



# Training Guide: How to Interpret and Administer the Parenting Map

Originally Designed by Project HOPE  
OVC Technical Support Team



# Contributors



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# Agenda



Module	Time	Topic	Training Method
1	30 min	Purpose of the Parenting Map	Facilitator presentation
2	1 ½ hours	Design and Interpretation of the Parenting Map Indicators	Facilitator presentation
3	1 ½ hours	Score Card and Practice	Facilitator presentation; Role play
4	1 hr	Action Plan and Practice	Facilitator presentation; Role play
5	30 min	Leveraging Action	Small group break out; Group discussion
6	20 min	Wrap-up and Feedback	Group discussion

# Learning Objectives

- 1) Learn what the Parenting Map is, how it works, and the purpose of each indicator
- 2) Learn how to administer the Parenting Map and supplemental tools
- 3) Gain an understanding of the different potential uses of the tool
- 4) Be able to train colleagues and staff on using the Parenting Map



# Module 1:

## Purpose of the Parenting Map

# Icebreaker

Skit:

“Why doesn’t anyone  
have malaria?”



**USAID**  
FROM THE AMERICAN PEOPLE



# Icebreaker Key Message

- ✓ This skit is an exaggerated demonstration of the need for tailored messaging at the household level.
- ✓ *Every child is different* and the education, care, and services provided should be tailored to meet the needs of each child.
- ✓ At the household level, this is the founding principle for the Parenting Map: to give an overall picture of each individual child in order to better address their specific needs and not deliver a ‘generic’ response and/or intervention.

# The “Basics” of the Parenting Map

**Who:** Caregivers of children, ages 0-17

**What:** Tool to assess each child individually on their well-being

**When:** Collected every six months

**Where:** Collected at the household, when possible, to make observations

**Why:** To address the importance of targeted and tailored approaches for each child and family



# Map Principles



Several key principles are associated with the Parenting Map, including:

- User-friendliness
- Acceptability
- Usefulness at multiple levels
- Sustainability

# User-Friendliness

- **Low-literacy tool** – allows people from all educational backgrounds to administer and understand in a “fun and easy” way
- **Fits on one page** – reduces paper burden for families with multiple children
- **Simple evaluation with happy and sad faces** – provides immediate feedback on child’s status



# Acceptability



- Participatory development/adaptation process – enables community buy-in and ownership, creating ‘local’ advocates
- Local artists and drawings – ensures cultural sensitivity and relevance
- Field tests and incorporation of program participant feedback – allows even the beneficiaries of the tool to be engaged from the onset
- Our experience – high acceptability by caregivers, volunteers, and field staff in our program

# Usefulness at Multiple Levels

- Household level – as a parenting guide
- Community volunteer (social support level) – as a case management tool
- Program staff (NGO level) – as an identifier of gaps or breakdown in referral system
- Community or district level – as an identifier of larger societal gaps in services (access and availability); leverage tool for foreign aid in specific districts

# Sustainability



Because of the tool's user friendliness, acceptability, and ability to function at multiple levels, the Parenting Map is easily used after a project ends:

- Caregivers learn how to assess their child's well-being and have markers by which to gauge progress.
- Community volunteers can continue to use the supplemental tools of the Parenting Map as a focal point to provide education, make referrals, and guide their advice to families.
- A database of child data can be aggregated at any level to leverage additional resources. Results can be tabulated by hand at the community level (computers not mandatory).



# Module 2:

## Design and Interpretation of Parenting Map

# Picture of Parenting Map

Parenting Map																
Health	1	Went to health facility last 3 times needed	3 2 1	2	Diarrhea in last 2 weeks	3 2 1	3	Fever in last 2 weeks	3 2 1	4	Fully immunized (DTP 1, DTP 2, Measles, SCD, VFA)	3 2 1	5	Received HIV education (over 8 years)	3 2 1	
	6	Received 4 meals last 2 days	3 2 1	7	Eaten foods from all 3 food groups in the last 2 days	3 2 1	8	Appears to be same height & weight as others his/her age (growth monitoring < 5)	3 2 1	9	Does what other children same age do	3 2 1	10	Drinks clean water	3 2 1	
																Nutrition and Development
	11	Safe living conditions (strong walls and roof)	3 2 1	12	Sleeps under mosquito net	3 2 1	13	Sleeps in same type bed as others	3 2 1	14	Has 2 sets of clothes	3 2 1	15	Has 1 pair of shoes	3 2 1	
16	Broke in school	3 2 1	17	Was in school every day last week	3 2 1	18	Has school uniform/walker & supplies (i.e. pencil or notebook)	3 2 1	19	Able to read & write (over 7 years)	3 2 1	20	Does well on exams	3 2 1		
															Education	
21	Has birth certificate or applied for one	3 2 1	22	Has succession plan (will or death certificate)	3 2 1	23	Treated same as other children	3 2 1	24	Unexplained bruises or injuries	3 2 1	25	Does some work in the house or other children	3 2 1		
																Protection
26	Unexplained crying	3 2 1	27	Obeys adults similar to other children (not defy or rebel)	3 2 1	28	Has a memory book	3 2 1	29	Attends religious services	3 2 1	30	Has one good friend or talks to you about problems	3 2 1		

