# TOOL 22: Developing a CEA emergency plan

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#### Purpose of this tool

This tool provides guidance and a template for developing a detailed CEA strategy and plan for emergency response operations. It also provides guidance on how this plan can be used to integrate CEA into the IFRC emergency response templates, including the Emergency Appeal, Operational Strategy, and Implementation Plan. It can be used by National Society CEA staff or CEA surge, but it is critical the CEA emergency plan is developed jointly by the National Society and CEA surge. For CEA surge, [Tool 23: SOPs for CEA in emergencies](https://communityengagementhub.org/resource/cea-toolkit/) provides an overview of the main tasks and responsibilities of IFRC community engagement and accountability (CEA) staff or delegates in IFRC emergency operations.

#### The IFRC emergency response templates

The IFRC has three key documents for emergency response operations where CEA should be integrated, which are outlined below. CEA should be integrated throughout these documents, but also has a dedicated section under ‘planned operations’ alongside other sectors, such as shelter, health, cash, and protection, gender and inclusion (PGI). Please note, the IFRC emergency templates are still being field tested and may change. We will update this guidance document as necessary to reflect any changes that affect how CEA should be integrated.

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| **Document** | **What is it?** | **How to integrate CEA** |
| **Emergency Appeal (EA)** | Short 3–4-page document, launched within the first 48 hours of a response. Mainly for fundraising purposes. | This is a very short document and produced early, so it is not expected or possible to include a lot of detail on CEA. Include a paragraph in the dedicated CEA section explaining how CEA will support the response and ensure adequate funding for CEA is included in the budget. See the vision section in the template CEA plan below for a paragraph you can edit and use for the EA. |
| **Operational Strategy (OS)** | More detailed outline of the situation, needs, capacities and activities and plans. First version published within 7 days.  | CEA should be integrated in the different sections of this plan, including the objectives and actions CEA will focus on. The template CEA plan below follows the format of the OS so you can lift content from the more detailed CEA plan to add to the OS.  |
| **Implementation plan (IP)***Template still in development* | Only used at country level and not shared with Geneva. The IP is a planning tool based on the available funds, not the overall ask like the EA. It can be updated regularly without a heavy validation process.  | CEA should be integrated in the different sections of this plan, including a detailed work plan for CEA. The template CEA plan below can be used to inform the IP. |

#### CEA emergency plan template and guidance

*This template aims to help National Society CEA staff and CEA surge develop a detailed CEA plan for the operation and provide a rationale for the CEA approaches and activities chosen. This CEA plan of action will inform CEA content to be included in the Emergency Appeal, Operational Strategy, and country-level Implementation Plan. As much as possible the structure of* ***this document mirrors the Operational Strategy****, with additional sections included where needed to capture CEA information. This document should be short and succinct and not exceed 5-6 pages. This is a living document and should be started within the first week of the response and updated regularly as new information is collected and the context develops.*

**VISION**

*What is the role of CEA within the operation? Which sectors will CEA support and how? What issues will CEA address and how? For example:*

The operation will be based on a thorough understanding of community needs, priorities, and context, and will ensure ways of working collaboratively with people and communities by integrating meaningful community participation, timely, open, and honest communication, and mechanisms to listen to and act on feedback throughout the response. This promotes good accountability to communities and enables people to lead and shape changes in their lives and on their own terms. This includes*…*

*Add more specific details of which sectors CEA will support and how, if available and space allows.*

*This paragraph can be used in the Emergency Appeal, as well as the Operational Strategy.*

**DESCRIPTION OF THE EVENT**

*Use this section to make the case for the CEA activities and approaches you want to include in the response. There should be a clear link between the impact and severity of humanitarian conditions and the CEA activities you choose to implement. Use the CEA secondary and primary data collected during the assessment and context analysis process (including socio-behavioural data) to complete this section.*

*This section includes guiding questions. You are not expected to answer every question in your plan, only those that are relevant to the context you are working in. You can complete this section with narrative or using bullet points.*

**Impact**

* *Provide a brief overview of the disaster, scope and scale, numbers of people affected.*
* *Damage caused to infrastructure that affects the National Society’s ability to access, communicate with, and receive feedback from communities.*

