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Lancement et suivi de programmes concrets de développement

INTER AIDE REPRODUCTIVE HEALTH PROJECT
ETHIOPIA 2012

SUPERVISORS' TOOLBOX

inter aide

Table of Contents

Supervision in the field

What is supervision?

Comments from team brainstorming	
What is it to be supervisor	**What being supervisor is not**
Team support/ strengthening/training Monitoring and evaluation of the team Plan programme and activities Control field activities Report Coordinate with other teams/ authorities	Searching for faults Substitute ourselves to field workers Evaluator of programme Direct field worker
It concerns team management (planning, training), small finance management, small assessment, external coordination, and technical management of activities The importance also to gather and share experiences and learn from it	

Definition
Supervision is a helping process that concentrates on people and sets out to improve performance. Through supervision, the supervisor has the opportunity not only to provide guidance, advice and help, but also to learn[1].

The purpose of the Supervision is to promote continuing improvement in the performance of workers. Supervision is a way to address the four major factors on which performance essentially depends.
- the adaptation of appropriate objectives
- overcoming the difficulties encountered
- the development of staff motivation
- the stimulation of staff improvement

Types of supervision
 "Supervision can be administrative or technical.

Administrative supervision mainly entails monitoring. It is concerned with checking on the progress of activities and the utilization of resources.

Technical supervision on the other hand, requires the supervisor to observe the provider perform a given task, and ascertain the extent to which procedures are being followed and expected standards are being met. This implies that the supervisor himself is technically competent on the task which is being observed. There should be procedure/standard manuals on which the provider [worker] has been trained and which the supervisor is familiar with." [2]

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[1] D. Flahault, M. Piot A. Franklin. *The Supervision of Health Personal at District Level,* WHO, Geneva, 1988
[2] R. McMahon, E. Barton, M. Piot *On Being in Charge, A Guide to Management in Primary Health Care,* Second Edition, WHO, Geneva, 1992

Administrative procedures for the follow-up of activities

If administrative procedures can often seem fastidious and time-consuming, when they are regularly followed-up they don't take time and are of great help to monitor, evaluate and make projects evolve.

Each activity should be carefully planned (and budgeted), monitored, reported. Keeping archives in good order facilitate further evaluation.

Planning activities

Prepare a realistic and feasible timetable indicating the following:
- when the activity is planed
- who will be visited/ what task will be done
- where he/she is located
- resources needed if specifics (different from usual resources)

  ➢ Monthly
  ➢ For all staff - who is involved in the planning
  ➢ Format : annex 1
  ➢ To share with: PO (supervision monthly plan), team (individual plan)

Monitoring the activities

Cf. next chapter on activity procedures: conduct a field visit and monitor the activity
Remember that monitoring of activities shall be regularly done in official way meaning that if during one month you make regular field visits to the different team members, you should make sure that at least once you will make a real monitoring with a monitoring report.

Reporting activities

Check the plan to ensure accomplishment of activities
- Record activities carried out and those not carried out and give reasons
- Reschedule activities not carried out
- Note all major problems/constraints encountered during the month
- Seek solutions to the problems
- Compare activities planned and those carried out to draw conclusion and decide on the next actions

  ➢ Monthly
  ➢ For all staff – who is involved in the reporting (from their own reports as well)
  ➢ Format:
    • For animators: annex 2
    • For facilitators: annex 3
    • For supervisors:
      o General monthly: annex 4
      o New users trends (monthly or quarterly): annex 5
      o Quick analysis of the quality: annex 6
  ➢ To share with: PO (supervision report), team
  ➢ Archive

Planning/Reporting communication

- Supervisors send their own report and planning for next period the 15 of the month

- PO/ Assistant gather reports, adapt their plan (communication with supervisor) then share general report and general plan for the month to come with supervisors before the 21st of the month

- Before each field visit (at least one week before), activities visited, time of visits, objectives shall be directly clarified and agreed

- If any change of plan, this should be communicated as soon as possible by the person aware of the change to the direct concerned persons

- If PO/ assistant and supervisors don't meet, weekly phone call shall be organized for smooth communication

Archiving data

This is utterly useful to organize clear archiving system in order to be able to have all info available for monitoring and evaluation.

- ➢ Regularly + Quarterly check
- ➢ For all activities/ places of activities
- ➢ Possible system: See annex 8
- ➢ To keep in office

Budget

Making a small budget on a monthly basis allows to effectively planning the needs in cash. Indeed, if not planned, there may not be enough money in the bank for your activities.
Request for special events (survey, training, etc.) should be done at least 10 days before.
A basic list of the necessary items with an estimated price and estimated total that is attached to the monthly plan is well enough.

- ➢ Monthly
- ➢ Format: annex 5
- ➢ To share with: PO
- ➢ Archive

Don't hesitate to call ahead when you know of a big coming expense (ex: a training in the next 2 months…).
Any expense above 500 ETB shall also be discussed ahead with the PO or assistant PO. Making quotations in order to estimate expenses can therefore be useful.
Make you sure that all the receipts you hand-over are translated in English

Logistic tasks

Orders and new items archiving

Some items may not be available at your place of work. Orders can be processed in Soddo or in Addis (through Soddo). If there is no logistic responsible in the team, you have to plan ahead (2-3 weeks in advance for Soddo) in order to receive the item in time.

For your information:
All items shall also be registered in the inventory. This is the role of the administrator or PO, assistant PO.

Follow-up/ inventories in the field

The supervisor is the responsible for the follow-up of the material kept by the team. A document (file, etc) shall be kept per staff member with its signature for each item received.

Each team member shall receive after 45 days:
- Material given for the length of the project (usually 3 years):
    o Rain-coat + umbrella
    o Shoulder bag
- Material given each year
    o Agenda
    o Voucher for shoes (participation)

- Material that should get back to InterAide at the end of the contract
    o Sleeping bag
    o IEC material
    o Bicycle (according to the agreement with InterAide)

One regular basis, pen and pencils are also given.

➢ For each new staff and for each new item given (excluding small material like pencils, etc)
➢ Format: annex 9
➢ Archive

Vehicle follow-up

If you have the use of car or motorbike, the logbook shall be filled each day with the relevant information.
Each refill shall be recorded with the number of litres and the total price spent.
Acts of maintenance can be added in the remark column.

➢ For each vehicle
➢ For each day of travel
➢ Format: annex 10
➢ Archive

Team procedures

A team needs to be not-only supervised but also encouraged, evaluated and trained to maintain a good quality of work. Don't forget that they don't work <u>for</u> you but that you are here to help them do their job better: they are the ones in the field with the communities and therefore are the most important members of the team.

<u>The recruitment</u>

Recruitment should be fair, objective. It should be done with the PO or assistant PO.

