FACES
of the MDGs

Family-based Actions for Children and their Environs in the Slums

Volume 2:
Guidebook and Training Manual

Cover Photo shows Roxas City children painting their personal visions of a bright future while their parents were engaged in the FACES workshop. © UN-Habitat/Angie Neo

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Volume 2:
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FACES of the MDGs:
A Guidebook

How It all came about

In 2000, the Government of the Republic of the Philippines, along with 189 UN member-states, signed the eight Millennium Development Goals, as follows:

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve women's reproductive health
6. Combat HIV/AIDS, malaria and other diseases
7. Ensure environmental sustainability
8. Develop global partnership for development

With these set of global goals, world leaders hoped to end poverty by the year 2015. Past the midpoint later, developing countries are faced with even greater challenges owing to a worldwide economic slowdown and a food security crisis that threaten the poorest of nations (The Millennium Development Goals Report 2008). The gains made in terms of improved health and survival capacities, and the number of lives saved, thanks to timely programs and interventions under the MDG, cannot however be undone.

The Philippines has been committed to the achievement of the MDGs and the last eight years have demonstrated some successes in mitigating hunger and poverty in the poorest corners in the country. The cumulative impact of these little successes have yet to be appraised, but more important perhaps than looking at their limitations is the rate at which specific poverty-reduction programs are being implemented and replicated in many cities and provinces.

Why FACES?

FACES (Family-based Actions for Children and their Environs in the Slums) is the most recent initiative of these more laudable anti-poverty programs implemented in the country. FACES focuses its intervention on children in urban poor communities in the cities.

Why? The face of urban poverty is that of a child. One of every three slum dwellers is a child.

How did it happen? More than half of the Philippine population live in urban areas. Thirty percent of those in the urban areas are in the slums. Growing poverty in the rural areas due to the unabated depletion of our natural resources and the uneven development of an agriculture-based economy has pushed many families to the cities where jobs and money are supposed to be easy. This trend towards the urbanization of poverty has resulted in the congestion of many cities, creating slums or squatter colonies that threaten to be nesting places for crime syndicates. At the household level, what these nests of poverty and criminality actually reveal are families living under most difficult circumstances, with children and women having little or none to eat and no avenues for schooling and improvement.

Destitute parents and malnourished mothers, more likely than not, raise malnourished and sickly children, and unfed and uneducated children grow up into adulthood with knowing little beside begging, soliciting, stealing and other anti-social behaviors. If left unattended, they make bad human resources and pose grave danger to the future of our society and nation.

To prevent this dire possibility, FACES directs its attention to children. Children ages 1-17, are the biggest sector of our society, comprising 43.36% of the population (based on NSO 2000 figure). They are the most hapless and vulnerable to all forms of abuse, neglect, and exploitation. This points to the need to give them special attention and protection. Children are our most important human resources. Whatever we do to them will impact on the kind of future society we will have. They are our future. What we do for them today is what we do for our country tomorrow. Therefore, to invest in their health and well-being is to invest in our future.

What does FACES want to achieve? Specifically, FACES seeks to address the following conditions suffered by children in the slums:

- Hunger
- Insufficient water and sanitation
- Insecure tenure; constant threat of eviction
- Lack of protection against the elements
- Violence and lack of security
- Presence of conditions that breed disease
- Incomes less than 1$ a day
- High maternal and child mortality
- Limited access to education
- Degraded natural environment and high vulnerability to disasters

What can cities do?

The cities are where institutions and resources for social support conglomerate. The private sector and business community, the justice system, government agencies, schools and educational institutions, civic and faith-based groups, and the media are resources that may be tapped and mobilized for child-friendly governance. A concerted effort of all these sectors is invaluable in improving the life of the poor and the chances of slum children to survive. Already, many cities in the country have put in place and implemented city ordinances and health and nutrition programs that support family welfare and children's right to life and full development.

Key features of FACES

- Focus on the lives of 20 girls and 20 boys from 40 urban poor households in 15 urban slums
- Women lead the project and play the central role in implementation and monitoring
- The target project sites are slum communities
- Emphasis on quick response actions and solutions to address MDG issues

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What does FACES seek to achieve?

FACES aims to lay the foundation for:

1. Urban poor women/mothers with enhanced capacities to identify issues, articulate the needs of and set targets for their families, especially those of their children, make strategic choices and actions, and monitor their children's progress to meet MDGs using the Family MDG Covenant.

   This can be measured in terms of :

   • Number of children with improved quality of life (i.e., better health, better education, etc.)
   • Number of women actively involved
   • Number of Family MDG Covenants adhered to
   • Number of desired targets met at the household level
   • Responsive actions implemented at the household level

2. Quick response mechanisms developed and established at the household, city and national levels to ensure concrete actions are facilitated to provide solutions addressing MDG issues affecting children in the slums, including the mobilization of national and local governments, business groups, churches, academe and civil society for policy, program, financial and capacity-building support.

   This can be measured in terms of

   • Number of effective quick response mechanisms developed and tested
   • Number and types of support provided at the household level
   • Number of stakeholders actively engaging in finding solutions to meet family targets
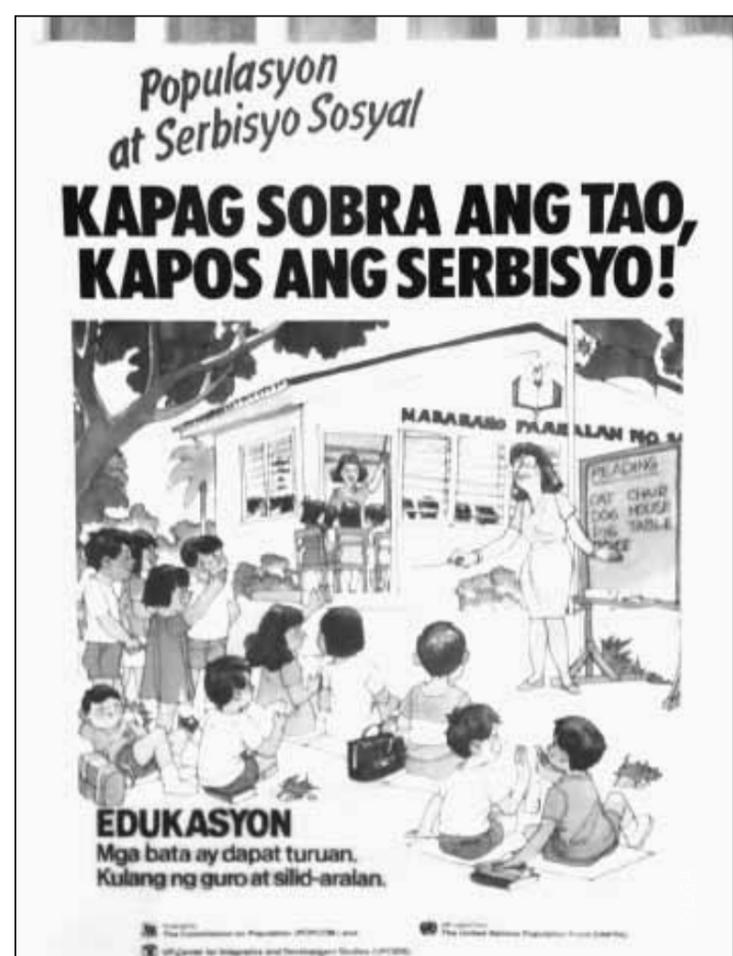
3. Models on rights-based actions and solutions developed and tested by the community to address MDG-deficits in education, food, health, and environment that directly impact on the quality of life of children in the slums.

   This can be measured in terms of :

   - Number of effective child-friendly MDG models developed and tested
   - Number of stakeholders interested to replicate FACES in other slum communities
   - Targets on health, education, food and environment met at the household level

How will the program be delivered?
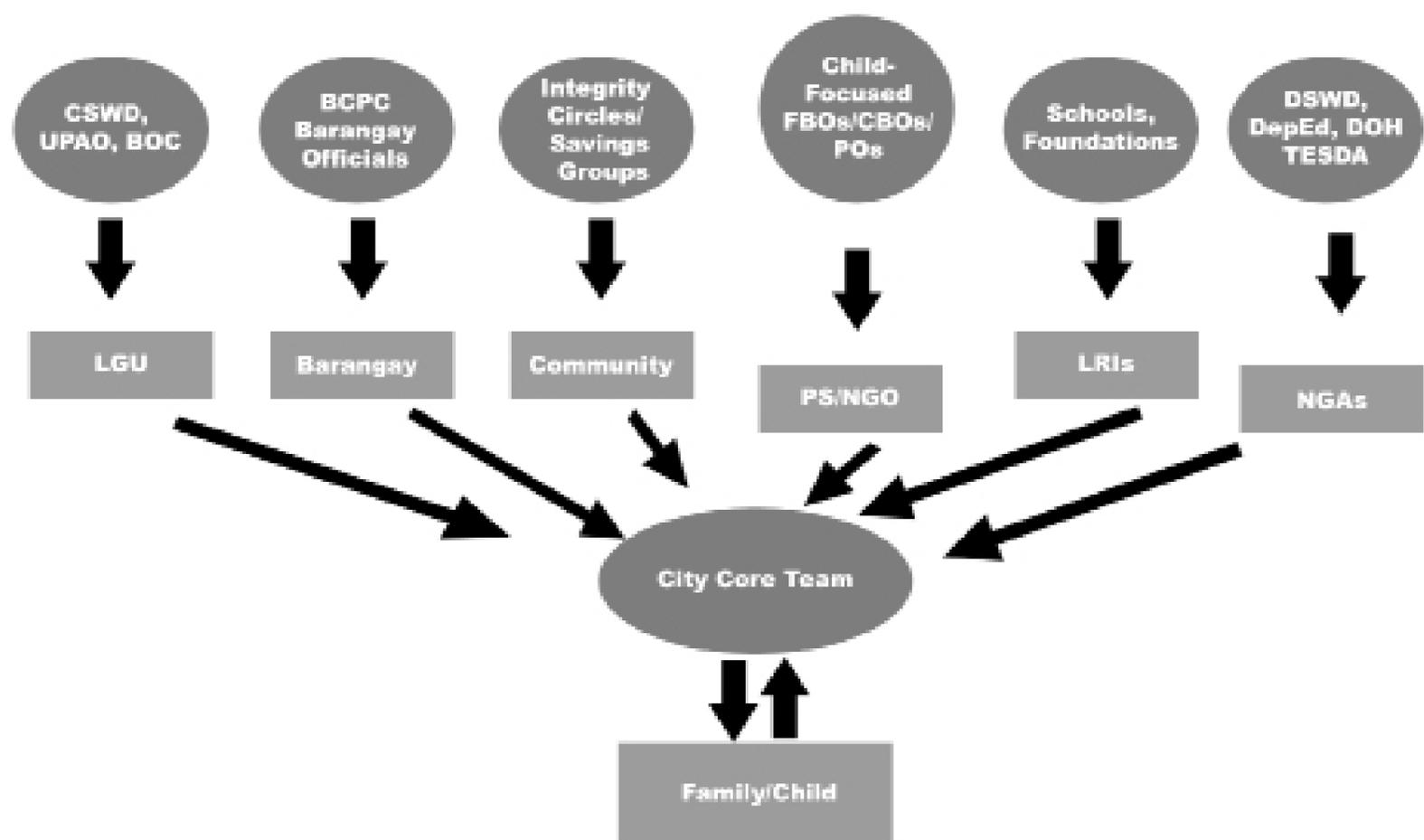
As illustrated above, FACES program management is in the hands of the City Core Team (CCT). It is the overall coordinator and facilitates communication between and among all stakeholders at the city level. The CCT is composed of representatives from the LGUs (e.g., the Mayor's Office or the Barangay Chair's Office), the various participating local government agencies (City Social Welfare and Development Office, Urban Poor Action Office, Barangay Operations Center, Barangay Council for the Protection of Children, etc.), the national government agencies (Department of Social Welfare and Development Office, Department of Health, Department of Education, Technical Educational and Skills Development Authority, etc.), other partners from the private sector and non-government organizations, people's organizations, legal resource institutions, academic institutions, foundations and community centers or programs in the barangay that are involved in the implementation.

As overall overseer and program coordinator, the CCT also links the beneficiary community, families and children to all the participating agencies and organizations. Whatever problems or needs arise or brought up in the family and community level are conveyed by the CCT to the concerned participating agency, organization or institution for appropriate action. Throughout the implementation, the CCT and the beneficiary family work together closely, as supported by other partner agencies and organizations. It is through this close coordination and constant feedbacking and inputting that the program is enriched.

What benefits will cities get from the FACES project?

Participating cities are entitled to the following benefits:

1. Access to technical assistance in program implementation in terms of the use of proven technologies and tools
2. Knowledge sharing with network of FACES cities and communities
3. Technical support from national partners
4. Showcase for focused and tested approaches that effectively address social development challenges in the slums
5. Ease in packaging proposals for possible funding from donor agencies

Who are qualified to participate?

The cities decide on their respective criteria for selection of barangays or communities qualified to participate in the FACES program. Some of the criteria are as follows:

1. Readiness. This can be seen in the presence of community organizations in the selected slum area and in the existing partnership of the LGU with NGOs and/or business establishments.

2. Willingness. Expression of intention to participate in the project.

3. Need. Prioritize barangays or communities with the poorest communities or the most pressing developmental challenges.

4. Chances for Success. This can be deduced if the city has established child-friendly programs or child development plans and established Barangay Council for the Protection of Children.

What is expected from the participating city?

- Selection and mobilization of slum community
- Staff (CSWD, UPAO, etc.)
- Structure for Quick Response Mechanism (e.g. LCPC)
- Counterpart for QRMs and demonstration projects
- Replication plan for other communities in the city

What is expected from the participating community?

- Selection and mobilization of families
- Formation of Integrity Circle among participating families
- Implementation of quick response mechanisms and demonstration projects
- Participative monitoring and evaluation

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What is expected from the participating family?

- Formulate and commit to the Family MDG Covenant/Pact
- Implement family quick actions based on Family Quick Action Guides (FQAG)
- Participate in FACES projects and activities
- Monitor and report on child's progress

Chapter 2
Framework, Processes and Tools

Completing the MDG localization process

FACES follows the MDG Localization Framework, bringing down development goals from the national level to the city and community level where it will reach the final beneficiary: the child. It sets targets, initiates actions and provides solutions at the city, community and family levels for 600 children living in 15 identified slum communities.