**Social and cultural context**

*This section does not appear in the Operational Strategy, but it is important for the CEA plan and country-level Implementation Plan to capture the context in communities and the impact this could have on the operation. In this section, include information collected during the needs assessment and context analysis including:*

* *Community demographics and structures, e.g., religious and ethnic groups, languages, literacy, sources of livelihoods, who the leaders are and if they are trusted/trustworthy, active community groups and associations, other stakeholders*
* *Community relations and communication, e.g., how decisions are made in the community, e.g., regular meetings or a committee, which groups, if any, are excluded, levels of social cohesion and trust, how people communicate and access information, how problems are resolved, any sources of conflict or tension, level of trust in authorities*
* *Culture and beliefs, e.g., role of gender and diversity (if not covered in a PGI briefing), discrimination towards any groups, any social and cultural values and beliefs relevant for the operation, e.g., religious practices, gender norms, social norms, or traditional beliefs*
* *Community capacities, e.g., local resources, skills, and capacities of different groups and how these could contribute to the response*
* *Perception of the Red Cross Red Crescent or aid agencies in general, e.g., if there is any mistrust or animosity towards the response in the community, people’s awareness of the National Society or Red Cross Red Crescent*
* *Knowledge, attitudes, practices, and beliefs about any risks being addressed through the response, particularly for an epidemic e.g., existing knowledge about the risk and any gaps, level of threat people attach to the issue, common beliefs or rumours, stigma and barriers to safer practices.*

**Severity of humanitarian conditions**

*This section outlines the humanitarian impact of the crisis and resulting needs and mirrors the Operational Strategy. Guidance is included on what to consider and include for CEA. Consider which groups and sub-groups in a community are more affected, and/or most at risk for each area.*

1. **Impact on accessibility, availability, quality, use and awareness of goods and services.**
* *How has the disaster affected people’s access to information? Are mobile networks, radio stations and TV still working? Have people lost their communications equipment?*
1. **Impact on physical and mental well being**
* *Are people traumatised by the crisis?*
* *Are people feeling frustrated by the situation and/or response? Do they feel listened to and that their needs are understood and are trying to be met by response agencies?*
1. **Risks & vulnerabilities**
* *Have community structures been disrupted? Are community members separated from family members and normal support structures? For example, are people in camps? Are community leaders still in place? Are churches and mosques still functioning?*
* *Are there any groups who have become more vulnerable, marginalized or excluded by the crisis?*
* *Do people have access to information about what is happening with the response, where to access support, or how to stay safe from further harm?*
* *Do people have a means of asking questions, making their needs clear or raising complaints? Is there a safe means of reporting corruption or sexual exploitation or abuse?*
* *In an epidemic, what knowledge, practices, practices, and beliefs do people have about the epidemic? For example, are people engaging in risky practices? Do they lack knowledge on prevention measures?*

**Capacities and Response**

1. **National Society response capacity**
* *National Society CEA experience and capacity. Do they have a CEA manager or focal point? What kind of CEA approaches have they implemented e.g., Is there a feedback mechanism in place for the NS? Are they experienced in participatory programme approaches? Have they used tools such as radio, mobile cinema, or SMS etc? Do they have a CEA policy or strategy? What is the NS capacity at branch level in the affected areas? Do they have CEA trained staff and volunteers? Are these people available?*
* *Does the NS have access and acceptance in the affected communities?*
1. **National capacity and response**
* *What is the role of government in relation to CEA? Are the coordinating information that is shared with the public? Is the National Society coordinating with government on CEA-related issues?*
* *What other community groups, local organisations, or civil society groups are responding to the crisis, whose capacity could be supported through the response*
1. **International capacity and response**
* *Any CEA-related activities led by the UN or other NGOs or actors*
* *Any interagency coordination mechanisms in place such as CEA or Accountability to Affected Populations (AAP), or Communication with Communities (CwC) Working Groups*
1. **Gaps in the response**

*What are the potential CEA gaps or needs within the operation? For example, is there an urgent need to share critical information with communities? Establish participatory approaches to planning or agreeing selection criteria with communities? Does the response have a feedback mechanism in place?*