Job description
Before recruiting somebody, you should establish a clear job-description (if it doesn't exist yet) with an adequate profile.
The salary and condition of work are set by InterAide rules.
- ➢ Job descriptions in RH team: annex 11
- ➢ For each staff member
- ➢ Shall be updated, checked with administrator/ P.O./ assistant PO on a regular basis (if change of responsibilities, etc)
- ➢ 2 copies are edited (signed by responsible and the staff member), one copy stays with the contract in the admin documents, the 2d copy is for the staff member

The vacancy announcement
Even if you have candidates ready, you should publish a job vacancy. This should be shorter than a job description (one page max). It should have clear information about:
- The position
- The date of job opening
- The deadline for application
- The documents requested from the applicants
- The contact address(es) where to send the documents

The selection process
Selection can be done via interviews, tests, etc.
According to the level of responsibilities, 2 or 3 different interviews can be conducted with the different responsible.
Make sure that interviews and test follow the same rules and the same questions for all the candidates: all candidates shall indeed benefit from the selection conditions.

The results announcement
If a test had been given, the results (and the classification) shall be communicated openly (posting on the office door is a possibility).
All candidates that had at least one interview shall be individually contacted even if the answer is negative.

If you are the direct responsible of the new team member, you should follow-up that this person has a proper contract established. Then according to Inter Aide rules, you should follow-up that a 2d contract after 45 days (with adequate conditions) is established and that the team member receive the appropriate material

The follow-up of the staff

The follow-up of the staff is clearly related to the follow-up of the activities but not only. As supervisor you are responsible of the well-being of your staff. You should make yourself available for discussion about work but also personal issues such as medical, training needs that can interfere with work.

On-site follow-up

The supervisor is entitled to visit the field activities regularly (more than 80% of the time in the field). This follow-up allows checking the good conduct of activities, the presence of the staff in the field, the participation of the communities, etc.

The follow-up can be informed or not: it is good to visit without informing your team from time to time.

Each visit should not be made as an official evaluation; however, evaluation should be done every 2 months.

Remember that as a supervisor you are in the field to support your staff: you are not in the field to make the activity yourself, to answer the questions of the community.

It is much more efficient to stand as a back-up for your team, let the animator/health facilitator do their work and if they do make errors, correct them at the end of the session in a private manner. Indeed, if you interrupt the session to correct your team member, you will discredit him/her and the community may not trust him/her anymore after that.

If questions are asked to you by the community, invite your team member to answer to show that you entrust him/her and to underline that the team member is knowledgeable as much as you.

> ➢ 80% of the supervisor time should be in the field
> ➢ Field visits should be planned but not always informed to the team member visited (surprise visits)
> ➢ As a supervisor, you should follow the activity never make it yourself
> ➢ Each visit should be followed by a quick debriefing.

Monitoring and evaluation

The point of making evaluation and monitoring is not to rate the work of the staff but to underline good experience and points to improve.

You should be careful to always say positive and negative points: all shall not be bad or good as it can either demoralize people or make them feel that they don't need to improve anything.

The negative points shall be told as 'points to improve' and leads shall be given to the staff member on how to improve.

Monitoring

On regular basis (every 2 months approximately), you should fill an activity monitoring paper. It is a tool for you to make a yearly evaluation of the staff and to see the evolution.

> ➢ Monitoring every 2 months
> ➢ Format: annex 12
> ➢ Archive for yearly evaluation

Evaluation

Evaluation should be yearly (at minimum). It is good to allow a sufficient amount of time for the process and to make it in a quiet time.

An evaluation should be carefully prepared from monitoring reports, notes and comments you may already have gathered about the team member, points to discuss, etc.

Organise everything around positive points, points to improve, discussion time. Indeed, the evaluation is a time to discuss about job evolution, training needs and other.

Inform well in advance the team member so he/she can also prepare himself/herself for the interview.

> ➢ Evaluation every year
> ➢ Format: annex 15
> ➢ Give feedback: annex 16
> ➢ Archive and one copy for the team member

Team meetings, capacity-building, training, skills enhancement

As supervisor you are responsible for the follow-up of your team: it means that you have to organize regular meetings (once or twice a month), that you may have to refresh their skills or even conduct training for some of your team members.

Team meetings topics can be:

- o Evaluate achievements
- o Discuss and share field experiences
- o Prepare and discuss a monthly plan
- o Conduct update session (technical....)
- o Provide information or new Instructions

If a new staff join the team, the best is to make this person follow the work of another team member (one who is conducting quality work of course) in order to learn.

During evaluation, take the time to discuss about the possible needs for training or skills development of the staff.

> ➢ Team meetings: once or twice a month
> ➢ Review meetings: every 6 or 12 months
> ➢ Trainings; every 3 years or more if new responsibilities/tools, etc.
> ➢ Points for the organization: annexes 17 & 18
> ➢ Report of meetings/ trainings: annex 19
> ➢ Small review-meeting of HEW on FP and registration: annex 21
> ➢ Training material (preparation, planning, report): archive and copy to PO and/or assistant PO

Activities procedures

The follow-up of field activities

Monitoring: field visits

Field visits can be done in 'informal' ways (without evaluation or monitoring sheet) or in a more formal way with monitoring in mind. Monitoring should be done at least once every 2 months. Field visits allow monitoring the team and the activities at the same time.

Prepare a plan for the visit as follow
- Collect information from various sources like previous report, the team member work plan/calendar
- Identify specific issues or tasks that require attention or assistance, and on which to focus during the visit and set objective for the visit
- You may decide to inform or not the team member visited

Conduct the visit as planned
- Use the technique(s) identified for collecting information (monitoring plan for example)
- Record all important information gathered during the visit
- Provide immediate feedback to the staff member
- Before ending the visit, allow discussions with the team member on any other issues

Follow up supervisory visits
- Analyze the information collected
- Interpret the results from the visit (like individual performance strengths and weaknesses, problems and constraints)
- Draw conclusions and recommendations for the team member's individual performance taking into account working conditions and others factors
- Briefly report the major outcomes of the visit (including observations made, needs identified, measures to be taken, conclusions and recommendations, possible date of the next visit)
- Use the conclusions/recommendations in planning the next visit.
  - ➢ Monitoring every 2 months (like staff monitoring)
  - ➢ Format: annex 19
  - ➢ Archive for yearly evaluation

Find in annex 20, the cycle of RH activities

Evaluate the activities

To evaluate activities, there are different techniques.
At programme level, an evaluation can be organized coming back on the programme initial documents such as logical framework, original objectives.
At field level, yearly evaluation helps us keep track of our advance and how we are reaching our objectives.

We evaluate against indicators that are set up at the beginning of the project/the activity/ etc
Indicators can be quantitative or qualitative.
We can evaluate for example by running surveys (quantitative) or making field studies (qualitative).
It depends of what we want to measure and for which reason?
For example:
- If we want to evaluate the impact of IA activities on family-planning coverage, an exhaustive survey can be run. We will confront the results of such survey to the baseline data (survey run at the beginning of the activities) to measure our impact.

