach**: mobilising faith groups and communities to embed MHD in daily work and lives.



The roots are the **qualities** of our relationships — how people act as faith groups and partners.



Unless the roots are strong, they will struggle to bring about the **final results for children** — depicted as mangoes.

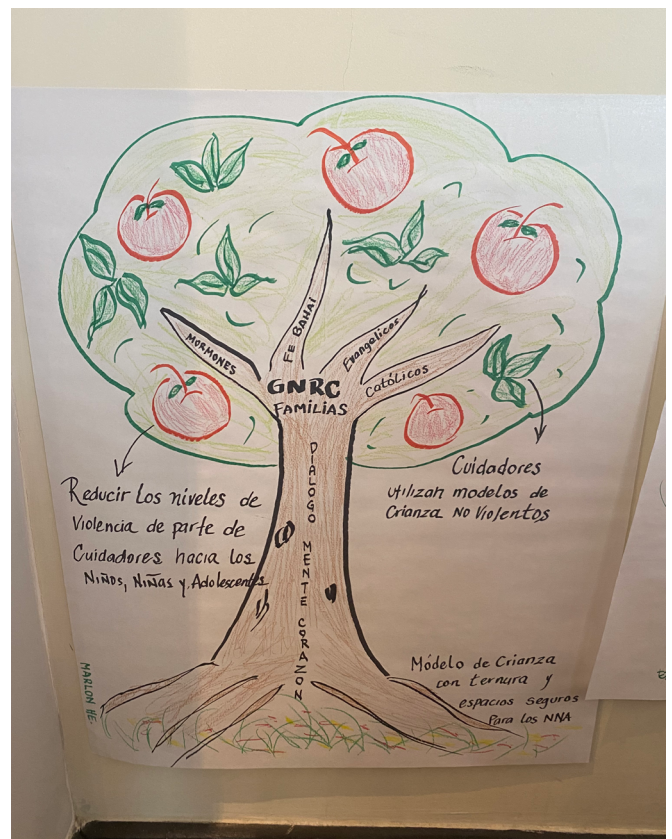
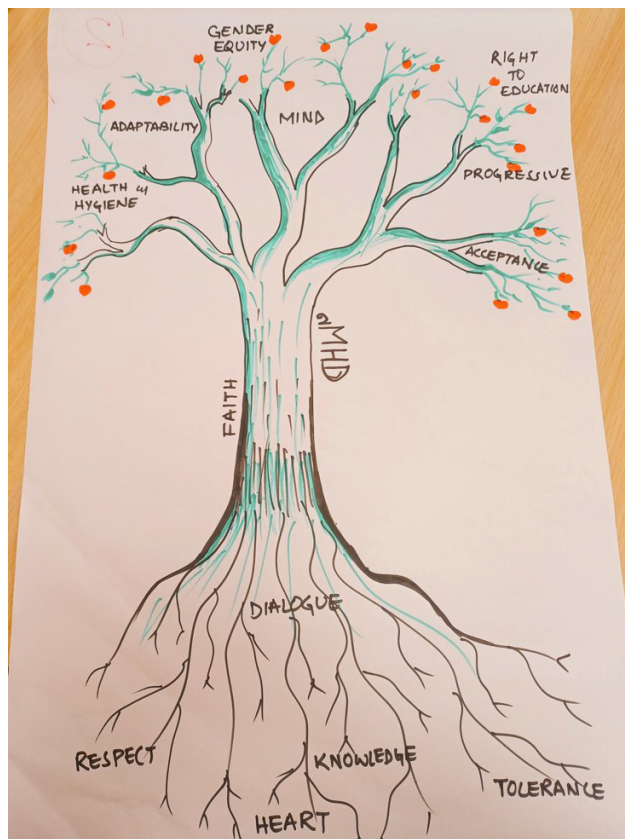
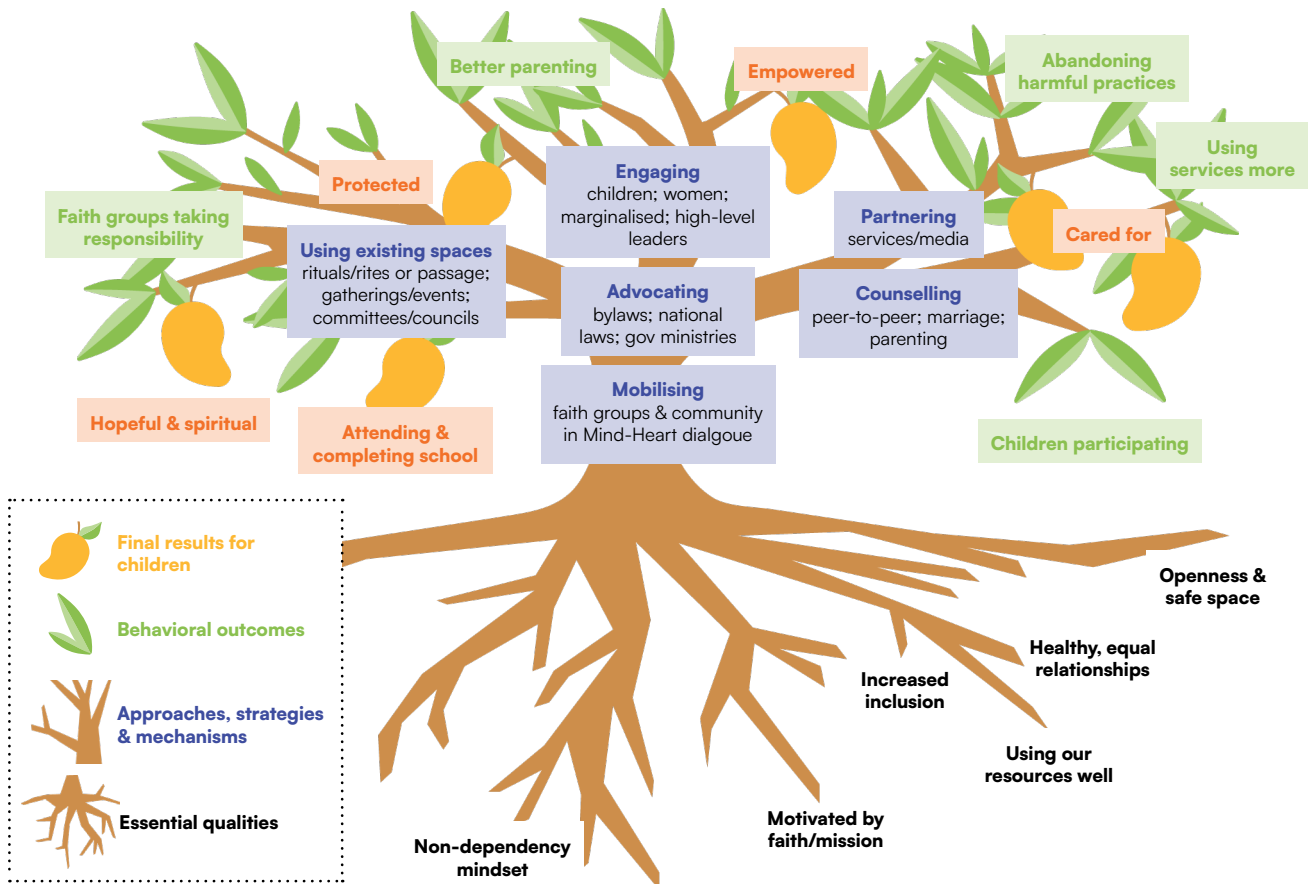


The branches are the **strategies and mechanisms that bring change**.



The leaves are the **changes in attitudes and behaviour**, required before the Tree bears fruit.

Sustainable change comes when an initiative covers all the elements of the Transformation Tree. This is an illustration of the Transformation Tree developed through the FPCC initiative:



Examples of transformation trees made by participants of Mind-Heart dialogue trainings

Elements of the Transformation Tree



FRUIT

Faith groups agree on the desired fruits (or outcomes) for children, families and communities (for example that children are protected from violence). To ensure complex issues are addressed in-depth, a specific fruit can become the focus (for example, reduced sexual violence or violent discipline).



LEAVES

Changes in attitudes, behaviour and practices of children, parents and communities must be achieved before the tree will be able to bear the desired fruit (outcome). MHD will help faith communities to identify context-specific barriers and opportunities related to their priority fruit, so that they know what strategies to use to influence change. Listening to children, families and communities through MHD before attempting change is critical. For example if the desired fruit is 'girls attending and completing primary or secondary school', some of the leaves could be:

- girls are motivated and interested to learn (individual level)
- parents value girls equally to boys and reduce their domestic chores (family level)
- communities stop expecting girls to be married early (community level)
- teachers treat girls equally to boys (institutional level)
- government enforces policies making child marriage illegal or allowing pregnant girls to continue to study (policy level)



BRANCHES

Faith voices and joint actions to influence social and behaviour change can be particularly powerful and wide-scale when they take place across the many spaces, platforms and mechanisms that faith networks provide. See Appendix 2 for further details and examples.

TRUNK

The trunk symbolises the foundational MHD approach for mobilising faith groups and communities - the overall approach explained in this Guide.



ROOTS

For change to be sustained, essential qualities must be embodied by each of the actors partnering to bring it about. In a healthy process, these qualities will grow and develop through its stages, as roots grow with a tree.

Situating MHD in the framework of a Journey of Change or Transformation Tree helps to illustrate how to move from the drivers of behaviours that harm children to lasting, positive change. The process is iterative, addressing different influences and combining effective approaches to achieve the desired impact. MHD is both the foundational approach within the Journey of Change or Transformation Tree and the process to develop it.

Faith groups working towards change can create their own Transformation Tree or Journey of Change, or adapt those developed through FPCC.

Applying the FPCC Journey of Change or Transformation Tree

In a **one-day planning meeting**, actors may choose to apply this Journey of Change or Transformation Tree (whichever they find more helpful) to the issue they are tackling. If more time is available, they can develop their own Journey, as explained as in the 3–5-day example below.

Timing	Process / content
Pre-session	1. Journey of Childhood with children
15 mins	Icebreaker: fun time to connect
20 mins	Scene-setting: introduction to MHD; session aims; hopes and fears; agreeing how to create a safe space for everyone to contribute
30 mins	MHD activity to explore the importance of children's participation Example: 14. Secret in a Box
30 mins	Listening to children: feedback from pre-session 7. Listening Activity
10 mins	Introduce FPCC Journey of Change / Transformation Tree (see previous pages in this section)
20 mins	BREAK — time to review the Journey of Change / Transformation Tree
20 mins	Reflection on Journey of Change / Transformation Tree
1 hour	Drawing out drivers of the focus issue Example: 11. Participatory Drama
40 mins	Group 10. Bean Ranking most significant drivers and identifying behavioural outcomes
1 hour	LUNCH
1 hour	24. Adapting the Journey of Change / Transformation Tree
20 mins	23. Case Studies — Reflecting on Good Practice
1 hour	Responding in Action Examples: 25. Individual Commitments ; 26. Bicycle Planning ; 27. Interfaith Planning
10 mins	Closing reflection and sharing commitments to action
Post-session activity	Implementing action plan; further listening














Creating your own Journey of Change or Transformation Tree

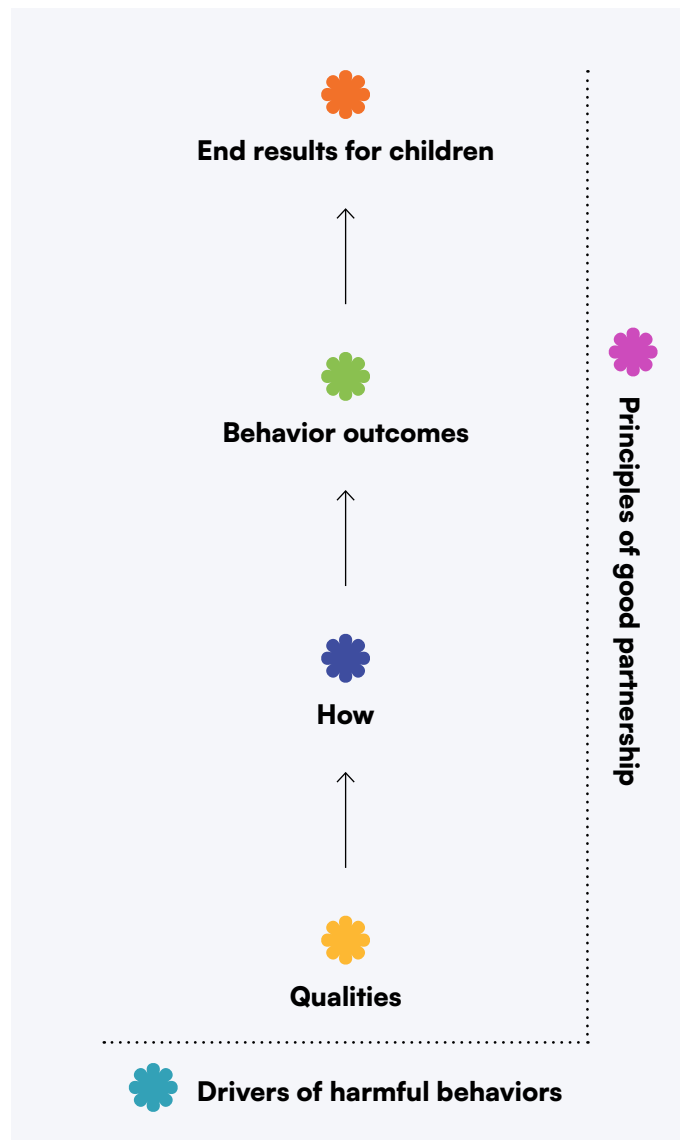
A 3–5-day planning meeting creates space to analyse an issue in depth and respond effectively by developing a Transformation Tree or Journey of Change. Whether that issue is positive change for children generally, or something specific like child marriage, these provide a structured way to identify how you move from the causes of the problem to the behavioural outcomes and finally to the tangible results in children’s lives.