MDG localization framework
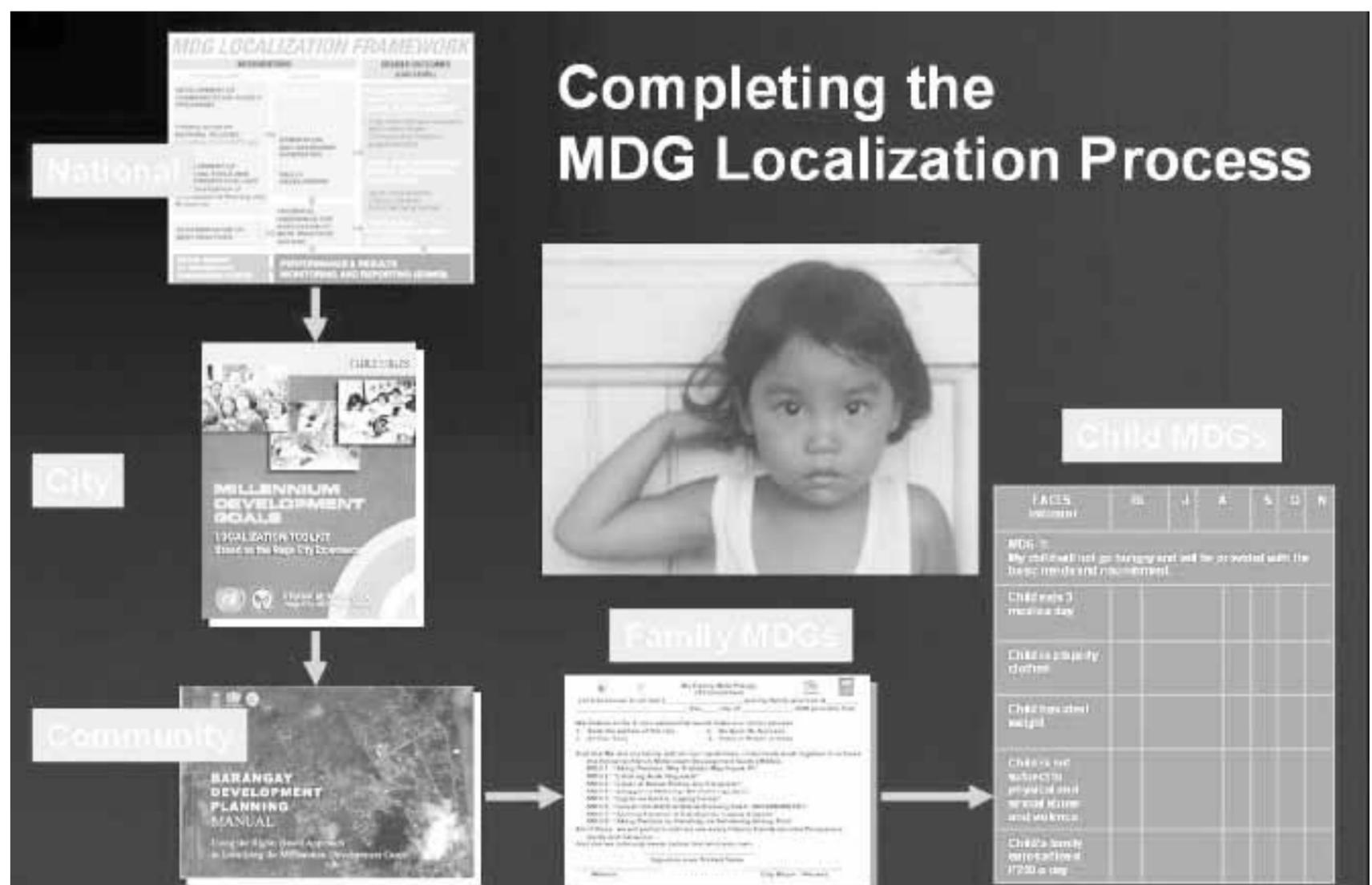
The FACES Framework
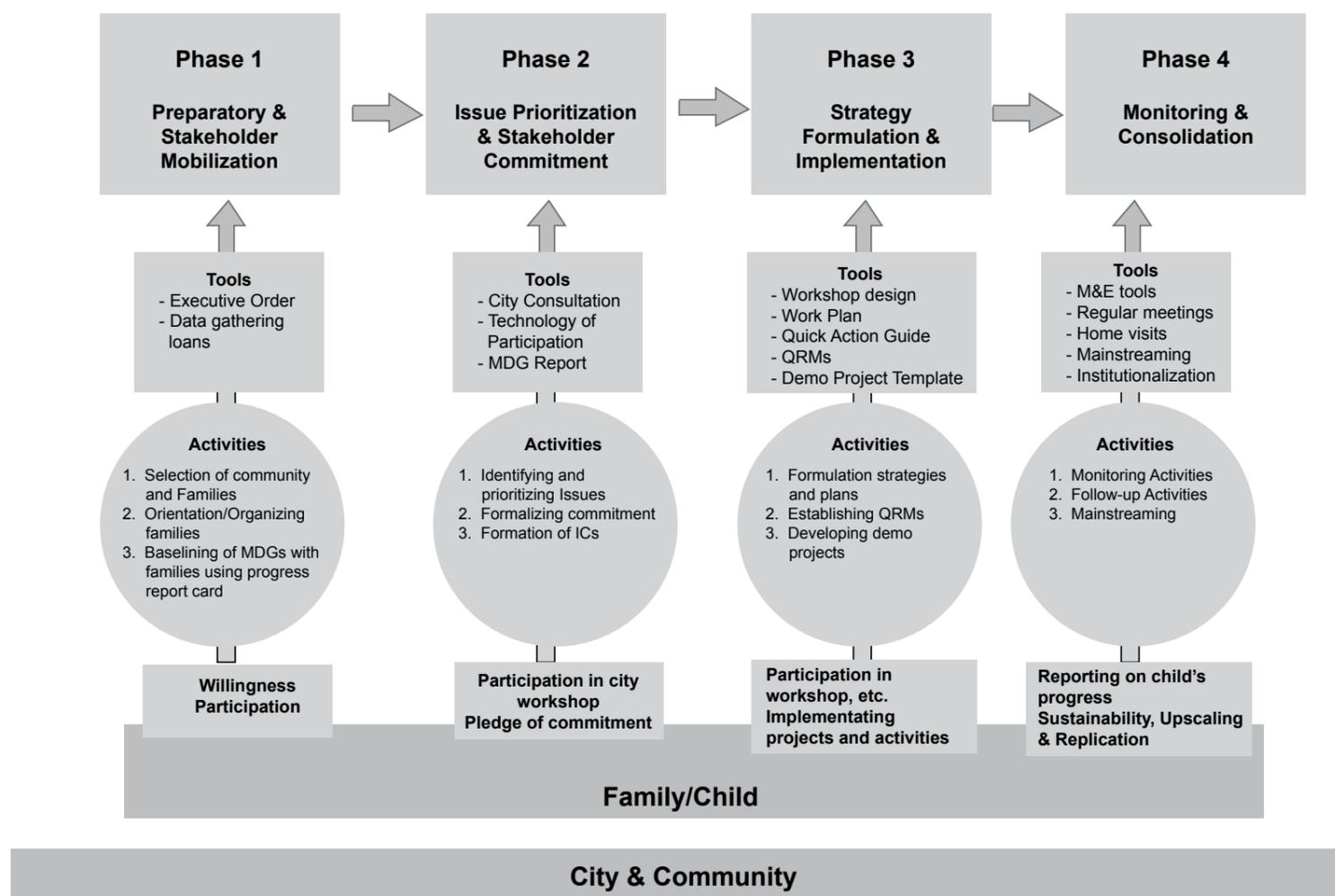
As illustrated above, implementing a FACES project involves four main phases. Each phase consists of several specific activities employing specific tools. The families and children are involved in project processes from the very beginning of the project and they play an indispensable role in project implementation and monitoring. The city and community efforts aim at supporting the families in all phases with the aim of empowering them to take responsibility for the improvement of their lives especially that of the children.

Phase One, Preparatory and Stakeholder Mobilization, pools all resources and mobilizes all those who have a stake for project implementation. This demands the leadership of the Office of the City Mayor as prime mover and lead agency whose job it is to issue an Executive Order instructing government agencies involved to make available human and material resources for the FACES project. In other cases, a Memorandum Order from the same office or a Resolution by the Sangguniang Panlungsod is issued to this effect. Following this EO (or Memo or SP Resolution) is the creation of the City Core Team (CCT) or the Project Team that will see to the implementation of the project.

Before the beneficiary community and families can be identified, the CCT undertakes a community survey that will surface the socio-economic profile of the city and inventory existing or potential resources that may be tapped for project implementation. In some cases, the Minimum Basic Needs (MBN) or Community-Based Monitoring System (CBMS) data and the health data from the City Health Office or any other existing survey results may be used as basis for community selection. After selection of beneficiary community and families is done, the families are then invited to an orientation seminar or a series of consultative meetings that will formally organize them for project implementation. This phase is sometimes called the community organizing phase where main stakeholders are mobilized for active participation. Baseline data that profiles the beneficiary families and monitor their progress against specific child-focused MDG indicators is then maintained using the progress report card.

Phase Two (Issue Prioritization and Stakeholder Commitment) identifies and prioritizes issues and problems faced by the participating families that they may be responded to in the immediate term. Before the beneficiary families can collectively act on this, the CCT first makes sure that they are committed to addressing these problems and changing their situation. This can be done by gathering them to a formal pledge of commitment through swearing to and signing of the family covenant. To ensure active involvement of beneficiary families, the Integrity Circles are then formed where tasks and responsibilities are delineated and delegated. The Integrity Circles (ICs) are small groups composed of the mothers of the children beneficiaries.

The formation of the Integrity Circles signals the rolling out of the demonstration project in the community level, entering Phase Three (Strategy Formulation and Implementation) of the project implementation. Here the CCT conducts a workshop or a series of consultations gathering the mothers in the ICs to plan and formulate strategies addressing the beneficiary community and families' most pressing needs. A demonstration project template designed for this purpose is used. Quick Response Mechanisms (QRMs) and Quick Action Guides (QAG) are organized and developed, as the ICs actually engage in quick actions and day-to-day running of the project. These QRMs and QAGs will later be used and developed for project duplication.

To maintain unity and camaraderie, and to strengthen commitment to their goals, these Integrity Circles may also on their own conduct team workshops and meetings to discuss problems and issues they encounter in carrying out their tasks. This is how the beneficiary groups manage to develop and improve their methods and skills at responding to problems, thus enriching the QRM and QAG and the project template.

Phase Four (Follow-up and Consolidation) ensures that the project is well on its way and making significant progress, especially in terms of improving the condition of the children in the slums. Through the conduct of regular meetings and consultations, home visits and monitoring, CCT makes sure that the community and beneficiary families' interest and enthusiasm in their children's progress are sustained and that all efforts towards achieving project goals are consolidated. This is done with the help of a Monitoring & Evaluation (M&E) tool and follow-up activities that include home visits, consultations, skills training, and socio-economic

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support activities. Equally important at this stage is the constant communication and close coordination between the CCT and the ICs on one the hand, and between and among the ICs on the other hand. Finally, consolidation of the organized beneficiary families is ensured as the demonstration project structure gets mainstreamed

and institutionalized and become part of the day-to-day life of the community.

While there four phases generally outline the processes undertaken by the 15 cities that implemented FACES, steps may either be expanded or collapsed depending on the pace and the capacity of the implementing groups. Where there are already existing community organizations and agencies to tap, mobilizing families and garnering support from government agencies and the private sector need not be an arduous effort as people can now easily capitalize on existing partnerships and collaboration.

Tools and Technologies used in FACES

The FACES Project aimed to localize the MDGs at the family level, making them meaningful and useful to the child living in the slums. As a pioneering approach, the FACES localization process had no existing tools to use for project implementation. Thus, with technical assistance from UNHabitat, with its four-year experience in localizing MDGs, tools were developed facilitate this localization process. The PMT made a final review of the tools and endorsed their use for the project.

The standard tools were introduced to the cities during the initial city workshops. The City Core Team, together with the participating families, refined the tools by translating the same into the vernacular language and giving them a local look and format. For example, the logos of the city and local partners were included in the final tools used.

1. Family MDG Covenant/Pact

The FACES project at the local level began with the expression of commitment from participating families that they would work to achieve the MDG targets for their child. This commitment was documented through the *Family MDG Covenant/Pact* formally sworn to with the city mayor and other stakeholders in a public ceremony. The MDG Covenant/Pact stated the MDGs in terms of can-do statements that the family can relate to. And because they were owned by the family, they were stated in the vernacular language for clear and easy understanding.

2. Child Progress Report Card

Although the MDG Covenant/Pact was expressed at a level that the family can relate to and act on, it contained general statements that needed more specificity in terms of child-focused indicators. The *Child Progress Report Card (CPRC)* detailed the MDG targets using specific indicators to track the child's progress on a monthly basis. As in the Pact, the indicators were stated in the vernacular language and validated first with the families before they were finalized to ensure clarity.

3. Family Quick Action Guide

Knowing the status of the child in relation to the MDG targets was important. But that was only half of the story. Acting on it was just as important. Thus, the *Family Quick Action Guide (FQAG)* gaves parents/guardians the information on how to access basic services that would respond to challenges met by the child MDGs. The FQAG provided information, per child-MDG indicator, on what can be done, who and which office and program to look for to solve child-related problems. In discussions with the participating families, the fact surfaced that families did not have access to

information on child-related services available in their community and city. The FQAG covered services provided not only by the city government but also by the national government agencies, private sector, academic institutions, church, NGOs and other duty-bearers and stakeholders in the city. It therefore consolidated all available information in a ready-to-use guide for families to use as reference.

4. City Workshop

There were a multitude of issues and challenges that parents faced when trying to address their child's MDGs. There was a need to prioritize the issues to be addressed in order to focus limited resources to the most pressing challenges. The process of *issues identification and prioritization* as well as *strategy formulation* strengthened community participation and ownership of the project because the families themselves identified the issues and agreed on the priorities. They also developed the strategies to address them. Families underwent this process during the city workshops facilitated by the PMT and city core team.

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5. Demonstration Project Template

Once the priorities and strategies were identified, demonstration projects were formulated using the *demonstration project template*. This guide scoped the project into manageable and short-time frames with quick measurable results. This was especially useful considering the short time frame.

6. Work Planning Guide

To ensure maximum community participation and multi-stakeholder engagement, *work planning* was done using participatory processes outlined in UN-HABITAT's guide to support participatory urban decision making. This was the template used in designing the city work plan, a process facilitated by the PMT during the 1st FACES business meeting.

7. Monitoring and Evaluation System

The FACES monitoring system was a systematic and continuous collecting, analyzing and using of information for the purpose of management and decision-making. The system provided information to the right people at the right time to help them make informed decisions. It highlighted the strengths and weaknesses in project implementation, enabling managers and partners to deal with problems, find solutions and adapt to changing circumstances in order to improve performance.

Monitoring activities focused on collecting and analyzing information on:

• Physical progress (input provided, activities undertaken and results achieved)
• Quality of process (i.e., stakeholder participation, local capacity building and gender sensitivity)
• Financial progress (budget and expenditure)
• Preliminary response by target groups to project activities (i.e., use of services or facilities and changes in knowledge, attitudes and practices)

The areas monitored were:

- Status/progress against the Annual Work Plan (AWP)
- Major challenges and problems
- Major breakthroughs
- Quick wins
- Strategic issues, opportunities and directions
- Key elements for success and replication
- Technical guidance/support

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While monitoring and evaluation could be done by an external team as in the case of the FACES pilot cities where the national PMT conducted M&E in the participating cities, M&E activities could also be undertaken on a regular basis by the city, community and families themselves. The CCT could check if support from all the members of the team were established by ensuring that FACES programs or projects were in the members' own organizations' plans and budgets (if applicable) and whether FACES programs or projects were in the city development plan and budget. The families played the most important role because they were responsible for continuously and regularly monitoring the progress of their child through the Child Progress Report Card. Their involvement in various projects and capability-building activities should ultimately redound to the benefit of the child.

8. Business Meetings

Business Meetings (sometimes called consultations or consultative meetings) were utilized as learning events where cross-fertilization of ideas and experiences were facilitated. The reporting templates were designed to extract pertinent insights and lessons learned. The reports also became sources of knowledge for the development of the replication guides and manuals.

The table below summarizes the tools used and the refinements that may be done to improve the tools.

Tool	Use	Direction
1. Family MDG Covenant/Pact	Formalize family's commitment to FACES	Renew on a yearly basis
2. Child Progress Report Card	Monitor child's progress in achieving specific MDG targets	Identify indicators that can be monitored monthly, quarterly, annually; Reformat into convenient back-to-back cards.
3. Family Quick Action Guide	Provide information on what, where, how and from whom to access basic services	Continuous update of information to facilitate access to services
4. Issues Identification and Prioritization	Harness community participation and ownership using technology of participation	Streamline based on initial use by the PMT
5. Monitoring and Evaluation System and Report	Guide in the monitoring and evaluation of the project	
6. Demonstration Project Template	Guide in the development and reporting of demonstration projects	Simplify demonstration project reporting formats and tailor-fit to FACES
7. Work Planning Guide	Guide in developing the project work plan	
8. Business Meeting Reporting Templates	Guide in the reporting of project status	Use combination of more multimedia technology and personal testimonies

Steps in FACES implementation

Phase 1: Preparatory and stakeholder mobilization

A. Mobilizing stakeholders

Step 1.   The City Mayor decides to implement FACES. In case the project is initiated by an external institution, he makes it known by writing a letter of intent to the inviting agency (LGA or LCP or other initiating institutions).

Step 2.   The City Mayor calls for a meeting of people who will possibly form the City Core Team (CCT, also called the technical working group or project team). They could come from various government agencies, civil society organizations, non-government organizations and the private sector in the city.

Step 3.   The CCT or TWG (heretofore referred to as project team) is formed. (See Appendix 1 for examples of CCT membership in different cities.)

Step 4.   The City Mayor gets the commitment from each person (representing an agency or organization) and lays down respective roles and functions of each. (See Appendix 2 for sample functions and roles)

Step 5.   A point person or a focal person is appointed. Aside from a focal person, a project manager or an office staff, as may be deemed necessary, may also be appointed to take care of the documentation of the project.

Step 6.   The City Mayor writes an executive order creating appointing membership to the CCT. (See Appendix 3 for Sample EO.)

Step 7.   The City Mayor requests the Sangguniang Panlunsod to issue a resolution allowing the former to enter into an agreement with possible partners in the project.

Step 8.   The SP issues a resolution to this effect. (See Appendix 4 for a sample resolution.)

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B. Issue and city profiling

Step 1. Project Team undertakes or requests people to conduct a community survey as basis for selection of beneficiary community.

Step 2. Project Team meets and discusses the city profile and agrees on the criteria for selection of community (See Appendix 5 for the criteria used by the different cities.)

Step 3. From a shortlist of potential project site, Project Team selects final beneficiary community.

Step 4. Project Team identifies possible partners in the community. (See Appendix 6 for a consolidated list of partners in the 15 pilot cities.)

Step 5. Project Team identifies strategies for mobilizing community and makes a listing of all critical activities per project phase and a process flow chart.

Step 6. Project Team delineates and assigns tasks and activities for every member with corresponding timelines.

Step 7. Project Team pools all resources and coordinates supplies, transport, communications and other needs to successfully generate the intended outputs per activity at each step.

Step 8. Project Team conducts courtesy calls in the offices or houses of the barangay officials, community leaders and other barangay workers in the project site.

Step 9. The barangay council is informed of the decision that their barangay has been chosen as beneficiary community. In this meeting, the possible criteria for the selection of participating families are discussed.

Step 10. Project Team prepares for FACES orientation and conducts a project orientation in the barangay council covering the project description, objectives, framework, processes and expected outcomes.

What to take note of:

- The participation of the private sector in any project has to be encouraged. In many instances, initial partnership and cooperation efforts with the private sector are established but in most cases their resources for community development are not maximized.

- An intensive IEC campaign and value formation is essential prior to the implementation of the project. This will help drum up interest and draw the commitment of all those that want to help or have the resources to support the project and will thus help establish a sense of ownership of the project.