- If we want to understand the changes in defaulting reasons of community women, a qualitative study will be more adequate as we know we will need to discuss in depth with women.

If monitoring is the responsibility of the supervisor, evaluation is the responsibility of the PO and PO assistant (but of course organized in partnership the field team)

> ➢ Family Planning coverage surveys (baseline prevalence, impact evaluation)
> ➢ Format: annex 22
> ➢ Archive

Evolution of activities, evolution of tools

Tools and manuals should never be done as static. They are usually designed at a specific place and for specific purposes. However, they may need to be updated. For example for animations: the needs in information may change, we may realize that the needs are different, and that our material is not relevant anymore.

In that regard, we should regularly evaluate the tools used and organize sharing of experiences with the concerned staff. A yearly meeting can be conducted for example to go through the different tools and methodologies and discuss the way people use them in the field to see if updates are necessary.

Once again, this kind of evaluation is to be done at project level (not at *woreda* level only)

Planning on the long-term

There are multiple ways and timing to plan.
- Strategies can be planned over decades
- Programs can be planned over 5 to 6 years
- Projects can be planned over 3 years
- etc

Tools can be as different as:
- Retro-planning
- Gantt chart
- Logical framework
- etc

At field level, the team participates to the overall strategy and programme making but is usually concentrating more on planning over 1 year maximum.

Daily and monthly follow-up are good to keep a good monitoring of activities. However, planning on 4-6-12 months will set objectives for the programme. This is a task that can be undertaken at supervision level.

Tools that be used by supervisor for long-term planning:

- Retro-planning: planning made reverse, starting from the objectives you want to attain

For example:
We are today the 10th of November and I would like to organise HEW meeting beginning of December
One week before the training, I will need to prepare the contents of the training
Before that, I have one week to plan the logistics
Before that, I need to discuss with the woreda *office to make sure HEW will be available etc..*
So I need 3 weeks preparation and from today till the beginning of December I should have enough time.

- Gantt chart: A Gantt chart is a graphical representation of the duration of tasks against the progression of time. A Gantt chart is a useful tool for planning and scheduling projects.

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A Gantt chart is helpful when monitoring a project's progress. A Gantt chart is a type of bar chart that illustrates a project schedule. Gantt charts illustrate the start and finish dates of the terminal elements and summary elements of a project.

To build a Gantt chart, you can start in different ways according to what you try to organize:
- Achieve a specific objective: define the objective to attain and its deadline, and then go back (activities, human resource, etc)
- Assess a geographical coverage of activities per staff member: start by staff members (one line per staff) and develop their possible activities over the year
- Develop the conduct of specific activities over a long-period: start with the beginning activity and develop over months to come how the activity(ies) can evolve.

Example of Gantt chart

2011	August			September				October				November					December			
	W3	W4	W5	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W5	W1	W2	W3	W4
Survey																				
questionnaire	█	█	█	█	█	█	█	█	█											
target population and sampling	█	█	█	█																
choice of studied area	█	█	█																	
choice of studied area					█	█														
choice of surveyors										█	█									
training of surveyors											█									
Survey												█								
Analysis															█	█	█	█		
Study																				
Call for student	█				█															
Research rationale	█											█								
Preparation of study																			█	█
conduct of study																				
Analysis																				
Activities																				
Definition of pilot activities						█	█	█	█	█										
Recruitment of 1 com facil										█	█									
Pilot activities implement													█	█	█	█	█	█	█	█
evaluation of pilot activities																				

Procedures often seem fastidious and time-consuming.
The fact is that while taking the habit to conduct them regularly rather than only when the information are requested (official authorities, headquarter, donors, etc), we will gain time.

Every month (around the 15) the supervisor report + plan for the next period (and budget) should be communicated to the PO/ assistant PO
Every quarter we should had the new user trends quarter report (15 April, 15 July, 15 October, 15 January)
All other documents can be controlled and requested at any moment

Developing new activities: hints

'If you don't know where you go, you are sure to end up somewhere else'.

Developing new activities should not be decided lightly. We should ensure that the possible activity is in line with the ethics and the rationale of our organization and programme.

Each activity should have a clear objective and the following questions should be answered:
- What is the activity we would like to conduct?
- Why we want to make the activity? What is the objective?
- Who will be the beneficiaries?
- Where do we want to conduct the activity?
- How do we want to conduct the activity?
- For how long this activity will be done?
- What is the exit strategy? What sustainability for the activity? Who will take care of it after us?

New activities should be tested and analyzed.
After the test we should reflect on the following:
- Did the activity meet its objective?
- Does this activity seem still relevant with our programme?
- Can we maintain/conduct this activity with our current resources or not?
- Is the added value to our program worth making this activity?

This part is for supervisors to understand better the way projects and activities are built. The aim is not for supervisors to develop by themselves new activities.

Developing new activities is not something you are expected to do yourself and alone.
It is a team work, usually develop at strategic level.
Developing a new activity or project, and making its follow-up usually follow a cycle such as the one below:
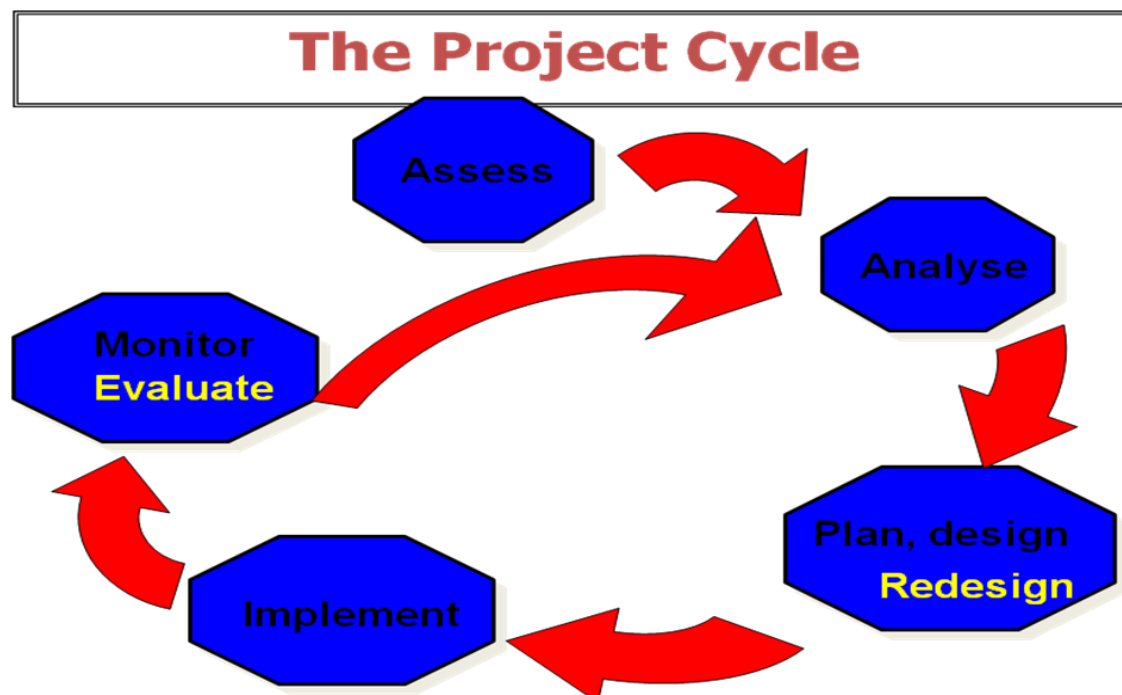
Context and problem analysis
Knowing the context
Before starting anything you should know:
- ✓ Context