**Operational Constraints**

*Any practical, logistical, technical, and human resource barriers that could affect the operation’s ability to be accountable to communities, meet their needs, or engage effectively, and steps to mitigate these. For example, is physical access to communities difficult, so other ways to engage people will be needed? Is there a lack of CEA trained staff and volunteers? Is there a high level of mistrust of aid agencies and the Red Cross Red Crescent? Will it be difficult to meet people’s stated needs and priorities?*

**Federation-wide approach**

* *Are any other members of the Movement engaged in and supporting CEA within the response e.g., ICRC or partner National Societies?*
* *How are CEA approaches being coordinated within the response across the Movement?*

**CEA OPERATIONAL STRATEGY**

*Use this section to set out your CEA strategy and plan. The CEA approaches and activities presented here should address the CEA needs and risks shared in the previous sections, be in line with the context and needs analysis, and the support the overall response to meet its objectives. Content from this section will inform the dedicated CEA sections under ‘planned operations’ in the Emergency Appeal, Operational Strategy and Implementation Plan.*

**Objective**

*Explain in a few sentences why it is important to integrate CEA into the operation. This can be similar to the vision statement at the start of this document.*

Community engagement and accountability will support the response to have a thorough understanding of community needs, priorities, and context, and ensure ways of working collaboratively with people and communities by integrating meaningful community participation, timely, open, and honest communication, and mechanisms to listen to and act on feedback throughout the response. This promotes good accountability to communities and enables people to lead and shape changes in their lives and on their own terms.

**Priority actions\***

*List the priority CEA actions that will be implemented to support the objective above to be met. Suggested priority actions are below that can be edited to suit the response. These priority actions correspond to the outcomes in the detailed CEA workplan below, which also provides outputs, activities, and indicators.*

*\*The term priority actions is used here to align with the language in the Operational Strategy.*

1. Integrate CEA across the response so staff and volunteers have the knowledge and capacity to engage communities effectively
2. Ensure the response is based on a thorough understanding of community needs, priorities, and socio-cultural context, including preferred ways to receive information, participate and give feedback
3. Establish mechanisms that enable communities and key stakeholders to participate in planning and guiding the response
4. Keep communities well informed about operation plans, progress, activities, selection criteria and distribution processes, delays and challenges, and their rights and entitlements
5. Collect, respond to, and use community feedback to guide the response.

**Adapted for epidemics (outcome 3, 4 and 5)**

1. People and communities have access to timely, accurate and trusted information and support to enable them to take action and protect their health and prevent the spread of infection
2. People actively participate in addressing *<insert name of disease or epidemic>* by promoting safe, healthier practices, facilitating community action, and helping to reduce fear, stigma, and misinformation.

#### CEA in emergencies workplan

The log frame below provides a choice of outcomes/priority actions, outputs, and activities for CEA in an emergency response. Not all the outputs, indicators or activities need to be included – choose the most relevant for your context and delete the rest. Activities are included for both the minimum and advanced measures for CEA in emergencies, as per the [CEA Guide](https://communityengagementhub.org/resource/ifrc-cea-guide/) (from p.74).