As you go through the training, you create your own Transformation Tree or Journey of Change on the wall, beginning with these headings (in the visual on the right below) and then adding participants’ learning under each heading as you go through the MHD activities.

The outline below is just an example of a three-day training - the activities can be switched around with others in Chapter 3. This example is based on three full days. However, you can spread the three days over five, with a half day, two full days, and another half. This enables the reflection and discussions to stretch over a longer period, allowing it to go even deeper.

This diagram shows how the different activities join together to build the Journey of Change. Activities (in the visual on the right) are colour-coded to show how they explore the content for each heading in the chart (in the box on the left):

	Connecting Faith and Childhood
	Power Walk
	Listening Well
	Mapping Childhood Journey
	Listening to Children
	Significant Stories of Change 1
	Behavioural outcomes and end results for children
	Significant Stories of Change 2
	How we contribute most effectively to lasting and positive change
	Secret in a Box
	Case study learning
	How (including qualities)
	Flipchart Activity
	Influences on children’s lives
	Child Protectors Balloon Game
	A new way of working together
	Changing Hats



Time	Day 1	Day 2	Day 3
Introduction 20 mins	Scene-setting <ul style="list-style-type: none"> • Training outcomes • MHD introduction • Hopes and fears 	Welcome <ul style="list-style-type: none"> • Introduction and recap • Ice-breaker 	Welcome <ul style="list-style-type: none"> • Introduction and recap • Ice-breaker
Session 1 1 hour 40 mins	Faith and Childhood <ul style="list-style-type: none"> • 2. Connecting Faith and Childhood • 3. Scripture Reflection • 4. Faith Object Reflection 	Option 1: Mapping Childhood <ul style="list-style-type: none"> • 6. Mapping Childhood Journey • 7. Listening to Children Option 2: Drivers of behaviour <ul style="list-style-type: none"> • 11. Participatory Drama • 10. Prioritising Drivers and Causes 	Journey of Change Reflection <ul style="list-style-type: none"> • Paired reflection • Plenary feedback • Individual reflection
BREAK 20 mins			
Session 2 1 hour 40 mins	Significant Stories of Change <ul style="list-style-type: none"> • 12. Listening Well • 21. Stories of Change, shared in groups: behavioural outcomes and results for children 	Perpetuating Violence <ul style="list-style-type: none"> • 13. Power Walk • 8. Perpetuating Cycles of Violence: Group discussion 	Personal Commitments <ul style="list-style-type: none"> • 9. Child Protectors Balloon Game • 5. Personal Testimony • 25. Individual Commitment
LUNCH 1 hour			
Session 3 1 hour 40 mins	Significant Stories of Change 2 <ul style="list-style-type: none"> • 22. Plenary Stories: how we contribute effectively to lasting change 	Living out Partnership <ul style="list-style-type: none"> • 20. Changing Hats: Group exploration of partner roles • 10. Bean-Ranking Partnership principles 	Action Planning <ul style="list-style-type: none"> • 26. Bicycle Planning: Faith Group or Organisation
BREAK 20 mins			
Session 4 1 hour	Significant Stories of Change 3 <ul style="list-style-type: none"> • 18. Flipchart Activity: Influences • 16. String Game • Mood Meter 	Case Study Analysis <ul style="list-style-type: none"> • 23. Case Studies: Buzz group learning • Plenary feedback of top points • Temperature Check 	Action Planning 2 <ul style="list-style-type: none"> • 27. Interfaith Planning • Wrap-up • Evaluation
Evening Activity Reading and highlighting three approaches from case studies			

How can Mind-Heart dialogue activities be adapted to virtual spaces?

While MHD works best in person, it is still possible to engage people deeply at the levels of mind, heart and faith in a virtual environment. With care, planning and deliberation, you can facilitate transformative experiences that cascade outwards. Where an in-person meeting is not possible, virtual connection becomes even more important — whether due to safety, or just the realities of distance and budget. Below are tips from this experience, including a suggested session structure that can be adapted for any topic. Many of the activities in Chapter 3 include ideas for facilitating them in a virtual space.

WHEN PREPARING:

- 1 Choose platform carefully: Zoom offers a reasonably easy, flexible space with interactive options to involve people (see tools below),
- 2 Spread short sessions over time: People often struggle to engage effectively for a long time online. Ideally, keep sessions to two hours. Depending on the context, it may be advisable to provide a short break, although breaks can be disruptive and participants may be slow to re-join.,
- 3 Compile a document with all the activity questions and links for the session, so they can easily be posted in the chat box
- 4 Understand the timing and time zones. The day and time should be convenient for participants and facilitators, considering they may not always have their phones on full charge with sufficient data,
- 5 Develop a small facilitation team, depending on the size of the group and the activities that will be run. They need to take account of the following roles (which can be combined as needed):
 - two facilitators so tasks and roles can be divided as needed: for example, when feeding back in plenary, someone can facilitate the discussion, while someone else documents,
 - a host, who has legitimacy and trust with participants, to convene the meeting,
 - a person comfortable with technology to organise break-out rooms and other activities,
 - brief someone on their role as a “resource person” and how to integrate technical information (see below),
 - set up a separate WhatsApp group for live feedback and quick decisions during the session.
- 6 Identify people to share testimonies and stories beforehand, so there will be examples that provide a model for others to come in and contribute,
- 7 Allow participants who can physically meet in the same space to join using one device if possible, to enable sharing costs for data,
- 8 Maximise the first part of the meeting as participants may drop out later with depleted charge on devices or data bundles or dwindling attention.

WHEN FACILITATING

- 1 **Integrate technical knowledge carefully:** Experts with specific technical knowledge can be helpful in the session (e.g. UNICEF staff, medical experts). However, it is important to recognise all participants as experts in their own right who bring knowledge and experience to the meeting. External experts should support and not pre-empt participants' contributions. They can highlight where faith leaders' experiences align well with wider learning; feed in additional good practice; and respond tactfully to misinformation. The chat box is an ideal place to post resources and integrate technical information. Ideally, facilitators and experts can meet beforehand to plan how to integrate technical aspects with faith and heart-focused elements of the approach.

- 2 **Repeatedly explain virtual tools:** Give repeated instructions during the session for finding the chat and annotate tools. Ice-breakers can help people practise using the virtual tools needed in the session. Keep introductions informal: Going round introducing everyone takes too long in large groups, so invite people to greet each other when they join. Change their name on their Zoom label to show their first name and one other piece of information (eg. country). Acknowledge their role outside the session but emphasise the importance of creating a safe space as equals. Ask late-comers to introduce themselves in the chat.
- 3 **Begin with small group MHD:** a MHD activity in groups of two or three before the formal introduction gives participants time to join, gets people talking, and helps create connection. Define MHD clearly and explicitly in every session, with a focus on explaining why adopting this approach is important.
- 4 **Maximise interaction:** if there is information on the screen (e.g. session guidelines or good practice examples), ensure to ask participants to either annotate the screen or comment in the chat to ensure engagement.
- 5 **Engage people through the chat box:** People often feel more comfortable writing in the chat box than speaking aloud. Facilitators can comment on or read out comments to draw others in.
- 6 **Keep verbal contributions short:** Agree guidelines for facilitators and participants to ensure short times to speak and choose a way to hold people accountable, e.g. using a buzzer.
- 7 **Focus on one or two questions for group work:** people lose track easily.
- 8 Be ready to call on women, younger people, or any others, by name if they are quiet, to make sure that there is **full participation**, as all voices are equally important.
- 9 **Gather feedback on the session:** Use a simple Google form (see Appendix 3 for an example). Asking people to fill it in before the end of the session ensures they can access it and remember to respond.
- 10 Be ready to **follow up** with individuals and groups to encourage action.

Some useful tools

TOOL 1: Create a word cloud as an ice-breaker or as a check-in



Example:

How are you feeling now? Choose three words or short phrases. Click on the link in the chat, then write those words or phrases and press 'submit'.

1. Go to [mentimeter.com](https://www.mentimeter.com) and create a username and password.
2. Go to 'your presentations', click '+ create new presentation', name it and click 'create'.
3. On the right you need to choose a slide type. Click on 'word cloud'.
4. Now there is a word cloud slide, on the right, type question under 'your question'.
5. Under 'entries per participant' put how many words each participant should add. Make sure the bottom box that says 'let participants submit multiple times' is unchecked.
6. A preview of what it will look like can be created by clicking 'present' on the upper right. This is also the button to will push to be able to show the results as they appear to the group.
7. Click 'share' on the upper right: a pop-up window that shows the direct link will appear. This can be copied and pasted into the chat box, before going back to 'present' mode, waiting for participants to start entering words to populate the word cloud.
8. Once everyone has entered their words, the screen can be shared to show them the results.

TOOL 2: Brainstorm ideas together using virtual post-its (such as Google Jamboard)



Example:

*What changes took place in us and in participants' lives as a result of the MHD activity? or
Imagine we are all meeting in a year or two's time for a celebration - what would success look like?*

1. Create a jam board at jamboard.google.com or by going to Google Drive, clicking on 'new' and then 'more' and then 'jamboard'.
2. Click 'share' in the top right; change the privacy setting to 'anyone with the link can edit'; and copy the link. Post link to jamboard in the chat box.
3. Ask everyone to click on the link and then add post-its with brief answers to the question.
4. Both the creator of the jamboard and the participants can move answers around to cluster similar ones together and to show common themes emerging.
5. After the exercise is completed, the jamboard can be saved as a photo and shared with everyone.

Find out more by watching: https://www.youtube.com/watch?v=GbyfD_LNVNM

TOOL 3: Annotate (Zoom)



This tool can be used with the Zoom whiteboard to add words or pictures or to get participants voting or highlighting ideas

Example:

Stamp the MHD activities you are comfortable facilitating or stamp the three issues you think are most important

1. It may be necessary to 'enable participant annotation' beforehand, if it is not already there:
 - Sign into the Zoom portal and go to 'settings'.
 - Go to the 'meeting' tab and explore 'meeting (basic).'
 - Scroll down and switch on 'annotation.'
2. During the meeting, share the screen. Ask participants to find the Zoom tool bar or 'view options' at the top of the screen, and then find the Annotate tool that looks like a pen.
3. Use the 'stamp', 'draw' or 'text' tabs to have fun in adding ideas.

