

## MOTHER BABY GROUP CHECKLIST

VISIT # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

TEAM: \_\_\_\_\_

### PART 1. GENERAL INFORMATION (FILL OUT ONCE; UPDATE WHEN NEEDED)

1	Community, address	
2	Mother baby group meets in...	<input type="checkbox"/> GMP site <input type="checkbox"/> Farmer's Training Centers <input type="checkbox"/> Pregnant women's Conference venue <input type="checkbox"/> Other: _____
3	Contact person:	Name:  Contact:
5	Number & names of trained facilitators	1. 2. 3. 4.
6	How do the facilitators organize themselves to do mother group & baby activities?	
7	How often does the group meet?	
8	On what day of the week?  From what to what time?	
10	How many participants usually take part?	Total: _____ Adolescent women (18 y or younger): _____  Pregnant women: ____ Mothers of 0-5 m olds: ____  Mothers of 6 to 24 m olds: _____

OBSERVE IN EVERY VISIT TO MOTHER BABY GROUP:		VISIT #___		VISIT #___		VISIT #___		Remark
		YES	NO	YES	NO	YES	NO	
1	Does the place seem welcoming and comfortable to be in, for the women?							
2	Is there a playbox with the recommended toys?							
3	Are there enough toys for the number and ages of children?							
4	Have any new toys been added since last time? (SKIP ON THE FIRST VISIT)							
5	Do the facilitators greet the women warmly and call them by their names?							
6	Do the facilitators register who is present?							
7	Do the facilitators refer to the manual during the session?							
8	Do the facilitators do the game with women and children?							
9	Are the children taken to their own activities, after the game?							
10	Do the facilitators promote sharing and problem solving among women?							
11	Do most women participate actively in sharing and problem-solving?							
12	Are shy/quiet women encouraged to participate?							
13	Do the facilitators do the main session effectively?							
14	Do the facilitators do the closing session effectively, so that women share some of their plans?							
15	Do women have snacks or do something social together (songs etc.)?							
16	Are there at least 2 facilitators present in children's group, in case of 10 or more children?							
17	Do children seem generally happy and engaged, during play time?							
18	Is there a simple schedule for children's activities, that is followed?							
19	Do the facilitators praise women frequently during the session?							
20	Do the facilitators collaborate and share the tasks well?							
	TOTAL (YES):							
1) DESCRIBE AND PRAISE THE FACILITATORS FOR GOOD PRACTICES. 2) HELP REINFORCE WEAK PRACTICES: DEMONSTRATE AND PRACTICE TOGETHER. 3) TALK TO 3-4 WOMEN EVERY TIME, AND TAKE NOTES ON <ul style="list-style-type: none"> <li>• ANY CHANGES THEY SEE IN THEMSELVES OR THEIR CHILDREN AS A RESULT OF SUPPORT GROUP</li> <li>• ANY NEW PRACTICES PARENTS STARTED USING AT HOME, BECAUSE OF SUPPORT GROUP</li> </ul>								