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| **COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA) EMERGENCY RESPONSE PLAN** |
| **Outcome(s) and Outputs** | **Indicators** | **Means of Verification** |
| **Outcome 1:** CEA is integrated across the response and staff and volunteers have the knowledge and capacity to engage communities | % of staff and volunteers working on the operation who have been briefed on CEA | Briefing and HR records |
| **Output:** CEA training and support is provided to staff and volunteers | % of months with a community engagement and accountability focal point for the operation | Training records |
| **Activities** | M1 |  M2 | M3 | M4 | Budget | Lead  |
| All staff joining the response are briefed on CEA, including their roles and responsibilities  |  |  |  |  |  |  |
| All staff joining the response are briefed on the Code of Conduct and prevention of sexual exploitation and abuse and corruption |  |  |  |  |  |  |
| A CEA delegate/lead is recruited/identified for the response |  |  |  |  |  |  |
| CEA in emergencies training is provided to response staff  |  |  |  |  |  |  |
| The one-day communication and feedback skills training is delivered to response volunteers |  |  |  |  |  |  |
| CEA is a standing agenda item in operational team meetings, including how to respond and act on community feedback, concerns, requests and changes in needs and context |  |  |  |  |  |  |
| **Outcome 2:** The response is based on a thorough understanding of community needs, priorities, and context, including preferred ways to receive information, participate and give feedback | % of community members who feel the aid provided by the operation currently covers their most important needs | Community survey or PDM |
| **Output:** Communities are consulted on their priority needs and preferred ways to receive information, participate and give feedback through a needs assessment | The operation is informed by a needs assessment | Assessment report |
| **Output:** A rapid context analysis is carried out to map community groups and leaders, power dynamics, gender and diversity roles, cultural and social values, conflict, and existing capacities | The operation is informed by a context analysis | Assessment or context analysis report |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Consult key stakeholders in the community on the best way to carry out the assessment |  |  |  |  |  |  |
| Brief or train assessment teams on the assessment purpose and how to communicate clearly and honestly with communities, and on the Code of Conduct and zero tolerance for sexual exploitation and abuse and fraud or corruption |  |  |  |  |  |  |
| Carry out a community meeting to introduce the National Society and explain the purpose of the assessment in advance, and answer any questions |  |  |  |  |  |  |
| Plan and conduct a rapid context analysis, to understand the structures and groups in the community, capacities, power dynamics, knowledge, practices and behaviours, cultural and social values, who is marginalized or at-risk, and who the other stakeholders are |  |  |  |  |  |  |
| Include questions about people’s needs, opinions, priorities, and preferred ways to receive information, participate and give feedback into the rapid needs assessment  |  |  |  |  |  |  |
| Include opportunities for two-way conversation with community members in the needs assessments e.g., focus group discussions |  |  |  |  |  |  |
| Coordinate assessment plans with external partners and local authorities to avoid duplication |  |  |  |  |  |  |
| **Outcome(s) and Outputs** | **Indicators** | **Means of Verification** |
| **Outcome 3:** Communities and key stakeholders participate in planning and guiding the response  | % of community members who feel their opinion is taken into account during operation planning and decision-making  | Community survey, PDM |
| **Output:** Response plans are discussed and/or developed with key stakeholders in the community  | # of different community groups and representatives consulted on response plans, per geographical location (e.g., community and religious leaders, women's groups, youth, livelihoods associations, people with disabilities) | Community meeting minutes, operation reports |
| **Output:** *(if selection criteria are used in the response)* Selection criteria and distribution processes are discussed and agreed with community members  | % of community members who know how the operation decided who should receive aid and who does not | Community survey, PDM |
| **Output:**  Mechanisms are set up to support community members to participate in managing the programme and making decisions  | # of opportunities for community participation in managing and guiding the operation (e.g., number of committee meetings, etc) | Operation reports, community meeting minutes |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Discuss response plans with key stakeholders in the community, including leaders, heads of community groups and National Society volunteers  |  |  |  |  |  |  |
| Participatory planning workshops with a diverse range of groups in the community to agree response outcomes, activities, roles, and responsibilities |  |  |  |  |  |  |
| Discuss with key community representatives how the National Society should work with them during the response, e.g., how people should participate, be kept informed, and provide feedback |  |  |  |  |  |  |
| Participatory planning workshops with a diverse range of groups in the community to agree how the community and the National Society should work together during the response, e.g., how people should participate, be kept informed, and provide feedback |  |  |  |  |  |  |
| Internal and external planning meetings to check response plans are complementary, not duplicative, and are not making commitments to the community that can’t be met |  |  |  |  |  |  |
| Discuss or plan selection criteria with the community, consulting a diverse range of groups |  |  |  |  |  |  |
| Use community-based targeting processes to identify who should receive support |  |  |  |  |  |  |
| Discuss or plan distribution processes with community members and key stakeholders, including the best days, times, and methods and how to protect people’s safety and dignity  |  |  |  |  |  |  |
| Community meeting to present response plans to the community for approval |  |  |  |  |  |  |