2-hour virtual Mind-Heart dialogue session

Timing	Process / content
Pre-session preparation	1. Journey of Childhood (if session is one-off) or 3. Scriptural Reflection
15 mins	Icebreaker: fun time to connect; testing mic etc
20 mins	Connecting activity — small group MHD activity linked to topic Examples: <ul style="list-style-type: none"> • 3. Scripture Reflection • 5. Personal Testimony sharing a story of violence or misinformation in the local area Plenary feedback if appropriate
10 mins	Welcome and scene-setting: session aims and interactive dialogue on how to create safe space
50 mins	Main participatory activity Examples: 13. Power Walk or 21. Stories of Change
20 mins	Action Planning: Responding in Action Examples: 25. Individual Commitments ; 26. Bicycle Planning ; 27. Interfaith Planning ; and facilitating with others
5 mins	Closing
Post-session activity	Implementing action plan; further listening



Dialogue during an activity at the Regional Training of Trainers in South Asia - Kathmandu, Nepal. Nov 2023

SECTION 3

Mind-Heart Dialogue Activities

Mind-Heart dialogue (MHD) activities are not limited to those whose steps are given in this Guide; however, they must involve more than messaging, raising awareness or focus group discussions alone. It requires more to reach a deeper level of reflection and spark innovative and creative ideas.



Pre-session listening to children or youth

Carrying out a listening activity with children, youth or other vulnerable groups before a session helps participants develop a mind-set for sharing, learning and genuine action. It challenges assumptions, strengthens empathy and instils the motivation to make a difference. Even if facilitators can only carry out the activity with a small group for an hour, it is worth doing and creates a different space for the session.

Why is it needed?

- 1 Evidence shows that listening is an important area of good practice for behaviour change as it helps understand the barriers to, as well as triggers for change, as well as how to overcome real concerns and fears in adopting new behaviours.
- 2 Evidence shows the critical importance of child and youth participation.
- 3 The findings will enable participants to draw on local knowledge about barriers and positive examples of change, helping ensure actions will bring about lasting impact for children.
- 4 It gives all participants a shared experience of carrying out the listening so everyone can meet and share as equals.

How to do it?

It is possible to adapt any of the activities in this Guide to use with children and youth. Here the Guide includes one simple participatory exercise, to involve children or youth (but also their communities) in analysing the priority issues facing young people, with a focus on traditional practices that may be harmful. The exercise can also be useful in understanding what helps and hinders behavioural change. Consider the following in the planning:

SAFEGUARDING

Follow existing organisational policy or good practice of the faith group to ensure the safeguarding of the children or youth involved in the participatory exercise, including:

- Meeting at a time and place that it is safe for participants to reach and leave again,
- Making clear why the exercise is done and how the findings will be used,
- Securing informed consent, e.g. agreeing with families and children or youth on their participation,
- Assuring confidentiality issues, e.g. not using real names and ensuring that participants are happy to have photos taken and shared,
- Referring, e.g. clarifying how children or youth will be referred to further appropriate support where safeguarding issues are raised.

WHO TAKES PART

Agree groups and numbers of children or youth to be involved in the participatory activity, so that they are (1) representative of who the organiser of the activity works with, and (2) appropriate and feasible to be engaged in the timeframe. This could include groups with different vulnerabilities and from different locations, including both girls and boys of different ages. Identify people in the community who influence them who can take part — this should include some who are parents or carers, some community leaders and faith leaders, and some informal leaders or influencers, including women and older youth.

FACILITATION

Facilitators should already have good relationships with the children, youth and other stakeholders. Ideally, this activity requires a facilitator of the same gender for each small group (a woman for the girls and a man for the boys). The main aim of the activity is to get everyone taking part and analysing the issues with each other, rather than responding directly to the facilitator. The facilitator's role is to mostly observe, ask guiding questions to prompt deeper discussion, and ensure that everyone is involved (including notably younger children or those more hesitant to speak). Capturing some of the things people say in their own words — as quotations — can be helpful.

Sample Mind-Heart Activity

JOURNEY OF CHILDHOOD



It is possible to do the activity first with the children or youth, in relation to their life, and then with adult stakeholders to explore their views on the issues that children face.

Steps:

1. Form groups of about six of the same sex, similar age and any other factor that will ensure they are comfortable to talk.

Divide into same-sex groups:

2. Each facilitator draws a road on a piece of flipchart or on the ground. Explain that this is the journey of a child or youth's life, with birth at the beginning and their age now at the end.
3. Participants divide that journey into key stages of childhood (eg. 0-5; 5-10; 10-14; 14-18), drawing lines on the road to separate stages.
4. Elect a 'secretary' to keep detailed notes on the discussion in a table like the one below:

Stage of childhood	Main activities	Greatest challenges and causes of suffering

5. For each stage of life in turn, ask participants the main activities expected of the boys or girls. Participants draw a symbol or picture of the activity for each stage (e.g. going to school, playing, cooking, etc).
6. Once every stage has been discussed and the responses are noted down, ask participants to draw and label the biggest problems or causes of suffering for each stage in a different colour, especially thinking of ones that they think their sex faces and the other does not (or does to a different extent). They should circle the greatest 2-3 issues. If nothing related to impactful events (e.g. abandonment, violence, drop out of school, etc.) or harmful practices (eg. child marriage and female genital mutilation (FGM)) has emerged, ask them to reflect on what harmful practices take place at what age and add it to their chart.
7. Discuss:
 - What decisions led to your top 2-3 issues? What are the consequences in people's behaviour?
 - Who has/had control over these decisions? Is this right?
 - How does our faith, or that of those around us, help or hinder positive change in behaviour?
 - What could we do to change behaviours for the better in relation to this harmful practice? What support do we need from others?

Come back together as a whole group:

8. Each group presents their results to the other and everyone discusses together:
 - What is something new you learned from listening to the other groups, especially the other gender?
 - What role does faith play in helping or hindering positive change in behaviour that increases your sense of safety and wellbeing?
 - What can we do differently to change behaviours for the better? How can we increase understanding from those that take decisions over which we have no or little control?

Core Mind-Heart activities

Exploring faith and scripture

CONNECTING FAITH AND CHILDHOOD



Steps:

1. Ask participants to reflect individually on these questions. If they have no personal faith, encourage them to think about how they interacted with it as a child:

Faith + Positive Change for Children

→ What is your first memory of faith & how it impacted you as a child?
↓
how does that memory make you feel now?

- ? What is your first memory of faith and how it impacted you as a child (or someone else)?
- ? How does it make you feel?

2. In groups of two to three, participants share how they felt. It is also possible to only share what happened (without focus on feelings) if they prefer.
3. Ask if anyone would like to share their story in the larger group and note key themes on flipchart.

SCRIPTURE REFLECTION



Steps:

1. Ask people to reflect on the following questions, either individually or in pairs

Sacred text reflection
→ What stories/passages come to mind from your sacred text in relation to children? (at least 2-3)
→ What do these show us about the attitudes & responsibilities we should show to children?
Compare this to your childhood experience

- ? What stories or learning come to mind from your scriptures in relation to children? Try to think of at least two or three.
- ? What do those show us about the attitudes and responsibilities we need towards children?
- ? How does this compare with our childhood memory?

2. Introduce someone who will be respected by all faiths that are present who can give alternative interpretations if someone raises a problematic text. Resources such as 'Channels of Hope'²⁰ might be helpful.
3. Facilitate plenary feedback and discussion: ask for examples from the scriptures and what they teach us about positive motivations, attitudes and behaviours in relation to children.

FAITH OBJECT REFLECTION: LAYING DOWN BURDENS AND BIASES



Steps:

1. Ask participants to reflect on the objects that are relevant to their faith and belief.
2. Participants meditate on whichever one most helps them feel a sense of peace (or imagine another) as they lay down any fears, hurts or burdens (e.g. something that came up in the childhood or scripture reflection); any biases or hard-heartedness caused by personal experiences; any failures to protect children, etc.

²⁰ <https://www.wvi.org/faith-and-development/channels-hope>

Faith Reflection

- Reflect on the sacred object that best represents lifting the fears, hurts, burdens or regrets that we carry
- Select a stone to symbolise that burden & lay it at the foot of the sacred object

3. When participants are ready, they choose a stone to symbolise the burdens they carry and lay them by the table of objects as a sign of laying them down before God or a higher power.
4. Reflect on the stories or scriptures that were shared:

- ? Which one remains with you as something positive and life-giving to guide our own contribution to the training and our attitudes to the work and each other?

Surfacing beliefs and drivers of behaviour

PERSONAL TESTIMONY

5

Steps:

1. A participant shares a personal story about an experience when they felt harmed or injured (ask them in advance and ensure they do not feel pressured). Stay near to support them or any other participant who may feel triggered. Thank them after.

Ground rules for supporting the personal telling the story

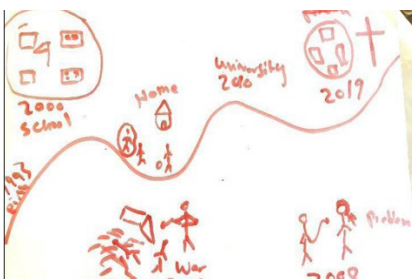
no photos, no movement, listening, confidentiality from others, open to listen...

2. Everyone individually reflects, recognizing mind, heart and spirit reactions to the story; writing down their thoughts; and identifying a response that they can make personally to it.
3. Give people the opportunity to say something in plenary if they wish, but without forcing.

MAPPING CHILDHOOD JOURNEY

6

Steps:



1. Frame the activity, e.g. the group is now going to reflect on their childhood and how it affects their responses and reactions today.
2. Ask participants to get into pairs where they feel safe and speak the same language.
3. Each should share and draw their childhood journey, showing the ups and downs of three significant experiences, and analysing what helped and hindered their development (internally and externally), including the role of faith.

4. They reflect in pairs:

- ? In what way do these experiences shape the way I respond to children today?

5. Ask groups to feedback these reflections and discuss together:

- ? How do we ourselves contribute to perpetuating some of the injustices and pain that children experience now?

If you can feed in the voices of children from your pre-listening or through involving them in the activities during your session, this will enable participants to make the link more easily and surface their own attitudes and behaviours that continue the cycle of violence.

LISTENING TO CHILDREN

7

Steps:

1. Ask volunteers to put on an object that people can put on to represent a child and to speak in the words of first the girl and then the boy. They should address the biggest issues they face, especially in relation to harmful practices, and reflect on who controls the decisions that are taken about these issues.
2. Participants reflect in small groups how society perpetuates the cycle of violence.

PERPETUATING CYCLES OF VIOLENCE

8

Steps:

1. Engage participants' hearts using the arts (e.g. painting, poetry, spoken word) or a personal testimony from a survivor of violence.
2. Having listened to those voices, in wider peer or mixed groups, participants discuss:

? *How have I contributed to some form of violence against children or women, whether through inaction or action (in my personal or work life)?*

? *What can I/we do differently or better?*

3. Each group agrees three ideas to feed back and prioritise one action to take immediately.
4. Gather feedback in plenary on flipchart.

CHILD PROTECTORS BALLOON GAME

9

Steps:



1. Explain that the game is competitive and physically demanding. Offer those who are older, ill or live with a disability the choice to sit as part of group 4 (see below).
2. Divide everyone into four groups and explain that each has a separate task and will not know the task of other groups (the first two groups must be of equal size). If men and women prefer not to touch, do the game in two groups or assign all of one sex to groups 1-3 and the other to group 4.
3. Give instructions to each group without others hearing:
 - **Group 1:** tie a balloon around their ankle. When the game begins, participants are to protect their balloon from getting popped; assign two of the group to only use one leg or be blindfolded.
 - **Group 2:** each group member has to stand next to someone with a balloon. When the game begins, they are to protect that person's balloon only. Talking is not allowed.
 - **Group 3:** participants are to burst as many balloons as possible once game begins, without hurting anyone
 - **Group 4:** members of group 4 are to observe the game.
4. Play the game for 5 minutes.