- All those who will be involved in the project will be considered as stakeholders in so far as they will directly or indirectly benefit from its successes. The main stakeholders, however, are the selected urban poor families and their children in the FACES project. All the other agencies and people involved should support and ensure that resources are made available so that these families' living conditions may be improved.

What to take note of:

- Baseline community data are, in most cases, available in the barangay centers. Other government offices like the NSO, CHO and CPDO also maintain baseline data that the Project Team may use.

- In the selection of community, accuracy of the information should be ensured to minimize or avoid negative reactions from the residents regarding the objectivity in the selection of participating families.

- It is important to do social preparation activities (e.g., value formation and skills trainings) for the family participants before the start of the project implementation.

- There must be a clear and well understood Terms of Reference for all the key players of the project. Parties to the agreement should level off in terms of expectations.

- The orientation and partnership with barangay officials and other members of the community are important to ensure commitment and community support

- In planning the activities, strategies should be well formulated using process and tools localized for the community.

- The Project Team should agree over how to approach the issue, how to convince the community to support the project, how to choose the participants in a fair manner and how to break the news without making those who would not be chosen feel badly.

- The Project Team should agree on the major stages of the project. For each stage, the activities, outputs and reports to be generated have to be planned in detail and a process flow chart has to be prepared. Parties should agree on a work plan.

- The project orientation should be attended by the department heads of the city government aside from the members of the barangay council.

Characteristics of a good strategy:
    a) doable and realistic approaches
    b) clear and simple steps;
    c) ease in implementation;
    d) minimum cost or efficiency; and
    e) realistic projected results

C. Selecting families

Step 1.   Project Team conducts on-site inspection, validation, barangay mapping of project site and home visits.

Step 2.   Project Team develops the criteria for selection of families. (See Appendix 7 for the criteria used by the different cities.)

Step 3.   Project Team makes a tentative list of desired number and names of families, depending on how many can be managed, and discuss the households' profile vis-à-vis the selection criteria.

Step 4.   Project Team comes up with a final list of selected MDG-FACES families.

Step 5.   Project Team prepares an invitation for families to attend an orientation and consultation workshop.

What to take note of:

- Although the pilot project found that 40 families are a manageable group, cities may decide to have more or less than 40 MDG-FACES beneficiary families – 20 boys and 20 girls. The decision on the number of beneficiaries to be included is for the City Mayor or CCT to make.

- Although part of the family selection process, home visits may be omitted if the barangay officials know their constituents very well. Similarly, the barangay chair can provide the Project Team of with names of children most deserving of the FACES program as long as the selection criteria were followed.

Phase 2: Issue prioritization and stakeholder commitment

A. Elaborating key issues

Step 1.   Project Team conducts orientation and consultation with MDG-FACES family beneficiaries project objectives, framework, processes and expected outputs/ outcomes are discussed.

Step 2.   Project Team, together with MDG-FACES families, identify and discuss key issues using Technology of Participation (TOP) wherein participatory process starts from individual to small group up to the whole group. (See guidance note below on how to apply TOP to identify issues.)

Step 3.   Workshop participants are divided into small working groups of around 8 members. The working group will discuss on their issues, organize and prioritize these issues. The agreed list of prioritized issues are later presented to the plenary.

Step 4.   At the plenary presentations, the group issues are again consolidated into the plenary list of issues.

Step 5.   From the consolidated issues in plenary, workshop participants identify top three community issues to be addressed by the MDG-FACES project. (Another TOP will be used here to prioritize issues.)

What to take note of:

- Orientation and consultation workshop, along with getting stakeholders' commitment and the formal project launch, may be done in one day.

- It should be made clear right from the start that the project does not involve dole-outs and that FACES family beneficiaries should actively participate in the project and do their share.

Specific TOP technology for identification of issues:

- During the orientation and consultation, full participation of the representatives of the MDG-FACES beneficiary families should be ensured.

Idea cards

Idea cards are a tool of participation where participants may write their ideas or issues. Each idea card should contain only one issue. All of these identified issues will be posted on a manila paper or easel sheet to be clustered and counted for frequency. Issues that have the highest frequency count will be prioritized.

Specific TOP technology for prioritization of issues:

Sticker votes

When the final issues have been consolidated in plenary, a list of issues are drawn up (in manila paper, cartolina or board) providing space for participants to stick their votes per selected issue. Participants are given 3 stickers which they will use to vote on the 3 issues that they find most important to be addressed. One sticker will be used for one issue. When all the participants have voted, the issues are ranked based on the number of votes it received. The issue with the most number of votes is ranked highest and so forth.

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B. Building collaboration and forging consensus

Step 1.   Beneficiary families meet and discuss problems faced by mothers and children in the community. They explore ideas on how to address the identified challenges.

Step 2.   Beneficiary families consult with the Project Team and together plan ways to address problems and issues. The Project Team, at this point, can also inform/orient families on existing programs implemented by the LGU or other institutions that could respond to the identified issues.

C. Formal political and stakeholder commitment

Step 1.   The project is formally launched and political and stakeholder commitment is obtained. Usually, this is done through a program where the mayor formally expresses the city's commitment to the project in the presence of beneficiary families and other stakeholders.

Step 2.   Officers are elected and Integrity Circles (groupings of MDG-FACES mothers/participants for group discussions and facility of monitoring) are formed.

Step 3.   Each mother in the ICs is issued a Progress Report Card which they will regularly fill out with assistance from the Project Team. (Note: The baseline data in the first month of the Report Card is filled in just right before or after the pledging to the Family MDG Pledge/Covenant.) The FACES Progress Report Card monitors on a monthly basis the child's progress in achieving the 8 MDG targets. (See Appendix 8 for a sample Progress Report Card).

Step 4.   MDG-FACES beneficiary families formally commit to the FACES project objectives by signing the Family Covenant. Signing is done by the mothers and/or fathers. In some case, the FACES children who are of discerning age can sign the Family Covenant together with the parent/s.

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Qualities of effective facilitators:

a) Patience in dealing with community people and in handling problems that arise in the community and beneficiary households;

b) Communicative skills and fluency in the language used by the community people;

c) Resourcefulness and competence not only in terms of project knowledge but also in organizing and motivating people (e.g., inputs on value formation, family planning, nutrition, etc.); and

d) Knowledge and initiative in undertaking plans that will help improve skills and livelihood of beneficiary families (e.g., livelihood skills training projects).

What to take note of:

- The grouping of families (mothers groups) may be based on proximity of group members' houses. This is to facilitate meetings and the quick response mechanisms they can collectively set up.

- In some cities or communities where there are existing community organizations or women's groups, the formation of the ICs may be skipped. The participating families may be mobilized as an entire beneficiary community.

- To ensure full participation and commitment from beneficiary families, project facilitators must be qualified to effectively deal with marginalized groups.

Phase 3. Strategy formulation and implementation

A. Negotiating and agreeing on plans

Step 1. Project Team conducts a focus group discussion among selected MDG-FACES families (Integrity Circles members) and presents community situationer and inventory of resources (strengths and capacities, challenges and opportunities)

Step 2. Project Team and participants discuss priority problems and arrive on a consensus regarding the most important concerns and focus problem.

Step 3. Project Team and participants discuss ways to meet the most pressing challenges and identify short-term and long-term goals and actions.

Step 4. Project Team and participants prepare a work plan. (See Appendix 10 for sample of work plan.)

Step 5.   Project Team and participants identify QRMs to set up and discuss possible projects and socio-economic activities to undertake.

Step 6.   Participants discuss and decide on doable demonstration projects to be set up in the project site and identify partners and network of support to implement the project.

B. Designing and implementing demonstration projects

Step 1.   Project Team prepares demonstration project proposal to be submitted to concerned funding agencies or to the City Mayor's Office for inclusion in the Annual Investment Program (AIP).

Step 2.   Project Team coordinates with partner agencies in the implementation of the demonstration project (e.g., LGU for basic social services, TESDA for livelihood and skills training, schools, faith-based organizations and NGOs for value formation, DOH for health and nutrition).

Step 3.   Families regularly attend meetings and capability building workshops/trainings and undertake activities for organizational development and skills enhancement (orientation, values formation, livelihood skills training, etc.).

© Tuguegarao City

What to take note of:

- Project implementation takes place at two levels: the community and the family. Families (particularly mothers) ensure that the Family Covenant they signed is fulfilled; see to their children's progress and participate in the implementation of projects that will impact on their children's development. At the community level, the Project Team works closely with the ICs and project partners in ensuring that the work plan is implemented and services are delivered.

- The more family members involved in the project, the better for the project as this means their active engagement in addressing the child's needs and monitoring child progress in the household level.

- It is very important to have a strategic and coordinated project implementation plan. Factors that affect efficient and effective project implementation include issuance of local ordinances, executive orders and memoranda to establish the expected roles and responsibilities of the project implementers and partners.

Inputs and outputs

Inputs are tangible (finance, physical infrastructure, facilities and equipment) or intangible (skills trainings, organizing skills, commitment, and moral support) investments introduced into the project. Proper utilization of these inputs and investments results in improved skills and organizational capacities to achieve improved living conditions of children in the slums.

Some of the material support and capacity building activities engaged in by cities include the following:

a)   training on parenting and responsible parenthood
b)   provision of weighing scales for weight monitoring

c) seeds for vegetable gardens
d) skills training on basic financial management
e) training on food processing
f) medical consultations
g) health and nutrition monitoring through checkup and CPRC

Some of the results after project intervention:

a) behavior change and improved family relationship
b) increased opportunity for economic activities
c) developed consciousness to save and repay loans
d) improved community participation
e) enhanced inter-agency coordination
f) established sense of ownership and stakeholdership

C. Integrating project and plans into strategic approaches

Step 1. Project Team and families explore ways on how to apply national and local programs in the FACES project.

Step 2. The FACES project may also be packaged to be a focus community or program for targeting by NGO and private sector initiatives.

Phase 4: Monitoring and consolidation

A. Monitoring activities

Step 1. Project Team and beneficiary families set in place a mutual monitoring system between and among mothers in the Integrity Circles. Reporting on the status and progress of the child should be part of the regular group or IC meetings.

Step 2. Families, with the help of Project Team, set up and build child-focused monitoring mechanisms based on the MDG indicators (e.g., nutrition charts, weight and height monitoring by CHO or health workers, etc.)

Step 3. Project Team continues regular consultations and community and home visits. The regular updating of the child's progress should be checked during these visits.

Step 4. Project Team and Integrity Circles prepare for the conduct of monitoring and evaluation activities, done either by the families themselves or by an external group, which could be LGU-based. (See Appendix 9 for methods of organizing integrity circles.)

Step 5. M&E team conducts the monitoring and evaluation in the project site. M&E activities may include: updating of work plans, validation of progress reports, on-site visits, consultation with MDG-FACES families, and photo/video documentation. (See Appendix 10 for the FACES M&E System.)

Step 6. M&E team discusses and validates the evaluation report with Project Team.

Step 7. M&E team writes the report and submit to the Mayor's Office and other relevant recipients/users.

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B. Follow-up activities

Step 1.   Project Team and Integrity Circles meet to discuss ways to stabilize and sustain gains made by the demonstration project and other project activities and programs.

Step 2.   Project Team and Integrity Circles prepare plans to expand and improve on the project and mainstream it in the local governance structure.

C.   Mainstreaming

Step 1.   Project Team and Integrity Circles advocate with government agencies and private sector to make the project part of the local governance processes by integrating its QRMS (i.e., LCPC, CPC, IC) in planning and decision-making as well as integrating FACES projects in the city's plans and budget.

FACES programs or projects are in the members' own organizations' plans and budgets (if applicable)

What to take note of:

- The Project Team should document the whole project, from day 1 to end of project, with the end view of suggesting replication in another barangay or in another city. Documentation should focus on success factors, pitfalls to avoid and lessons learned.
- Even after the end of the project, the LGU should make sure that the community goes on with other activities that will sustain the development and improvement of the different families and the community.

Chapter *3*
Sustainability, Upscaling and Replication

A project is deemed successful if it achieved its goals. It is successful if, at the end of the day, all the people who were involved in it found it worth all their time and energy and all those who invested material and financial resources felt that these went to concrete results. Results though need not always be in terms of financial returns. The gains can be tangible like increased incomes or an improved shelter and living space. They can be intangible like improved self-esteem, improved health, improved coping capacities, and a more positive outlook in life for those the project sought to help. Finally, a project is deemed successful if all these tangible and non-tangible gains can be sustained and upscaled for the benefit of the beneficiary community or replicated to other communities so they may also improve their living conditions.

How did MDG-FACES fare in these aspects? And what makes the MDG-FACES a worthwhile project? What were the elements and circumstances that contributed to the successful implementation of the project? Below are some of the critical success factors based on the experiences of the 15 cities that implemented MDG-FACES.

Success and Sustainability Factors

A. Clear goals and objectives

There must be clear conceptualization and well-defined objectives that people can understand and organize themselves around. In defining problems and planning solutions and responses, goals should be realistic and attainable and indicators to measure project results should be clear and simple. Tools and templates should be handy for everyone to understand and use, and all activities must be doable within a given timeline. Along with the plans and activities, corresponding resources should be made available.

B. Simple methods and processes

Working with existing resources and capacities of people and employing methods that people already know and can work from avoid complicating the work that people have to do for the project. This includes tapping local resources and facilities and working within institutions and traditional practices. Thus, it is important to use the family structure and the mothers in responding to children's needs rather than introducing new personnel or setting up artificial support mechanisms that might disappear as soon as funding is exhausted. Simple methods and processes also refer to the use of tested templates and methodologies that worked in similar situations.

C. Broad project participation

This refers to the mobilization of the widest community network that may be of help to the project. All resources available in the city should be tapped. That is why a good FACES project has to start with an inventory of all activities, programs and services being undertaken or offered by the different government agencies present in the city and community. This should be reflected in the quick action guide for families. The information should be used to coordinate efforts of all these service agencies and partners.

D. Leadership and commitment

The strong leadership and commitment for the project by the Mayor will ensure that the MDG goals are executed locally, that appropriations are made and that a dedicated project team is officially established to manage and see to the successful implementation of the project. The strong presence of the local executive at the helm of the project will likewise attract a wide support from all sectors and stakeholders who have the ability and the resources to help.

E. Financial and logistical support

This refers to the optimal utilization of material and institutional resources that are marshaled for the project. Adequate funding makes many things possible. This can come from the LGU and other funding agencies who can serve as partners in the implementation of the project. This can also come from agencies or NGOs engaged in child-focused programs. This can be made possible through a well-planned and well-coordinated set of activities that properly and efficiently divides work and logistical responsibilities between and among the agencies involved so that services needed by the beneficiary community are delivered. This also means an active and aggressive sourcing of funding on the part of the Project Team in case current budget appropriation or pooled government monies are not available.

F. LGU-NGO collaboration

Partnership between NGOs and the LGU is important for project success, as shown in the examples of Tuguegarao and Dipolog cities where both parties pooled their resources to serve the underprivileged. In Tuguegarao, seven GOs, NGOs and POs collaborated and formed into a network of support and services for the beneficiary families. In Dipolog, the relocated families had been previously organized by the NGOs and the FACES project augmented resources and technical capacities to improve on the gains already made by these partner NGOs. A good working relationship between the LGU and a faith-based organization was also shown in Pasay City and Bais City, contributing to project success.

G. Active involvement of the barangay leader

The participation of the Barangay Chair and the Barangay Council is crucial for the success of the FACES project as the barangay leaders make available existing resources and programs to support the project. This includes the BCPC, the BHW and the Peace and Order Council. The Sangguniang Kabataan and other existing youth and women organizations organized by the barangay council can also assist in the project implementation. Equally important is the facilitation of health services and other basic services, as well as making available facilities like the meeting halls, the health center, public school ground and sport facilities.

H. Active and dedicated stakeholders

To the FACES mothers are the project's main stakeholders. Their faith and commitment to the project are critical. Their active participation in the regular meetings of the Integrity Circles and their involvement in the planning, decision-making and implementation of projects and activities are indispensable factors for the project success. They are responsible for the fulfillment of the family covenant and seeing to their children's progress. That they work together with family members and the Project Team is indispensable.

I. Private Sector Support

The business sector is one good source of help to tap. However, it is important that its sense of corporate social responsibility be evoked first. In many cities, PBSP as well as chambers of commerce are active. Business establishments with need for human resources may help by providing employment to some of the beneficiaries. Along this line, they can provide summer jobs to student participants of the project. The cities may also challenge the business sector to provide educational scholarships for the children beneficiaries through their corporate social responsibility (CSR) programs.

J. An internal monitoring system

An internal and external monitoring system should be in place. The internal monitoring can be done by the Integrity Circles composed of participating families. Because they are small groups who know each other, it will be easy for them to have small meetings and discussions on how they are faring in the implementation of the project. Internal monitoring can be more effectively done if a proper and efficient documentation system has been installed, work which may be done with the help of the project team and should cover start to finish, focusing on success factors and pitfalls (or lessons learned) to avoid similar mistakes and unnecessary waste of resources. This will be useful for purposes of project replication and upscaling and will instruct other barangays or cities that may want to implement the FACES project.

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K. External monitoring

The external project monitoring team evaluates the project for its overall impact on the community and families involved. This team may be composed of members of a funding agency and/or representatives from partner agencies like the CSWDO. Their presence will make the stakeholders aware of what and how things should be done for them to come up with concrete and measurable desired outcomes. They can also bring in new ideas based on similar experiences that were successful elsewhere. In short, the guidance of recognized experts in the field is indispensable.