This tool was made possible through support provided by the Office of HIV/AIDS Bureau for Global Health, U.S. Agency for International Development, under the terms of Award No. GPO-A-00405-00019-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the U.S. Agency for International Development. For more information, please contact Project HOPE's Global Health Department at [www.projecthope.org](http://www.projecthope.org) or (540) 857-2100. April 2008.

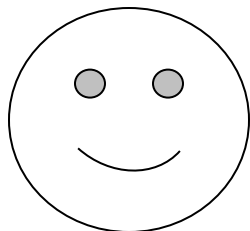
# 6 Domains of OVC Care and Support

The Parenting Map covers 6 OVC Care and Support Domains:

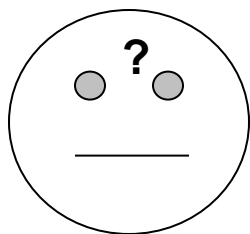
- 1) Health
- 2) Nutrition and Development
- 3) Shelter/Care
- 4) Education
- 5) Protection
- 6) Psycho-social Support



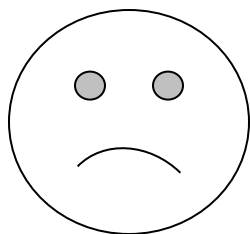
# Measurement of Scale



= Good



= Not Sure/Don't Know



= Bad



# HEALTH

## Domain

# Indicator 1



1. Did you take [child's name] to the health facility the last 3 times he/she needed to go?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

Child should be taken to the health facility **EVERY** time needed

# Indicator 2

## 2. Has [child's name] had diarrhea in the last 2 weeks?



### Underlying Principle:

Diarrhea is usually indicative of other health concerns; no child should be having diarrhea consistently.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 3

3. Has [child's name] had a fever in the last 2 weeks?



Possible responses:

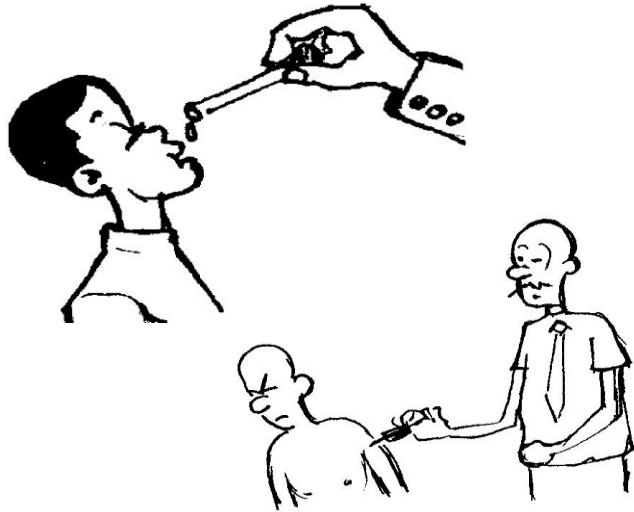
Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

Fever is usually indicative of malaria or other illnesses; it is a warning sign.

# Indicator 4



4. Is [child's name] fully immunized (DTP1, DTP3, Measles, BCG, Vit A)?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

## Underlying Principle:

All children need to be up-to-date on their immunizations, according to their age.

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was "DK/NS"
- ❖ Mark ☹ if the response was **Bad**

# Indicator 5



5. Has [child's name] received HIV education (over 8 years old)?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was "DK/NS"
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

All children over 8 years old need to be exposed to HIV prevention messages



# NUTRITION AND DEVELOPMENT Domain





# Indicator 6

6. Has [child's name] received 4 meals in the last 2 days?



## Underlying Principle:

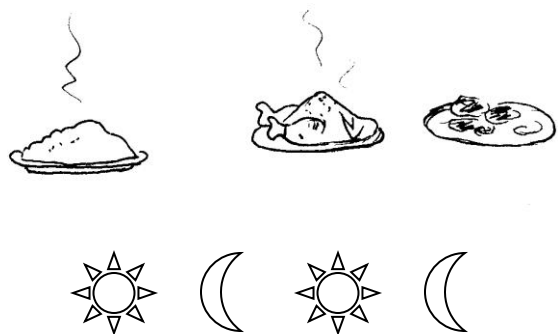
All children need to eat at least 4 meals every 2 days.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was "DK/NS"
- ❖ Mark ☹ if the response was **Bad**