5. Debrief, capturing learning on one flipchart for each group under title 'feelings'. Ask each:

- ? What instructions did you receive?
- ? How did you feel during the game?
- ? What category of people do you think you represented? (1 — children; 2 — child protectors; 3 — abusers; 4 — observers)

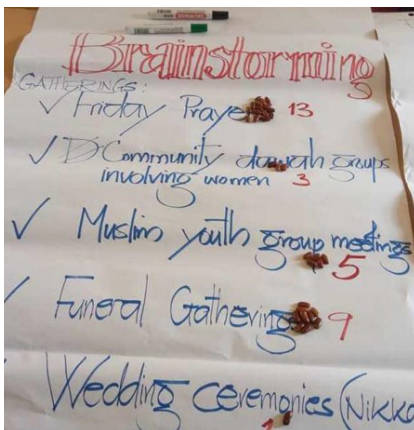
6. Talk about how those who were hopping or blindfolded felt (e.g. uncertainty, fear, not knowing who to trust, knowing some are better equipped to protect themselves) and who they could represent.
7. Talk about the people in the community who protect or try to protect children, including formal and informal actors.
8. Talk through some of the groups that abuse — encourage answers that begin with “a person who....” — they may be the same as some of the protector groups.
9. Talk about the observers, pointing out that some may not know how to identify or report abuse.
10. Conclusion and de-role: end activity by disengaging people from the role. Make them repeat as a group out loud these sentences:

- **Group 3:** “I am not an abuser”
- **Group 1:** “I have resources and gifts to protect myself”
- **Group 4:** “I will not keep silent”
- **Everyone:** “I want to/will be a child protector”

BEAN RANKING



Steps:



1. Group (5-10 persons per group) brainstorm around the question you are discussing, e.g. ‘what approaches work best to bring change?’, ‘what is the change you most want to see in your life?’ or ‘what faith ritual/ gathering is most important to you?’ (see example ranking in picture below)
2. Groups write each idea on a post-it and feedback in plenary, clustering similar ideas together. Create a list of the most frequently mentioned.
3. Each group writes the list on a flipchart (pictorially or in words) and places it in the centre. Give eight beans to everyone.
4. Each person then scores the options, dividing up their beans according to what they think is most important. They can give all, none, or any number to each option.

5. Look together at the options that have the most beans. Count up if they are close.

- ? Does everyone agree that these are the most important? Why? Why not?

6. Encourage people to step forward and move the beans around as they discuss until there is consensus and none of the options has the same score. Count up the final scores and write the ranking next to each option before removing the beans.

DRIVERS OF HARMFUL BEHAVIOUR - PARTICIPATORY DRAMA



Steps:

1. In buzz groups of 4 to 10 persons, participants reflect on learning so far from listening to children's stories and any other sections:
 - ? *What have we learned about the drivers and causes of harmful behaviour and who influences them?*
 - ? *What have we learned about the changes that children, youth and community members want to see in relation to the harmful behaviour (for children and in the behaviour of society)?*
2. In groups, participants prepare a role play highlighting the causes and results of harmful behaviour.
3. Watch the role plays in plenary one by one. After each performance, ask everyone what they observed and how it demonstrates the drivers already discussed or highlights others (if relevant, add to the Journey of Change as drivers are mentioned).
4. Discuss:
 - ? *When could the harmful behaviour have been stopped? Which was the first point?*
 - ? *Who could have stopped it?*

Analysing resources and power

LISTENING WELL



Steps:

1. Two participants perform one role play on a chosen topic.
2. Ask other participants what marks of good or bad listening in what they have seen in the role play.
3. Draw out body languages 'dos' and don'ts', including:
 - **DO:** *Affirm what the other is saying. Show you have listened and understood. When in doubt, repeat back what you think they have said.*
 - **DON'T:** *put forward your own views or ideas*
4. Explain that to listen well, we have to listen on three levels:
 - **'listen for the head' (thinking level):** *to thoughts, facts, concepts, arguments, ideas*
 - **'listen for the heart' (feeling level):** *to feelings, emotions, mood, experience*
 - **'listen for the feet' (the will level):** *to intentions, drivers, direction, motivation, the will*
5. Divide into pairs or groups of three (pairing participants with different people than in the previous exercise).
6. Each participant shares one story of positive change (max 5 minutes for this part), focusing on family, their job, spiritual experiences, etc; the others listen at the different levels; then swap until all are done.
7. In the plenary, draw out what helped and hindered change, especially less tangible aspects of how change happens and the role of faith within that.

POWER WALK



Steps:

1. Hand everyone a card with a character description, which you can adapt for your context. Read each out as you give them out, in case of language or literacy issues, ensure that the character description is clear. Ask them to empathise as much as they can with this person and think about their life, without worrying if they do not know all the facts.
2. Everyone stands in a line. When each scenario (see list below) is called, participants take a step ahead if they think it applies to their character or stay still if not.
3. Afterwards, discuss how they felt and what this means for their work and who they need to focus on. The exercise can also be used to draw out ideas about the power dynamics in the session and to share ideas for guidelines to ensure everyone's voice is heard.

Scenarios which can be adapted according to context:

- Your family have nutritious food to eat all year
- You can read
- You have leisure time to relax
- You have a regular income or source of money
- People respect your opinion
- You can access health care when you are sick
- You or your children attend primary school
- You have a bank account
- You are not afraid of, or the target of, violence
- You have some control over family resources
- You have finished or are likely to finish secondary school
- You have friends whom you regularly spend time with
- You feel confident to express your opinion in faith group or community forums
- You have the skills and confidence to solve problems with others, without waiting for external help
- You have a house and basic necessities for your family
- You are part of a faith community which provides a sense of support
- If you are robbed or the victim of violence, you know where to go and will receive support and justice
- You or your children have a registered identity so you can access government services and support

SECRET IN A BOX — WHO ARE THE EXPERTS?



Steps:

1. Ask for three volunteers.
2. Hand the sealed box to person A and ask them to say what is inside without opening it. Announce how many items they guessed correctly, but not which ones.
3. Ask person B to close their eyes, open the box and allow them to feel the objects. Then ask them to say what they can feel. Announce how many items they guessed correctly.
4. Then hand the open box to person C and ask them to list the objects as specifically as possible (i.e. with their colours and other details).
5. Ask, if we think of this box as representing depth of understanding of a community:

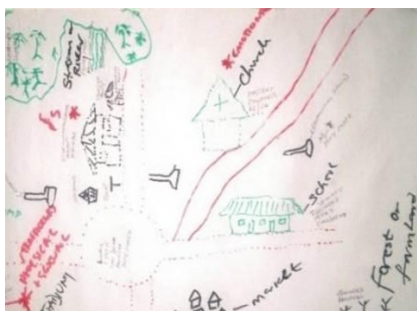
- ❓ *Who could each of these three represent? (e.g. the first may be an INGO donor; the second may be a government official; the third a community member with first-hand knowledge)*
- ❓ *Who scored the highest? Who scored the lowest? Why? (e.g. donors tend to be highly dependent upon knowledge from the mind; officials may only see half-truths if they hear about things but do not stay in the area)*
- ❓ *What does this activity tell us about who tends to plan the development work that happens in this area and who should really plan, based on information and understanding?*

MAPPING SAFETY

15

Ideally this activity should be done by the children or a particularly vulnerable group in relation to their own lives. However, it can also be useful for other stakeholders to do as well so they can reflect on where they are contributing to risks and have assets that could help.

Steps:



- 1. Introduction:** Explain the activity and ask everyone to give some examples for each question. Divide them into peer groups, as needed, so it is a safer space for them to discuss (e.g. by gender or age)
- 2. Drawing the map together:** Participants can either do this with flipchart and pens, by gathering objects that are lying around, such as bricks, stones, leaves, bits of rubbish, seeds, bottles, cans etc., or by drawing on the ground. To prompt participants, you can ask:

? What are the major roads that you use?

They begin by drawing the main roads in the area

? What are the major landmarks that everyone knows? (this helps them structure the map)

They add in big natural features, such as rivers, lakes, hills, forests, crops etc and key man-made features such as wells, cooperatives, markets, houses, bore holes, maize mills etc.

? Where do you or children usually gather, for what purpose and how often?

They add in places such as schools, clinics, churches (e.g. using two sticks in the shape of a cross to represent a church), mosques, football pitches, childcare centres, the chief's house, witchdoctor's, where they find things they need (e.g. food, water), etc.

Ensure everyone accepts the map is an accurate representation.

- 3. Discussing safety:** Choose together a colour or symbol to represent safety (e.g. green pen) and one to represent risk and danger (e.g. red). Discuss and mark on the map together:

? Where do you, your friends or other children feel most safe? Where do good things happen to you (or them)? Why?

Mark with your colour or symbol for safety on the map.

? Where do you or other children feel most at risk? Where are you met with problems or challenges? Why?

Mark with your colour or symbol for danger on the map.

? What groups, resources or services exist to help children at risk of violence?

Mark with your colour or symbol for safety on the map.

- 4. Planning action:** Discuss and agree at least one action together (using the relevant question):

? What can we as children do to protect ourselves and others from risk? How can we take action to report violence?

? How can we as faith leaders or groups take action to address violence and protect children better?

Working together

STRING GAME



Steps:



1. Ask participants to get into same sex pairs and demonstrate how to set up the string:
 - Each participant should tie a loop big enough for their hand to fit through at each end of the string
 - The first person puts each of their hands through a loop of their string so they are linked together
 - The other puts their hand through one of the loops
 - They then thread the other end through the other person's string before attaching it to their other hand
2. Ask participants to untangle themselves without breaking the string or removing it from their wrists (see picture of FPCC participants).
3. After some have worked it out, ask participants to feedback some of their frustrations and challenges, and how they found the solution by working together.
4. Link the discussion about learning from the activity to principles for working together — getting others on board and mitigating the influences that can hinder change.

BALLOON GAME



Note: in a context where men and women are not comfortable bumping into each other, you may need to do this in two separate groups in areas designated for male and female participants.

Steps:

1. Each participant blows up and ties a balloon. Move participants to a large open space. Tell them they can only tap each balloon twice in a row before tapping a new balloon and that they need to work together for 45 seconds to keep all the balloons off the floor.
2. After 45 seconds, stop the game, getting participants to hold the balloons that are still in the air. Count the balloons on the ground.
3. Second round: ask participants to try again — but this time after discussing a plan to keep more balloons in the air, either all working together, or in small groups, or in any creative way they choose. Ask them to focus on the following questions:

- ? *How do you think we could do better?*
- ? *What was most surprising in the previous round?*

4. Make sure everyone has a balloon and remind them of the same rules. Time another 45 seconds. Then count the balloons again.
5. Debrief and draw out lessons about who needs to work together to protect children.

- ? *How much better did we do? Why do you think that was?*
- ? *If each balloon represents a child, what does this game show us?*

STAKEHOLDER MAPPING - FLIPCHART ACTIVITY

18

If you have done the activity *Significant Stories of Change* (activity 21), groups can feedback influences they identified.

Steps:

1. Explain that on a flipchart, the paper represents 'lasting change for children'. Ask the participants who needs to hold the paper for it to stay up?
2. As someone feeds back a possible factor, ask them to come and hold the edge of the flipchart paper to represent that person or group (and label themselves with a post-it on their head — see photo right). If they are directly involved with children, they should hold the flipchart; if more distant (e.g. government) they should hold the shoulder of whoever they are directly linked to (e.g. community leader).

STAKEHOLDER MAPPING - VENN DIAGRAM MAPPING

19

Steps:

1. Choose the largest circle to represent the group for whom you want to bring positive change (e.g. children), label it (with words or a picture), and place it in the middle of a flipchart paper laid out on the ground.
2. Participants brainstorm everyone who has any influence on the children's lives (or on the particular issue that you focus on, e.g. child marriage), like for example elders, traditional birth attendants, traditional healers, chiefs, extended families, children, farmers, faith leaders, local government officials, agricultural extension workers, NGOs, MP, village committees, health workers, central government, etc.
3. As each stakeholder is mentioned, participants write their name within a circle. The size of the circle should correspond to how influential they are on community life.
4. Participants then place the circle on the flipchart paper. The distance from the 'community circle' and other stakeholder circles should represent the level of contact between them.
5. Participants draw lines to connect the community with various stakeholders and the stakeholders with each other:
 - Two lines for a strong relationship; one line for a working relationship; zigzag lines for a bad relationship; an arrow if there is one-way influence

6. Discuss:

- ? *What strikes you about the mapping you have created? Are any relationship patterns surprising? Are any groups missing?*
- ? *How does this help us decide who we need to work closely with? Who will need to be informed about what we are doing? Who will be useful to partner with to share resources?*
- ? *How do we improve relationships with the most important groups and mitigate risks from those we cannot influence?*

CHANGING HATS - WORKING TOGETHER



This activity is to use in interfaith or other multi-partner settings.