L. Institutionalization in the city

To institutionalize the project, the Chief Executive Officer can make this project a part of the city structure by allotting a desk under the CSWDO. This is the most logical lead agency since its mandate is to look after the social welfare of the constituents particularly the marginalized sectors of society, in this case the children in the slums. Since it will become a regular project, yearly budget allocation is ensured. Where the resources of the city and community would allow, institutionalization may also take other forms, like creating a separate program that will become a permanent service institution for children.

M. Upscaling and Replication

Successful projects may be upscaled or replicated. Upscaling involves improving and intensifying project impact either by broadening its scope or by introducing new features of service delivery in the same community or project site. Replication refers to the duplication of similar successes in other areas or barangays within the same city or in other cities where similar projects are needed. To spread MDG-FACES across other areas will benefit more families which means more children will be spared from the debilitating effects of poverty, hunger, malnutrition, diseases and illiteracy.

Replication plans as exemplified by cities mainly involved setting up of similar projects in another barangay or barangays. Where available resources are not adequate to meet the needs of another project, most of the cities made do with integrating MDG-FACES components in the regular programs and services of government agency like the CSWDO. This was done by integrating FACES in the Work and Financial Plan of the office. (See Appendix 10 for sample of a CSWDO Work Plan.) Documentation is important part to record not only the shortcomings and pitfalls, but most importantly, the significant decisions and lessons learned that these may be emulated by those who want to make the same successes.

Discussion of upscaling and replication is impossible without first taking stock of the gains and concrete benefits introduced by the FACES project. Below are some city examples:

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1. Roxas City

Inputs	Stakeholders & Agencies Primarily Involved	Outputs/Results
Sessions on Women and Children's Rights, Responsible Parenting, Youth Value Formation, Family Planning, Reproductive Health and Drug Abuse	CSWD and FCCT	Improved self-esteem and coping capacities for women (mothers) and better appreciation of parenting roles and improved relation with children.
Financial Management Training which include the Alkansiya concept, savings and the preparation of daily financial income statement and monthly cash flow)	CSWD and FCCT	Family beneficiaries were able to initiate and manage small businesses giving mothers greater confidence in their income earning capacities.
Establishment of communal vegetable garden.	CHO with women, youth and children (stakeholder families)	Improved diet and nutrition of children and families
Skills training on food processing Provision of basic health services such as supplemental feeding, Vitamin A supplementation, medical and dental consultation and regular monitoring of children's weight.	CSWD FCCT with CHO, BHWs, NGOs, private educational institution	Income-generating skills augmented Improved health of children
Loan of not more than P5,000.00 for income-generating activities	City Government with 37 families (out of a total of 40 beneficiary families)	Families had been provided with capital for income-earning activities and were able to repay loans at 100 percent repayment rate
Alkansiya concept	Beneficiary families	Enabled women to repay their loans on time and set aside savings for future requirements

Upscaling and replication plans:

1. To continue credit support programs for those who were able to repay their loans. For instance in Roxas City, there had been requests to extend the FACES project to benefit more families.
2. To ask for shelter assistance under the Urban Poor Amelioration Program of the city government.
3. To look for means to install communal faucet and toilet to solve sanitation problems. Lack of problem identification currently prevents program implementers from immediately responding to these basic needs.
4. Revitalization and strengthening of existing child-focused programs and agencies due to the infusion of capital and resources into the community through the FACES project (e.g., Roxas City's BCPC had been strengthened by FACES).
5. Modification of existing service agencies for these to be more child-focused (e.g., CSWD programs).

2. Bago City

Inputs	Stakeholders & Agencies Primarily Involved	Outputs/Results
Sessions on Women and Children's Rights (VAW and RA 9262), Responsible Parenting, Youth Value Formation, Family Planning, Reproductive Health and Drug Abuse	CSWD and CCT	Improved self-esteem and coping capacities for women (mothers) and better appreciation of parenting roles and improved relation with children.
Seminar on Health and Nutrition	CSWDO	Improved nutritional intake as parents learned to cook inexpensive but nutritious food.
Skills training on Reflexology, Cosmetology, and Smocking with free tool kits	CSWDO	Income-generating skills had been augmented and usurious loans and family conflict over money had been avoided.
Basic Computer Training and ICT Utilization for the youth	CSWDO	More computer-literate youth.
Learning Support System for Mothers	DepEd	More equipped mothers in vital issues like Maternal and Child Health, Population Management, Communicable Diseases, HIV/AIDS and more responsible parents. This also increased mothers' confidence in helping their young children cope with school.
Provision of basic health services	Project Team with CHO, CSWDO, and barangay leaders	
	CCT and beneficiary families	Improved health of children and families.
Training-workshops on QRMS and QAG		
	CCT	
Php59,000.00 in educational materials on Maternal and Child Health, Population Management, Communicable Diseases, HIV/AIDS in the vernacular		Families had been able to identify and tap existing government services for their needs thus changing their perceptions about government being indifferent and neglectful of poor people's needs.
		Educated beneficiary families on important family issues.

3. Bais City

Inputs	Stakeholders & Agencies Primarily Involved	Outputs/Results
Orientation workshops on FACES	CCT with beneficiary families	Awareness of common problems being faced by urban poor families.
Seminars on Women and Children's Rights (VAW and RA 9262, Anti-Trafficking Law, Juvenile Justice and Welfare Act), Reproductive Health, etc.	DSWD and CCT	Improved self-esteem and awareness on women's and children's rights, coping capacities for women (mothers) and better appreciation of parenting roles and improved relation with children.
Community organizing and education campaigns	CCT, DSWD, religious organizations and beneficiary families	Gave women a sense of belonging and connectedness with other women and families that share the similar problems and conditions.
Seminar on Health and Nutrition, regular weighing activities and post-natal consultations, provision of medicines and Vitamin A; Seminar on Population Management	CHO with BHWs, City Population Office	Improved nutritional intake of family as parents learned to cook inexpensive but nutritious food.
Skills Trainings on Food Processing and Preservation	DSWDO	Improved skills that enabled families to start a small business.
Briefing on Bayanihan Project Savings Scheme	CSWDO	Instilled the value of saving in families.
Initial provision of Certificates of Eligibility benefiting 17 families	City Government	Improved security of tenure.
Provision of basic health services	Project Team with CHO, CSWDO, and barangay leaders	Improved health of children and families.

Upscaling and replication plans:

1. The City of Bais plans to expand FACES to other barangays by networking with other organizations.
2. The City Mayor's Office plans to include the FACES project in the City Development Plan with corresponding budget allocation by year 2010.
3. The Project Team plans to get the involvement of the private sector in the future as their contribution is seen as an important driving force to support FACES.
4. There is a request from the women beneficiaries to provide working capital so they can make use of the skills they learned from FACES skills trainings and workshops.

4. Tuguegarao City

Inputs	Stakeholders & Agencies Primarily Involved	Outputs/Results
Educational and skills upgrading seminars and workshops	CCT, TESDA, NGOs, POs with beneficiary families	Capacitation and empowerment of organized MDG-FACES mothers.
Trainings on maternal and child health and RH and provision of health services	CHO, NGOs	Improved health of children and other family members
Provision of five low-cost housing units to evicted families	City government	Relocation of families to a more secure shelter/living space
Skills training on Dressmaking and Tailoring	CSWD	Provision of four units of sewing machines and employment opportunities to seven graduates of the training.
Micro-credit assistance of Php4,000.00 for each of the 20 qualified recipients of SEA-K	CSWD	Improved incomes
Provision of technical assistance and seed capital of Php20,000.00 to qualified recipients of Bigasan ng Bayan	CSWD	Improved productivity and food security of beneficiary families
Installation of four units of artesian wells.	City government	Reduced incidence of water-borne diseases and reduced labor time for fetching water and doing laundry.
Provision of 15 toilet facilities for 15 families	City government	Reduced incidence of diseases due to unsanitary conditions. Improved community environment.
Provision of basic health services	Project Team with CHO, CSWDO, and barangay leaders	Improved health
Seminar-workshops on QRMs and QAGs	CCT with MDG-FACES mothers	More informed mothers who can identify and make appropriate actions and responses to community problems.

Upscaling and Replication Plans

1. FACES demonstration projects have been integrated into the Annual Investment Program of the city government.
2. The convergence approach adopted by all MDG-FACES partners in Tuguegarao is in place and applies to all future programs and projects in the city.
3. The City plans to continuing technical assistance to the BCPC in areas of food security, livelihood and employment, health and nutrition and environmental management.
4. CCT and Integrity Circles, with coordination with child-friendly programs of GOs and GOs plan to continue monitoring of children's progress.
5. The City plans to revise the City Child Welfare Code and Gender Development Code to make these more child- and women-friendly.
6. MDG-FACES families plan to help organize other families in the slums.

7. The City plans to continue education for city officials, CCPC, BCPC and barangay team.
8. Institutionalization of MDG-FACES by including it as criteria for the annual city search for most child-friendly barangay.

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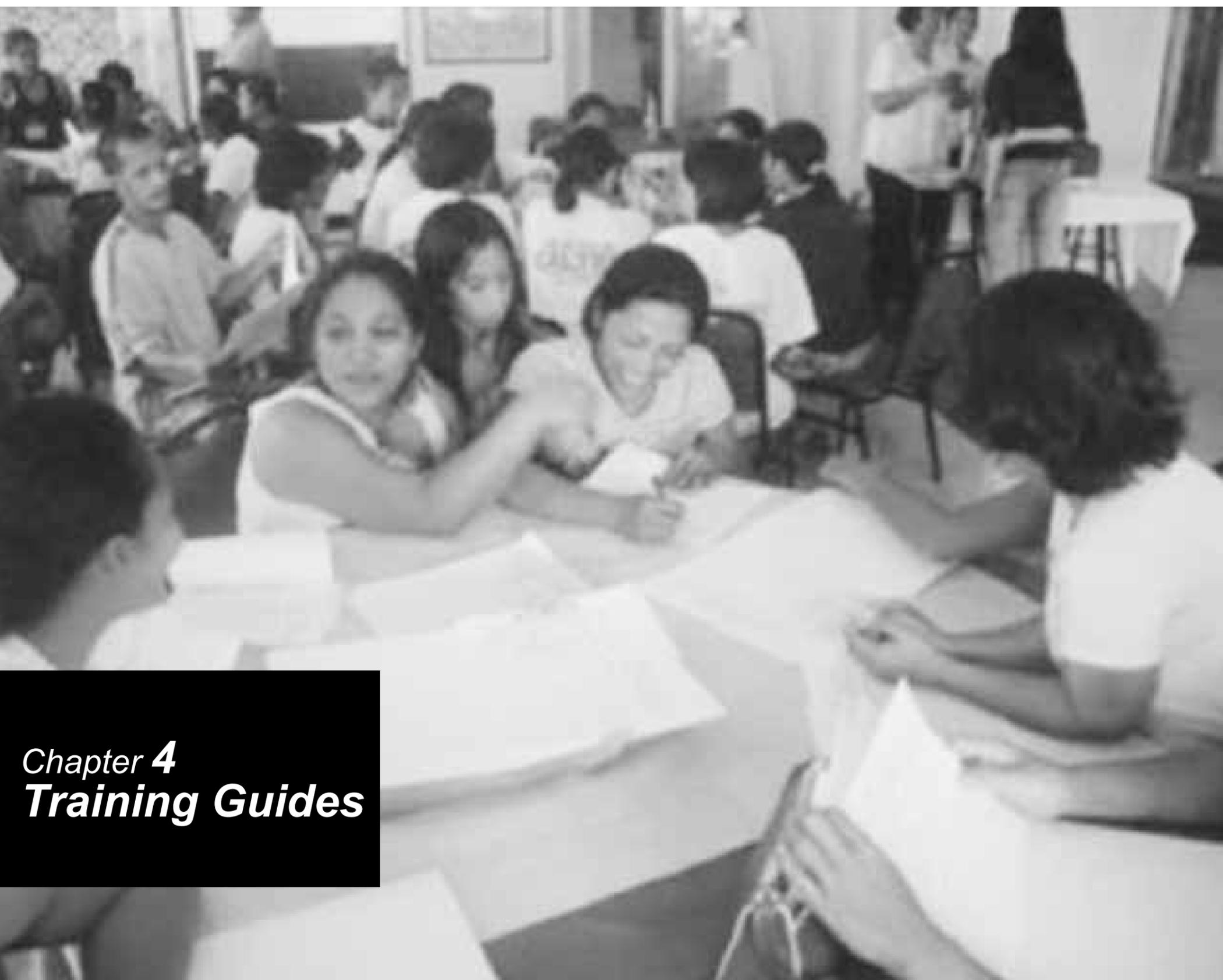
Chapter **4**
Training Guides

What this Training Manual is all about

This set of training manuals is a component of the MDG – FACES toolkit. It serves as a guide in the conduct of seminars, workshops or meetings to facilitate implementation of the MDG – FACES project based on the experience of the pilot project involving fifteen (15) cities in the Philippines.

Each training manual contains the design, training plan and session guides for every seminar/workshop to be conducted. It guides the reader on how to conduct the seminars, workshops or meetings covering subjects like the timing and sequence of each activity, the responsible persons and their role in each activity and the training materials for the event. While these training manuals are useful in the conduct of a seminar, workshop or meeting to complement the undertaking of a critical step involved in the FACES project, the outlined steps are not prescriptive. They can be modified to suit the particular circumstances in a given local government unit implementing similar projects.

The manuals cover the following processes:

A. FGD on Selection of Communities and Families

B. MDG FACES Orientation and Familiarization

C. Problems/Issues Identification and Prioritization

D. Strategy Formulation and Action Planning

E. Monitoring and Evaluation

A. Focus Group Discussion on the Selection of Communities and Families

I. Meeting Design

- *Rationale*

  √ This meeting is done at the city level. The members of the CCT together with the city mayor and the Sangguniang Panlunsod and other units/departments involved in the project sit together and discuss the criteria in selecting the community and family beneficiaries.

- *Objective*

  √ At the end of the meeting, the participants shall be able to identify and select the community and family beneficiaries.

- *Contents*

  1. Review of the Community Based Monitoring System (CBMS)

     This provides the participants relevant inputs in selecting the slum community.

  2. Ocular inspection of the selected slum community

     An ocular inspection of the selected community follows after the meeting to validate the data as presented in the CBMS and finally select the family beneficiaries.

- *Target Participants*

  During the Meeting

  § CCT
  § City mayor
  § SP members
  § Other units/departments involved

  During the ocular inspection of the selected slum community

  § Barangay day-care worker
  § Barangay health worker
  § Barangay Captain and other barangay officials

- *Duration and Venue*

  The meeting isdone at the Session Hall of the city or other appropriate venue. The ocular inspection may be done in a day depending on the extent of the validation process.

- *Duties and Responsibilities*

    At the city level

    The CCT coordinates with the city mayor regarding this meeting and informs all other participants to attend the said meeting. During the meeting, all participants discuss the basic criteria for selection. The data contained in the CBMS, MBN or other profiling system serve as relevant inputs.

    At the barangay level

    The Barangay Captain and barangay officials together with the BHW assist the CCT in visiting the prospective family beneficiaries to validate their poverty profile as reported in the CBMS.

II. Training Plan

DAY/TIME	SESSION	OBJECTIVES	METHODOLOGY	MATERIALS NEEDED
	Part 1 - Done at the city level			
9:00 – 10:00	Session 1 – Presentation of the CBMS and the criteria for selection	At the end of the session, the participants shall be able to: · Be familiarized with the data contained in the CBMS and the criteria for community and family beneficiaries selection.	Discussion Open Forum	CBMS criteria for selection
10:00 – 10:30 10:30 – 12:00	Break Session 2 – Identifying the slum community	At the end of the session, the participants shall be able to: · Identify slum community beneficiary.	Brainstorming Workshop	
12:00 – 1:00	Break Part 2 – Done at the barangay level			
As scheduled	Session 3 – Ocular inspection of the community and prospective family beneficiaries Note: This activity may be undertaken right after the city-level meeting.	· At the end of the session, the family beneficiaries shall have been selected.	On-site visitation	

III. Session Guides

Session 1

Title   : Presentation of the CBMS and the criteria for selection

Objectives   : At the end of the session, the participants are familiarized with the data contained in the CBMS and the criteria
       for community and family beneficiaries selection.

Design and Timing:

Time Allotted	Activities	Materials Needed
9:00 – 10:00	• The city mayor may preside over the meeting • The CBMS data on the community poverty profile is presented for deliberation • The criteria for selection is discussed • Criteria for selection is finalized	CBMS

Session 2

Title   : Identifying the slum community

Objective   : At the end of the session, the participants shall be able to identify the slum community beneficiary.

Design and Timing:

Time Allotted	Activities	Materials Needed
10:30 – 12:00	• Finalize the slum community beneficiary • The criteria for selection must be strictly followed. The decision must be based on utmost objectivity without regard to political affiliation, consanguinities or affinities.	Group output during the workshop on issues/problems identification and prioritization

Session 3

Title   :   Ocular inspection of the community and prospective family beneficiaries

Objective   : At the end of the activity, the family beneficiaries shall have been selected

Design and Timing:

Time Allotted As scheduled	Activities	Materials Needed

	• Dialogue between the barangay officials and the CCT to orient the barangay regarding the MDG FACES project.
	