# Indicator 7



7. Has [child's name] eaten foods from all three food groups in the last two days?

Possible responses:

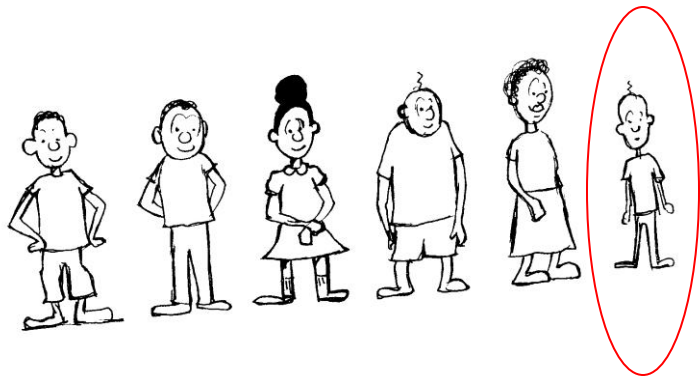
Yes, No, I don't know (DK)/I'm not sure (NS)

## Underlying Principle:

All children should eat foods from all 3 food groups at each meal as much as possible.

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 8



8. Does [child's name] appear to be same height & weight as others his/her age (or if <5 have regular growth monitoring)?

Possible responses:

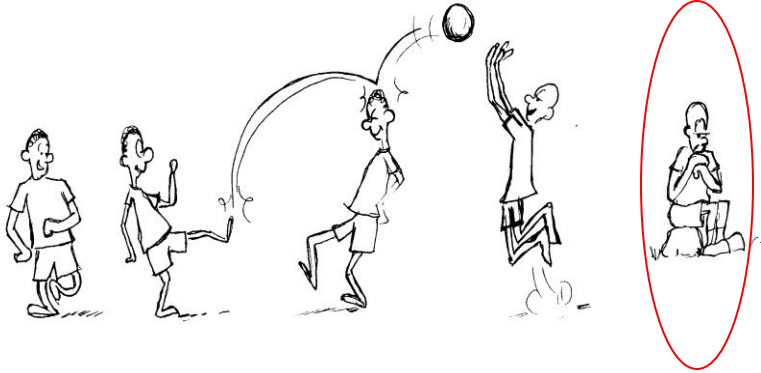
Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

All children should appear to be similar in stature with other children his/her age.

# Indicator 9



9. Does [child's name] do what other children the same age do?

## Underlying Principle:

All children should be socially and physically active to some degree.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was "DK/NS"
- ❖ Mark ☹ if the response was **Bad**

# Indicator 10

## 10. Does [child's name] drink clean water?



### Underlying Principle:

All children need to be drinking from clean water sources.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

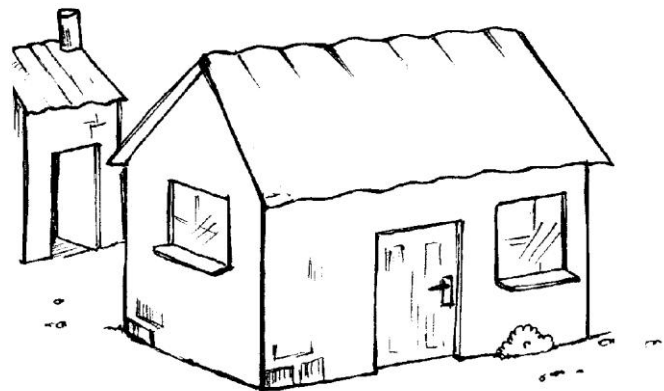


# SHELTER/CARE

## Domain

# Indicator 11

11. Does [child's name] have safe living conditions (strong walls and roof)?



## Underlying Principle:

All children need to be living/sleeping in a safe house, out of the elements.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 12



12. Does [child's name] sleep under a mosquito net?

## Underlying Principle:

All children (and adults) in malaria-endemic areas need to sleep under a mosquito net to prevent malaria.