- ✓ Beneficiaries, the target group
- ✓ General problems and their effects
- ✓ Main Problem : the priority
  - ✓ Seriousness
  - ✓ Frequency
  - ✓ consequences
- ✓ Existing and needed resources
- ✓ Existing capacities
- ✓ External factors and obstacles

This implied research:
- Desk-based research
- Field research: surveys, group-discussion
- etc

Knowing the problem
From a defined problem, you should offer a solution/ objective.

> *For example in water supply:*
> *Problem can be: people take water for unsafe source -> people drink unsafe water -> people at high risk of water-borne diseases*
> *Solution can be: people take water from safe source -> they drink safe water -> there is a reduced risk of water-borne diseases*

You can consider tackling different part of the problem assessed.

> *For water for example, you can tackle the safe water, the source of water or even the disease.*

You should analyze what is the most appropriate activity you can do:
- ✓ Do not consider impossible objectives or those with negative consequences (ex: giving mineral water to people)
- ✓ Choose the strategy better fits with our priorities (mandate, sector, experience, resources…)
- ✓ Take into account the implications for the affected population

A new activity/ project should be amongst others:
- • Feasible
- • Relevant (with your mandate, the context)
- • Effective and efficient (you should have clear impact)
- • Sustainable

Writing the activity

Inputs Activities Outputs Effect Impact

Design direction

We write usually an activity starting from the effect, the impact we want to have.

Each activity should have:

- An objective

Purpose – outcome at the end of the operation, expected benefits.

> *Example: people have less disease linked with bad water consumption in x villages after 1 year*

- 1 to 3 results

Direct tangible results that the operation delivers

Example: people are sensitized to hygiene & sanitation in x villages after 1 year, 5 water points are built in x villages after 1 year

- Clear tasks

The tasks that need to be carried out to deliver the planned results

Example: training of animators, making tools for animators....

Thinking about all external pre-requisite which can impact on our activity

We often make assumptions about the context of our work.
We should make sure to check that our assumptions are correct if they have an impact on the activity.
An assumption is a condition:

- required for operation success;
- which is not under the control of operation management; and
- which will need to be monitored

For example: 'the community volunteers are willing to be trained to take-over sensitization in the concerned villages' is a very important assumption! If it is not the case, all the sustainability part of your activity is falling down.

Following-up the impact of the activity, planning the resources

Indicators

You need to be able to measure your action with verifiable and objective (quantitative, qualitative) indicators.
Indicators are for results and objectives. You have also to think about the way you will check the indicators.

For example:
If the objective is 'people have less disease linked with bad water consumption in x villages after 1 year', an indicator will be the morbidity data that you can collect from zone office.
If the result is '5 water points are built in x villages after 1 year', an indicator will be the number of water points built and you can check by making field visits.

Resources and budget

For each task, you should plan what are your needs in terms of resources (human, material) and budget.
Be careful! Sometimes resources can also require developing specific tasks (for example, if you plan to have IEC as a resource, maybe you should plan to develop them).

Finally, you can start making a calendar!
Of course, punctual activities can be possible: participation to special day, a special training.
Measuring our impact

They are thousand ways to collect data: surveys (exhaustive or not), observation, group discussions, interviews, questionnaires, etc.
Never forget that it should be easy and cost-effective to organize.
Baseline data

When we speak about indicators, we speak about the possibility to measure the impact of our activities.
If you want to be able to measure your impact, you should make sure that you have baseline data to confront the data you will collect at the end of the activity.
If you don't have data before the action to compare the data after the action, you cannot measure the impact, the added-value of your work.

Measuring quantity and quality

Quantitative data (number of sessions, number of people trained, etc) are easy to measure.

Example: number of villagers participating in sensitization sessions during 1 year in a village.

Qualitative data (behaviour change, level of satisfaction of people, etc) are less easy to collect but can bring great insights on the impact of an activity. Still, you can organize a way to measure quality.

For example if you want to know the impact on sensitization sessions on the behaviour of people, you can organize to collect information on their behaviour before and after the sensitization sessions: the number of people declaring that they are washing their hands after going to the latrines before the sensitization and after 1 year of sensitization is a way to know what impact you had on behaviour (you can measure through a survey for example).

Using an external evaluator

It is sometimes difficult to objectively measure our own impact: we are responsible of this impact, of the results and it can be stressful to collect information to ensure that our activities were indeed effective.
It can be sometimes a good option to refer to an external evaluator.

As discussed between the supervisors, few points to keep in mind to keep your mind on the biggest picture!

INTERAIDE ETHICAL CHART

We don't	We do
Stay forever	Have an exit strategy
Substitute to existing health services and workers	Support and build the capacities of our partners
'manipulate' people	Give transparent and complete information
Make decision for people	Build confidence of the communities to make their own choices

ANNEX 1: MONTHLY ACTIVITY PLAN

Name of staff: _____

Area covered: _____

Year:_____   Month:_____

Date	Task	Location	Specific resources	Remarks

Pratiques Network http://www.interaide.org/pratiques

ANNEX 2: ANIMATOR MONTHLY REPORT

animator's name _____
Date _____
Period covered _____
Woreda/ Kebele _____

	Date	Place (ketena, LB)	1st H to H visit			Group session 1			Group session 2			Group session 3			Selective H to H		
			N° of houses	M	F	N° of sessions	M	F	N° of sessions	M	F	N° of sessions	M	F	N° of houses	M	F
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
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10																	
11																	
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Pratiques Network http://www.interaide.org/pratiques

18																				
19																	22			
20																				
21																				
22																				
23																				

N° of new users in the kebele for the month (HEW report):_____

Other general comments: successes, difficulties, questions and suggestions

ANNEX 3: HEALTH FACILITATOR REPORT: THE DATA ANALYSIS TOOL

Used on non-regular basis

Health facilitator's name
Period covered
Woreda/ Kebele

Quality care of new users	point	comment
1) The potential new users are welcomed warmly		
2) Privacy is respected (the potential new users are asked if they feel comfortable to talk in front of other people for example)		
3) The HEW questions the potential new users about their visit		
4) The potential new users are given exhaustive information about the different methods, their advantages and disadvantages		
5) The potential new user are asked about their health history and possible contraindications and/or pregnancy (or a pregnancy test is done)		
6) The potential new users are the one to choose the contraceptive, they are told to take time to think about it if necessary		
7) The new users are encouraged to come visit the HEW anytime		
8) The new users are given a card with a clear appointment that is also explained orally		
Conclusion		