| Establish, or leverage existing, approaches to involve the community in key decisions about the operation e.g., regular community meetings or focus group discussions  |  |  |  |  |  |  |
| Establish, or leverage existing, mechanisms to hand over more decision-making power to communities to manage and guide activities, including implementing their own community-led activities and solutions e.g., community committees or community-led action plans |  |  |  |  |  |  |
| Hold regular *(specify weekly, bi-weekly, monthly)* meetings with the community committee or representatives and discuss operation progress, activities, decisions or changes, challenges, feedback raised, and exit plans |  |  |  |  |  |  |
| Hold regular FGDs with different groups in the community, including volunteers, to check if the operation is meeting people’s needs, there are no negative unintended consequences, and people are satisfied with the quality of information, participation and influence they have |  |  |  |  |  |  |
| Discuss what should happen after the operation ends and agree an exit plan with communities |  |  |  |  |  |  |
| Include questions to measure community satisfaction with the timeliness, quality and effectiveness of support provided, and improvements for future responses in the end line evaluation  |  |  |  |  |  |  |
| Involve communities in planning the end line evaluation  |  |  |  |  |  |  |
| Organise a community-led end line evaluation  |  |  |  |  |  |  |
| Discuss the end of operation evaluation findings and next steps with community members |  |  |  |  |  |  |
| **Outcome(s) and Outputs** | **Indicators** | **Means of Verification** |
| **Outcome 4:** Community members are well informed about operation plans, progress, services, activities, selection criteria and distribution processes, delays and challenges and their rights and entitlements | % of community members who feel the operation has communicated well about plans and activities | Community survey, PDM |
| **Output:** Information is shared regularly with the community about the operation, using the best communication approaches for different groups | # and type of methods established to share information with communities about what is happening in the operation, including selection criteria if these are being used | Programme reports and plans |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Identify the best channels for sharing information with communities based on the assessment data and discussions with community members during the planning phase |  |  |  |  |  |  |
| Develop a communication plan setting out what information will be shared, when, with whom and how and discuss this in operation meetings |  |  |  |  |  |  |
| Set up communication channels and materials, e.g., put up noticeboards, plan community meeting schedule, establish an SMS system etc |  |  |  |  |  |  |
| Regular meetings with community volunteers to keep them informed of operation plans  |  |  |  |  |  |  |
| Monthly community meetings to update on operation progress and answer questions |  |  |  |  |  |  |
| Communicate selection criteria widely and clearly to recipients and non-recipients |  |  |  |  |  |  |
| The closing of the operation is communicated clearly to communities and volunteers, including what will be handed over to the community and alternative sources of support |  |  |  |  |  |  |
| Regular FGDs to check the operation is using the most effective channels, approaches, and languages to reach different groups and that information is received and useful |  |  |  |  |  |  |
| **Outcome(s) and Outputs** | **Indicators** | **Means of Verification** |
| **Outcome 5:** Community feedback is collected, responded to and used to guide the response | % of community members, including marginalized and at-risk groups, who know how to provide feedback about the operation | Community survey, PDM |
| **Output:** Establish a feedback mechanism for the operation in consultation with communities and programme staff | # and type of methods established to collect feedback from the community  | Operation plans and reports |
| **Output:** Analyse, respond, and act on community feedback, and use it to make changes and improvements to the operation | # of operational decisions made based on community feedback | Feedback database and meeting minutes |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Discuss what kind of feedback mechanism would be needed for the operation in coordination meetings |  |  |  |  |  |  |
| *(If the National Society has a permanent feedback mechanism)* Identify how the National Society feedback mechanism can be adapted and used to support the response |  |  |  |  |  |  |
| Discuss the proposed feedback mechanism with communities through meetings and FGDs *(if this was not already done during the planning phase)* |  |  |  |  |  |  |
| Set up the feedback mechanism, including systems for collecting, responding, analysing, and referring feedback to other organisations |  |  |  |  |  |  |
| Train all those involved in running the feedback mechanism on how it will work and their role  |  |  |  |  |  |  |
| Brief all operation staff and volunteers on the feedback mechanism so they can explain it accurately and clearly to communities  |  |  |  |  |  |  |
| Advertise the feedback mechanism to communities through preferred channels |  |  |  |  |  |  |
| Discuss community feedback and monitoring data in operation team meetings as a standing agenda item, including how to act on it by adjusting the response  |  |  |  |  |  |  |
| Monitor how the feedback mechanism is working by analysing the volume of feedback received and who it comes from  |  |  |  |  |  |  |
| Regular FGDs to check people are aware of and feel comfortable using the feedback mechanism  |  |  |  |  |  |  |
| Capture case studies documenting how community feedback has been used to improve the response |  |  |  |  |  |  |
| **Outcome(s) and Outputs***Outcomes 6 and 7 below are in addition to the outcomes above, which are relevant and necessary for any type of response. However, the outcomes below have been adapted specifically for an epidemic response.* ***Discuss and plan the use of these outcomes with the relevant health leads to ensure they are in line with the wider health response.***  | **Indicators** | **Means of Verification** |
| **Outcome 6 (for epidemics):** People have access to timely, accurate and trusted information that supports them to take action to protect their health and prevent the spread of infection | % of community members who say they trust the information and services provided by the <insert name of National Society> about the epidemic | Response reports and meeting minutes |