	• The team shall also ensure that the following data/reports are prepared and ready during the dialogue:
	   - Barangay map showing significant public infrastructures
	   - Barangay socio-economic profile
	   - Barangay development plan (if available)
	   - CBMS survey results
	
	Note: These data may be useful for validation purposes.
	
	• Visitation and initial interview of prospective family beneficiaries. During the visitation and interview, the following shall be noted and recorded:
	   - type of dwelling
	   - presence or absence of basic utilities like light, water, toilets, etc.
	   - number of children in the family. Ask whether they are registered with the local civil registrar
	   - number of school age children attending or not attending school
	   - number of individuals residing in the house
	   - occupation of parents or sources of income
	   - demographic profile of the household members
	
	• Deliberation and final selection of family beneficiaries	

B. Orientation and Familiarization

Note: Pre – program Activities:

1. Memorandum of Agreement between the LGA and the city mayor as authorized by the City Council shall have been signed.
2. City Core Team (CCT) shall have been organized and officially mandated through an Executive Order to lead the project.
3. The slum community and participating families shall have been selected. Parents shall have been informed about the activity in advance.
4. The FACES tools such as the Family MDG Pact, Child Progress Report Card (CPRC) and Family Quick Action Guide FQAG) shall have been translated in the local dialect.

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I. Workshop Design

- Rationale

  This workshop orients and familiarizes the different stakeholders regarding the MDG – FACES project. It provides the opportunity to determine the strategic directions and focus of the project efforts and to mainstream all other resources towards the successful implementation of the project.

- Objectives

    1. To orient the stakeholders on the purpose and overall objectives of the project, particularly the activities, structures and responsibilities of the family beneficiaries, the CCT, city government and all other stakeholders involved in the project.

    2. To organize the family beneficiaries.

    3. To establish the families' commitment to the program.

- Contents

    1. *Opening Preliminaries*

       This part of the program encourages family beneficiaries to know more about each other and the other persons/stakeholders involved in the program.

2. *Context Setting*

This provides the overview of the entire project. It presents the salient points of the project highlighting the child – focused MDGs. It also orients those involved in the project as to their duties and responsibilities. Likewise, the MOA signed between the LGU and the LGA is also presented.

3. *Organizing the family beneficiaries and election of their set of officers*

The families are organized into small groups (around 8 to 10 members) to facilitate project coordination and implementation. The families may be grouped according to their proximity to each other or according to the projects they implement together or other appropriate criteria. Each group may elect their set of officers as necessary.

The family beneficiaries may decide to organize themselves as a whole 40-member group and elect their set of officers.

4. *Enrollment into the program of the children beneficiaries*

The CCT facilitates this part of the program. Based on the criteria, each family beneficiary enrolls one child into the FACES project. There must be 20 boys and 20 girls.

5. *Pledge Ceremonies*

Parents of family beneficiaries pledge their commitment to be partners in the implementation of the project. Family MDG Pact forms and the Child Progress Report Card are distributed to the parents. The Report Card contains the child-focused MDG indicators and targets which the parents are expected to achieve with the support of the other FACES partners.

- *Target Participants*

  - CCT
  - City mayor
  - SP members
  - Barangay Captain and barangay officials
  - The family beneficiaries (if possible, both parents and the child enrolled in the project).

- *Duration and Venue*

  One day, within the local government unit. This activity may be conducted at the barangay plaza or other convenient public place where other members of the community can witness.

- *Duties and Responsibilities*

  A. Participants:

  o Participants are required to report to the program site before 8:00 AM as scheduled.
  o Participate actively throughout the duration of the program.

  B. The city government:

  1. The city government (through the CCT)

     - Invites participants and ensure their active participation
     - Negotiates the use of venue and conference site
     - Provides secretariat and support funds
     - Provides transport service
     - Provides facilitators who shall coordinate, conduct, manage and document the program.

II. Training Plan

DAY/TIME	SESSION	OBJECTIVES	METHODOLOGY	MATERIALS NEEDED
8:00 – 9:00	Registration of participants			
9:00 – 10:00	Session 1 – Opening preliminaries	At the end of the session, the participants shall have: 1. Become acquainted with the other participants, the CCT members and other stakeholders involved in the program.	• To instill the sense of being welcomed as part of the project, informal dialogues and conversations with the family beneficiaries is encouraged especially during the break	
10:00 – 10:30	Break			
10:30 – 12:00	Session 2 - Context setting	At the end of the session, the participants shall have been: 1. Oriented on the activities, structures and responsibilities of the family beneficiaries, the CCT, the city government and all other stakeholders involved in the project. 2. Oriented fully regarding the child – focused MDGs.	• Lecture	Copies of the translated 1) Family MDG Pledge/ Covenant, 2) FACES Progress Report Card and 3) Family Quick Action Guide
12:00 – 1:00	Lunch break			
1:00 – 3:00	Session 3 – Election of officers and enrollment of children beneficiaries	At the end of the session, the participants shall have: • Elected their officers and adopted a name for their organization • Enrolled their child into the FACES program		
3:00 – 3:30	Break			
3:30 – 4:00	Session 4 – Pledge ceremonies	At the end of the session, the parents beneficiaries shall have sworn to and signed the Family MDG Pledge of Commitment or Family MDG Pact		• Copies of the Family MDGs Commitment /Pact Form • FACES Report Card • Family Quick Action Guide

III. Session Guides

Session 1

Title   : Opening preliminaries

Objectives   : At the end of the session, the participants shall have gotten acquainted with other participants, the CCT members and stakeholders/persons involved in the program.

Design and Timing :

Time Allotted	Activities	Materials Needed
8:00 – 9:00	• Registration of participants	
9:00 – 9:15	• Invocation and National Anthem	
9:15 – 9:30	• Opening remarks by the local chief executive or his representative	
9:30 – 10:00	• Introduction of family beneficiaries, guests, members of the CCT. To acknowledge the families and establish rapport, each of the family beneficiaries are presented in front. They may be asked about their expectations from the project.	
10:00 – 10:30	• Break	

Session 2

Title	:	Context setting

Objectives	:	At the end of the session, the participants shall have been:

1. Oriented on the activities, structures and responsibilities of the family beneficiaries, the CCT, the city government and all other stakeholders involved in the project.

2. Oriented fully regarding the child – focused MDGs.

Design and Timing   :

Time Allotted	Activities	Materials Needed
10:30 – 11:00	• Presentation of the salient points of the MDG FACES project	• Copies of the 1) Family MDG Pledge/ Covenant, 2) FACES Child Progress Report Card and 3) Family Quick Action Guide
11:00 – 11:30	• Presentation of the Family MDGsNote: The child-focused MDGs have been translated in the local dialect	• Copy of the Executive Order creating the CCT with their corresponding duties and responsibilities
11:30 – 12:00	• Presentation of the units/ departments, contact persons their corresponding duties and responsibilities involved in the projec	
12:00 – 1:00	• Fellowship lunch	

Session 3

Title   : Election of officers of the FACES family beneficiaries and enrollment of children beneficiaries

Objectives   : At the end of the session, the family beneficiaries shall have elected their officers, adopted a name for their organization and enrolled their children beneficiaries into the program.

Design and Timing :

Time Allotted	Activities	Materials Needed
1:00 – 2:00	• Election of officers. (Election and counting of votes shall be done by simply raising of the hands) Note: The barangay day-care worker, BHW or CCT member may preside in the election.	Easel/manila paper, pens
2: - 3:30	• Registration and enrollment of child beneficiaries. • Checking of marriage contract of parents and birth certificates of children beneficiaries.Note: Parents may not have marriage contract but have been living together for a long time. Children beneficiaries may not have been registered with the Local Civil Registrar. However, these are not the requirements to be included into the program.	
3:30 – 4:00	• Break	

Session 4

Title   :   Pledge ceremonies

Objectives   :   At the end of the session, the family beneficiaries shall have pledged their commitment to the program by signing the Family MDG Pledge of Commitment.

Design and Timing   :

Time Allotted	Activities	Materials Needed
4:00 – 5:00	• Presentation of the Family MDGsNote: The child-focused MDGs have been translated in the local dialect • Request parents to read the Family MDG Covenant aloud and with feelings together with the city mayor or his representative • Facilitators will assist the parents in affixing their signature to the MDG Pledge of Commitment • Distribute Faces Child Progress Report Card to families, one per family • Orient parents on how to accomplish the Report Card	• Copies of the Family MDGs Commitment Form • FACES Child Progress Report Card

C. Problems/ Issues Identification & Prioritization

I. Workshop Design

- *Rationale*

    This workshop enables the family beneficiaries to become fully aware of the "current realities" affecting their living conditions. The main aim of this workshop is for the families to identify the problems/ issues affecting their community and their family and to prioritize the most pressing issues that must be responded to immediately.

- *Objectives*

    At the end of the one-day workshop, the participants shall have:

    1. Adequate knowledge about the current socio-economic situation of their locality.

    2. Become aware of the issues and problems that their community, specifically their families are facing.

    3. Prioritized which among these problems should be given immediate solution.

Contents

1. Current reality workshop (situation analysis)

   This provides the participants the opportunity to assess the situations that their families are facing. This includes the discussion of the MDG baselines and targets based on the child – focused MDG indicators. The current situation is used as baseline data and recorded in the Child Progress Report Card.

2. Problems/issues prioritization

   This activity prioritizes the most pressing problems/issues identified that should be responded to at the earliest possible time.

- *Target Participants*

   √   CCT
   √   Barangay Captain and other barangay officials
   √   The family beneficiaries

- *Duration and Venue*

   √   One day within the LGU

- *Duties and Responsibilities*

   A. Participants:

   Participants are required to report to the training site on or before the start of the session. They shall actively participate throughout the duration of the workshop. They should bring along with them the copy of the Family MDG Progress Report Card distributed during the orientation program.

B. The city government (through the CCT)

- Invites participants and ensure their active participation
- Prepares workshop venue
- Provides secretariat and support funds
- Provides transport service
- Provides facilitators who shall coordinate, conduct, manage and document the workshop
- Prepares city and barangay poverty profile
- Prepares presentation on current service delivery programs of the LGU relevant to FACES
- Prepares city and barangay poverty profile
- Prepares presentation on current delivery programs of the LGU relevant to FACES

II. Training Plan

DAY/TIME	SESSION	OBJECTIVES	METHODOLOGY	MATERIALS NEEDED
9:00 – 10:00	Session 1 –Current reality workshop(situation analysis)	At the end of the session, the participants shall be able to: 1. Have adequate knowledge about the current socio-economic situations of their locality. 2. Become aware of the issues and problems that their community, specifically their families are facing.	· Brainstorming · Group discussion · Workshop · Presentation of the poverty profile of the city and the barangay (to be done by the CPDO and the barangay captain, respectively.)	Manila/easel paperPens, idea cards (different colors), masking tapes
10:00 – 10:30 10:30 – 11:00 11:00 – 12:00	Break Session 1 continued Plenary presentation		Presentation of problems/ issues by group	
12:00 – 1:00	Lunch Break			
1:00 – 2:00	Session 2 - Problems/issues prioritization	At the end of the session, the participants in each group shall have been able:	· Brainstorming · Group discussion · Workshop · TOP	Easel/manila paper, pens, thumb tacks, masking tapes
2:00 – 3:00 3:00 – 3:30 3:30 – 4:30	Plenary Presentation Break Consolidation of outputs	· Prioritize which among these problems should be given immediate solution At the end of the session, all the participants in plenary shall have been able to prioritize which among the identified problems should be given immediate solution		

III. Session Guides

Session 1

Title   :   Current reality workshop

Objectives   :   At the end of the session, the participants shall be able to:

      1. Have adequate knowledge about the current socio-economic situation of their locality.

      2. Become aware of the issues and problems that their community and their families are facing.

Design and Timing:

Time Allotted	Activities	Materials Needed
9:00 – 10:00	· The session starts with the poverty profiles of the city and barangay to be presented by the CPDO and Barangay Captain, respectively. This is to give the participants an overview of the developmental problems confronting their community. · The participants (family beneficiaries) are divided into groups (8 to 10 members in each group). · Each group assigns a discussion leader. Group members identify the current issues and problems that their families are facing. Final outputs are written on the manila/easel paper. · Participants use one piece of cartolina (idea card) per identified problem or issue. · Facilitators cluster or group together similar problems/issues	Easel/manila paper, pens, thumb tacks, masking tapes
10:00 – 10:30	· Break	
10:30 – 11:00	· Session 1 continued · Each group writes the problems/issues identified in easel or manila paper	
11:00 – 12:00	· Plenary presentation · Each group assigns one member from the group to present their output	
12:00 – 1:00	· Lunch break	

Session 2

Title   :   Issues/problems prioritization

Objective   :   At the end of the session, the participants shall have prioritized the identified problems/issues to be given immediate solution

Design and Timing:

Time Allotted	Activities	Materials Needed
1:00 – 2:00	· Maintain the original grouping of participants. · Participants rank the identified problems and issues. Rank 1 should refer to those that are most pressing and must have to be responded immediately. At the first run, problems/issues are ranked based from the participants' personal decision. On the second run, these are ranked based on group consensus.	
2:00 – 3:00	· Plenary presentation · Each group presents their group output. Groups are reminded to stay within the time allotted for reporting.	
3:00 – 3:30	· Break	
3:30 – 4:30	· Using TOP, the issues identified by the groups are consolidated into a plenary listing of all the priority issues. This is presented in the form of a table where participants can vote on their top choices. Each participant is given three stickers to be used as votes for their chosen priority issues. The issues with the most number of votes become the top priority issues to be addressed by the project. · Open discussion on the final tally and ranking. · All groups must arrive at a consensus as to the final ranking of problems/issues.	

D. Strategy Formulation and Action Planning

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I. Workshop Design

• *Rationale*

This workshop provides the venue for the different stakeholders and local development managers involved in the MDG – FACES project to determine the focus of their efforts and to mainstream all other resources towards the successful implementation of the project.

• *Objectives*

At the end of the one-day workshop, the participants are expected to:

1. Be familiarized fwith the Family MDG targets and identify which of these indicators are not being met.
2. Identify major areas of concern of the target beneficiaries and prioritize which area needs immediate attention.

3. Complete the information in the Family Quick Action Guide and generate inputs of various programs available from government and non-government agencies in the locality.

4. Identify quick response mechanisms (QRMs) and determine demonstration projects to address particular problems/issues.

• *Contents*

1. Overview of the Family MDG indicators and targets

   This provides the participants working knowledge of what they are going to do, when and how to do it. Taking into consideration the Family MDGs, indicators and targets, participants shall identify the possible constraints in achieving these targets and indicators.

2. Review of the problems/issues that were identified and prioritized.

   This facilitates the development of the QRMs.

3. Formulation of the Family Quick Action Guide

   This identifies the current as well as future issues and problems that the family beneficiaries may face. It also provides them doable and practical solutions to those problems and issues.

   Note: The Family Quick Action Guide is a blank template that the CCT together with all the stakeholders will have to completely fill up with information on what programs, who to contact, where to go, etc.. This serves as reference for families to access basic services.

4. Drafting of the QRM and identification of possible demonstration projects

This presents the possible programs/projects to be undertaken by the LGU and other partners and the extent of participation of the family beneficiaries in response to the problems/issues presented.

• *Target Participants*

   √ CCT
   √ City mayor
   √ SP members
   √ Barangay Captain and barangay officials
   √ The forty (40) family beneficiaries (if possible both parents and the child enrolled in the project).

• *Duration and Venue*

   One day, within the local government unit

• *Duties and Responsibilities*

   A. Participants:
      Participants are required to report to the training site before 8:00 AM as scheduled. They shall participate actively throughout the duration of the workshop.

   B. The city government:
      1. The city government (through the CCT)
         · Invites participants and ensures their active participation
         · Negotiates the use of venue and conference site
         · Provides secretariat and support funds
         · Provides transport service
         • Provides facilitators who shall coordinate, conduct, manage and document the workshop

II. Training Plan

DAY/TIME	SESSION	OBJECTIVES	METHODOLOGY	MATERIALS NEEDED
8:00 – 9:00 9:00 – 10:00	Registration of participants Session 1 – Overview of the Family MDG indicators and targets	At the end of the session, the participants shall be able to: · Become familiarized with the Family MDG targets and identify which of these indicators are not being met.	Lecture	Easel/manila paper, pens, thumb tacks, masking tapes Easel/manila paper, pens, thumb tacks, masking tapes
10:00 – 10:30 10:30 – 10:15	Break Session 2 – Review of the issues/problems Identified	At the end of the session, theparticipants shall be able to: · Identify major areas of concern of the target beneficiaries and prioritize which area needs immediate attention.	Brainstorming, Workshop	Easel/manila paper, pens, thumb tacks, masking tapes
10:15 – 11:30	Session 3 – Formulating the Family Quick Action Guide	At the end of the session, the participants shall have: · Drafted the Family Quick Action Guide and generated inputs about various programs available from government and non-government agencies in the locality.	Brainstorming, Workshop	
11:30 – 12:00 12:00 – 1:00	Plenary presentation Break			
1:00 – 3:00	Session 4 – Drafting of the QRM and identification of possible demonstration projects	At the end of the session, the participants shall have: · Drafted the QRM and determined demonstration projects to address particular problems/issues	Brainstorming, Workshop	
3:00 – 3:30 3:30 – 4:30	Break Open Forum			

III. Session Guides

Session 1

Title   :   Overview of the Family MDG indicators and targets

Objectives   :   At the end of the session, the participants will be familiarized fully with the Family MDG targets and identify which of these indicators are not being met.