Steps:

DISTINCTIVE ROLES IN PARTNERSHIP FOR POSITIVE CHANGE FOR CHILDREN	
BOY CHILD	ROLE MODEL, PEER EDUCATION, DEVELOP POSITIVE CHARACTER, VOICE OF BOYS
FAITH LEADER	BREAK THE SILENCE, COUNSELLING / ADVOCACY, CORRECT RELIGIOUS TEACHING, PLATFORM TO DISCUSS ISSUES RELATING TO CHILDREN
MEDIA	AWARENESS, AMPLIFY VOICES OF CHILDREN, MEDIA ADVOCACY, WORKING TOGETHER, DISSEMINATE POLICY
UNICEF	FUNDING, TECHNICAL + OTHER RESOURCES, ADVOCACY, KNOWLEDGE, EDUCATION FOR ALL CHILDREN
GOVERNMENT / POLICY MAKER	CHILD FRIENDLY POLICY & LIMIT RESOURCES, ENFORCEMENT, LEADERSHIP, CHILD PROTECTION POLICY
CSO	ADVOCACY - DEFEND RIGHTS OF CHILDREN

1. Participants reflect individually:

- ? Where have we seen particularly good examples of any partnership (involving families, faith, formal projects. etc.)?
- ? What were the keys to its success?

2. Participants identify the different actors in the partnership and write them on the flipchart.
3. Divide participants into small groups.
4. In the groups, each participant takes on the role of one of the other partners (not their own) and spends a few minutes reflecting on the following question in relation to the partnership:

? What do I bring to this partnership that would help to achieve positive change for children?

5. Go round the group, asking each person, empathising with their character, to answer in no more than two sentences. Record the roles on a flip chart.
6. Afterwards, discuss together and see what else you might want to add to what has been shared.

Learning what works

SIGNIFICANT STORIES OF CHANGE | 1

Behavioral outcomes and results for children



Steps:

Behaviour + attitude change to impact children	Results for children
<ul style="list-style-type: none"> 1. Women forgive her husband 2. Women become more responsible 3. Women stop beating their children 4. Women convert to Christianity 	<ul style="list-style-type: none"> 1. This woman started as an illiterate Christian woman that the social lady got her concerned back on her in-laws 2. Women went back to school 3. Leading a happy married life
<ul style="list-style-type: none"> 1. Frequent divorce 2. Reconciliation took place 3. Women returned back to in-laws house 4. Husband accepts marriages 	<ul style="list-style-type: none"> 1. Children went back to school 2. Wife went back 3. Family stayed united

1. Each participant chooses one story that represents some of the best work they do that brings about changes in behaviour (in family, community, children or young people) to achieve lasting impact in children's lives (especially around a harmful practice).
2. In groups, participants tell their Significant Change stories, listening well (see activity 12) to each other.
3. At the end of each story the groups should discuss and note on the flipchart the main attitude and behaviour changes that took place and in whom — and the resulting impact on the children's lives (see picture of a flipchart on the right).
4. Each group selects one story that shows the most impact in behavioural change in society and resulting impact on children.
5. Feedback is given in plenary, with a focus on behavioural changes and results for children.

SIGNIFICANT STORIES OF CHANGE | 2

22

How we contribute effectively to lasting change

Steps:

1. One person from each group tells the story they selected as part of the previous exercise (21. Significant Stories of Change (1)) to everyone.
2. Those listening identify what helped bring about and sustain change — the qualities and approaches.
3. Add key points to the wall chart as participants discuss.

CASE STUDIES — REFLECTING ON GOOD PRACTICE

23

Ideally give participants the case studies the day before to reflect on overnight, focusing on the following question:

- ? *What does each case study show us about effective approaches involving faith to bring about or sustain change for children?*

Steps:

1. Read the case studies in groups of three and reflect:

? *What does each case study show us about effective approaches involving faith to bring about and sustain change for children?*
2. Select three key points to share.
3. Make time for plenary feedback on the learning from the case study, linking it back to findings from the case studies (and add to the Journey of Change if building one).

ADAPTING THE JOURNEY OF CHANGE

24

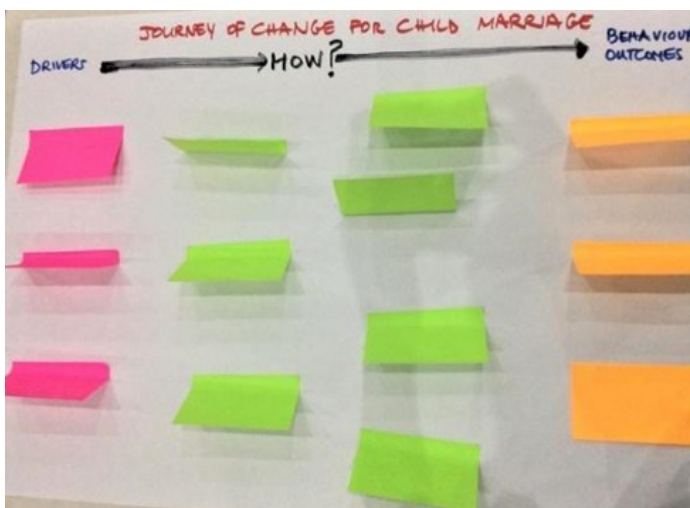
At the beginning of this activity, explain how the Global Journey of Change was created and validated at national level by five pilot WorkRocks (see p. 5). Explain that it brings together all of FPCC's learning so far from the evidence about what brings lasting positive change for children, therefore allowing participants to use it as a framework to work out what is needed to effectively address a specific issue such as child marriage or broader child wellbeing programmes.

Steps:

1. Remind everyone of the importance of MHD and mobilisation led by faith actors with civil society in partnership with others. When planning action together, it is critical not to fall into patterns of instrumentalization or messaging. Instead, actors should analyse issues and develop strategies together that are aimed at bringing lasting change in attitudes and behaviour.
2. Begin by adding the most important three drivers of harmful behaviours from the Journey of Change to the left side of a blank piece of flipchart paper and the behavioural outcomes (drawn from the participatory drama or brainstorming) to the right side.

- In groups, encourage participants to reflect on how to get from the drivers to the behavioural outcomes.

? Looking at the global Journey of Change, which of the 'how' factors will be helpful to address the drivers?



- Write them on post-its and add them to the Journey of Change template on the flipchart paper.
- World Café feedback: this style of feedback allows people to move around and hear from other groups. Each group first appoints one person to remain with their journey to present it to other groups. Then everyone moves to the next group to listen to the presenter. After five minutes, everyone circulates again to the next group. Make sure people keep circulating — after three times, or when people have heard enough, come together.

- Discuss what was similar and different across the groups; what struck people as most important or innovative; and give opportunity to share highlights.

Responding in action

INDIVIDUAL COMMITMENTS

25

Steps:

- It can be helpful for someone here to share a personal story that shows resilience, hope and the impact that is possible.
- People consider as individuals:

? What one thing do I commit to take away from this session as an individual?

- They write them on their commitment card.
- It may be helpful to share the commitment with one or two people near them or the group they have worked with. Some could share them in plenary.
- Bring everyone together to lay the commitments down at the foot of a table of faith objects.
- Ask someone to pray over them or any other ritual relevant to your context.

BICYCLE PLANNING: FAITH GROUP OR ORGANISATION

26

Steps:

1. In groups divided by faith background or organisational affiliation, discuss and fill in the Bicycle Planning template (Appendix 6):

? What existing work takes forward the learning from FPCC; what needs to be stopped or reduced; and what we can do better or differently? Share and agree ideas for how to use MHD and mobilisation activities to share learning within one's group and work out what to do better and how to work with others.

2. Allow for feedback in the plenary, allowing for the most important activity to continue and the most important one to add.

INTERFAITH PARTNERSHIP PLANNING

27

Steps:

1. Facilitate a group discussion about how to take the learning forward together. Question prompts:

? What forums or networks already exist that we can build on?

? What else is needed at national level to take forward FPCC?

? What will our individual roles be within that? Encourage participants to write down key points in their personal notes.

? How can we continue to communicate, monitor progress, share successes, and learn together?

2. Capture actions on flipchart. Encourage people to appoint specific people and timings for each task.
3. Each person then writes down their part in the plan onto their Individual Action Plan template (see Appendix 6).
4. Participants may use the time to detail their action plans further or to work among themselves to propose any joint actions or statements.

Energisers and mix-up activities

WHO BEGAN THE MOVEMENT

Steps:

1. Ask participants to reflect individually on these questions. If they have no personal faith, encourage Participants form a circle and one closes their eyes and ears or moves away from the group so they cannot see or hear
2. Explain that there will be a leader whose every movement they have to copy, . The person who left the group before the instructions were shared does not know who the leader is and will have to guess who it is by watching to see who initiates the movement.
3. Participants choose the first leader (by pointing if the guesser is close enough to hear).
4. The leader begins actions and everyone copies, such as: marching on the spot; waving arms in the air; nodding; jumping. The leader must change the movement frequently.
5. The guesser returns and stands in the middle of the circle. They are told that they must look for the leader, i.e. the one who is initiating the movements. The guesser has three attempts to guess.
6. If the guesser fails within three attempts or when they guess correctly, someone else goes out of the room and the game can repeat.

As AND Bs

Steps:

1. Ask participants to stand in a space, spreading around the room.
2. Tell participants that they must each choose one person in the group who they will call 'A' and another person they will call their 'B'. Each participant decides this on their own without telling anyone else who their 'A' and their 'B' are.
3. Explain to participants that, when you tell them to start, they have to try to get as near as possible to their 'A' and as far away as possible from their 'B'.
4. Tell participants to start and watch them chase each other round for a few minutes (they will probably end up in clusters or lines). Then tell them to do the opposite: get close to their 'B' and away from 'A'.

ELEPHANTS AND GIRAFFES

Steps:

1. Participants stand in a circle with the facilitator in the centre.
2. When the facilitator points at a participant, saying 'giraffe', they must pretend to be a giraffe by reaching both hands up into the air above their head to touch, standing on their toes, thus making a tall giraffe shape. The participants on each side of them must bend down to hold the 'giraffe's' ankles as if they were the giraffe's body and legs.
3. When the one in the centre points at a participant and says 'elephant', that participant must use their arm(s) to form a trunk shape while the participant on each side of them waves their nearest hand by the 'elephant's' head to signal his ears.
4. The game should move quickly so that the participants do not have time to think but are more likely to make mistakes.

FRUIT SALAD

Steps:

1. Ask participants to form a circle with their chairs. Ensure there are only as many chairs as people and then take one away.
2. Stand in the centre of the circle.
3. Go around the circle and get the first 5-6 participants to name a local fruit. Then continue round the circle naming each person in turn as those fruits eg. lemon, orange, apple, lemon, orange, apple etc. — (do not forget to give yourself a fruit too).
4. Check that everyone knows what fruit they are by calling the name of each fruit and asking all those people to raise their hands. You can see quickly if they know who they are as they will be spaced out by the number of fruits from each other.
5. **Explain:** "I will shout out one of the fruit names. If you hear your fruit called out, you must leave your own seat and run to find another that is free. I will run and grab one of your seats. If I shout 'fruit salad', then everyone must leave their seat and find another. I will still grab one. If you are left in the middle, you become the caller and have to shout out the name of a fruit or 'fruit salad' and then run to take the place of someone else.
6. Call out different fruits in sequence and occasionally add in 'fruit salad'. Continue this process until you feel that energy levels have increased.

BINGO

Steps:

1. Give a bingo chart (see appendix 5) to each person, possibly choosing to edit the phrases to better suit the group.
2. Tell participants that they must 'find someone who...' meets each phrase on the chart and write their name in the specific box. They must have a different name in each box.
3. Participants circulate around the room asking each other questions to find out if they match with any of the categories and then writing their name in the relevant place
4. The first person to finish should shout 'bingo'.
5. Ask people what was the most interesting fact they found out about someone during the game.