Possible responses:

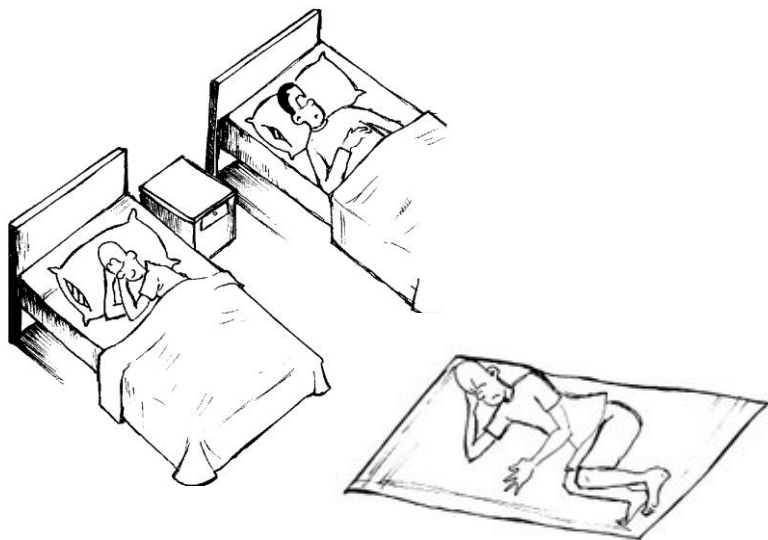
Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**



# Indicator 13

13. Does [child's name] sleep in the same type bed as the other children?



## Underlying Principle:

All children should be treated equally – one indicator is the type of bed each child sleeps in.

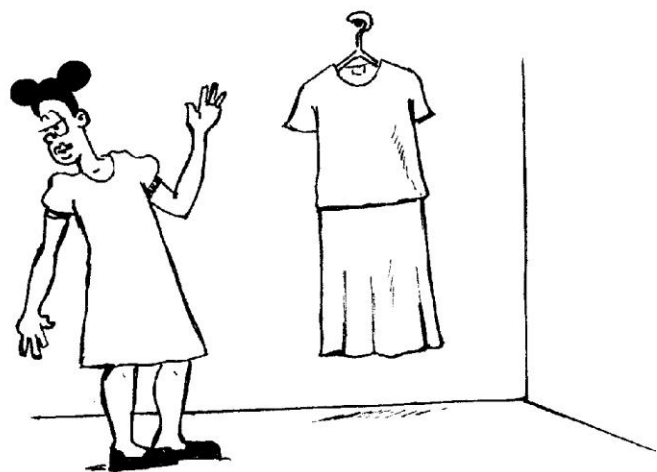
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 14

## 14. Does [child's name] have 2 sets of clothes?



### Underlying Principle:

Each child needs to have at least 2 sets of clothing for hygienic purposes (a basic need).

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 15

## 15. Does [child's name] have one pair of shoes?



### Underlying Principle:

Each child needs to have at least one pair of shoes (a basic need).

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**



# EDUCATION

## Domain

# Indicator 16



## Underlying Principle:

All school-aged children should be enrolled in school.

## 16. Is [child's name] enrolled in school?

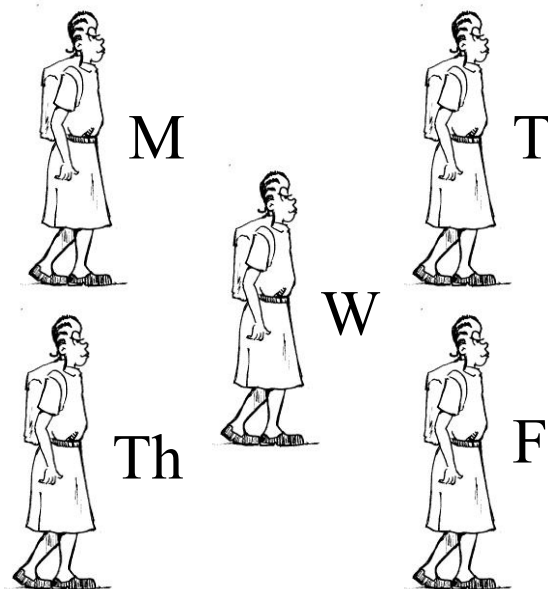
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 17

17. Was [child's name] in school every day last week?



## Underlying Principle:

All school-aged children should be attending school every day consistently.

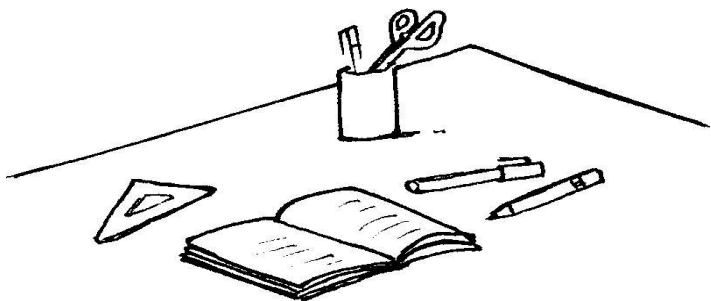
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 18

18. Does [child's name] have school uniform/waiver and supplies (i.e. pencil or notebook)?



## Underlying Principle:

All school-aged children need to have the basic but necessary school materials for enrollment and good performance.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 19

19. Is [child's name] able to read and write (if over 7 years)?



## Underlying Principle:

Having the ability to read and write are skills that best prepare our children for successfully supporting themselves.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**



# Indicator 20



## Underlying Principle:

Children should perform well in school.

