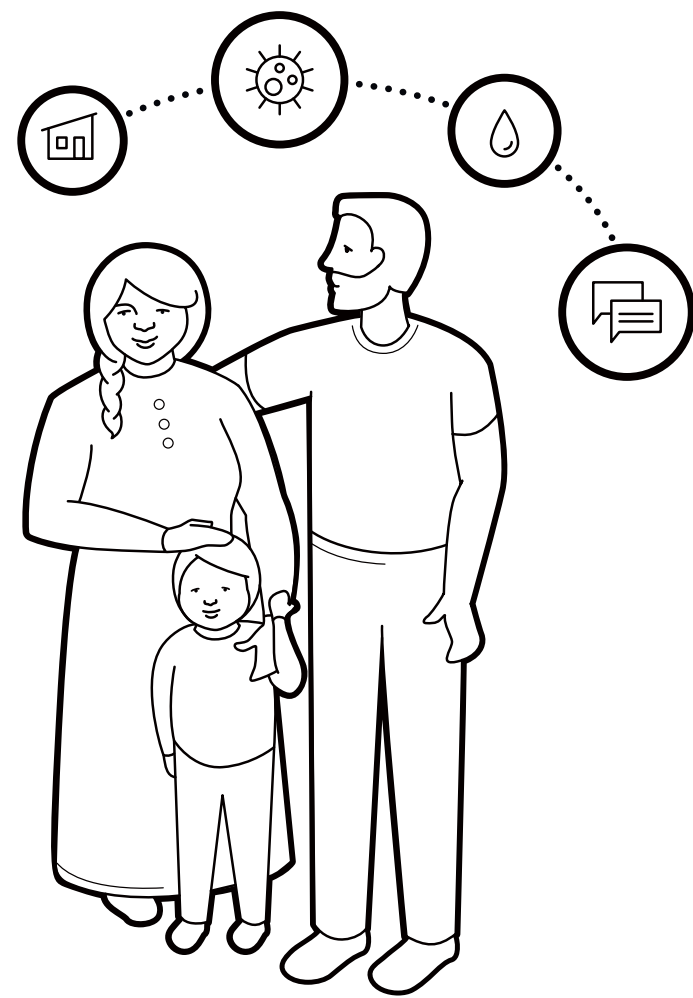


The Use of a Community Perception Tracker (CPT) in Humanitarian Responses

LESSONS LEARNED IN BANGLADESH AND VENEZUELA DURING COVID-19



The CPT is an approach that uses a mobile tool to enable staff to capture, analyse and understand the perceptions of communities during disease outbreaks. Correlated with epidemiological data, it is used to inform and adjust programming, and provide an evidence base for advocacy and influencing.

The CPT is a vital part of Oxfam's Community Engagement approach.

It was developed by Oxfam in 2018 and piloted in the Democratic Republic of Congo in response to the Ebola outbreak. In 2020, the CPT was adapted for COVID-19 and deployed across 13 countries – ACF staff were also trained, enabling implementation in an additional 2 countries.

TAKING THE PULSE OF COMMUNITIES

How does it work?

- 1 Collection**
Technical field staff listen to and capture the community's perceptions via SurveyCTO.
- 2 First Analysis**
The perceptions collected are available in real time on the SurveyCTO server. A weekly report is provided for analysis.
- 3 Regular Meetings/ Discussions**
Daily and/or weekly meetings take place, to discuss the findings. The data collected is linked to contextual information and epidemiological data to prioritise key actions.
- 4 Triangulation with Other Actors**
The findings and data are shared with others to triangulate / expand the reach of the collected info.
- 5 Adapting Activities / Influencing**
Activities are adapted / concerns are brought to other actors / advocacy for change.
- 6 Follow Up Activities**
Changes are monitored, and evidence is documented.



Why use the CPT?

- More **systematic** way of engaging with the community, providing real time data about their current thoughts and behaviours.
- Enables **rapid analysis** of data to support programmatic adaptations.
- Provides a way of **working across sectors** during a COVID-19 response.
- Enables us to **identify trends**, anticipate their recurrence and thereby inform future responses / preparedness plans.
- Allows **better advocacy** on behalf of a population, where necessary.
- Ease of use** (single form and ICT) — user-friendly recording system and rapid reports.

Bangladesh The use of the CPT in a complex humanitarian response

BACKGROUND Close to 1 million Rohingya people fled violence in Myanmar in August 2017 seeking refuge across the border in Bangladesh. Oxfam has been responding to the crisis since the outset.

WHEN July 2020—present

Ukhiya Teknaf

WHERE Rohingya Refugee Response – Cox's Bazaar

PERCEPTIONS COLLECTED 3,044 (as at 30/04/2021)

In refugee camp there is no COVID-19.

– A woman in Camp 22, Teknaf

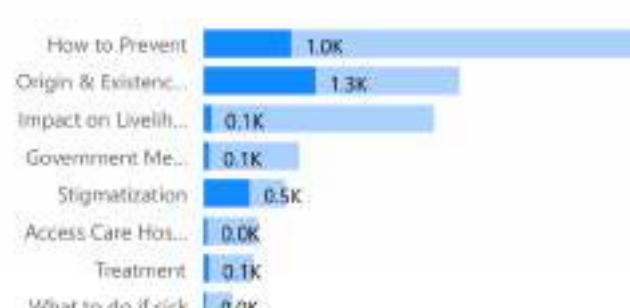
Camps are densely populated and congested. Since I must survive within this situation in the camp, I'm concerned about COVID-19.