| **Output:** Identify the most trusted channels and sources of information in the community | # of <insert approach used e.g., *radio shows, radio spots, SMS sent, social media posts, mobile cinemas or drama shows etc>* | Operation reports |
| **Output:** Share timely, accurate information about *<insert name of disease or epidemic>* through trusted mass communication channels | # of people reached through *<insert the communication channels being used e.g., radio, SMS, social media, mobile cinemas etc>* | Radio/TV station audience figures # of SMS sent# of views/likes on social media# of people attending events |
| **Output:** Analyse, respond, and act on community feedback and social data about behaviours and use it to make changes and improvements to the response | # and type of methods established to proactively track community beliefs, suggestions, questions, rumours, and complaints about the behaviour change issue and the National Society | Perception and feedback reports |
| **Output:** Update information shared about *<insert name of disease or epidemic>* regularly based on the beliefs, fears, rumour, questions, and suggestions in communities  | # of programme/response approaches adapted and improved as a result of community feedback | Programme reports, programme/operation meeting minutes |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Train staff and volunteers on community engagement, with focus on behaviour change and risk communication approaches |  |  |  |  |  |  |
| Carry out a context analysis and community mapping to understand the structures, groups, power dynamics, capacities, beliefs and challenges and needs |  |  |  |  |  |  |
| Identify the best channels for sharing information about *< insert name of disease or epidemic >* with communities based on the assessment data and discussions with community members during the planning phase  |  |  |  |  |  |  |
| Adapt/translate information about *< insert name of disease or epidemic>* to the local context and languages |  |  |  |  |  |  |
| Rapid community assessments to understand knowledge, attitudes, practices, and perceptions to *< insert name of disease or epidemic>*  |  |  |  |  |  |  |
| Social mobilization to encourage positive behaviours and address fear, rumours, and stigma (e.g., house to house, loudspeaker systems, WhatsApp groups etc) |  |  |  |  |  |  |
| Interactive radio and TV shows to encourage positive behaviours and safe practices, address rumours, fear, misinformation, and stigma |  |  |  |  |  |  |
| Radio jingles and adverts to share key information |  |  |  |  |  |  |
| Use of social media to encourage positive behaviours and address fear, rumours, and stigma |  |  |  |  |  |  |
| Hold a programme team meeting or workshop to plan how a proactive feedback mechanism to capture beliefs, fears, rumour, questions, and suggestions in communities about the issue  |  |  |  |  |  |  |
| *(If the National Society has a permanent feedback mechanism)* Identify how the National Society feedback mechanism could be adapted and used to support the response |  |  |  |  |  |  |
| Discuss the proposed feedback mechanism with key community representatives, including volunteers, to check this it will be an effective way to monitor people’s perceptions *(if this was not already done during the planning phase)* |  |  |  |  |  |  |
| Set up the feedback mechanism, including systems for collecting, responding, analysing, sharing, and referring feedback |  |  |  |  |  |  |
| Train all those involved in collecting and managing feedback on how the process will work  |  |  |  |  |  |  |
| Prepare weekly/monthly reports analysing the main feedback trends and discuss this in response meetings, including how the response should be adapted to respond to and act on the main beliefs, fears, rumour, questions, and suggestions in communities |  |  |  |  |  |  |
| Collect feedback from community volunteers about the beliefs, fears, rumour, questions, and suggestions in communities |  |  |  |  |  |  |
| Regularly review and update the information shared with communities based on community feedback data and changes in the context |  |  |  |  |  |  |
| Monitor how the feedback mechanism is working by analysing the volume of feedback received and who it comes from to ensure no one is being missed and it is working well |  |  |  |  |  |  |
| Regular FGDs to check the response is using the most effective channels, approaches, and languages to reach different groups and that information is received, understood, trusted and useful |  |  |  |  |  |  |
| **Outcome(s) and Outputs** | **Indicators** | **Means of Verification** |
| **Outcome 7 (epidemics):** People actively participate in addressing *<insert name of disease or epidemic>* by promoting safe, healthier practices, facilitating community action, and helping to reduce fear, stigma, and misinformation | # of community-led solutions to solving problems supported by the response | Community meeting reports, operation reports |
| **Output:** Communities are supported to identify community-led solutions to address challenges and reduce the spread of infection | # of trusted leaders, influencers and community groups helping to lead behaviour change initiatives in their community | Community meeting reports, operation reports |
| **Activities** | Q1 |  Q2 | Q3 | Q4 | Budget | Lead  |
| Carry out a context analysis and community mapping to understand the structures, groups, power dynamics, capacities, beliefs and challenges and needs |  |  |  |  |  |  |
| Build partnerships with community leaders, influencers, groups, and networks to plan local solutions and engage them in sharing information, addressing misinformation, and collecting feedback |  |  |  |  |  |  |
| Community workshops to identify problems, brainstorm solutions, and agree activities and roles  |  |  |  |  |  |  |
| Provide funding grants and support to local community groups to implement local solutions  |  |  |  |  |  |  |
| Train and support local community groups, leaders, volunteers, and representatives to lead activities and behaviour change and risk communication approaches |  |  |  |  |  |  |
| Engage community members and groups in developing behaviour change and risk communication information and materials |  |  |  |  |  |  |

