



***Beyond Cash: Making Social Protection Deliver More for  
Children through Improved Parenting Practices***

**Trainer and facilitator formats for  
preparation and monitoring of parenting  
programme delivery**

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**CSSP staff/ certified ICDP trainers - India, Nepal, Philippines**

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# 1. Home Visit Guide

## Objective of the home visit

To strengthen parenting skills acquired in the group sessions. In more detail the idea is:

1. To observe the practices of parents/caregivers towards their children with respect to the specific sessions delivered and give positive, constructive and practical feedback on how to further strengthen desirable behaviors; the facilitator should do this in detail and demonstrate with the caregiver's children if they are at home, or ask the parent/ caregiver to demonstrate.
2. To deepen the trust between the facilitator and the caregiver and her/his family.

## Preparation

- Agree a time with the parent/ caregiver for the visit.
- Try to choose a time when the children are at home.
- The duration should be 30 min to 1 hour.
- Frequency: 3 home visits per family is a minimum during the course of the programme.
  - The visit should be well planned and focus on a set of sessions that are linked – e.g. one ICDP dialogue, family budgeting etc.
  - Prepare a time plan for home visits when the programme starts.

## Process to be followed during the visit

- Greet the caregiver and other family members present.
- Aim to build rapport and create an atmosphere in which the caregiver feels at ease and can openly share feelings. Talk about general things initially.
- Clarify the objective of the visit and give an idea of the time involved.

### 1. Review the sessions conducted so far/ since the last home visit. The questions below should be used to guide the discussion.

- Which sessions did you participate in so far?
- How did you find the sessions?
- What did you like most? Why?
- Was there anything that you did not understand/disagreed with/ found difficult? The facilitator should clarify with examples and/or demonstration.

### 2. Review the home tasks (since last home visit)

- What was your home tasks? Did you practice?
- How did you feel when you applied the learning from the session and did the home tasks? Did you have any problems? The facilitator should clarify with examples or demonstration if not already done so when reviewing the sessions
- What were your child's (children's) responses? Ask the child also if present (and relevant) how they felt?
- Will you continue doing this?
  - If yes, why and how can we support you to do more?
  - If no - why? What are the main constraints? How can we support you so that you continue?

### 3. Other family members' engagement

- Have you discussed with other family members about the parenting sessions? What is their response?
- Do you need any support from us to engage other family members (to make them supportive)? If yes, what type of support and how?

### 4. Key observations/ assessment by the facilitator

- Based on observation and information generated so far- share with the caregiver what seems to be going well and suggest what can be further improved and how.
- Agree with the caregiver on concrete steps – and note them down in the home visit diary

### 5. Review the ICDP Likert scale with the caregiver

- Based on the sessions discussed help the caregiver to make a new scoring (although the score may end up being the same as before.); remember to add the date so that this can be used for monitoring purposes with the caregiver and understand progress or lack of it.
- 

## Home Visit Diary

Based on your interaction/observation as above, fill up the Home Visit Diary

Name of caregiver who is participating in the sessions:

Address of the caregiver:

Name of facilitator:

	Visit 1	Visit 2	Visit 3	Visit 4
Date				
Time				
Sessions covered in the visit				
Who was present during the visit?				
Facilitators main observations during the visit				
Agreements with the caregiver				
Things to follow up				
Any suggestions/ feedback from family members, children				
Other				

## 2. Diary of the Facilitator

A copy to be filled in after each session with caregivers and to be shared with the trainer

Name of the facilitator: .....

Place of the session: .....

Municipality/Barangay/Sitio (Philippines).....

Organizer (1. directly by Save the Children 2. Partner organization 3. Local government): .....

Date of the session: .....Session number and name: .....

Duration of session: ..... No of caregivers in the group : Total.....M.....F.....

ATTENDANCE				
No.	Description	Male	Female	Total
1	Number of caregivers present			
2	Number of caregivers absent			
3	Number of children present			

1. Agenda that actually took place – topics covered:

- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

2. Note **what participants discovered/ learned** (key words)

3. Which **topics engaged the participants** most? Why?

4. **Interesting points/ stories** brought up by the participants.

5. Was there **anything that was not understood** or disliked?

6. What were the **challenges** and how should it be improved? (Suggestions for improvement on session content, approach, delivery and time)

Facilitator's observations	For each question mark your selected option: (Give ✓ mark at the options)			Comments/Remarks
1. Did they remember the key points discussed in the last session?	Less than half	About half	Almost all	
2. Did all do the home-exercise?	Less than half	About half	Almost all	
3. How were the home-exercises received?	Not well	Medium	Well	
4. How was the group's level of activity and engagement in general?	Not good	Medium	Good	
5. Ability to relate the session with the previous sessions?	Not good	Medium	Good	

**Other thoughts:**

**Fill in below after all sessions have been delivered to the group:**

How well was the main objective of the programme internalised by the group (as per the facilitator) Score: 1-5 (5 meaning very well) . Explain the score

### 3. Agenda for weekly/ regular meeting with facilitators

– during the implementation of the parenting programme

Objective: prepare, review and support facilitators to implement the parenting sessions effectively

#### **Agenda items to be covered in the meeting**

##### **Review of session held**

- Discuss and review sessions that have been implemented and what could be learned more generally.
- Discuss and review home visits, if applicable.
- Experiences of case stories; encourage all to share in rotation an interesting and relevant example from a session or home visit.
- Feedback on videos made by the participants: make sure at least a few of them bring videos to the meeting.
  - Self-reflection by the facilitator on the video
  - Observations by other facilitators (remember to be positive)
  - Feedback and summary by the trainer (reflect on the 7 principles of sensitizing)
- Discuss and review diaries of facilitators – from sessions and home visit. Some of this may need individual attention.
- Use of home visit guide.
- Follow up on the attendance (sheets) of the parents/ caregivers.
- Check that caregivers are filling up the Likert scale for the guidelines.