Design and Timing   :

Time Allotted	Activities	Materials Needed

9:00 – 10:00	• Presentation of the Family MDG indicators and targets.
	
	• Each family beneficiary records the information corresponding to each of the indicator as baseline data.
	
	• Facilitators post in the board an enlarged copy of the Family MDG indicators through the use of an LCD monitor
	
	• Focus Questions:
	
	  - Do you understand the indicators?
	  - What are the constraints in attaining these indicators?
	  - What can you do to eliminate the constraints?
	  - How long have you been deprived of the opportunity to address or respond to these indicators?	

Session 2

Title   :   Review of the issues/problems identified

Objective   :   To recall the issues/problems presented during the workshop on issues/problems identification and
                         prioritization

Design and Timing   :

Time Allotted	Activities	Materials Needed
10:30 – 10:15	• Participants form into groups (preferably maintain their groupings during the previous workshop) • The facilitators post on the board the problems/issues identified Note: This session is held very briefly. It serves as a take – off point for the next session	Group output during the workshop on issues/problems identification and prioritization

Session 3

Title   :   Formulating the FQAG

Objective   :   At the end of the session, the participants shall have drafted the FQAG and generated inputs about various programs available from government and non-government agencies in the locality.

Design and Timing :

Time Allotted	Activities	Materials Needed
10:15 – 11:30	• Each group identifies the government agency/ department that provides assistance/response to the identified problems/ issues. Note: The main responsibility for this activity lies with the CCT and stakeholders who are aware of the different programs and services available for families. • A group secretary records the draft family action guide accomplished by the group Note: Facilitators post on the board four headings : Problems/issues, Where to Seek Help, Whom to Contact, Telephone Number	Easel/manila paper, pens
10:30 – 12:00	Plenary presentation · Group outputs are presented · The secretary (overall) drafts the final FQAG.	
12:00 – 1:00	Break	

Session 4

Title   :   Drafting of the QRM and identification of possible demonstration projects

Objectives   :   At the end of the session, the participants shall have formulated the QRM and determined demonstration
                                    projects to address particular problems/issues

Design and Timing   :

Time Allotted	Activities	Materials Needed

1:00 – 3:00	• Note: This activity is the concern of the representatives of the LGU headed by the CCT. A secretary is designated (preferably from the members of the CCT) to list down all the possible programs/projects to be undertaken by each agency or office concerned in response to the identified problems/issues. The facilitator posts on the board 4 headings:
	
	  Lead agency/office, program/
	  project to be undertaken, time
	  frame, funding requirements and source	

3:30 – 4:30	• Present and discuss the output • Open Forum	

*Note: A particular demonstration project may call for separate training programs. For instance, training on livelihood projects may be conducted by TESDA or any qualified trainer,
or training in Water Sanitation can be conducted by a WatSan expert. These sorts of trainings can be coordinated by the CCT.*

E. Monitoring and Evaluation

I. Workshop Design

- *Rationale*

The members of the CCT discuss the methodologies in monitoring and evaluating the project. The M&E template provided for the project may be used as reference.

- *Objective*

At the end of the meeting, the participants will be able to design a monitoring and evaluation system for the project.

- *Contents*

1. Presentation of status of the demonstration projects.

    This provides the participants relevant inputs in designing the monitoring and evaluation system. Bottlenecks and constraints related to the projects are identified.

2. Identification of functions of individuals involved in monitoring and evaluation.

    This establishes a clear delineation of functions of monitoring and evaluating.

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3. Mainstreaming the beneficiaries in the process of monitoring and evaluation.

   This determines the extent of participation of the beneficiaries in the process of monitoring the progress of the project and evaluating the results as well.

4. Designing the monitoring and evaluation system

   Note:
   The M&E system used by the PMT for FACES may be utilized. However, this will have to be localized for use by the CCT.

- *Target Participants*

   √ CCT
   √ Other units/department Involved
   √ Family beneficiaries

- *Duration and Venue*

   One half day at the city hall or the barangay hall.

- *Duties and Responsibilities*

   CCT - The CCT coordinates with the family beneficiaries regarding this meeting and informs all other participants to attend the said meeting.

   Family beneficiaries - Family beneficiaries are required to attend the meeting on time

II. Training Plan

DAY/TIME	SESSION	OBJECTIVES	METHODOLOGY	MATERIALS NEEDED
9:00 – 10:00	Session 1 – Presentation of status of the demonstration projects.	At the end of the session, the participants shall be able to know the status of the projects and identify the bottlenecks/ constraints	Discussion Open Forum	
10:00 – 10:30	Break			
10:30 – 11:30	Session 2 – Identification of functions of individuals involved in monitoring and evaluation.	At the end of the session, the participants shall be able to: · Assign responsible individuals and their functions in the monitoring and evaluation of the project.	Brainstorming, Workshop	
11:30 – 12:00	Session 3 –Mainstreaming the beneficiaries in the process of monitoring and evaluation. Break	At the end of the session, the family beneficiaries are oriented as to their roles in monitoring and evaluation of the project		
12:00 – 1:00				

III. Session Guides

Session 1

Title   :   Presentation of status of the demonstration projects.

Objectives   :   At the end of the session, the participants shall be able to know the status of the projects and identify the bottlenecks constraints

Design and Timing   :

Time Allotted	Activities	Materials Needed

9:00 – 10:00	• Projects coordinators present status of demonstration projects highlighting the following:
	
	  - date of commencement
	  - percentage of completion
	  - persons involved (implementers, beneficiaries etc.)
	  - benefits derived from the project-constraints and bottle necks
	  - sustainability
	  - other information deemed necessary
	
	• Ask opinions from project beneficiaries
		Accomplishment reports

Session 2

Title   : Identification of functions of individuals involved in monitoring and evaluation.

Objective   : At the end of the session, the participants shall be able to assign responsible individuals and their functions in the monitoring and evaluation of the project.

Design and Timing   :

Time Allotted	Activities	Materials Needed
10:30 – 11:30	• Assignment of individuals to monitor and evaluate projects with their corresponding functions • Preparation of monitoring and evaluation instruments. • Preparation of schedules	Bond papers, pens, pencils

Session 3

Title   :   Mainstreaming the beneficiaries in the process of monitoring and evaluation.

Objective   :   At the end of the session, the family beneficiaries are oriented as to their roles in monitoring and evaluation of the project

Design and Timing :

Time Allotted	Activities	Materials Needed
10:30 – 12:00	• Re-orient the families regarding the FACES Progress Report Card. • Give clear instructions on how to fill out the cards. Note: The FACES report card is to be accomplished monthly. This could be done during a regular meetings at the barangay hall. The Barangay Day – Care worker or BHW convenes the parents to a meeting and assists the parents in filling out the forms. The child beneficiary witnesses the filling – out of the cards • In long term projects like housing or establishment of a water system, the core team may identify the activities that the beneficiaries may undertake in relation to the project (e.g. in Candon City, members of the family beneficiary contribute manual labor in the construction of row houses one day per week) • Inform the beneficiaries that they play an important role in the successful implementation of the projects. They are advised to give accurate feedback.	

Appendices

Appendix 1
Membership in the Core Team

1. Bago
   City Vice-Mayor as focal person
   CSWDO
   CPDO
   CPDO staff – secretariat services

2. Bais
   CSWDO
   CHO
   CPO
   CEO

3. Candon
   CSWDO
   CEO
   CIO
   CHO
   CTO
   CAO
   CBO
   CPDO
   Sangguniang Panlungsod

4. Dipolog – 5 personnel
   CSWDO – 2 personnel
        DILG
        CPDO
        NGO

5. Island Garden City of Samal
        CSWDO - 4 personnel
   City Administrator
   CPDO – 2 personnel
   CEO

6. Ligao
   CMO

7. Maasin
  CSWDO
  CAO
  DILG
  CHO
  CPDO
  CEO
  CMO
  Sangguniang Panlungsod
  Barangay Council
  LCPC

8. Mandaluyong
  CSWDO – Focal Office
  Office of the City Administrator
  CLO
  Office of the Barangay Chairman, Addition Hills
  CHO
  PESO (Public Employment Services Office)
  CPDO
  MDO (Manpower and Development Office)
  Office of the School Superintendent, DepEd
  HDBO (Housing Development Board Office)
  PIO
  SPO (Scholarship Program Office)
  CCMZ

9. Pagadian
  CPDO
  CHO
  CMO
  CSWDO
  URPAO
  CLGOO
  Sangguniang Kabataan Federation

10. Pasay
  Office of the City Administrator
  CPDO
  HHRO (Housing and Homesite Regulatory Office)
  CSWDO
  Office of the DILG Director
  Office of the City Cooperatives Officer
  Consultant on Social Services
  IFP (Intercessors for the Philippines)
  BCMP (Brotherhood of Christian Ministers in Pasay)

11. Roxas
  CSWDO – project manager
  City Administrator – focal person
  CMO
  CPDO
  CHO
  City Councilor on Health
  CLGOO
  NGO representative (Silver Gold Foundation)

12. Santiago
  CMO
  CPDO
  CSWDO

13. Science City of Munoz
  No data

14. Surigao
  CMO
  CSWDO
  CHO
  CHDO (City Housing and Development Office)

15. Tuguegarao
  CMO
  CSWDO
  CPDO
  SP Chairman, Committee on Education
  SP Chairman, Committee on Public Health
  Nutrition and Sanitation
  SK
  NGO/PO/ focused on children
  Academe/TESDA
  CHO
  CLO
  City Schools Superintendent
  Urban Poor Affairs Officer
  CCPC
  Nutritionist
  DILG City Director

Appendix 2
Roles and Functions of CCT Members

Candon

1. City Social Welfare and Development Office:
   a. surveys the skills of the family members as part of the labor force of the community
   b. coordinates with Saint Joseph Institute and other organizations for the moral values formation of the family members enrolled in the program.

2. City Engineering Office:
   a. conducts inventory of galvanized iron from the civic center which was used by the beneficiaries to replace the roof of their houses.
   b. surveys the current structure and facilities and identified who among the family beneficiaries were in need of housing repairs.
   c. prepares site development plan for a vegetable garden as a livelihood project to be located in the proposed lot for the row housing project.

3. City Information Office:
   a. takes charge in documentation of the project

4. City Health Office:
   a. implements and continuously conducts immunization, vitamins supplementation, maternal services, sanitation and operation timbang.

5. City Treasurer's Office
   a. disburses the funds released for the purpose in accordance with the usual auditing and accounting rules and regulations.

6. City Accounting Office:
   a. prepares liquidation report on disbursement on the funds released by partner agencies

7. City Budget Office:
   a. sources out possible funding support to the project

8. Office of the City Planning and Development Coordinator:
   a. provides secretariat services to the project core team

   b. continuously gathers data and other information relative to the project.
   c. monitors and consolidates the monthly progress report card of the families enrolled in the project.

9. Sangguniang Panlungsod:
   a. formulates an ordinance wherein residents of the barangay who have the skills should be chosen as laborers for any construction project in the said barangay.
   b. prepares necessary ordinances/resolutions regarding possible sources of funds to finance the implementation of the project.

Island Garden City of Samal

1. The FACES Project Management Team shall have the following functions and responsibilities:
   • Responsible for the over-all supervision of implementation of the Project, to include the proper coordination with all the appropriate offices that may be involved, and the management and regular monitoring of the various stages of the Project;
   • Responsible for the selection of the slum community as beneficiary of the Project;
   • Responsible for the effective and timely realization of the outputs/deliverables of the Project, as follows:
     o Customization of a Family-based MDG Covenant in the Island Garden City of Samal; and,
     o Establishment of a structure for Quick Response Mechanism.

2. FACES Support Team. The Project Management Team shall be assisted by the FACES Support Team to include the following:
   • The City Health Officer
   • The Division Superintendent of the Department of Education;
   • The General Manager of the IGaCoS Water District
   • The City Accountant
   • The City Treasurer
   • The Chief of Police of the City
   • The Action Officer of the City Disaster Coordinating Council.

The FACES Support Team. The FACES Support Team shall do the following roles:
- through a participatory process, assist the FACES Project Management Team in the community action planning, bearing in mind their respective areas of concern/responsibilities vis-à-vis the need of the recipientcommunity;
- develop and extend practicable MDG-responsive interventions hereon; and,
- monitor, document, and submit timely the prescribed and other appropriate progress reports to the FACES PMT, to ensure synergy.

3. FACES Secretariat personnel, to be determined by the PMT, shall prepare and keep the records of the FACES Project Management Team and the Support Team.

Pasay

1. Technical Working Group – monitors the project implementation
2. Project Management Team – (mostly staff from the COOP) – conducts over-all project implementation with the assistance from the Field Officers and the BLC – Igniters
3. Igniters – visit the family beneficiaries on a weekly basis. (They receive allowance from the city government on a task basis)

Roxas City

1. Project Management Team – exercises over-all leadership in the implementation of the project
2. Project Operation Team – serves as the implementing arm of the project and is tasked to operationalize the activities approved by the Project Management Team
3. Project Secretariat – provides secretariat and logistical support to the implementation of the project

Santiago
1. City Mayor – leadership
2. City Planning and Development Office – baseline data and targets based on CBMS/MBN
3. City Social Welfare and Development Office – family profile of selected families
4. Barangay Operations Center – selection and poverty profile of selected community

Appendix 3
Sample Executive Order

Republic of the Philippines
Province of Davao del Norte
ISLAND GARDEN CITY OF SAMAL
Office of the City Mayor

EXECUTIVE ORDER NO. 07
Series of 2008

"CREATION OF THE PROJECT MANAGEMENT TEAM FOR THE IMPLEMENTATION OF THE FAMILY-BASED ACTIONS FOR CHILDREN AND THEIR ENVIRONS IN THE SLUMS (FACES) PROJECT QF THE UNITEDNATIONS-HABITAT IN THE ISLAND GARDEN CITY OF SAMAL"

WHEREAS, the Government of the Republic of the Philippines, is a member of the United Nations (UN), took the Millennium Challenge by enrolling as a signatory to the attainment of the UN Millennium Development Goals (MDGs);

WHEREAS, the United Nations Center for Human Settlements (UN-Habitat) in the Philippines has recently launched the Family-based Actions for Children and their Environs in the Slums (FACES) as among the localized MDG-responsive interventions in chosen cities nationwide;

WHEREAS, the Local Government Academy (LGA) of the Department of Interior and Local Government (DILG) of the Philippines has been designated by the UN-Habitat as Implementing Partner for FACES;

WHEREAS, over the past three years, the Island Garden City of Samal has been chosen as one of the pilot cities and has now emerged as one of the resource cities on the localization of the MDGs in the Philippines;

WHEREAS, the City Government of the Island Garden City of Samal has entered into a Memorandum of Agreement with the Local Government Academy to support and assist in the implementation and the achievement of the project deliverables for FACES;

NOW, THEREFORE, I, ANIANO P. ANTALAN, City Mayor of the Island Garden City of Samal, Province of Davao del Norte, by virtue of the powers vested upon me by law, do hereby order:

Section 1. CREATION OF A PROJECT MANAGEMENT TEAM (PMT). A local Project Management Team for the Family-based Actions for Children and their Environs in the Slums (FACES PMT) is hereby created to ensure the smooth implementation of FACES in the Island Garden City of Samal;

Section 2. COMPOSITION. The FACES Project Management Team shall be composed of the following:

Team Leader : The City Social Welfare and Development Coordinator

Members:

1. The City Planning and Development Coordinator;
2. The City Housing and Settlements Officer;
3. The President of the Urban Poor Organization of the target informal settlers community; and,
4. The MDG Focal Person.

Section 4. FUNCTIONS AND RESPONSIBILITIES OF FACES PMT. The FACES Project Management Team shall have the following functions and responsibilities:

- Responsible for the over-all supervision of implementation of the Project, to include the proper coordination with all the appropriate offices that may be involved, and the management and regular monitoring of the various stages of the Project;

- Responsible for the selection of the slum community as beneficiary of the Project;

- Responsible for the effective and timely realization of the outputs/deliverables of the Project, as follows:

  o Customization of a Family-based MDG Covenant ii the Island Garden City of Samal; and,

  o Establishment of a structure for Quick Response Mechanism.

Section 5. FACES SUPPORT TEAM. The Project Management Team shall be assisted by the FACES Support Team to include the following:

1. The City Health Officer;
2. The Division Superintendent of the Department of Education;
3. The General Manager of the IGaCoS Water District;
4. The City Accountant;
5. The City Treasurer;
6. The Chief of Police of the City; and,
7. The Action Officer of the City Disaster Coordinating Council.

Section 6. ROLE OF THE FACES SUPPORT TEAM. The FACES Support Team shall do the following roles:

- through a participatory process, assist the FACES Project Management Team in the community action planning, bearing in mind their respective areas of concern/responsibilities vis-à-vis the need of the recipient community;
- develop and extend practicable MDG-responsive interventions hereon; and,
- monitor, document, and submit timely the prescribed and other appropriate progress reports to the FACES PMT, to ensure synergy.

Section 7. FACES SECRETARIAT. Secretariat personnel, to be determined by the PMT, shall prepare and keep the records of the FACES Project Management Team and the Support Team.

Section 8. EFFECTIVITY. This Order shall take effect immediately upon approval hereof and shall remain in full force and effect unless sooner revoked or amended by the Local Chief Executive.

ISSUED this _____ day of June 2008 in the Island Garden City of Samal, Davao del Norte, Philippines.