– A man in camp 4

Perceptions collected
Top countries



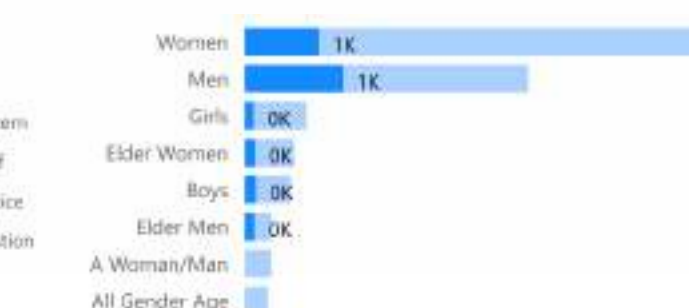
Perception thematic



Perception type



Gender age



Venezuela The use of the CPT in a protracted crisis

BACKGROUND When COVID-19 broke out across Venezuela, it aggravated an existing crisis in which an estimated 7 million people were already in need of humanitarian assistance. It is into this context that Oxfam launched its CPT in 2020, through a local partner-led project aimed at preventing the spread of COVID-19.

WHEN June 2020—December 2020

Zulia
Táchira
Lara

WHERE Oxfam local partners in Zulia, Táchira and Lara

PERCEPTIONS COLLECTED 5,285 (as at 31/12/2020)

I would be afraid to go to the hospital if I feel any symptoms.

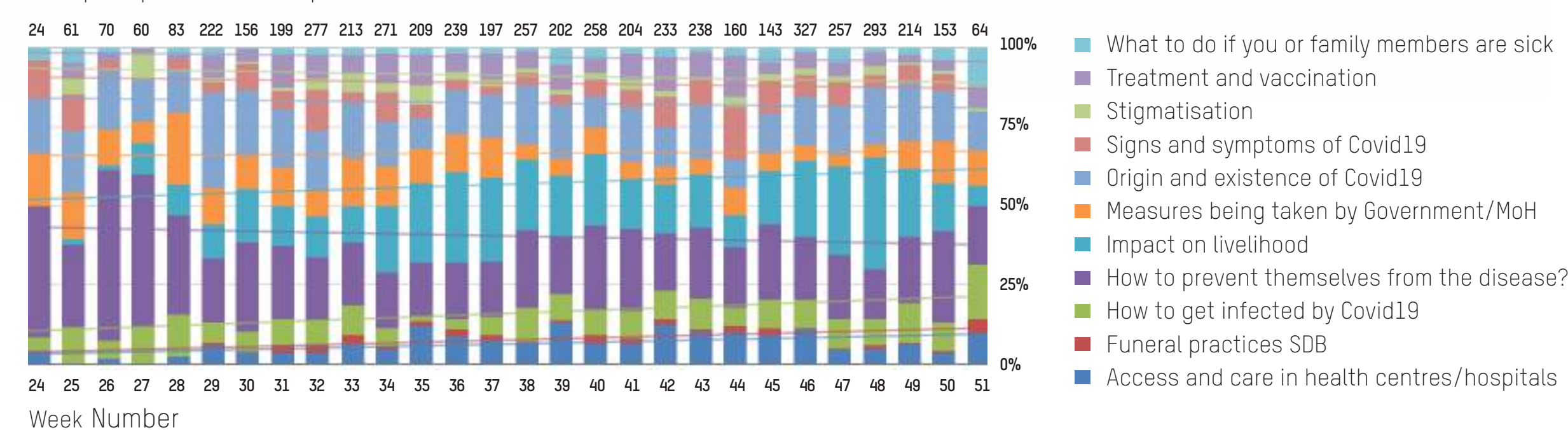
– A boy in Maracaibo, Zulia, June 2020

There are women attacked by the confinement of COVID, violence in homes has increased.

– A woman in Junín, Táchira, Sep. 2020

Main trends identified

Total perceptions collected per week



KEY TAKEAWAYS

Highlights

- + Holistic approach** Providing the opportunity for cross sector teams and partners to meet regularly and coordinate more effectively.
- + Meaningful programmatic changes** Utilisation of the data to adapt programmes can play a key role in building trust with communities.
- + Enhanced advocacy** Rapid report production results in timely recommendations, which can be used for advocacy purposes (including for donors).
- + Local humanitarian leadership** The CPT is particularly effective in contexts in which local partners have existing relationships with communities.

Challenges

- ▲ Lack of understanding** Simple approach but requires a shift in mindset. Confidence and commitment will take time to build.
- ▲ Lack of capacity** Low staff capacity and existing teams overloaded / lack of confidence in qualitative data analysis.
- ▲ Restricted field access** Travel restrictions and social distancing have resulted in remote support / capacity building.

Next Steps

- ➔ More monitoring.
- ➔ CPT beyond COVID-19.

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For further information, visit our [CPT Webpage](#), and view [Other case studies](#).