##### **Preparation for next session**

- Preparation of the facilitators for next session, including mock sessions of the topic (remember to involve all)
- Materials, role plays etc
- Remind the facilitators to take a video of their session (need not be the whole session)

##### **Prepare minutes of the key points discussed**

## 4. Monitoring format: facilitator delivery of parenting sessions

- The format should be filled in on a regular basis by the ICDP trainer for each facilitator that is being supervised - at least thrice during the course of a full parenting programme for each facilitator.
- The assessment should be based on observing a parenting session. If this is not possible- this can be filled in based on a mock session or by the trainer seeing a video of the facilitator delivering a session.
- Each assessment should be discussed with the facilitator.
- It is important to note that this is foremost a tool for encouragement and improvement. The aspiration is for the facilitators to reach “to a great (or very great) extent” on as many items as possible. The information can be summarised for all facilitators to indicate overall quality and progress in delivery, but this would not be an objective assessment as trainers may have different ways of scoring.

Name of trainer: .....

Name of facilitator:.....

Name of areas/villages covered by the facilitator: .....

Number of groups covered by the facilitator:.....

Use 1-5: 5= to a very large extent

I. Is there a <b>trusting alliance</b> with the caregivers? (Principle 1)	To a very small extent 1	To a small extent 2	Average 3	To a great extent 4	To a very great extent 5
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				



2. The facilitator facilitates the discussion using an <b>inquiring approach</b> so that the caregivers start to verbalise their own understanding of the guidelines. (Principle 5)	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

3. The facilitator uses <b>other means than dialogue</b> during the session.	Date:	Date:	Date:	Date:
	1-5	1-5	1-5	1-5
a. Role play/dramatization – with analysis afterwards, clear and to the point				
b. Videos (to contrast bad/good interaction, empathy, 8 guidelines)				
c. Photo analysis – more than one picture for each guideline				
d. Reflection in small groups and in pairs				
e. Playful exercises that relate to the topic				
f. Personal examples for the 8 guidelines (short and to the point)				
g. Longer examples for all the 8 guidelines (narratives/videos)				
h. Setting home tasks (caregiver to practice, observe and report back)				
i. Reviewing home tasks with positive feedback				
j. Occasional examples from research (“What has research taught us”)				
k. Stories, humour, energizing activities				

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

4. Is the facilitator able to <b>deliver and conclude the activities</b> so that the participants understand the objectives of the activities?	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

5. The facilitator <b>points out clearly the different aspects of good interaction</b> that appeared in the examples given by caregivers of their interaction with children (Principle 4) (or in facilitator's own examples)	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

6. The facilitator provides enough <b>relevant examples that are personalised, short and to the point</b> (Principle 7a)	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

7. Did the facilitator manage to <b>influence caregivers to define the child in a more positive way and apply empathic identification?</b> (to see the child as a sensitive person that needs love, care and positive guidance) (Principle 2)	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

8. The structure of the session and activities are <b>well prepared, easy to follow</b> and carried out at an appropriate theoretical and practical level in relation to the caregivers.	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

9. Did the facilitator <b>adjust the agenda</b> and put special emphasis on <b>issues of particular importance</b> to that specific group of caregivers?	To a very small extent	To a small extent	Average	To a great extent	To a very great extent
Date					
Date					
Date					
Date					

	Date	Date	Date	Date
What went well?				
What can be improved?				
Other remarks				

## For trainer internal use

Name of facilitator:

Name of trainer:

1. First observation: Remarks/ notes/ agreements / follow ups

2. Second observation: Remarks/ notes/ agreements / follow ups

3. Third observation: Remarks/ notes/ agreements / follow up

### **ICDP 7 PRINCIPLES OF SENSITIZING**

1. Establishing a **contract of trust** with caregivers.

2. Positive **redefinition of the child** – to see the child as a person:

- a. Pointing out to caregiver the positive qualities in their child.
- b. Re-labelling positively what appear to be negative features of a child.
- c. Reactivating past good memories in caregiver-child relationship.
- d. Using exercises for caregivers to discover positive features in their children.

3. **Activating caregivers in relation to the** theme/guideline that was discussed by:

- a. Asking caregivers to make self-assessments of personal interactions with their child based on the 8 guidelines of good interaction
- b. Exemplification: asking caregivers to produce examples of their interactions with the children
- c. Giving caregivers observational tasks in relation to their children
- d. Tasks for caregivers to test out new ways of communicating and interacting with their children

4. **Confirming caregivers' competence** by pointing out that which is already positive in their existing interaction with the child.

5. Using an inquiring approach to guide caregivers' discussions about what is good interaction.

6. Encouraging sharing and attentive listening among caregivers in group meetings, so as to learn from each other's experiences.

7. Using **two styles of communication** in relation to caregivers.

- a. A personalized style of explanation, with personal examples.
- b. An empathic interpretative style, i.e. describing how the child experiences the situation; comparing the experience of the child with similar adult situation.