Virtual activities

OPINION STAMPING

Steps:

1. Select a question where you can have 6-10 different photos on the screen for participants to choose from, e.g.

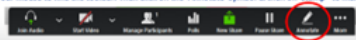
- ❓ Which is your favourite childhood food?
- ❓ Which is your favourite childhood activity?
- ❓ Which hobby would you most like to try?
- ❓ Which is your favourite sport?
- ❓ Which is your favourite fruit?
- ❓ How are you feeling today? (with emojis)

Ice-breaker: Favourite Childhood Foods

- What was your favourite childhood food? Use the Annotate tool to stamp the picture below
- How did you feel when you ate it? Write in the Chat box the food and how it made you feel



Move your mouse to find the toolbar. Then click on the 'Annotate' symbol & then on 'stamp' to mark the food!



2. Make a PowerPoint slide for each question (with pictures) to share on Zoom.
3. As they join the call, ask participants to mark their answer with the stamping tool. Give detailed instructions for how to do this, both on a phone and laptop.

4. Ask everyone to give slightly more detail by writing in the chat box, such as by answering:

- ❓ 'Why?' or 'How do you feel when you eat that fruit or do that hobby?'

WORLD MAP

Steps:

1. Put a world map on a PowerPoint slide to share on Zoom and select a question that participants can answer by annotating the map, e.g.

- ❓ Where do you live?
- ❓ Where is your favourite country?
- ❓ Where would you most like to visit?



2. As they join the call, ask participants to use the annotate tool to answer, by stamping if possible. Give detailed instructions for how to do this, both on a phone and laptop.
3. Ask everyone to give slightly more detail by writing in the chat box.

SHOW AND TELL

Steps:

ICE-BREAKER: FRUIT

As we wait for others to join, hold up your fruit to show us what you have brought
Write in the chat box what it is and why you have chosen it



1. Give participants advance warning to bring an object with them (ideally one that can be found easily for those that forget), e.g.

- favourite fruit (example in the picture on the right)
- hat or head covering that says something about who they are
- object related to a hobby
- an object that they have in their home and that represents hope to them in any way (but be careful in interfaith context with the significance of symbols)

2. As they join the call, ask participants to show or wear their object (with videos on) and say why they brought it — aloud or in the chat box.
3. Draw attention to some of the fun or interesting things participants are saying in the chat and the diversity among the group (or provide examples of objects already shared as others join).

VISUAL EXPLORER

Steps:

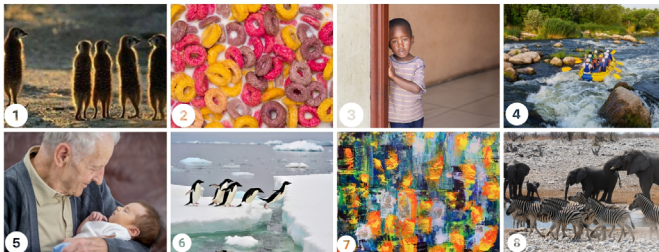
1. Choose a question that you would like participants to answer, e.g.

- ❓ *What do we understand as inclusion?*
- ❓ *What should our children's future be like?*
- ❓ *What has your experience of facilitation been like?*

VISUAL EXPLORER

What do we understand as inclusion?

Please take a look at the images below. Choose one that relates to your answer - It can be intuitive, literal, symbolic, ... Write in the chat box the number of the image you have chosen and why



2. Put a selection of 8-10 numbered images on a PowerPoint slide that could relate (directly or indirectly) to the question.
3. As they join the call, ask participants: Please take a look at the images below. Choose one that relates to your answer — it can be intuitive, literal, symbolic... Write in the chat what number image you have chosen and why.

FUN FACTS

Steps:

1. As they join, ask participants to think of two facts about themselves that would surprise others and write them in the chat box.
2. Encourage them to unmute to ask each other more.

WORD CLOUD

Steps:

1. Choose a question that participants can answer with one word, e.g.

- ❓ *How are you feeling today?*
- ❓ *What new hobby have you picked up in the last year?*
- ❓ *What is one thing you can see out the window? (one word)*

2. Follow instructions on [p.29](#) of this guide to create the Word Cloud.

GETTING TO KNOW NAMES

Steps:

1. Choose a question that participants can answer with one word beginning with the same letter as their first name, e.g.
 - a word related to your experience as a facilitator
 - adjective to describe you
2. As they join, ask participants to write their name and their answer in the chat box.
3. Encourage them to unmute to ask each other more.



Intra-Faith MHD workshop with Muslim Religious Leaders - Colombo, Sri Lanka - March 2024

Monitoring, Evaluation, Accountability and Learning (MEAL) for Mind-Heart dialogue and the FPCC Journey of Change

How to know if Mind-Heart dialogue is making a difference?

Mind-Heart dialogue (MHD) facilitators are accountable to each other and their partners in supporting positive change. They should have equal interest in understanding how and the extent to which joint efforts have made a difference. This will help identify changes that may be needed. Monitoring can take place at different times and levels:

- 1 After a MHD activity or session to understand how participants are feeling about the content and approach (see Mood Meter or Temperature Check below or in Appendix 3 for a sample post-session feedback form),
- 2 At programme level to know the extent to which the agreed actions are being implemented and to identify and learn from challenges that may have been experienced.

To assess programme level change, MHD facilitators can focus on the following three areas (please refer to the FPCC Monitoring and Evaluation Framework for further detail).²¹

²¹ This is available at <https://www.faiht4positivechange.org/>.

CHANGE IN CAPACITIES OF FAITH ACTORS' TO UTILISE MHD WHEN INTERVENING ON CHILDREN ISSUES



Has there been an improvement in the MHD knowledge access and application by faith actors in their interventions on children issues?

- Acquisition of knowledge: How accessible is MHD to faith actors?
- Application of MHD knowledge: At both the individual and organisational level

CHANGE IN COORDINATION, COLLABORATION AND PARTNERSHIP



Has there been any institutional change and improved partnership and coordination brought about as a result of our work?

- Have there been improvements in coordination amongst faith partners, e.g. reduced duplication, better use of resources, greater ownership, reduced dependency mindset, more inclusive partnerships?
- Have there been changes within UNICEF and/or other development partners, e.g. less instrumentalist attitudes to faith engagement, approaches that are more holistic or more systematically incorporated into country programming processes?

CHANGE IN FACTORS AFFECTING CHILDREN, FAMILY AND COMMUNITIES' LIVES



Has our work made, or started to make, a difference in people's attitudes or behaviours in relation to the agreed priorities in the Transformation Tree (or Journey of Change)?



Methodological approach and data collection

The FPCC Monitoring, Evaluation, Accountability and Learning (MEAL) Plan adopts a mixed-methods approach recommending a range of data collection tools that can be implemented according to what is most appropriate for the indicator rather than a one-size fits-all approach, as captured below.

In the short-term, monitoring can help ask and answer questions, such as:

- 1 Are we doing what we planned to do?
- 2 Are our actions relevant in meeting the needs of our stakeholders?


The following methods can be considered for measuring MHD progress on a continuous basis to capture and analyse information needed for a robust MEAL process:


After a Mind-Heart dialogue session


MOOD METRE

Steps:

HOW DO YOU FEEL TODAY?









1. Ask everyone to tick the flipchart face that relates to how they are feeling in relation to something in particular, e.g.
 - how much they enjoyed the sessions,
 - how confident they feel facilitating the activities.
2. Ask a few participants why they have ticked that face to explore further what worked well and less well.

TEMPERATURE CHECK

Steps:

1. Draw a large thermometer on a piece of flipchart.
2. Ask everyone to mark how they are feeling on the thermometer — the better they are feeling, the 'hotter' they should place the mark.

DIALOGUE PLANNING TEMPLATE

These can be utilised to record sets of quantitative data on attendances to dialogue sessions, child priority themes covered, participants demographics, resources utilised etc. See appendix 11 for a sample dialogue diary.

In the longer term

The FPCC MEAL plan answers the question: **What is changing for individuals, organisations and systems as a result of our MHD implementation?** Importantly, this question is underpinned by the broader question of: **What are we learning and how might this enhance FPCC initiative?**

Internal and external evaluations can therefore be considered to measure long-term FPCC impact. Evaluation methods and tools can be agreed upon by the evaluators. In the long-term and for in-depth assessment of the FPCC initiative, it is recommended to employ a range of tools with support of MHD facilitators where possible, including (but not limited to) the following:

FOCUS GROUP DISCUSSIONS AND KEY INFORMANT INTERVIEWS

The plan seeks to utilise these qualitative data collection methods to gather feedback on various aspects of the implementation and impact of FPCC.

SURVEYS

Surveys and questionnaires are to be used to measure specific indicators associated with MHD training outputs, including, for example, in-person, online and blended learning events. A core set of competencies and skills form the basis of evaluating how participants are applying what they have learned.

SENSEMAKING AND REFLECTION WORKSHOPS

These can be used to ensure implementing partners at different levels, who often have varying interests and perspectives, jointly make sense of information, allowing them to develop a shared understanding of issues concerning FPCC activities.

PHOTO AND VIDEO DIARIES

The use of photos and videos to document change can be helpful as a more visual form of monitoring and evaluation.

CASE STUDIES AND STORIES OF CHANGE

Case studies and stories can be collated highlighting change across different thematic areas and regions. Below is a sample activity for collecting stories of change.

STORIES OF SIGNIFICANT CHANGE | 1 & 2

While Stories of Significant Change can be MHD activities in their own right (as seen in Chapter 3, Activities 21 and 22), they can also be used as a monitoring tool for the overall impact of MHD in the longer term. In this case, Stories of Significant Change can be used in a dedicated gathering once participants have taken action that they would like to reflect on and share.

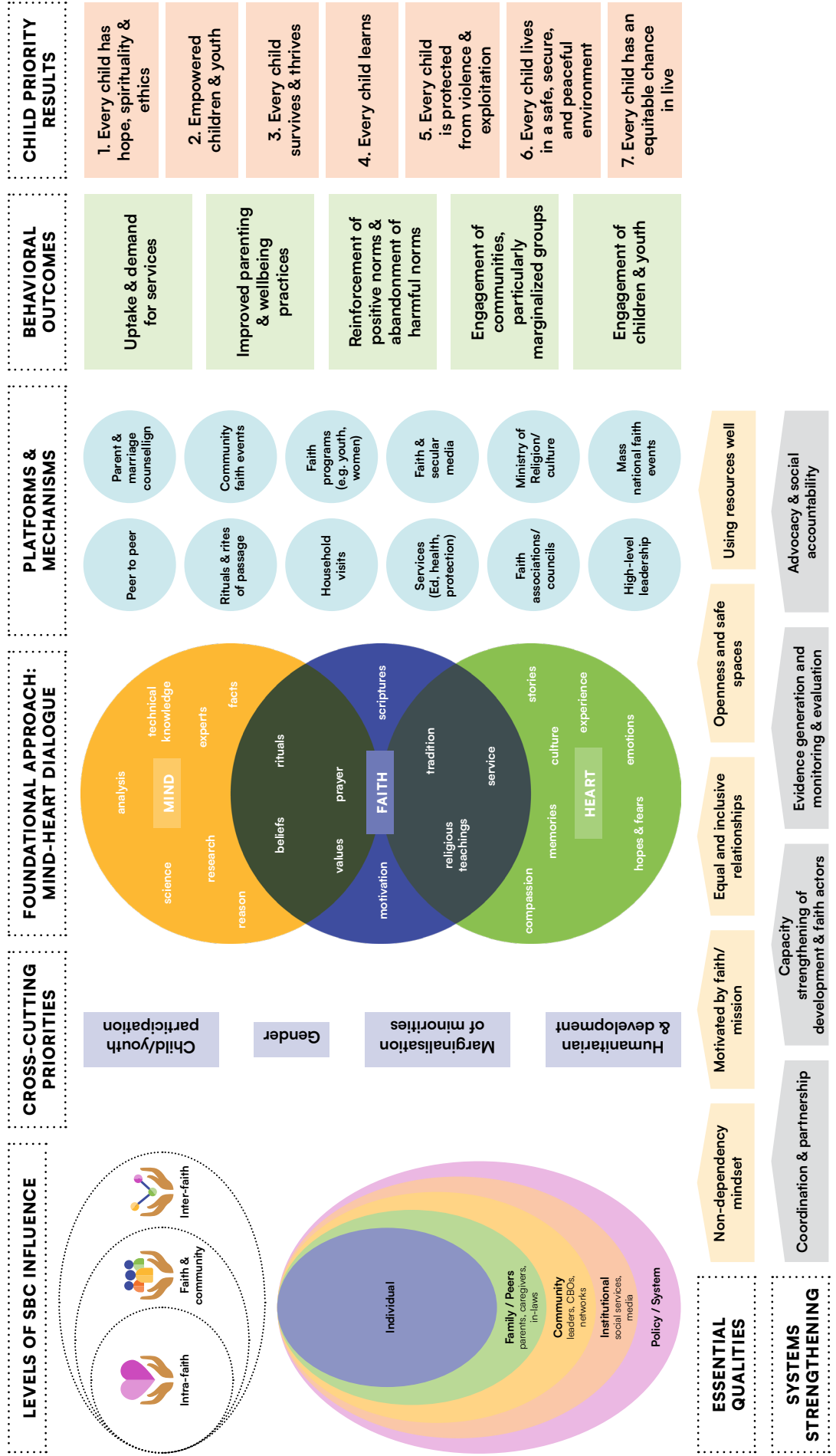
Steps:

1. Explain that the purpose of the exercise is for participants to celebrate the positive changes that are happening, and to learn what can be done to strengthen the work of everyone.