Quality follow-up of new users	point	comment
1) There is a minimum of one weekly check in the book to see if the new users especially didn't miss the appointment date		
2) When HEW meet a new user (in health post, outreach, during information session, at home,…), she takes time to discuss with her about her health condition, possible side effects, benefits of family planning		
3) if they missed their appointment, the new users receive home visit before a week time after the missed appointment		
4) The new users give positive feedback about their interaction with HEW and declare feeling at ease with them		
Conclusion		

Quality follow-up of defaulters	point	comment
1) HEW identify people who are 15 days late for their appointment as potential defaulters		
2) The HEW check at least every 15 days potential defaulters in the registration book		
3) Potential defaulters receive home visit		
4) Potential defaulters are asked open question about their late coming		
5) If the person is not willing to use contraceptive anymore, she is offered an alternative (other contraceptive, meeting to discuss with the husband,..)		
6) If the defaulter is not willing to use contraceptive after having been offered an alternative, the HEW plan to come back a 2d time 1 month after		
Conclusion		

Quality of outreach services	point	comment
1) HEW make a monthly plan for the visit of outreach sites		
2) The maximum walking time to the outreach post from any household is 30 minutes one way		
3) The HEW give clear information about when they are coming		
4) The HEW are always punctual		
5) The HEW stay a minimum of 2 hours		
6) Each outreach site is visited at least 2 times per month		
7) The HEW know the number of users that will come at the outreach site and take enough material in consequence		
8) The HEW sessions in outreach are equivalent in quality with the sessions given in health post		
9) The community members report that the family planning services in the outreach sites are good enough for them to avoid going to the health post directly		
Conclusion		

Quality of registration	point	comment

1) The registration book has:
   a. Numbers without mistakes
   b. Clear names written
   c. Clear age and children number per woman
   d. Clear location
   e. Clear appointment date		

2) The HEW easily find back a person in the book (less than 15 minutes)		
3) If they use the new HIMS system, the HEW easily find back the file of a person (less than 15 minutes)		
4) The HEW have a check at least once a week in the registration book		
Conclusion		

Quality of volunteers	point	comment
1) There is a minimum of 4 volunteers identified per outreach site		
2) A minimum of one volunteer is active on family planning (take the names)		
3) The volunteers receive training or refresher at least once a year		
4) The volunteers meet with HEW minimum twice a week		
5) The volunteers are involved into identifying potential new users		
6) The volunteers are involved in following-up on new-users and defaulters		
7) The volunteers encourage users and non-users to go to the health services		
Conclusion		

Other comments

Don't forget to join the map of the kebele to your report

ANNEX 4: SUPERVISOR MONTHLY REPORT

Name of staff: _____

Area covered: _____

Year:_____   Month:_____

Activities

Animations

Place (woreda/ kebele)	1st H to H visit			Group session 1			Group session 2			Group session 3			Selective H to H			New users in the month
	N° of houses	M	F	N° of sessions	M	F	N° of sessions	M	F	N° of sessions	M	F	N° of houses	M	F	
TOTAL																

Remarks

Quality

New users(if results are not available yet, put a date of expected reporting)

Woreda/kebele	N° new users	Woreda/kebele	N° new users

Remarks

Meetings
(with officials, with animators, with Health workers,...)

Particular issues
(specific events

PLAN FOR THE NEXT PERIOD

Animations

Quality

Others

Questions waiting for answers (and changes planned for the months to come)

Join monthly budget.

ANNEX 5: MONTHLY BUDGET

Place:_____

Period covered:_____

N°	Description	Unit	Unit price	Quantity	**Total price**	Remark
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
		TOTAL estimated				

Prepared   by: Authorized   by:

_____   _____

ANNEX 6: REPORT ON NEW USERS TRENDS

Name of staff:_____
Area covered: _____
Period:_____

	Kebele	N° of new users	sum age	sum children	N° of new users with missing information
1					
2					
3					
4					
5					
6					
7					

This report shall be conducted on a monthly or quarterly basis.

A minimum of 2 kebele of animation and 2 kebele of quality should be covered: age and number of children per new user should be collected. In case info are missing, the number of new users with missing information shall be collected in another part.

The number of new users for all kebele of work should still be collected for report.

ANNEX 7: QUICK ANALYSIS OF THE QUALITY BEFORE INTERVENTION

This document should be filled at the very beginning of animations in order to assess the quality before InterAide starts to work. This should be done by HEW observation and discussion by the supervisor.

Staff: _____

Area covered: _____

Date:_____

	Rating	Comments
Quality care of users		
1) The HEW is punctual and open the health post on time		
2) The users receive good welcome in the health post		
3) The HEW takes time to discuss with the user		
4) The user is given a card with a clear appointment that is also explained orally		
5) There is a minimum of one weekly check in the book		
6) Potential defaulters receive home visit		
Quality of outreach services		
1) HEW make a monthly plan for the visit of outreach sites		
2) The maximum walking time to the outreach post from any household is 30 minutes one way (check with the map)		
3) Each outreach site is visited at least 2 times per month		
Quality of registration		
1) The registration book has: a. Numbers without mistakes b. Clear names written c. Clear age and children n° per woman d. Clear location e. Clear appointment date		
2) Defaulters are identified (a reason is written in the book)		
Quality of volunteers		
1) The volunteers meet with HEW minimum twice a week		
2) The volunteers are involved in family planning		
Conclusion (total rating, urgent points to focus on...)		

ANNEX 8: ARCHIVING SYSTEM AT SUPERVISION LEVEL

Documents about activities in each kebele are under the responsibility of the supervisor.

- General calendar or gantt chart
- General map of the are covered
- General folder for letters, supervision reports and plans

Activities archives

Archiving system per kebele can be organized as follow
One file per kebele is recommended.

Per kebele, the archives should be completed (little by little) as followed:

- Map of the kebele

- Survey(s) done in the kebele
  Don't forget that if 2 surveys, the ketena shall correspond or at least be confronted (make sure to record to which previous ketena correspond a new one if this as changed)

- Quick evaluation of the quality done at the starting of the animations

- Animations report

- Quality archives
  All the different data collected by the health facilitator
- Quality reports:
  a. Data analysis tool and recommendations
  b. Small final report at the end of the capacity-building

- All other relevant documents

Name of the employee:_____
Job title:_____
Place of work:_____

EQUIPMENT	FREQUENCY	RECEIVED (date + signature)
Vehicle (motorbike or bicycle)	Once. Stay the property of IAF To be returned at the end of the contract	
IEC material (describe)		
1 sleeping bag		
1 umbrella	once	
1 rain coat	once	
1 bag	once	
1 pair of shoes (voucher)	per year	Y1 Y2 Y3
1 agenda	per year	Y1 Y2 Y3

The employee understood that he/she needs to take care of the materials that is given or lent to him/her. If damaged before the end of the period, the material will not be changed.