Signed:

ANIANO O. ANTALAN
City Mayor

Appendix 4
Sample Resolution

Republika ng Pilipinas
Lalawigan ng Davao del Norte
Legislative Building, Mankilan, Tagum City, Davao del Norte

Sangguniang Panglalawigan

EXCERPT FROM THE MINUTES OF THE 37TH REGULAR SESSION OF THE SANGGUNIANG PANLALAWIGAN OF DAVAO DEL NORTE HELD AT THE SESSION HALL, PROVINCIAL CAPITOL TAGUM CITY, ON MONDAY, OCTOBER 6, 2008

Present:
Hon. Victorio R. Suaybaguio, Jr., MPA (Vice-Governor)
        Presiding Officer
Hon. Janet G. Gavina, Member
Hon. Salvador R. Royo, Member
Hon. Macario A. Bermudez, II Member
Hon. Gregorio S. Facula, Member
Hon. Artemio V. San Juan, Member
Hon. Antonio M. Lagunzad, Member
Hon. Ely C. Dacalus, Member
Hon. Leopoldo A. Monteroso, Sr., Member
Hon. Jose Recarido P. Federiso, Member
Hon. Demetrio C. Maligro, Member/FABC
Hon. Helario T. Caminero, Member/PCL

On Official Business:
Hon. Dennis C. Café, Member (SKFP)

Absent:
Hon. Rogelio E. Israel, MPA Member (On Leave)
(Sponsors: Hon. Artemio V. San Juan, Hon. Helario T. Caminero, Hon. Gregorio S Facula, Hon. Ely C. Dacalus, Hon. Janet G. Gavina, Hon. Leopoldo A. Monteroso, Sr. and Hon. Demetrio C. Maligro)

RESOLUTION NO. 587
CONCURRING EXECUTIVE ORDER NO. 07, SERIES F 2008 OF HON. ANIANO P. ANTALAN, MAYOR, ISLAND GARDEN CITY OF SAMAL, THIS PROVINCE, "CREATION OF THE PROJECT MANAGEMENT TEAM FOR THE IMPLEMENTATION OF THE FAMILY-BASED ACTIONS FOR CHILDREN AND THEIR INVIRONS IN THE SLUMS (FACES) PROJECT OF THE UNITED NATIONS-HABITAT IN THE ISLAND GARDEN CITY OF SAMAL"

WHEREAS, letter dated September 25, 2008 of Ms. Norma A. Lurnain, CPA (Provincial Budget Officer) OIC-Provincial Administrator, this Province, duly received by the Office of the Secretary to the Sangguniang Panlalawigan on September 29 2008, endorsing to this August Body, Executive Order No. 07, Series of 2008 of Hon. Aniano P. Antalan, Mayor, Island Garden City of-Sama1, this Province, with the information that the Office of the Provincial Governor has reviewed the foregoing executive order in consideration of the legal opinion rendered by the Provincial Legal Officer, Atty. Jennifer B. Namoc dated August 4, 2008, was presented for appropriate action;

WHEREAS, aforesaid measure was jointly referred to the Committee on Laws, Resolutions, Ordinances and Justice and the Committee on Women, Children and Family Relations for study and recommendation;

WHEREAS, the Committees thoroughly discussed and deliberated on the merits of the said measure and per Joint Committee Report No. 104, dated October 7, 2008, finally recommended to concur the same for being in order.

WHEREFORE, BE IT RESOLVED, by the Sangguniang Panlalawigan in Session Assembled, to concur, as it is hereby concurred, Executive Order No. 07, Series of 2008 of Hon. Aniano P. Antalan, Mayor, Island Garden City of Samal, this Province, "Creation of the Project Management Team for the Implementation of the Family-Based Actions
for Children and their Environs in the Slums (FACES) project of the United Nations-Habitat in the Island Garden City of Samal";

RESOLVED, FURTHER, that copies of this resolution be furnished Hon. Aniano P. Antalan, Mayor, Island Garden City of Samal, the Office of the Provincial Administrator and the Provincial Legal Office, all of this Province, for their information and reference.

CARRIED.

I thereby certify to the correctness of the above quoted resolution.

DENNIS DEAN T. CASTILLO, MPA
(P.G. Department Head) Secretary to the Sanggunian

ATTESTED:
VICTORIO R. SUAYBAGUIO, JR., MPA
(Vice Governor) Presiding Officer
APPROVED:
RODOLFO P. DEL ROSARIO
Governor

Certified:
MARIVIC LARAZAN
Legislative Officer

October 30, 2008
Date signed

Appendix 5
Criteria for Selection of Community

Bago
1. High incidence of child illness
2. Poverty incidence
3. Sanitation

Bais
1. Accessibility
2. High incidence of poverty and disease
The project site ranked first in the number of dengue cases in the city

Candon
1. Barangay having the most number of squatters
2. Having the most number of residents living below the poverty threshold

Dipolog
Government relocation site

Island Garden City of Samal
1. Readiness. PHOAI had been identified by the LGU-IGaCoS and the NGO-Mindanao Land for priority in possible relocation
2. Willingness. PHOAI expressed willingness to participate in the project
3. Need. There was no doubt in the minds of the CCT that PHOAI needed support from any organization willing to help
4. Chances for success. Since the group had been organized and leaders had been identified, chances for the project's success would be greater than in any other area in the city given the constraint of time
5. Geographic location. PHOAI is accessible for monitoring since it is near City Hall

Ligao
Considered as a relocation site of the families displaced by the floods brought by typhoons that visited the region in the recent years.

Mandaluyong
1. Most densely populated barangay
2. Classified as a Planned Unit Development Area
3. Largest informal settlement in the area
4. Recorded the largest number of children suffering from 2nd and 3rd degree malnutrition

Pasay
1. Unique socio-economic and environmental characteristics
2. Family profile of residents

Roxas City
1. Intensity of the problems confronting a slum area
2. Community accessibility
3. Probability of success of the project

Santiago
1. Barangay with the most number of households below poverty threshold
2. Barangay with an immediate need for basic social services

Surigao
1. Poor community occupied by informal settlers
2. Very vulnerable to calamities and disaster.

Tuguegarao
Barangay with the most number of households below poverty threshold

Appendix 6
Criteria for Selection of Family Beneficiaries

Bago
Health status of children
Incidence of diseases
No potable water
No sanitary toilet
With out-of-school youth
Children not availing of Early Childhood Development
Program
Experienced flooding

Bais
Family income

Candon
1. The family is residing in a house made of make – shift materials
2. With children aged 17 years and below
3. Both parents do not have permanent source of income

Dipolog
1. Mothers with children identified as underweight, out of school as determined by the
Community-Based Monitoring System conducted by the LGU prior to the project
2. Have poor housing condition
3. An average family of 5 earning PhP 200 or below per day

Island Garden City of Samal
1. Bonafide member of the Penaplata Homeowners' Association (PHOAI)
2. PHOAI member in good standing, with good reputation and relations with family and community
3. No fixed income
4. With a son/daughter aging 0-17 years old
5. With positive work attitude and concern for the welfare of the community

Ligao
1. Very low income and no permanent source of living
2. Increasing number of family members who are undernourished
3. Congested household due to large family size
4. Absence of sanitary toilets including potable water source
5. Unavailability of waste disposal system
6. Increasing number of out-of-school youth

Mandaluyong
1. Total family income is not more than one thousand pesos per month
2. Resident of the barangay for more than 10 years
3. Plenty of children
4. Good attitude and willingness to participate in all the activities of the MDG-FACES Project, i.e. meetings, skills trainings and seminars, values formation sessions, etc.

Pagadian
The selection was based mainly on Community-Based Monitoring System (CBMS) profile of the family with higher considerations for the following:
1. With child aging 6-11 years old
2. Active participation in community activities
3. Not a recipient of assistance/benefits from other externally funded development programs/projects

Pasay
The job of selecting the families was given to the FACES Igniters. They were to identify FISH (Families in the Slums who need Help) participants. All members of family beneficiaries were provided opportunities to participate especially in skills training and job employment

Roxas
Identification of children was delegated to the barangay officials with especial consideration for the following:
1. economic data
2. health data

Santiago
1. Underweight children
2. Youngest in the family
3. No permanent residence
4. Cannot avail of basic health and social services

5. Parents who are unemployed/under-employed
6. Unacceptable dwelling and facilities
7. Sincere interest in the project

Surigao
1. Very vulnerable to calamities and disaster.
2. Congested area and have insufficient toilet facility.
3. Residents have relatively low income as drivers, laborers and peddlers, not as fisherfolks
   .

Tuguegarao
1. Family with no vices
2. Unemployed
3. With family members who are OSYs
4. Below poverty threshold
5. With family members who are disabled
6. With underweight children
7. Unsecured tenure
8. Unacceptable dwelling units
9. Solo parents or common law couple
10. Mother must be able to read and write

Appendix 7
Partners of the Different Cities

Bago
1. Department of Education
2. Technology and Livelihood Development Center

Bais
1. Central Azucarera de Bais
2. Universal Robina Sugar Manufacturing Company
3. Mountainview Development Association
4. Possible Partners: World Vision Rotary Club Couples for Christ

Dipolog
1. CESCOD
2. Bantay Dagat-CCF
3. Local Council of Women
4. Filipino-Chinese Chamber of Commerce

Ligao
1. Ligao National High School
2. Bicol University
3. INFOTECH
4. Red Hog Industries
5. Gawad Kalinga

Mandaluyong
1. Petron Foundation Incorporated
2. Pinewood Incorporated
3. San Miguel Corporation
4. Prime Agency
5. Colgate-Palmolive Philippines, Incorporated
6. Community Church of Mount Zion
7. Jollibee Food Corporation
8. United Kingdom Embassy

Pagadian
1. Botika ng Bayan
2. Department of Education

Pasay
1. Brotherhood of Christian Ministers in Pasay
2. Philippine Business for Social Progress
3. Department of Education
4. TESDA
5. Intercessors for the Philippines
6. Business Firms
7. Private individuals who donate five hundred pesos per month for education, food, health, environment, economic concerns of the sponsored child

Santiago
1. Santiago Water District
2. Patria Sable Corpus College
3. East-West Bank
4. De Guia Construction Boysen Incorporated

Surigao
Livelihood Training and Productivity Center

Tuguegarao
TESDA

Appendix 8
Methods of Organizing Integrity Circles

Dipolog
The mothers were grouped according to proximity of their houses.

Island Garden City of Samal
The participating mothers were divided into five (5) groups. Grouping was done just by letting the mothers count off from 1 to 8. Five integrity circles were formed with 8 member-families per IC.

Tuguegarao
The families were subdivided into 4 groups consisting of 10 members/families per group.

Appendix 9
FACES Progress Report Card

Child's Name		Nickname
Gender	Age	Birthdate
Mother's Name		Birthdate
Father's Name		Birthdate
Guardian's Name		Birthdate
Parents'/Guardian's Contact Number/s		Number of brothers and sisters
Address		
Barangay	City	
Organization/s where family and/or child is a member:		

Please answer blank spaces with a YES or NO or N.A. (Not Applicable)

FACES Indicator	June Baseline	July	Aug	Sept	Oct	Nov Target
MDG 1: **My child will not go hungry and will be provided with the basic needs and nourishment.**						
Child eats 3 meals a day						
Child is properly clothed						
Child has ideal weight						
Child is not subject to physical and sexual abuse and violence						
Child's family earns at least P___ a day (depends on subsistence threshold of city and number of family members)						
Infancy (0-2 y.o.)						
Registered at birth (with birth certificate?)						
Exclusively breastfed up to 6 months						
Immunized from common childhood diseases						
Weighed monthly						
(Put actual weight)						
Given vitamin A dosage twice a day						
Early Childhood 3-5 y.o.						
Availed of free micro-nutrient supplement						
Given vitamin A dosage twice a day						
Adolescence (13-17 y.o.)						
Participated in skills training						

Goal 2: Child goes to school and finish primary education on time					
Child is enrolled					
Child goes to school regularly					
Child completes primary education					
Child finishes schooling on time					
Child travels within 30 minutes from house to school by public transportation					
Early Childhood (3-5 y.o.)					
Attended early education programs					
Childhood (6-12 y.o.)					
Received/has access to free and compulsory elementary education					
Availed of open and flexible learning systems					
Passed the elementary achievement tests					
Out-of-school child given alternative education					
Adolescence (13-17 y.o.)					
Received free secondary education					
Availed of open and flexible learning systems					
Passed the high school achievement tests					
Out-of-school child given alternative education (please specify)					

MDG 3: Child gets care and support from both mother and father						
Child gets care and support from both mother and father or guardian						
Child recognizes the equal role of mother and father in the family						
Child respects both mother and father or guardian						
Child, whether girl or boy, gets equal treatment from parents or guardian						
Parents/ guardians/caregivers enrolled in functional literacy programs						
MDG 4: Child is healthy, has proper nutrition and immunization						
Child has proper weight						
Immunized against tuberculosis						
Immunized against DPT						
Immunized against polio						
Immunized against measles						
Child uses only iodized salt						
MDG 5: Child's mother is healthy and well						
Pregnant mother gets at least 4 complete prenatal checkups						
Pregnant/ lactating mother given sufficient doses of vitamin A and iron						
Pregnant mother at risk gets emergency obstetric care						
Birth attended by trained personnel						
Newly born child's mother gets post-natal checkup						
Pregnancies are spaced at least 2 years apart						

MDG 6: Child is aware of and not exposed to situations where s/he can get HIV/ AIDS, malaria and other diseases						
Child is aware of HIV/ AIDS and how it can be acquired and prevented						
Child is not exposed to HIV/AIDS						
Child is aware of malaria and how it can be acquired and prevented						
Child does not smoke						
MDG 7: Child lives in a clean, healthy and safe environment						
Child has access to safe drinking water						
Child has access to sanitary toilet facility						
Child lives in an adequate durable and safe house and community environment						
Child lives in family's own house						
Child lives in family's own land						
MDG 8: Child has access to decent and productive work as well as new technologies						
Child has access to new technologies especially ICT						
Child is removed from exploitative and hazardous labor						
Child is removed from prostitution and pornography						
Child participates in development process						
Administration:						
Accomplished by: (Parent or child to affix signature)						
Date accomplished:						
Discussed with community circle: (Circle member to affix signature)						
Date discussed:						

Notes on the report card:

1. Child should show improvement from the June 2008 baseline data.
2. MDGs least likely to be achieved shall be prioritized in terms of quick response mechanisms and demonstration project for the community.
3. Major gaps in indicators and the ideal targets should spur quick response action.
4. The indicators are best stated in the language of the community.
5. Finalization of the indicators should be done in a participatory manner with the concerned families who should confirm their understanding of the instrument and the process of implementing it in the household.

Administrative guidelines for maintaining the progress report card:

1. The mother or father or guardian shall be responsible for accomplishing the report card. They shall affix their signature to signify their personal knowledge and active monitoring of the child's progress.
2. Adolescents may accomplish their own report card when determined to be of sufficient age and sense of responsibility.
3. A copy of the report card shall be kept by the city's FACES Focal Person.
4. The community Integrity Circle shall monitor, double-check and discuss the progress of the participating children every month. The same meeting should also be used to identify quick responses to problems that will arise among the children.
5. Each family is encouraged to accomplish the household survey form (CBMS/MBN survey form) to establish baseline data for the household aside from the child-focused MDGs.

Appendix 10
Sample of a Workplan

Mandaluyong City

CSWDO Work & Financial Plan wherein MDG-FACES funds are incorporated.

Social Protection for 200 children	P	500,000.00
Character Building Program for 500 Youth		216,000.00
- OSYs		
- Street children		
- FACES Children		
- Petron Scholars		
Home-based ECCD/Supervised Neighborhood Play		500,000.00
-2000 children		
Foster Parent Program for 20 parents		20,000.00
Children's Congress for 150 kids		20,000.00
Capability Building		
- CRC (Consultation for the Rights of the Child)		
- Seminar on Volunteerism		
- Life in the Spirit Seminar		
- ECCD Training for Child Development Worker		
(Early Childhood Care & Development)		

Appendix 11
Family MDG Pledge of Commitment

Family-Based Actions for Children and their Environs in the Slums
FACES

Be it known to all that I, _____(name of mother)_____, and my family residing at _____(address)_____ on _____
(date)_____, hereby declares:

That I and my family commit to the achievement of the Millennium Development Goals (MDGs) in my family and for my children as follows:

MDG 1:   My child will not go hungry and will be provided with the basic needs and nourishment.
MDG 2:   My child will go to school and finish schooling on time.
MDG 3:   My child will get support and care from both mother and father and respect both of us as parents.
MDG 4:   My child is healthy, properly nourished and immunized.
MDG 5:   I am healthy and well.
MDG 6:   My child is not exposed to situations where s/he can get HIV/AIDS, malaria and other diseases.
MDG 7:   My child lives in a clean, healthy and safe environment.
MDG 8:   My child can participate in our community's development.

I and my family will do everything in our power to achieve the above goals for my family and my child until we live in happiness and abundance together with my neighbors and fellowmen.

I and my family will commit to participate and comply with the requirements and processes of the FACES project in furtherance of the child-focused MDG targets.

With you and God as witnesses, we hereby pledge our commitment.