2. Introduce the areas of change you are seeking to focus on, e.g . the behavioural changes from the Journey of Change if you are using it:
 - Uptake of and demand for services
 - Improved parenting and wellbeing practices
 - Empowered children and youth with influence
 - Empowered marginalised communities and groups
 - Reinforcement of positive norms and abandonment of harmful norms
 - Peaceful, secure communities
 - Increased responsiveness from faith institutions
3. Divide people into small groups, encouraging them to listen well (see activity 12) to each other and to celebrate what they have achieved. Ensure that all voices are heard, including children, youth, young women, older women, and other groups that may be marginalised in this specific context.
4. In the groups, ask people to give examples of the ways they have seen positive changes in each of the areas of change and to each share verbally one story each that they think is significant (e.g. because it was the most successful story, or the most representative of the group, or because it helped someone facing extreme challenges).
5. Each group should select one story for each area (if there are no stories about any of the areas, then leave these out). Participants can map the stories out as journeys (e.g. as a road or river) or just tell them verbally, including a focus on:
 - the start date and situation at the beginning of any activities
 - the changes that have been achieved by the time of the current meeting
 - Any challenges or highlights that have been encountered along the way
6. In the plenary, each group then shares one story covering the first area and why it was selected. A note-taker should capture the details of the stories in the person's own words (see template format in Appendix 7). It can help for the facilitator to record the story on their phone, if possible.
7. After hearing the stories, the group of all participants selects one particularly good story for that area and says why they think it is most significant.
8. This is repeated for the other areas of change.
9. After the stories are chosen, the facilitator invites other participants/stakeholders to add their perspective on the changes that have been described in the plenary.
10. Following that, participants are to reflect in the plenary what factors have helped or hindered change. They discuss what lessons can be drawn from this. The facilitator encourages them to identify actions that different groups can take to strengthen positive and sustainable change and to mitigate any hindrances, reminding participants that activities need to be achievable and lasting.
11. Take a photo of the Journeys of Change documented for each story and an action shot photo of the people creating the Journey of Change to illustrate each selected story.

Appendix 1

FPCC Global Theory of Change



Appendix 2

Platforms and mechanisms for engagement

Faith voices and joint actions to influence social and behaviour change can be more powerful and reach a wider scale when they take place across many different platforms and mechanisms that already exist within faith networks. Through Mind-Heart dialogue (MHD) and planning, faith groups can map out these opportunities, prioritising the ones they think will have the most influence, and strategizing how to engage with them. The following provides a list of possible opportunities for influencing change.

The following bullet points describe the branches of the Transformation Tree (page 23).



PARENT AND MARRIAGE COUNSELLING

Religious leaders conduct marriage rites and counselling which are key opportunities for them to facilitate reflection on relationships, self-care and parenting practices (e.g. discouraging child marriage, encouraging the sharing of childcare responsibilities, addressing violence against women and other key themes and practices for child wellbeing).



HOUSEHOLD VISITS

Recognizing that parents are often the first teachers of their children and that many challenges around children's wellbeing start at home, faith communities can organise networks of volunteers trained in MHD to conduct household visits to guide parents on a range of caregiving skills and to provide spiritual or psychosocial support. This can be especially important for the most vulnerable families and parents who may not have received such support through government services.



PEER-TO-PEER

Beyond roles by high-level leadership, peer members of faith communities can be mobilised and trained to facilitate MHD and serve as champions of change. This could include the involvement of male gender champions, to help break the silence around sensitive issues such as gender-based violence; work with women peer mentors to support breastfeeding mothers; or youth peer mentors to support young people suffering from anxiety or depression.



FAITH MEETINGS, CELEBRATIONS, RETREATS

Regular faith meetings (such as weekly communal worship) or faith-related mass gatherings (such as pilgrimages and religious celebrations) or observances (such as annual days of prayer and action that occur at set dates on the calendar) can provide important opportunities for awareness raising and outreach to touch the hearts and minds of a wider population, while religious retreats provide an opportunity for more in-depth MHD sessions.



RITUALS AND RITES OF PASSAGE

Through Mind-Heart listening, dialogue and reflection, religious leaders can find creative ways of adapting the where, when and how of traditional religious rites, rituals and practices without losing their intended meaning, in order to address barriers and opportunities for children and family wellbeing. This can include adapting the timing of religious ceremonies in order to announce women's pregnancies to communities, which has helped to increase women's willingness to attend ante-natal care check-ups. Agreement of religious leaders to perform pre-birth ceremonies outside healthcare facilities has increased women's willingness to deliver their babies there, which can help avoid more risky home births. Adapting methods for washing, dressing and perfuming of corpses in collaboration with health authorities has helped reduce disease transmission in public health emergencies such as Ebola and COVID-19.



FAITH AND SECULAR MEDIA

Developing faith-centred media content and programmes (e.g. talk shows, testimonies, docu-dramas and social media messages) on both faith and secular media platforms can help raise awareness of issues, show religious role models practising desired behaviours, and spark dialogue amongst faith and wider communities. This is an opportunity not only for influencing shifts in attitudes and behaviour, but also for demonstrating how to engage people in MHD.



FAITH-RUN SERVICES

Many faith-based organisations run their own healthcare services or special services, e.g. madrasas, shelters for migrants, drop-in centres for street children, or centres for children with disabilities. These networks of services can provide multiple opportunities for influencing improved self-care practices and for working with vulnerable groups. Faith groups can also work with government-run services, and vice versa, to become more inclusive and change behaviours which may form barriers to people accessing and using them.



CHILDREN AND YOUTH PROGRAMMES

Specific worship and religious programmes organised for children and youth (e.g. Sunday schools, faith-based recreational clubs, youth camps) can provide opportunities for direct MHDwith and for children and young people. This can be done through child-centred activities such as stories, story-telling, drama and videos, which can provide a means of children reflecting on and discussing their own problems and solutions.



ADVOCACY

When changes to policies and laws are needed to protect or improve the lives of children and the wider community, religious leaders can provide an influential force to call for such change. They can develop a common stand through their own denominations and faith professional associations or, even more powerfully, through inter-faith efforts. On the other hand, religious leaders also have an important role to play in mobilising their followers to adhere to existing policies and laws that can help improve lives.

Appendix 3

Google Feedback Form

Create a new form at: <https://docs.google.com/forms/u/O/>, copy/pasting the following questions:

TITLE OF SESSION
<p>Dear participant, Please share your feedback on this Mind-Heart dialogue session. Your opinions are collected anonymously and will be very important to inform the design of future sessions. We look forward to hearing from you. Thank you, in advance, for your feedback.</p>
<p>Please tick the one relevant to you</p>
<p> <input type="radio"/> Faith group participant <input type="radio"/> UNICEF participant <input type="radio"/> Religion for Peace / ACRL participant <input type="radio"/> Other: </p>
<p>1. Considering the webinar as a whole, which of the below best describes it for you?</p>
<p> <input type="radio"/> a. Informative <input type="radio"/> b. Engaging <input type="radio"/> c. Boring <input type="radio"/> d. Confusing </p>
<p>2. Which session did you find the most interesting? Specify sessions.</p>
<p> <input type="radio"/> a. Mind-Heart dialogue scene-setting <input type="radio"/> b. Main Mind-Heart dialogue session <input type="radio"/> c. Small group reflection <input type="radio"/> d. Action planning </p>
<p>3. What could we do differently next time?</p>
<p>4. At the end of the session, how do you rate your comfort level in facilitating the Mind-Heart dialogue activity yourself?</p>
<p> <input type="radio"/> 1. Not comfortable at all <input type="radio"/> 2. Not very comfortable <input type="radio"/> 3. Quite comfortable <input type="radio"/> 4. Very comfortable <input type="radio"/> Not sure <input type="radio"/> Not relevant (as I will not be facilitating any activities myself) </p>
<p>Any other observations you would like to make?</p>

Appendix 4

Power Walk Characters to print

<p>You are an 8 year old girl in primary school in a village. Your parents are farmers.</p>	<p>You are 24, an unmarried woman living with HIV.</p>
<p>You are a widow with four children whose house and land has been taken by your husband's family.</p>	<p>You are 14, an orphan living in a child-headed home and caring for your four younger siblings in a village.</p>
<p>You and your spouse are both subsistence farmers. You have only two years of education and four children under 10. Your elderly parents live with you.</p>	<p>You are the leader of a small religious community. Your wife does not work but spends her time caring for your six children.</p>
<p>You are a 34 year old female teacher in a village. Your husband has a small business at the local market. You have five children aged 4-11 and care for your three nieces.</p>	<p>You are a 40 year old doctor, working at a city hospital. Your spouse is a lawyer and you have three children.</p>

You are a local NGO staff member, responsible for community development programmes.

You are a women's group leader in a large city church.

You are 15 year old girl. You are living with ongoing sexual violence from your uncle and have recently become pregnant.

You are a 12 year old boy. You were born with cerebral palsy and live in a village with your parents and siblings.

You are a 45 year old religious leader in a village.

You are a 29 year old male farmer but last year you were injured in an accident and now cannot walk.

You are a teenage girl in a village who has the household responsibility to fetch water from the local stream but fears violence on the way.

You are a 60 year religious leader living and heading up a large community.

You are a 75 year old woman with no close family alive. Your home collapsed in floods and your fields and crops were destroyed.

You are a woman who has recently become literate through a literacy programme from your religious community and is part of a savings group.

You are a young UNICEF programme manager recently married and who has relocated to the capital city to manage an EU funded project.

You are a government official working in the Ministry that oversees children's affairs.

You are a district government official working in a rural district.

You are an 18 year old girl from a religious family living in a rural area, married with a child on the way.

Appendix 5

Find Someone Who...! template

Write the person's name in the box who fulfils that statement — try to find a different person for each box. When you have at least one name for each box, shout 'bingo'.