20. Does [child's name] do well on exams?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

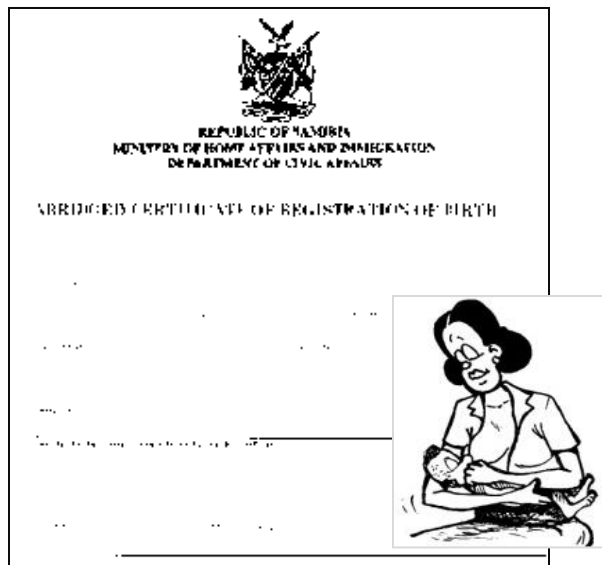


# PROTECTION

## Domain



# Indicator 21



21. Does [child's name] have a birth certificate or has applied for one?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

All children need to have proper identification in order to access services and education.

# Indicator 22

22. Does [child's name]'s caregiver have a succession plan (will or death certificate)?



## Underlying Principle:

All children need a plan that establishes what happens if a caregiver passes away.

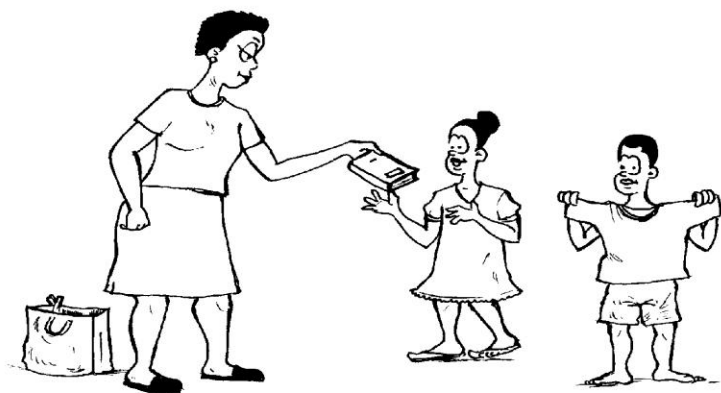
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 23

23. Is [child's name] treated the same as other children in the household?



## Underlying Principle:

All children should be treated equally in the household.

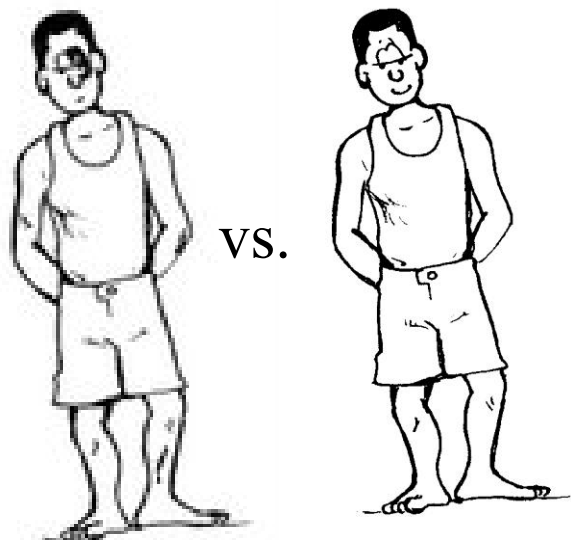
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 24