_____
Signature above printed name of parent/s

_____(Signature above printed name)____   _____(Signature above printed name)_____
Witness   Witness
(Organization and Position)   City Mayor

Notes on the pledge:

1.   The pledge may be written in the local language for easier communication and understanding.
2.   The format may be slightly revised to reflect local protocol and culture.
3.   Logos of main participating organizations may be included in the page. The city logo as well as the main implementing NGO/CSO/FBO may be included. For UN organizations, the logo of UN-Habitat and UNDP shall be included.
4.   It is recommended that the signing of the pledge be done in a symbolic ceremony to highlight the significance of the commitment.

Appendix 12
FACES Family Quick Action Guide

MDG Indicator	Problem Situation	Quick Action				
		What To Do	Who To Contact			Where To Go/ Program
			Name	Expertise	Contact Number	
MDG 1: My child will not go hungry and will be provided with the basic needs and nourishment.						
Child eats 3 meals a day	Child does not have enough to eat					
Child is properly clothed	Child does not have enough clothes					
Child has ideal weight	Child is underweight	Consult with barangay nutrition scholar	Name of BNS	Nutrition		Health Center
Child is not subject to physical and sexual abuse and violence	Child is subjected to physical or sexual abuse or violence	Report to women's desk officer	Name of officer	VAWC law		Barangay Hall
Child's family earns at least P200 a day	Nobody in the family is employed or with livelihood	Look for work				Barangay Hall, TESDC, OWWA, etc.
Infancy (0-2 y.o.)						
Registered at birth	No birth certificate	Report to Punong Barangay				
Exclusively breastfed up to 6 months	Not breastfed	Breast-feed child. Consult BNS				
Immunized from common childhood diseases	Not immunized	Consult BHW				
Weighed monthly (Put actual weight)	Not weighed	Weigh in Health Center				
Given vitamin A dosage twice a day	Not given	Procure from health center				
Early Childhood 3-5 y.o.						
Availed of free micronutrient supplement						
Given vitamin A dosage twice a day						
Adolescence (13-17 y.o.)						
Participated in skills training						
Goal 2: Child goes to school and finish primary education on time						
Child is enrolled						
Child goes to school regularly						
Child completes primary education						
Child finishes schooling on time						
Early Childhood (3-5 y.o.)						
Attended early education programs						
Childhood (6-12 y.o.)						
Received free and compulsory elementary education						

Availed of open and flexible learning systems						
Passed the elementary achievement tests						
Out-of-school child given alternative education						
Adolescence (13-17 y.o.)						
Received free secondary education						
Availed of open and flexible learning systems						
Passed the high school achievement tests						
Out-of-school child given alternative education						
MDG 3: Child gets care and support from both mother and father						
Child gets care and support from both mother and father						
Child recognizes the equal role of mother and father in the family						
Child respects both mother and father						
Child, whether girl or boy, gets equal treatment from parents						

Unschooled parents/ caregivers/ guardians enrolled in functional literacy programs						
MDG 4: Child is healthy, has proper nutrition and immunization						
Child has proper weight						
Immunized against tuberculosis						
Immunized against DPT						
Immunized against polio						
Immunized against measles						
Child uses only iodized salt						
MDG 5: Child's mother is healthy and well						
Pregnant mother gets at least 4 complete prenatal checkups						
Pregnant/ lactating mother given sufficient doses of vitamin A and iron						
Pregnant mother at risk gets emergency obstetric care						
Birth attended by trained personnel						
Newly born child's mother gets post-natal checkup						

Pregnancies are spaced at least 2 years apart					
MDG 6: Child is aware of and not exposed to situations where s/he can get HIV/AIDS, malaria and other diseases					
Child is aware of HIV/AIDS and how it can be acquired and prevented					
Child is aware of malaria and how it can be acquired and prevented					
Child does not smoke					
MDG 7: Child lives in a clean, healthy and safe environment					
Child has access to safe drinking water					
Child has access to sanitary toilet facility					
Child lives in an adequate durable and safe house and community environment					
Child lives in family's own house					
Child lives in family's own land					
MDG 8: Child has access to decent and productive work as well as new technologies					
Child has access to new technologies especially ICT					

Child is removed from exploitative and hazardous labor					
Child is removed from prostitution and pornography					
Child participates in development process					

Appendix 13
FACES City Workshop

I. Prior to the workshop

    A. Memorandum of Agreement shall have been signed
        by the Mayor as authorized by the city council;
    B. Annual Work Plan (AWP) drafted during the 1st
        Business Meeting on May 29-30, 2008 shall have
        been finalized;
    C. FACES Focal Person for the city shall have been
        identified and appointed;
    D. The slum community and participating families
        shall have been selected;
    D. City counterpart:
        1. Venue
        2. Equipment (i.e., LCD, sound system, white
        board and marker)
        3. Local transportation for resource persons
        4. Food for participants

II. Objectives of the workshop

    A. Discussion and prioritization of child issues;
    B. Development of Family MDG Pacts and Report
        Cards;
    C. Strategy formulation and action planning;
    D. Discussion of possible demonstration project;
    E. Establishment of monitoring system.

III. Participants

    The community consultative workshop shall be
    multi-sectoral involving the main stakeholders of the
    project. The following list is recommendatory and not
    exhaustive. The city may add or revise the composition
    of the participants considering its particular context.

    At the city level:

Person/Organization	Responsible for
1. Mayor	Leadership
2. City Social Welfare and Development Officer	Family profile of selected families, if available
3. City Planning and Development Officer	MDG baselines and targets based on CBMS/MBN, if available (See attached Minimum MDG Baselines Form)
4. Urban Poor Action Officer	Poverty profile of selected community
5. City/Barangay Council for the Protection of Children	Initiatives and programs
6. Sanggunian Committee on Women and Children	Legislations relating to women and children
7. CSO/NGO/FBO focused on children	Programs and projects
8. DILG City Director	

At the barangay level:

Person/Organization	Responsible for
1. Barangay officials	Leadership Barangay profile
2. 40 families and children (at least the mother and child)	Participation
3. Barangay Health Worker	Family profile
4. Barangay Nutrition Scholar	Taking baseline weights (use weighing scale)
5. People's organizations in the community involved in child-focused projects and activities	Community support

IV. Workshop Flow

Activity	Time	Output	Materials	Responsible

I. Introduction
  A. Participants
  B. Messages
  C. Project Overview
	9am -10am	Registered participants
		Expressed commitment to project
		Understanding of project
			Name cards for participants
			Powerpoint Presentation of FACES (LCD)
				LGA
				City Mayor
				Brgy Official
				LGA

II. Situation Analysis
  1. MDG baselines and targets
  2. Poverty profile
  3. Barangay and community profile
  4. Programs and projects
  5. Programs and projects
	10am -12nn	Presentation
		Presentation
		Presentation
		Presentation
		Presentation
			CPDO
			CSWDO
			Barangay Official
			LCPC
			CSO/NGO/ FBO	

III. MDG baselines for the Child	1pm -2pm	Child-focused MDG baselines identified and put in FACES Child Progress Report Card	FACES Report Card	PMT
IV. Analysis & Prioritization	2pm – 3pm	Prioritized Issues	c/o LGA	PMT
V. Strategy Formulation	3pm -4pm	Strategies, Programs, Projects & Activities Family Quick Action Guide (FQAG)	c/o UN-Habitat	PMT
VI. QRM and Demo Project	4pm -5pm	Demonstration Project Concept	Presentation and forms c/o UN-Habitat	PMT
VII. Monitoring System: Family, Barangay & City	5pm -5:30	Monitoring System	c/o LGA	
VIII. Pledge Ceremony	5:30 – 6pm	Signed Family MDG Pacts	Pro-forma Family MDG Pacts	City and Families
IX. Critical Next Steps	6pm – 6:30 pm	Action plan	c/o LGA	PMT

Appendix 14
Demonstration Project Notes

"A demonstration project provides the means to introduce and experience innovative ideas and approaches and prepare the way for replication and up-scaling."

Purpose

"A Demo project shows in practice how a particular problem may be addressed. It facilitates the replication and up-scaling of an action through visible accomplishments and lessons of experience"
- To provide a learning framework for better solutions and approaches;
- To focus on "action";
- To facilitate replication and up-scaling of innovative approaches

Principles
- Small scale and short project cycles
- Demonstration *ex-ante*
- Demonstration-monitoring-replication cycle

How it Works – The Key Elements
- Design – reflects the principles
  - Thematic area and relation to MDG priorities
  - Geographic spread and focus: small, well-defined areas
  - Scale and project cycle: small scale and short project cycle
  - Partners/Beneficiaries: focus on the vulnerable sector
  - Local ownership: manifested by local partnerships – inputs and participation
  - Sustainability: built-in institutional arrangements
  - Indicators: to monitor and measure project performance
  - Deliberate knowledge management: local documentation of knowledge
- Financing – financed through a variety of funds, catalyzed by a seed capital, leveraged by small grants, cost-shared

Appendix 15
Monitoring and Evaluation System

Introduction

The FACES monitoring system is a systematic and continuous collecting, analyzing and using of information for the purpose of management and decision-making. The system shall provide information to the right people at the right time to help them make informed decisions. It must highlight the strengths and weaknesses in project implementation, enabling managers and partners to deal with problems, find solutions and adapt to changing circumstances in order to improve performance.

FACES monitoring shall focus on collecting and analyzing information on:
- Physical progress (input provided, activities undertaken and results achieved)
- Quality of process (i.e., stakeholder participation , local capacity building and gender sensitivity)
- Financial progress (budget and expenditure)
- Preliminary response by target groups to project activities (i.e., use of services or facilities and changes in knowledge, attitudes and practices)

Areas to be Monitored
- Status/progress against the Annual Work Plan (AWP)
- Major challenges and problems
- Major breakthroughs
- Quick wins
- Strategic issues, opportunities and directions
- Key elements for success and replication

The Sample Evaluation below may be used/adapted by the City.

FACES Monitoring Report   Date of Report:

                                            Prepared by:

I.   Project Data

Date MOA was signed	
Start of project activities (as per AWP)	
End of project (as per AWP)	
City	
Barangay	
Community	

II.   Financial Data

Total Project Budget	
• City • NGAs • NGOs • Individuals • FACES Community • Others	
Funds used (as of reporting date)	

III.   Summary of Conclusions

Achievement of Goals *Probability of the project achieving its goals as measured against the approved work plan.*	
Strategic Opportunities and Directions *Assessment of opportunities and challenges and their impact on the project.*	
Potential Sustainability *Potential for continuation of benefits even after the project period.*	

IV.   Key Observations, Action/s Recommended and by Whom Monitoring Questionnaire

	Yes	No
A. Achievement of Output 1 *Urban poor women/mothers with enhanced capacities to identify issues articulate the needs of and set targets for their families, especially that of their children, make strategic choices and actions, and monitor their children's progress to meet MDGs using the Family MDG Covenant.*		

1. Do the children have improved quality of life in the following areas?
  a. Food
  b. Education
  c. Health
  d. Environment
 	
Were they able to have better access to services because of FACES?
Did they participate in the project?
How?		

2. Were the women actively involved? How did they participate?		
3. Were the Family MDG Covenants/Pacts completed? How are they being observed?		

4. Were the desired targets met at the household level?
  On health?
  On education?
  On food?
  On environment?		

5. Were responsive actions implemented at the house hold level? What actions were implemented?		

6. Was the FACES Progress Report Card useful?
  Was it easy to use?
  Was the Quick Action Guide useful?
  Was it easy to use?		

7. Cite instances when the tools were used and deemed responsive.		

8. Do you see the whole process as effective for the family?
  Do you see the whole process as effective for the LGU?
  Do you see the whole process as effective for the FACES City Core Team?		

B. Achievement of Output 2 *Quick response mechanisms developed and established at the household, city and national levels to ensure concrete actions are facilitated to provide solutions addressing MDG issues affecting children in the slums, including the mobilization of national and local governments, business groups, church, academe and civil society for policy, program, financial and capacity-building support.*		
1. What are the effective quick response mechanisms developed and tested? Please describe. (Examples: establishment of the LCPC and BCPC, implementation of the "4 gifts for children" at the city level, etc.)		
2. What are the forms of support provided at the household level? Please describe. (Examples: livelihood training, access to basic services, etc.)		

Other areas to be assessed	Narrative description and evidences
Major challenges and problems	
Major breakthroughs	
Quick wins	
Strategic directions	
Strategic issues and opportunities	
Key elements of success and "best practices" for replication	
Replication strategies	
Technical guidance/support	
Participative gender audit	
Partnerships/linkages established. How promoted/encouraged?	

Potential Sustainability	Yes	No
1. If the services/results have to be supported institutionally, are funds likely to be available From the local government? From the private sector? From other donors?		
2. Is there a phase-out strategy to be implemented?		
3. Do the beneficiaries have ownership of the project?		
4. Is the project integrated in the LCPC, BCPC and other child-focused local structures?		
5. Were the beneficiaries and stakeholders involved in the planning process?		
6. Were the beneficiaries and stakeholders involved in decision making?		
7. Were the beneficiaries and stakeholders involved in implementation?		
8. Are there good relations with new or existing institutions and are they capable of continuing the project?		
9. Do project contents and methodology reflect a gender-sensitive approach?		
10. Is the technology (human and technical) introduced and used by the project appropriate?		
11. Do the technologies build on existing practices and knowledge?		
12. Does it encourage the development of local knowledge and capacity?		

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Glossary

City Core Team – sometimes called the technical working group or project team, is a select group of project experts selected from various local and national government offices, CSOs and private sector groups tasked to lead the implementation of the project.
Demonstration project –provides the means to introduce and experience innovative ideas and approaches and prepare the way for replication and up-scaling. It follows 3 principles: small scale and short project cycles, demonstration *ex-ante,* following the demonstration-monitoring-replication cycle.
Institutionalization- the process of making an idea or a newly introduced structure a permanent and integral part of a government setup.
Integrity Circle –is a group of citizens and organizations sharing common organizational goals that voluntarily form themselves into a self-managed coalition to promote and institutionalize mechanisms for transparent and accountable governance.
MDG Localization process –mainstreaming the MDGs in local governance process down to the lowest political level, the barangay or village, the smallest political entity and local governance structure nearest to the constituents..
Quick Response Mechanisms – short-term measures and avenues of action to quickly address arising problems.
Replication – adoption of a process or method successfully tested elsewhere in another area or project site.
Up-scaling – infusion of heavier investments in terms of human capital and financial resources to achieve higher results.
Sustainability – the capacity of a given project to go beyond its given "life cycle" and evolve into a permanent structure in the community.

Acronyms

AIP	Annual Investment Program/Plan
ALS	Alternative Learning System
AWP	Annual Work Plan
BCPC	Barangay Council for the Protection of Children
BM	Business Meeting
BOC	Barangay Operations Center
CARE	Common Action Revitalizing the Environment
CBMS	Community-Based Monitoring System
CCT	City Core Team
CHO	City Health Office
CPDO	City Planning and Development Office
CPRC	Child Progress Report Card
CSOs	Civil Society Organizations
CSR	Corporate Social Responsibility
CSWDO	City Social Welfare and Development Office/r
DepEd	Department of Education
DILG	Department of Interior and Local Government
DOH	Department of Health
DSWD	Department of Social Welfare and Development
EPR	End of Project Report
FACES	Family-based Actions for Children and their Environs in the Slums
FAITH	Food Always In The Home
FGDs	Focus Group Discussions
FQAG	Family Quick Action Guide
GUG	Good Urban Governance
HUDCC	Housing and Urban Development Coordinating Council
IC	Integrity Circle
IEC	Information, Education and Communication
IGACOS	Island Garden City of Samal
LCE	Local Chief Executive
LCP	League of Cities of the Philippines
LCPC	Local Council for the Protection of Children
LSDEC	Livelihood Skills Development and Enhancement Center
LGA	Local Government Academy

LGUs	Local Government Units
L-MDGs	Localization of the Millennium Development Goals
LRIs	Local Resource Institutes
M&E	Monitoring and Evaluation
MBN	Minimum Basic Needs
MDG	Millennium Development Goals
MRF	Materials Recovery Facility
NCWP	National Council of Women in the Philippines
NGAs	National Government Agencies
NGO	Non-government organization
NUDHF	National Urban Development and Housing Framework
ORPO	Olingan Relocation People's Organization
PBSP	Philippine Business for Social Progress
PHOAI	Penaplata Home Owners Association Inc.
PMT	Project Management Team
PS	Private Sector
QRMs	Quick Response Mechanisms
RIC	Rural Improvement Club
SK	Sangguniang Kabataan
SP	Sangguniang Panglungsod
TESDA	Technical Educational and Skills Development Authority
TOP	Technology of Participation
TWG	Technical Working Group
UDM	Urban Decision Making
UN	United Nations
UNCHS	United Nations Centre for Human Settlements
UN-Habitat	United Nations Human Settlements Programme
UNDP	United Nations Development Programme
UNIFEM	United Nations Development Fund for Women
UNICEF	United Nations Children Fund
UPAO	Urban Poor Action Office/r
UPAP	Urban Poor Amelioration Program

Partners

Local Government Academy

Department of Interior and Local Government

United Nations Development Programme

United Nations Human Settlements Programme

Philippine Business for Social Progress

League of Cities of the Philippines

Housing and Urban Development Coordinating Council

Santiago City		Roxas City		Pasay City	
Ligao City		Maasin City		Mandaluyong City	
Island Garden City of Samal		Surigao City		Candon City	
Dipolog City		Bais City		Science City of Munoz	
Bago City		Pagadian City		Tuguegarao City	

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