<p>Had a wedding in the family in the last year</p>	<p>Has met a celebrity</p>	<p>Has saved a life or tried to</p>	<p>Founded their own organisation</p>
<p>Has climbed a mountain</p>	<p>Has performed a dance on stage</p>	<p>Speaks five or more languages</p>	<p>Made the clothes they are wearing</p>
<p>Has more than five children</p>	<p>Sits on a Board of Trustees of Directors</p>	<p>Has lived over five years outside their country of birth</p>	<p>Loves cooking more than any other hobby</p>

Appendix 6

Bicycle Planning

NAME: _____

FAITH GROUP / ORGANIZATION: _____

DATE: _____

INDIVIDUAL COMMITMENT	
ORGANISATIONAL COMMITMENT	
What could I / we do to take forward FPCC?	Actions
What existing work should we continue doing, or strengthen, to take forward FPCC? (the bike wheels)	
What should we stop doing, or reduce, to take forward FPCC? (the brakes)	
What could we do differently, or better, to take forward FPCC? (the pedals)	



ORGANISATIONAL COMMITMENT	
What will I/we do to get the right people on board and develop a shared vision within my group or organisation?	Actions
<p>What other groups can I/we involve to take FPCC beyond existing partnerships, e.g. with children, youth groups or women's networks?</p>	
<p>What length can I/we do the sessions to get people to share the vision?</p>	
<p>What activities will I/we use? (please check the guide for ideas)</p> <ul style="list-style-type: none"> • Listening exercise • Mind-Heart dialogue activities • Action planning tools 	
NATIONAL COMMITMENT	
<p>What is my/my organisation's role to bring about change on a national level?</p>	

Appendix 7

Significant Story of Change template

1. Introduction

Story title:

Date:

Location:

Why the story was chosen:

2. The initial situation (who was reached and what challenges did they face):

3. Resulting changes and evidence (positive changes in behaviour and the results for children, their families and communities):

4. How change happened (the key factors that brought and sustained change through the program, and the factors related to the wider context that helped and hindered change, including the role of faith):

5. Lessons learned (ways to strengthen the work going forward, sustain the positive changes and inspire others to follow suit):

Appendix 8

MEAL Framework questions

Focus group questions on organisation/partnership

QUESTIONS

- 1 Are the benefits of FPCC distributed amongst all, including the vulnerable and marginalised, in a fair and equitable way?
- 2 Level of inclusion/ownership: have local faith actors from different groups been suitably involved in the ongoing management of the FPCC program?
- 3 Has there been co-ordination between FPCC, other organisations (including local FBOs) and local officials, before or since FPCC started, to ensure that support provided would be complementary?
- 4 Are there other local FBOs operating in the same target areas? If yes, which are these, and has FPCC attempted to include them in the planning and activities? If yes, how has this contributed to improved coordination, coherence and efficiency?
- 5 To what extent has FPCC contributed to increased, improved and more inclusive co-ordination of child-focused communication and engagement within faith groups (intra-faith), across faith groups (inter-faith), and across faith and other organisations?

Interview questions on communication/engagement approaches

To be asked both to FPCC facilitators and participants

MIND-HEART DIALOGUE

- 1 To what extent has the capacity of Mind-Heart dialogue facilitators improved on the following components:
 - **Heart:** listening to different groups about their priorities or concerns related to the agreed focus areas, reflections on triggers and drivers of attitudes and behaviours (e.g. childhood memories, differences in levels of power, gender influences, societal expectations, etc.)
 - **Mind:** consideration of technical, scientific information, experts or material in accessible ways
 - **Faith:** connection with religious motivation, religious teachings or sacred texts

INCLUSION

- 1 What systems did the FPCC programme put in place in order to allow community members, of all backgrounds, to have increased participation in the design, implementation, and review of the initiative? Please explain these systems.
- 2 Have you or the community been actively engaged in these systems, and participating in the FPCC initiative?
- 3 What, if any, changes need to be made to FPCC to make it more participative?

EMPOWERMENT AND OWNERSHIP

- 1 Have there been fair and equitable opportunities for youth and women groups to influence the direction of FPCC? Please provide examples.

PARTICIPATION

- 1 **Consultative:** Were local people (men, women, boys, and girls of all ages as well as religious and ethnic backgrounds) consulted in the design, implementation and assessment of the FPCC initiative?
- 2 **Relevance:** Are the objectives of FPCC relevant to the needs and priorities of the target community? Are the activities appropriate to meet these objectives? Is the assistance being provided culturally appropriate?

DIVERSITY OF APPROACHES

- 1 To what extent has FPCC influenced the use of a wider range of communication and engagement spaces, entry points and platforms as outlined in the Journey of Change?

BUILDING ON LOCAL CAPACITY

- 1 To what extent has local capacity (including that of youth, women, and marginalised groups) been supported and further developed during FPCC, to help deliver the programme aims?
- 2 How does this compare to before FPCC? Has the situation improved? If yes, how? If not, why not?
- 3 Has FPCC provided a fair opportunity to the targeted community itself to be active in the implementation of FPCC? Please give examples. If it has not provided a fair opportunity, please also explain.
- 4 To what extent has the targeted community itself, and its knowledge or expertise, been actively utilised in the implementation of FPCC? Please give examples. If you feel more could have been done, please explain.

Interview questions on communication/engagement approaches

Attitudes to faith engagement and increased systemic integration into country programming


QUESTIONS

- 1 Had you worked on any initiatives prior to this FPCC program, in relation to faith engagement aimed at bringing about social and behavioural change?
- 2 Have you received any communication about the progress of FPCC since its inception?
- 3 Have you made an effort to engage with the FPCC project since its inception?
- 4 Assuming you knew about FPCC, what was your initial opinion regarding it?
- 5 Has the initiative so far changed any of your views on engagement of faith actors in development programming? If yes, how so?
- 6 Have you integrated any of the precepts into other projects or programmes that you are working on? If not, could you explain why not?
- 7 Are there any suggestions, based on your recent experience, that you feel could improve uptake of the FPCC programme either by yourself or across UNICEF?

Appendix 9

The Egan 'Skilled Helper' Change Model

The Egan 'Skilled Helper' Change Model consists of three stages aimed at promoting behaviour change or maintenance. Here is a breakdown of each stage:




STAGE 1: EXPLORING LIFE

Life (problem exploration and clarification): In this initial stage, participants engage in self-reflection and exploration of their lives. They acknowledge and accept their present reality, seeking to identify any overlooked issues. The focus is on clarifying the problems or challenges at hand and gaining a deeper understanding of their impact on individuals, families, and communities.

Stage 1 can be divided into three sub-stages:

- 1a: Telling the story
- 1b: Focusing
- 1c: Blind spot - looking for what has been overlooked




STAGE 2: THE NEW PICTURE

Developing new perspectives and setting goals

Once the problems have been identified and clarified, participants move on to exploring alternative perspectives and behaviours. They critically evaluate these new possibilities, gradually forming a “new picture” of what they desire. Through this process, participants are encouraged to set meaningful goals aligned with their preferred reality. This stage involves envisioning a different future and committing to the actions necessary to achieve it.

Stage 2 can be divided into three sub-stages:

- 2a: Alternative behaviours
- 2b: Critiquing
- 2c: Choice and commitment



STAGE 3: ACTION

The third stage involves translating the goals and commitments into concrete actions. Participants work together to determine what can be done to address the identified issues. They collaboratively develop action plans, considering the specific steps required to bring about change. Finally, participants implement their plans, actively engaging in the actions they have designed and committed to.

Stage 3 can be divided into three sub-stages:

- 3a: What can be done?
- 3b: Planning - how can we do it?
- 3c: Action - do it!

Appendix 10

Pertinent FPCC Mind-Heart Dialogue themes (behavioural outcomes)

The Mind-Heart dialogue (MHD) approach can be adapted and applied to diverse circumstances, and we encourage facilitators to tailor it to respond to any issues pertinent to their context. That being said, FPCC has historically prioritised work with faith leaders in the following critical issues affecting children:

1. UPTAKE AND DEMAND FOR SERVICES

Supporting access and completion of basic education: FPCC aims to play a role in ensuring that all children have the opportunity to receive quality education and develop essential skills for their future.

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Promoting children immunisation: FPCC strongly supports immunisation programmes for children, as they are critical for protecting their health and well-being.

2. IMPROVED PARENTING AND CAREGIVING AS WELL AS WELLBEING PRACTICES

Child health and wellbeing: FPCC aims to promote the physical, mental, spiritual and social well-being of children. It encompasses various aspects of a child's life, including their physical health, emotional well-being, social interactions, and overall development. It is important to prioritise and promote the health and well-being of children as it lays the foundation for their future growth and success.

3. REINFORCEMENT OF POSITIVE PRACTICES AND ABANDONMENT OF HARMFUL NORMS

Eliminating incidents of child abuse and neglect: A critical mandate of FPCC is to advocate for safeguarding and protection of children. This requires a comprehensive approach involving various stakeholders, including individuals, families, communities, government and non-governmental entities. FPCC will always be at the forefront of this work to ensure children are well protected and safeguarded.

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Prevention and response to child marriages: FPCC aims to help prevent child marriages, which refers to any marriage where at least one of the parties or both is under the age of 18. It is a violation of human rights and has severe negative consequences for the well-being and development of children, particularly girls. FPCC supports the concerted efforts of governments, non-government organizations, faith actors, communities and individuals to address child marriage incidences.

4. ENGAGEMENT AND EMPOWERMENT OF MARGINALISED GROUPS

FPCC promotes the inclusion of the voices and participation of the marginalised and vulnerable including children, women, youth, persons living with disabilities and other groups for development and influence on family, community and government. It specifically encourages children's right to participation and to be heard in the decision-making process especially in matters that affect them.

5. INCREASED RESPONSIVENESS FROM FAITH INSTITUTIONS FOR SOCIAL AND BEHAVIOURAL CHANGE

FPCC aims to have social and behavioural change (SBC) approaches integrated into policies, strategies, budgets and curriculum of faith institutions.

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FPCC supports strategic advocacy on matters affecting children, families and communities on social services.

6. PEACEFUL SECURE COMMUNITIES

FPCC's goal is to ensure that every child lives and thrives in a safe, secure and peaceful environment.

Appendix 11

Planning and reporting template

Mind-Heart dialogue (MHD) facilitators planning and reporting template

Name of MHD facilitator(s)

Name of convening partner

What issue related to socio-cultural norms that affect children do you want to address through the MHD sessions?

- Respond to access to education by the children
- Prevent child abuse in all its forms
- Promote child immunisation/Covid-19 vaccination
- Access to health care services
- Harmful practices that have negative impact on children
- Other (please specify):

Reasons for holding the MHD session

- Create awareness
- Reach out to the ultimate beneficiary
- Initiate similar dialogue sessions to others
- Other (please specify):

Objectives of the MHD session

- To promote understanding of diverse perspectives, experiences and ideas
- To build relationships through trust, respect and empathy
- To develop innovative approaches to address challenges
- To inspire action
- Other (please specify):

Duration of the MHD session (tick as appropriate)

- 1 hour
- 2 hours
- 1/2 day
- Other (please specify):

Dates

Venue

Who are your target audience?

- Children
- Religious leaders
- Women
- Youth
- Community leaders
- Other (please specify):

Total number of target beneficiaries per MHD sessions:

Which MHD activities do you plan to use? Please list according to the Facilitator's Guide²².

Name and add the contact details of children's officer or relevant department that will be present and will be engaged during and/or after the MHD session

List the training resources required for the MHD session:

What are some of the lessons learnt?

²²<https://www.faith4positivechange.org/mind-amp-heart-dialogue-resource-guide>

Appendix 12

MEAL indicators

MHD-related Monitoring Evaluation Accountability and Learning (MEAL) indicators to be measured on both the short term and long term.

OUTPUT	OUTCOMES	
	Intermediate	Long term
<p>Output 1: Increased use and application of MHD approach by faith and development actors</p>	<p>Intermediate Outcome 1.1: Improved knowledge, attitudes and skills on MHD as an intervention approach for children’s issues by faith actors</p> <p>Intermediate Outcome 1.2: Faith actors more engaged in policy making and service improvement’s advocacy with national and local governments as per their engagement in the MHD approach.</p>	<p>Outcome 1.0: Improved capacity of faith actors to utilise the Mind Heart Dialogue approach when intervening on issues of children</p>
OUTCOME INDICATORS		
<p>Country level indicators</p>	<p>(1.1) % of facilitators trained on MHD who demonstrated acquired skills and learning as per post-training assessment</p> <p>(1.2) # of community dialogues organised by facilitators on child priority results</p> <p>(1.3) # of individuals (disaggregated) reached by the MHD approach</p>	
<p>Regional level indicators</p>	<p>(1.4) % of trained facilitators actively conducting community dialogues on child priority issues and sharing session reports per country</p>	
<p>Global level indicators</p>	<p>(1.5) % of surveyed faith and development actors who believe the MHD approach was beneficial when intervening on children’s issues</p> <p>(1.6) # of community dialogues organised by facilitators on child priority results</p> <p>(1.7) # of individuals (disaggregated) reached by the MHD approach</p>	