24. Does [child's name] have unexplained bruises or injuries?



## Underlying Principle:

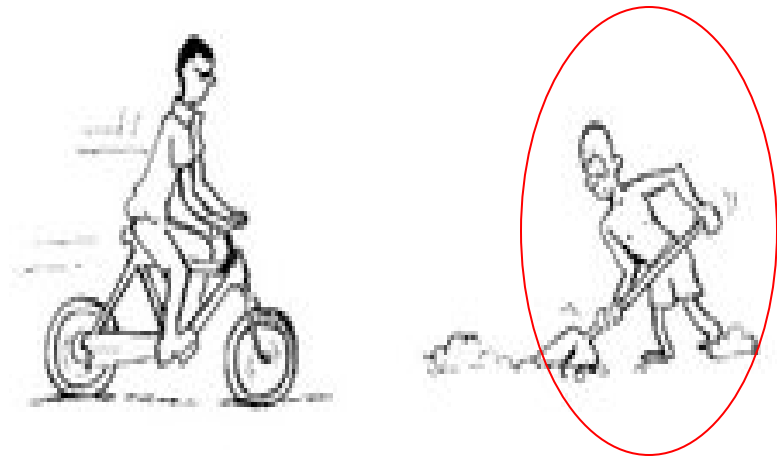
No child should be consistently showing signs of unexplained bruises or injuries.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 25



25. Does [child's name] do the same work in the house as other children?

## Underlying Principle:

Each child in the household should be treated equally, in relation to quantity of and age-appropriate work.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was "DK/NS"
- ❖ Mark ☹ if the response was **Bad**



# PSYCHO-SOCIAL SUPPORT Domain





# Indicator 26



## Underlying Principle:

Children should have an general overall happy disposition and be optimistic about life.

26. Does [child's name] cry without an explanation?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 27



27. Does [child's name] obey adults similar to other children (not defy or rebel)?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

## Underlying Principle:

Children should obey and respect their caregiver, just as the caregiver should listen and respect each child.

# Indicator 28

28. Does [child's name] have a memory book?



## Underlying Principle:

All children should have some form of a memory or picture book.

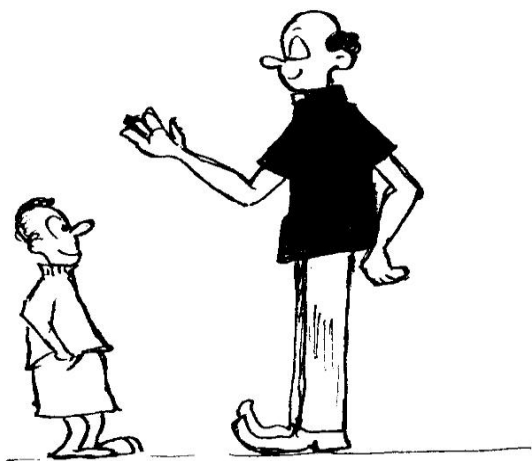
Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 29

## 29. Does [child's name] attend religious services?



### Underlying Principle:

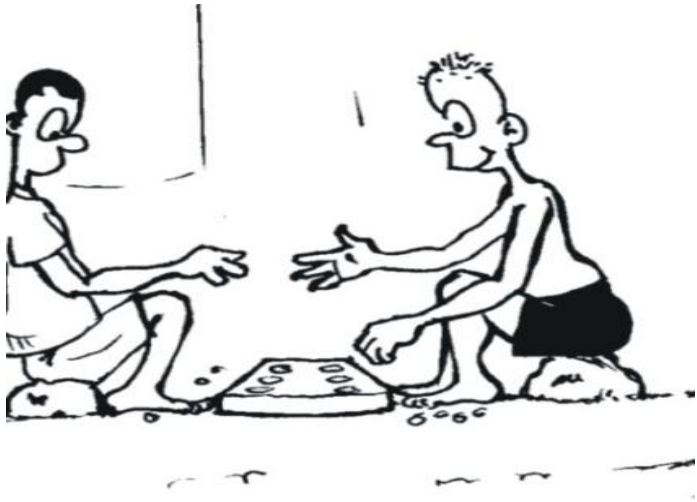
Some source of spiritual guidance and external support is shown to be healthy for the child.

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**

# Indicator 30



## Underlying Principle:

Every child should have at least one person to confide in and trust to talk about both joys and problems.

30. Does [child's name] have one good friend or talks to you about problems?

Possible responses:

Yes, No, I don't know (DK)/I'm not sure (NS)

- ❖ Mark ☺ if the response was **Good**
- ❖ Mark ☹ if the response was “DK/NS”
- ❖ Mark ☹ if the response was **Bad**