**RISK MANAGEMENT**

*Use the risk matrix below to detail some of the expected internal and external risks or challenges to CEA and the mitigation steps that can be put in place. Some examples below*

*Likelihood: rare (1); unlikely (2); possible (3); likely (4); almost certain (5)*

*Impact: negligible (1); minor (2); moderate (3); major (4); severe (5)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Risk** | **Likelihood** | **Impact** | **Mitigating steps** |
| 1. Physical access to communities is not possible
 |  3 |  4 | * Identify methods for remote community engagement, such as WhatsApp groups with community representatives and online FGDs
 |
| 1. Appeal funding is low and budget for CEA is cut
 |  4 |  4 | * Activities within the CEA plan will be prioritized into categories based on levels of appeal funding raised. Other sources of funding and partnerships with other organisations will be explored
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**QUALITY AND ACCOUNTABILITY**

* *List of key CEA indicators for the response (See workplan above and Tool 7: CEA M&E tool*
* *Explain how CEA activities will be monitored, including how data for the indicators above will be collected*
* *How will CEA be reported on? How will data be shared and with whom?*
* *How will the impact of CEA be evaluated?*

**HUMAN RESOURCES**

* *List the CEA staff you have for the operation, within the IFRC, the National Society and Partners*
* *The number of volunteers who can support CEA activities*
* *Note any gaps in human resources*

**COORDINATION**

* *Who are the key internal and external partners you will coordinate with? How will this coordination happen?*
* *Note any potential coordination challenges anticipated*

**BUDGET**

* *Include an overview of the budget for CEA activities and identify any funding constraints*
* *See Tool 6: CEA budgeting tool*

**CONTACT INFORMATION**

* *Include the contact details for the CEA lead for the response*