Name:

Date:

Signature:

ANNEX 10: VEHICLE LOGBOOK

Programme/place:_____   Year:_____   Month :_____
Motorbike:_____

Day	Driver	Dep. KM	Arr. KM	Reason/destination	Fuel qty	Cost/ remark/maintenance
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

Pratiques Network http://www.interaide.org/pratiques

RH animator Job Description
IAF, RH pgm, Ethiopia, Dec 10

The objective of the animator is to deliver objective and holistic information to the communities about reproductive health (particular focus on family planning and potential new users).
The animator will be based in (woreda) and expect to conduct field work.
The animator will work under the direct management of the senior health supervisor. The length of time spend in one site will be planned with the supervisor.
The animator salary will be of ….. after a probation period of 45 days.
Main activities:
   − To define a planning of animation following IA methodology and built together with the supervisor
   − To undertake animation sessions :
      − Discuss with relevant leaders, authorities and health bodies to implement the sessions and encourage their participation
      − Explain the objectives of the project to the community
      − To carry out house to house visits to inform about the project and follow-up on potential new users
      − To make animations by using participatory approach and relevant IEC materials
      − To participate -when relevant and needed- to specific information sessions (animation during immunization days in places where potential users are difficult to target, etc)
   − To work in partnership with Inter Aide field team, relevant field partners
   − To participate to team meetings and trainings
   − To prepare reports on the work conducted
   − Any other tasks that will be relevant with the animator position

Skills and competencies
   − Experience working with communities
   − Good knowledge of the woreda of work, their communities and their culture
   − Experience in reproductive health will be an asset
   − Knowledge of local language and Amharic
   − Experience working with NGO will be an asset
   − Pedagological skills
   − Willing to work in remote places and to make long distance trips (the animator may have to stay during week days in the kebele of work)

RH Health Facilitator Job Description
IAF, RH pgm, Ethiopia, March 11

For its reproductive health program, Inter Aide, international NGO based in Soddo, is looking for

The objective of the health facilitator is to strengthen the quality of family planning services in the existing governmental health posts by working with the health workers.

The health facilitator will be based in (woreda) and expect to conduct field work.

The health facilitator will work under the direct management of the technical supervisor.

He/she will work in 4 to 8 kebeles at the same time, flying between the health posts. The length of time spend in one site will be planned with the technical supervisor.

The health facilitator salary will be of ….. after a probation period of 45 days.

Main activities:
- Assess the quality of the family planning services in the place of intervention
- Support and train the Health Extension workers in their family planning work:
  - welcome the new users: support the health extension workers in caring the new clients of family planning to make them confident with the contraceptive methods.
  - outreach posts maintenance: help the Hew to implement adapted number of outreach sites in the kebeles to facilitate the access of contraceptives.
  - follow up the defaulters: carry out a strategy to follow up the women who stop to take contraceptive because of fears, side effects or false beliefs.
  - registration system: work with HEW to improve the quality of the family planning registration system, data collection and clients appointment list.
  - Organisation of the work with the community/government volunteers
- Work in partnership with Inter Aide field team, participate to team meetings and trainings
- Prepare reports on the work conducted
- Any other tasks that will be relevant with the health facilitator position

Skills and competencies
- Nurse diploma (10 + 3)
- Experience in reproductive health (preferably in family planning)
- Knowledge of local language and Amharic. English will be an asset
- Experience working with NGO will be an asset
- Pedagological skills
- Good knowledge of the woreda of work, their communities and their culture
- Willing to work in remote places and to make long distance (bicycle can be provided, the person can be asked to walk long distance as well)

RH Senior supervisor in RH Job Description
IAF, RH pgm, Ethiopia, Dec 10

The objective of the senior supervisor is to supervise and coordinate the work realized by the field team (animators and health facilitators).

The senior supervisor will be based in (woreda) and expect to conduct field work.

The senior health supervisor will work under the direct management of the project officer and assistant project officer.

The senior supervisor salary will be of ….. after a probation period of 45 days.

Main activities:
- To coordinate planning and dispatching of the field team in the woreda(s) of work by organizing team meetings.
- To ensure the good implementation of the field team work according to the annual plan by undertake field visits and assist technically the field team in the implementation of their activities
- To liaise with field partners and relevant officials (health authorities, possible NGOs,…) to coordinate common and/or overlapping field activities
- To follow-up and evaluate training needs and organize relevant trainings for his/her team when needed.
- To follow-up small administrative tasks: evaluation of the field team, follow-up of leave and overtime of the field team, build monthly budgets for field expenses
- To work in partnership with Inter Aide team
- To participate to team meetings and trainings
- To prepare reports on the work conducted (from field team reports and other relevant field bodies reports)
- Any other tasks that will be relevant with the senior health supervisor position

Skills and competencies
- Nurse diploma (12+2)
- Experience working with communities and in reproductive health
- Experience working with NGO will be an asset
- Good knowledge of the woreda of work, their communities and their culture
- Knowledge of English as well as local language and Amharic is compulsory
- Pedagological and organizational skills
- Willing to work in remote places and to make long distance trips
- Motorbike skills are compulsory (driving license can be organized)

ANNEX 12: ANIMATIONS EVALUATION GRID

Name of the staff:
Date:
Topic of the session:

ORGANISATION

	Excellent (++)	Good (+)	acceptable	to review (-)	Other comments
Topic of the session is well defined					
The lenght of the session is correct					
The place and time are adapted					
the public is according to plan (sex, number, users,…)					
There is an introduction and a conclusion time					
There is time for questions and referral					

COMMUNICATION

	Excellent (++)	Good (+)	acceptable	to review (-)	Other comments
The communication is clear and information clear and concise					
The public is attentive					
The education supports are pertinent/ well used					
The public is asked about its knowledge					
The public participates, asks questions					
Animator is replying easily and refers if he/she doesn't know					
Choice, privacy of people is respected					

General comments and recommendations

Pratiques Network http://www.interaide.org/pratiques

ANNEX 14: OVERTIME SHEET

Name: _____
Position: _____
Place of work: _____
Month: _____

Date	Hours	Reason	compensation/ payment	Signature employee

Pratiques Network http://www.interaide.org/pratiques

ANNEX 15: EMPLOYEE PERFORMANCE REVIEW

Name of the employee:_____
 Job Title: _____
Manager:_____
Review period:_____

JOB REVIEW

	(- -) =To review	(-) = To improve	(neutral) = Satisfactory	(+) = Good	(++) = Excellent
Job Knowledge *Comments:*	☐	☐	☐	☐	☐
Work Quality *Comments:*	☐	☐	☐	☐	☐
Attendance/Punctuality *Comments:*	☐	☐	☐	☐	☐
Initiative (Self-Starter) *Comments:*	☐	☐	☐	☐	☐
Communication/Listening Skills *Comments*	☐	☐	☐	☐	☐
Dependability(Reliability) *Comments:*	☐	☐	☐	☐	☐
Team Work *Comments:*	☐	☐	☐	☐	☐

Overall Rating

Additional Comments: (Needs, training…)

Goals (as agreed upon by employee and manager): strong Points and Points to improve.