# Module 3:

## Score Card and Practice



# Score Card



## Score Card for Parenting Map

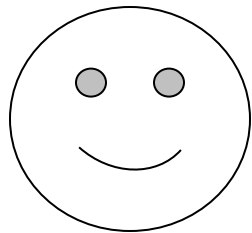
Date:									
Caregiver Name	<i>(First, Middle, Last)</i>								
Caregiver ID									
Child No.	1	2	3	4	5	6	7	8	9
Name of Child (First, Mid, Last)									
Child Code Number									
Sex (M / F)									
DOB (DD-MMM-YYYY)									
Mother Alive? (Y / N)									
Father Alive? (Y / N)									
Relationship to Caregiver									
1. Went to health facility last 3 times needed?									
2. Has had diarrhea in last 2 weeks?									
3. Has had fever in last 2 weeks?									
4. Is fully immunized?									
5. Received HIV education (> 8 years)?									
6. Received 4 meals last 2 days?									
7. Eaten foods from all 3 food groups in the last 2 days?									
8. Appears to be same height & weight as others same age?									
9. Does what other children same age do?									
10. Drinks clean water?									
11. Lives in safe conditions (strong walls and roof)?									
12. Sleeps under mosquito net?									
13. Sleeps in same type bed as others?									
14. Has 2 sets of clothes?									
15. Has 1 pair of shoes?									
16. Is enrolled in school?									
17. Was in school every day last week?									
18. Has school uniform/waiver & supplies?									
19. Able to read & write (over 7 years)?									
20. Does well on exams?									

# Purpose of the Score Card

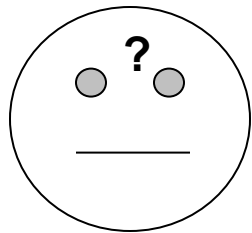
- ✓ The Score Card is for data collection use, not for the caregiver. It is used by the same person who administers the Parenting Map.
- ✓ The Score Card is the piece that returns to the office for aggregating and evaluating data beyond the household level.
- ✓ It was originally created in order to capture multiple children on one sheet, lessening the paperwork burden for data collectors.



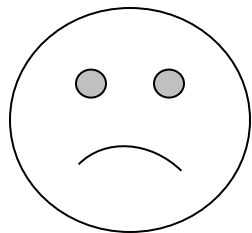
# How to Mark on the Score Card



= Good = 3



= Not Sure/Don't Know = 2



= Bad = 1

Not Applicable (N/A) = 4

# Practice Exercise “A”

## Role play:

–3 Volunteers:

- 1 Facilitator (Narrator)
- 1 Caregiver
- 1 Volunteer/Staff Member

# Practice Exercise Instructions

## Volunteer/staff:

- Leads the caregiver through the Parenting Map asking questions about his/her children

## Caregiver:

- Answers questions about his/her children

## YOU (act as the Volunteer):

- Record “scores” on the Score Card, as if you were the Volunteer

# Practice Exercise “B”

## Role play:

- 3 Volunteers:
  - 1 Facilitator (Narrator)
  - 1 Caregiver
  - 1 Volunteer/Staff Member
- Same directions as before












# Module 4:

## Action Plan and Practice



# Action Plan



Caregiver Child Action Plan							
Child No.	1	2	3	4	5	6	
Name of Child							
 1. Went to health facility last 3 times needed	✓	✓	✓				
 2. No diarrhea in last 2 weeks	X	✓	✓				
 3. No fever in last 2 weeks	X	X	✓				
 4. Fully immunized (DTP1, DTP3, Measles, BCG, Vit A)	X	✓	✓				
 5. Received HIV education (> 8 years old)	---	---	✓				
 6. Received 4 meals last 2 days	X	✓	✓				
 7. Eaten foods from all 3 food groups in the last 2 days	X	X	✓				
 8. Appears to be same height & weight as others his/her age	X	✓	X				
 9. Does what other children same age do	✓	✓	X				

# Purpose of the Action Plan

- ✓ The caregiver fills out the Action Plan for all the children he/she is caring for.
- ✓ The Action Plan can be left with the Caregiver to act as “plan” for where each child needs to improve.
- ✓ The Action Plan can also act as a “follow-up guide” for the Community Volunteer at their next household visit.
- ✓ Having the caregiver fill out the Action Plan keeps them engaged and mindful of each child’s status.

# How to “Mark” on the Action Plan

- Mark **✓** if the Caregiver replies with a positive or good response (corresponds to “3” on the Score Card)
- Mark **X** if the Caregiver replies with a negative or bad response (corresponds to both “2” and “1” on the Score Card)
- Mark **---** if the question is not applicable to that child (corresponds to “4” on the Score Card)



# Practice Exercise “C”

## Role play:

### - 3 Volunteers:

- 1 Facilitator (Narrator)
- 1 Caregiver
- 1 Volunteer/Staff Member

# Practice Exercise Instructions

## Volunteer/staff:

- Leads the caregiver through the Parenting Map asking questions about his/her children

