

<p><b>STANDARD SECTOR INDICATOR CODE:</b> HE-177 <b>PEPFAR CODE:</b> NA</p>	<p><b>1 Care Service- Educated Individuals on Parenting Skills:</b> Number of individuals educated on parenting skills.</p>	
<p><b>HEALTH SECTOR</b></p>	<p><b>Sector Schematic Alignment</b></p> <ul style="list-style-type: none"> <li>• <b>Project Area:</b> HIV Mitigation</li> <li>• <b>Project Activity Area/Training Package:</b> Community Care of OVC</li> </ul>	
<p><b>Type:</b> Output</p>	<p><b>Unit of Measure:</b> Eligible Individuals</p>	<p><b>Disaggregation:</b> <b>Sex:</b> Male, Female <b>Age:</b> 0-9 years, 10-14 years, 15-17 years, 18-24 years, 25+</p>

**To be counted for this indicator the following criteria must be met:**

- The individual must have received at least one hour of training, mentoring, or participated in a group focused on parenting skills.
- The services must have been provided by the PCV or their partners in an individual or small group setting. Research shows ideal group size is less than 25 individuals, although in some instances group size can be significantly larger.
- Receipt of service must be documented by the Volunteer or their partner.

**Definitions:**

**Parenting skills (groups, education):** Good parenting skills help children become physically, mentally and emotionally healthy, productive, and successful adults.

**Parenting skills Interventions (groups, education):** are aimed at facilitating child-caregiver bonding and imparting knowledge on child development, positive discipline, and promoting basic health and nutritional knowledge. Caregivers participate in family centered activities that are meant to build knowledge, skills and/or resources to improve caring for the family unit. Interventions can include things like: parenting skill building classes, home visits, and parenting clubs which can all serve to support improved parenting skills. Support provided for reducing household stress and improving care giving skills to the child can be enhanced through referrals to vocational training and income generating activities.

**Caregiver of an OVC:** A parent, guardian, foster parent (formal or informal) who has primary responsibility in the home for caring for a child affected by HIV/ AIDS.

**PLHIV:** Persons living with HIV/AIDS.

**Orphans and Vulnerable Children:** Children <18 affected by AIDS, often referred to as orphans and vulnerable children (OVC), are children who have lost a parent to HIV/AIDS, who are otherwise directly affected by the disease, or who live in areas of high HIV prevalence and may be vulnerable to the disease or its socioeconomic effects.

**Rationale:** HIV affects entire families and is a disease that clusters within families, requiring a family centered response. 95% of all children affected by HIV/AIDS live in families so a great deal of attention should be put on this unit. Families caring for orphans and other vulnerable children often experience additional stress due to the reduced resources and may need to deal with a child experiencing grief and loss. Parenting classes have been shown to reduce toxic stress in the lives of both caregiver and children.

**Measurement Notes:**

1. **Sample Tools and/or Possible Methods:** Volunteers should use data collection tools to measure progress against project indicators. For this Standard Sector Indicator, a tracking sheet that collects the names, sex, and age of participants who were trained, mentored, or participated in a group focused on parenting skills will capture the needed data. A tracking sheet may include:
  - a. The name/title of the intervention/project
  - b. The start and end date
  - c. Location where the intervention is conducted
  - d. A brief description of the activities of the intervention
  - e. Beneficiaries – *see disaggregation*
  - f. Names of organizations/partners collaborated with in implementing the intervention
  - g. Source and amount of funding, if funds are used
2. **General Data Collection for Volunteer Activities:** All Volunteer activities should be conducted with the intention of achieving outcomes – knowledge change (short-term), skills demonstration (intermediate-term), and behavioral changes (intermediate to long term) as defined by the progression of indicators within the objectives of a project framework. The progression of measurement for all Volunteer activities should begin with baseline data being conducted prior to the implementation of an activity (or set of activities), followed by documenting any outputs of the activities and then later at the appropriate time, measurements of specific outcomes (see the bullet on frequency of measurement).
3. **Activity-Level Baseline Data Collection:** Because this is an output indicator that does not measure any change, there is no need to take a baseline measurement before reporting the results of this indicator. However, Volunteers should take baseline measurements for any outcome indicators that are related to this output indicator. Refer to the project framework to review related outcome indicators.
4. **Frequency of measurement:** An output indicator only needs to be measured once—in this case, every time the Volunteer or partner holds a training event (or series of events), facilitates mentoring, or groups focused on parenting skills, he/she will want to keep track of the number of unique individuals who participated in the event(s) and report on it in the next VRF.
5. **Definition of change:** Outputs do not measure any changes. However, a minimum expectation for any parenting skill service to be counted for this indicator is that a caregiver of an OVC must attend at least one (1) hour of training, mentoring, or group focused on parenting skills. This could include: parenting skill building classes, home visits, referrals to vocational, income generating activities, and parenting clubs which can all serve to support improved parenting skills.
6. **Reporting:** In the case of output indicators, Volunteers only have one box to fill in on their VRF: “total # (number).” This indicator is intended to capture programs targeting caregiver of an OVC. The number can be generated by counting the number of caregivers of OVC in attendance at a training, mentoring or group session focused on parenting skills.
7. **Reporting on Disaggregated Data in the VRT:** This indicator is disaggregated by Sex and Age. When reporting in the VRF, a Volunteer should disaggregate the total number of individuals by Sex and Age. When reporting in the VRF, a Volunteer should disaggregate the total number of male individuals by 0-9 years, 10-17 years, 18-24 years, 25+ years and the total number of female individuals by 0-9 years, 10-17 years, 18-24 years, and 25+ years.

**Data Quality Assessments (DQA):** DQA are needed for each indicator selected to align with the project objectives. DQAs review the validity, integrity, precision, reliability, and timeliness of each indicator. For more information, consult the Peace Corps MRE Toolkit.

**Alignment with Summary Indicator:** No Link