By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.

Employee's Signature   *Date*

Manager's Signature   *Date*

Additional comments may be supplied by employee on a separate sheet of paper when necessary

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ANNEX 16: HINTS ON HOW TO GIVE AN EFFECTIVE FEEDBACK

Feedback in this context means communicating with the staff, regarding performance. The Supervisor gives feedback to its staff at different times and in different forms:

- Indicates whether or not the task was carried out as expected.

- Points out aspects of the task which were not properly performed.

- Advises the Provider how to properly carry out aspects of the task that are wrongly performed.
  At the end of the visit the supervisor will have a meeting with the - CBS, Provider during which he shall:
  - Provide solutions to problems raised during the last visit and for which supervisor had no answers at that time.
  - Outline major findings of the visit pointing out the strengths and weakness in performance.
  - Point out operational and other problems identified.
  - Discuss and propose solutions to problems identified.
  - Map out and agree with CBS Provider future plans before leaving

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Always prepare the training.

We usually say that for 1 hour training, there is 2hours of preparation
A training plan should detail every sessions, every activity (introduction, discussion, exercise, conclusion, speaker, time, material)
Budget and logistic requests shall be established and discussed at least 2 weeks in advance

- Identify topics to be discussed
- Multiply the format of the activities (role plays, discussions,…)
- Setup the meeting objectives
- Identify the site and the materials, depending on objectives and themes
- Send invitation(s) and ensure that participants are informed in time (purpose, site, date, time, duration, expected results…)

- Prepare the outline for the meeting
- Prepare the site for the meeting
- Prepare notes and assemble all materials identified
- Prepare the venue:
    - Invitation
    - Prepare the room
    - Prepare the rules of the training

Conduct the meeting/training
- Be present to welcome participants
- Settle participants as they come in
- Create a positive environment i.e. rapport
- Formally welcome and greet the participants
- Introduce the topic(s) and the purpose of the meeting
- Share expectations before, evaluate after

It is always good to discuss what people expect from the training/meeting, what the difficulties they face regarding the topic developed BEFORE starting the training: it allows the trainees to compare what they are learning with their difficulties all along.

- Allow participants to express themselves on the different topics
- Adopt a democratic style during the meeting
- Allow participants to express their own concerns
- Regularly summarize and note the major issues from the discussions
- Regularly check the time to avoid exceeding meeting time
- Summarize the meeting's major results and decisions
- Schedule the next meeting and agree on possible topics
- Evaluation of the meeting:

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A small evaluation after will help you to see if your succeeded in meeting your trainees expectations and will help you to enhance for the next time: the idea is therefore is to have a critical evaluation which doesn't mean it is negative!

- Close and thank participants

Carry out follow up of the meeting

- Write the report of the meeting reflecting the major decisions, recommendations and actions to be undertaken
- Submit a narrative report to the next level supervisor
- Inform participants and other partners about the major outcomes of the meeting
- Include relevant outcomes of the meeting in the next monthly plan.

ANNEX 18: TOOLS FOR TRAINING ADMINISTRATION

ATTENDANCE SHEET   *InterAide, oct 11*

Event: _____

Dates: _____

Place: _____

	Name	Position	Area of work	Day 1 _____	Day 2 _____	Day 3 _____
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

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PERDIEM SHEET   *InterAide, oct 11*

Event: _____

Dates: _____

Place: _____

	Name	Position	Area of work	Daily perdiem	N° of days	Total perdiem	Signature
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Prepared by: _____   Paid by: _____

ANNEX 19: CONTENTS OF MEETING/TRAINING REPORT

- o Introduction (why, where, what, when... in brief):
- o Purpose of meeting
- o Major topics discussed
- o Major decisions, recommendations, actions to be taken and when and by who
- o Points to improve for next time
- o Conclusion

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FP survey
Quick animation analysis

Report to the officials of the results and presentation of the methodology

Animations to community (cf. Animation procedures)

Quality work (cf. Health facilitators procedures)

Hand-over to officials:
- Presentation of results (coverage, quality data)
- Field visit
-
FP impact survey (random: not all kebele are surveyed)

Quality impact visit (random: not all kebele are surveyed)

Youth activities?

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When assessing the services of HEW, it seems sometimes necessary to make an update of their knowledge and skills (such as registration) even before quality work takes places.

It should involve:

- o presentation of IAF (methodology, rules and protocols)
- o refreshing on FP methods (cf. following tools on the way to check if a pregnancy test is necessary for a new-coming user and on the different methods,)
- o refreshing on false beliefs as even HEW seem to spread some of them. You can refer to the animator guidebook and the part on false beliefs.
- o if necessary, 'emergency' registration training (if there is no registration book, one can be purchased). You can refer to the health facilitator handbook for training procedure.

LET'S CHECK THE POSSIBLE PREGNANCY OF A POTENTIAL USER

Here are the questions to ask:
- Did you had your menstrual period started in the past 7 days?
- Did you gave birth in the past 4 weeks?
- Do you breastfeed AND gave birth less than 6 months ago AND your periods have not returned?
- Did you had miscarriage or abortion in the past 7 days?
- Did you avoided sexual relationships since your last period?
- Have you been using contraceptives correctly till today?

If any of this is true, the woman can normally start using a contraceptive method immediately as it is almost certain that she is not pregnant.

Otherwise, a test should be run or she has to come at her period time.

Note that there are always exceptions and you can expect some women to be pregnant while having their period for example. This happens but is very rare! In case of doubt (irregular period, non correct use of contraceptive, etc), she should make a pregnancy test.

CHOICE-MAKING TOOL FOR CONTRACEPTIVES

Interaide, August 2012

	Implants	Depo	Pill	Male condom	IUCD	Vasectomy	Female sterilisation	Breastfeeding (LAM)	Natural methods
Very effective	good choice			good	very good	very good	very good	good choice	
Easily available	good choice	very good	very good	good choice				very good	very good
Helps protect against HIV/AIDS				very good					
Few side-effects			good choice	very good					very good
Easy to use	good choice				very good	very good	very good		
Easy to stop		good choice	very good	very good				very good	very good
Can have children later	very good	very good	very good	very good	very good			very good	very good
Good while breastfeeding	6 weeks after delivery is a minimum	special pill available		very good	very good	very good	very good		
Use only when needed				very good					
No need to touch genitals	very good	very good	very good		good choice	very good	very good	very good	very good
Comments	one-time procedures, nothing to remember. Check contradications. Implants: inform where to go for removal.	remember to take every day at the same time. If 2 missed, avoid intercourse during 7 days		use each time you have intercourse. Learn how to use	one-time procedures, nothing to remember. Check contradications. Available in health centers	one-time procedures, nothing to remember. Check contradications. PERMANENT. Available in big town		Must follow instructions: baby should eat every 4 hours minimum, only mother milk, before he is 6 months	not recommended to avoid pregnancy. Calendar alone, withdrawal: not effective!