## Caregiver:

- Answers questions about his/her children

## YOU (act as the Caregiver):

- Mark on Action Plan with “X” or “√” or “---” as if you were the Caregiver



# Module 5:

## Leveraging Action



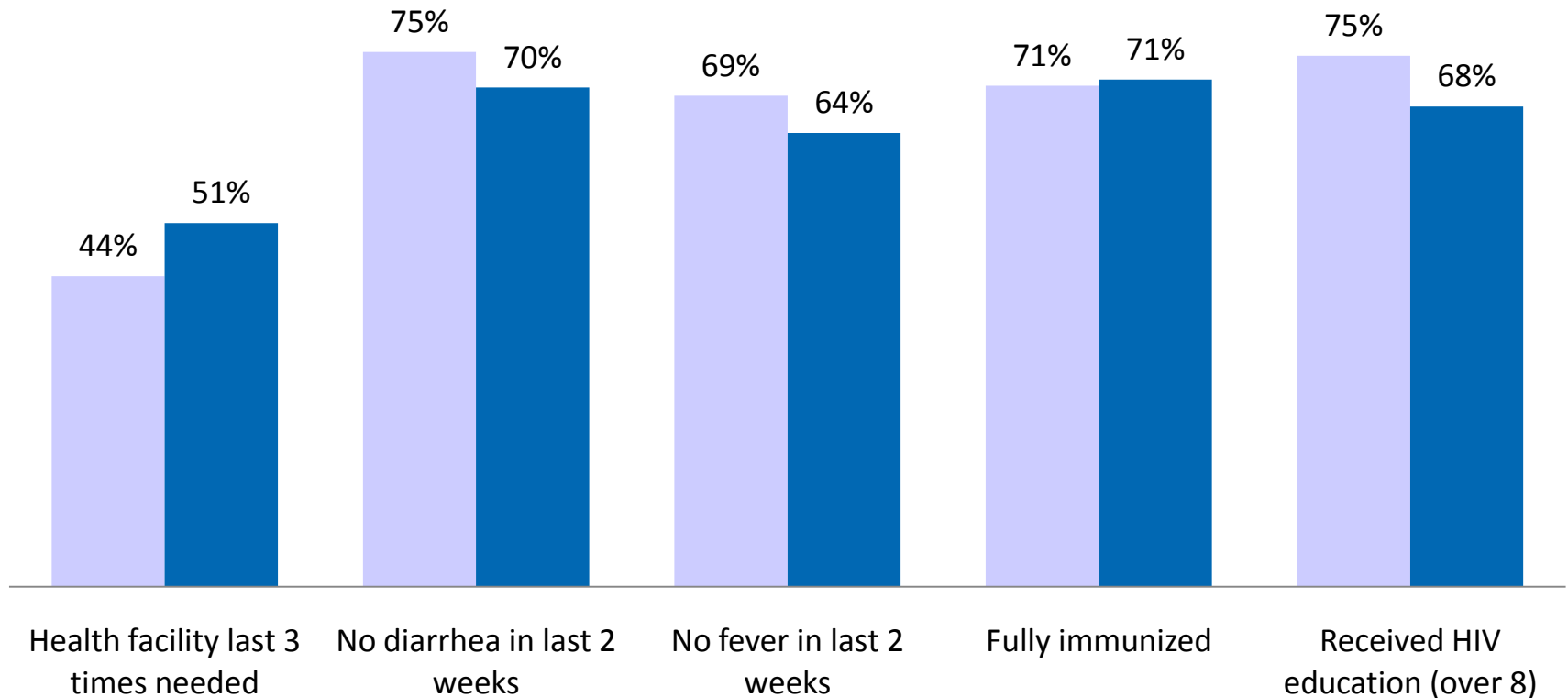
# Using Data to Leverage Action

With aggregated data by region, province, district, community, village, etc., the ability to leverage action is in YOUR hands!



# Sample Analysis

## Achievement of Indicators – Health Domain



# Community Action

## Break into groups:

- Looking at the sample analysis, answer the following questions:
  - 1) What do you conclude from the analysis?
  - 2) How would you propose to act on this information/data?
  - 3) What groups (people, organizations, government bodies, etc.) would you take this to in your own community to leverage action?

# Adapting to Needs

## Large Group Discussion:

- What other programs could this tool be adapted for?
- How can you use the tool in your project, organization, or work?



# Module 6:

## Wrap-up and Feedback



# Wrap-up and Feedback

- Were your expectations met?
- Did you achieve the learning objectives?
- Do you have any comments or feedback?



Thank you for your time. We hope you have enjoyed learning through this training guide. If you have any questions, comments, or suggestions, please feel free to email [acooper@projecthope.org](mailto:acooper@projecthope.org) or [sdalebout@projecthope.org](mailto:sdalebout@projecthope.org) for immediate assistance/feedback.





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