Legend:
- ☐ not a good choice
- ▥ a good choice
- ▨ a very good choice

Introduction
The family planning survey is an exhaustive survey which permits to have a reliable prevalence of the family planning clients' coverage in the kebeles. This survey will be implemented in each kebele before starting the family planning program. According to the result, it will be decided where it appears the most relevant to implement the project. Afterwards, the survey will be repeated on a yearly basis to measure the project impact.
The survey duration is about 3 weeks, including the surveyors' training. Of course, the duration may vary according to the topography and the season.

One surveyor covers one kebele. The bigger kebeles are covered by two surveyors.
Each kebele official association is preliminary informed by a letter.

Involve the Health office if they are in demand and for smooth relationships. However, note that using Health office staff (kebele supervisors or others) can be twice time consuming as you will need to supervise them as well. One idea is to invite them to the training and then, to make a field visit with you and have only you as supervisor (+ Interaide staff if needed).

Recruitment of surveyors:
The recruitment is done by the supervisors with the help of Kebele Administration or the HEW (Health Extension Worker).
The surveyors are expected to have completed grade 10th or 12th.
They must be in favor for the Family Planning.
The surveyors are from the Kebele but can be reemployed to work in another Kebele.

Training of the surveyors *(2 days)*

− *Objectives of the training*
- to make the surveyors familiar with the family planning project
- to understand what the purpose of the exhaustive survey is
- to understand the questionnaire
- to know how to react in particular situations
- to understand the importance of the age estimation in order to have a reliable/ illegible population number.
- to know how to use the documents

− *Methods:*
  − Introduction: presentation of the family planning project, the purpose of the survey, the different methods of contraceptives.
  − A reading and understanding test: each surveyor reads the questionnaire and one

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other explains what he/she understood.
- A role playing: simulation of situation, one play the surveyor's role and one woman, the interviewee
- Use the document: explain how to use the documents, questionnaire, notes to help them and the collected data format.
- Practical test: at the end of the session, a practical test is done in some houses near the office; the surveyors do the survey under the control of the supervisor.

A meeting time is planned the 3rd day after the beginning of the survey. This time allows to evaluate the quality of the data collected . The surveyor who has better understanding can also be a resource for the others.

Materials:
- *a questionnaire and a note laminated for each surveyor :*

1/ What is the name of the household head?

2/ How many women between 15 and 50 years old live in this house?

3/ How many are single?

4/ How many are married?

5/ How many are currently under contraceptive? And which type?

6/ How many women were using contraceptive and stopped?

7/ How many women are not users?

Important notes

Question 2: For this question, since most of the time the women don't know their age exactly, you should estimate their age. **Be careful not to forget the young women between 15 and 20 years old.**

Question 3: Among the women you register on question 2, how many are single (not married, divorced, widow).

results question 3 + 4 = result question 2

⬜⬜⬜⬜⬜
Question 5: With this question, we want to know how many women are under contraceptive today and get the contraceptive methods used.

Depo = injection every 3 months

Pills = one medicine per day
Condom = preservative masculine
Implan = little stick under the skin of the arm for 3 or 5 years.

Question 6: With this question, we want to know the number of women who were using contraceptives but decided to stop for any reasons.

Question 7: Here we want to know how many women don't take a contraceptive <u>today</u>. (Including the ones who never took, the ones who took but stop for other reason than to have a child.)

> **results question 5 + 6 + 7 = result question 2**

- *a format to collect the data – 20 households per page*

Interaide Family Planning Survey									
Name of the kebele: **Massafe**		Kebele total HH: **250**			Date of survey: **may 2010**				
Name of the ketana: **Lada**		Ketena total HH: **25**			Surveyor name: **Fitsum**				
1. Name of the head HH	2. Number of woman in the HH	3. Number of single	4. Number of married	5. Number of currently contraceptive users				6. Number who stopped	7. Non users
				Depo	Pills	Condoms	Implan		
1 **Tesfaye**	4	2	2	1	0	0	0	0	3
2 **Sissay**	1	0	1	0	0	0	0	1	0
3 **Desta**	3	0	3	2	0	0	0	0	1
4 **Musfin**	5	3	2	0	0	0	1	1	3
5 **Ashenafi**	6	4	2	0	0	0	0	0	6
6									
7									
8									
9									
10 **....**									
TOTAL	**19**	**9**	**10**	**3**	**0**	**0**	**1**	**2**	**13**
			19		**19**				

Validation and data compilation

All the households must be visited by the surveyor. The surveyor puts a mark on each door when he finishes the interview to indicate that the house has been visited.

Pratiques Network http://www.interaide.org/pratiques

The supervisor crosschecks the survey on the field: all the doors have to be marked and the collected data document is validated by the supervisor who visits some houses, randomly.

The data document is collected by the supervisor at the health post level. The supervisor compiles the data progressively.

The supervisor gives the result to the Woreda Health Office, the Kebele Cabinet, the Health Center and the HEW.

Parallel work: quality analysis (for supervisor)

While beginning in a new kebele, IA teams assess coverage of Family Planning through an exhaustive survey. This survey however, fails to underline the initial quality <u>before</u> the whole start of the programme in one kebele.
This can also be done during the first month of animation.
It seems necessary to have a view of the quality of family-planning services while assessing the coverage of family-planning amongst the community members.
This analysis of quality shall concern only a limited number of indicators and shall be quickly done by the supervisor during the survey while interacting with HEW.

Interaide Family Planning Survey

Name of the kebele: Kebele total HH: Date of survey:

Name of the ketana: Ketena total HH: Surveyor name:

	1. Name of the head HH	2. N° of woman in the HH	3. Number of single	4. Number of married	5. Number of currently contraceptive users					6. Number who stopped	7. Non users
					Depo	Pills	Condoms	Implant	IUD		
1											
2											
3											
4											
5											
6											
7											
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COMPILATION OF SURVEY DATA

Woreda _____   Kebele _____   House Hold N° _____   Date _____

	Ketena	2.Number of Woman in the HH	3.Number of Single	4.Number of Married	5. Number of Currently Contraceptive Users					Total Users	6.Number who stopped	7.Non users	TOTAL Coverage users in %
					Depo	Pill	Condom	Implant	IUCD				
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
	Sub total												
	Total												

55

Pratiques Network http://www.interaide.org/pratiques