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MAENDELEO YA WANAWAKE  
ORGANIZATION

ACTION PLAN

FOR MWORA-MAP IMPLEMENTATION

JUNE 1995 - MAY 1996

**FAMILY PLANNING MANAGEMENT DEVELOPMENT**

Project No.: 936-3055  
Contract No.: DPE-3055-C-00-0051-00  
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**FOR**

**MWORA-MAP IMPLEMENTATION  
JUNE, 1995 - MAY, 1996**

**FAMILY  
PLANNING  
MANAGEMENT  
DEVELOPMENT**

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**Local Initiatives Program**

House # 40/C, Road # 11 (New), Dhanmondi R/A, Dhaka, Bangladesh : 818153, 817935

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**FOR**  
**MWORA-MAP IMPLEMENTATION**  
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## List of Abbreviation

CBD	:	Community Based Distribution
DC	:	Divisional Coordinator
DM	:	District Manager
ELCO	:	Eligible Couple
ELCO-Map	:	Eligible Couple's Map
FP	:	Family Planning
FP-Map	:	Family Planning Map
FPAK	:	Family Planning Association of Kenya
FPMD	:	Family Planning Management Development
LIP	:	Local Initiatives Program
MIS	:	Management Information System
MWORA	:	Men and Women of Reproductive Age
MWORA-MAP	:	Men and Women of Reproductive Age Map
MYWO	:	Maendeleo ya Wanawake Organizations
NCPD	:	National Council for Population and Development
NGO	:	Non Government Organization
PO	:	Program Officers
RO	:	Research Officer
TO	:	Training Officer
USAID	:	United States Agency for International Development

## I. SUMMARY

Maendalio ya Wanawake Organization will implement Men and Women of Reproductive Age Map (MWORA-Map) in Mitaburi Location for one year, June 1995 - May 1996 on a pilot basis.

The overall goal of MWORA-Map pilot testing is to improve MYWO's CBD MIS system at the field level. To achieve the above goal MYWO will prepare nine MWORA-maps in nine CBD Agents' area under Machakos district for a pilot testing and will implement these maps for a period of 12 months, June 1995 through May 1996. It is anticipated that these MWORA mapping would enable CBD field agents to understand their community and its contraceptive needs better and also, they would be able to use them for making as a simple & effective program management tool.

MYWO's specific activities for the pilot period will include the following:

- In June 1995, prior to preparing MWORA-maps, each CBD field agent will collect a copy of sub-location map from the sub-location administrator office to demarcate MWORA-mapping areas.
- In early June 1995 the CBD Agents under the direct supervision of CBD divisional coordinator will conduct the house-hold survey and as per survey analysis will prepare the first draft map.
- By the second/third week of June, the divisional coordinator will review these maps, make necessary correction and submit to district manager for her review and feed-back.
- In the first week of July 1995, the district manager will review all final draft MWORA-maps and submit these maps along with the survey records to Evaluation Officer at the MYWO headquarters in Nairobi.
- The Evaluation Officer/Assistant EO will review these final draft FP maps. They will conduct some consistency check to ascertain accuracy of MOWRA boxes and utilization of appropriate colors to represent FP methods.
- In the 3rd week of July 1995, the MYWO headquarters staff will conduct a one-day MWORA-Map implementation workshop to provide feed-back on the final draft maps and house-hold survey records. As per this workshop the CBD field agents will finalize their MWORA-maps and survey registers and will implement those for next 10 months.
- To augment knowledge and skills of the CBD agents on the appropriate utilization of MWORA maps, the MYWO headquarters will provide them a one-day training in November 1995.
- In early May 1996 the Evaluation Unit of MYWO will conduct an assessment/evaluation of MWORA-Map implementation. MYWO will determine their next course of action on MWORA-Mapping implementation as per results of this evaluation. This evaluation findings will also be shared among other NGO's through holding a dissemination seminar.

## II. BACKGROUND

### MWORA MAPS FOR MAENDELEO YA WANAWAKE CBD PROGRAM

The experience of community-based family planning programs in Indonesia and Bangladesh demonstrates that simple geographical maps can serve as useful information tools in helping family planning workers or volunteers to understand their community and its contraceptive needs. Family Planning workers can use the information shown on a map to plan information, education, and communication activities, distribute contraceptives more efficiently and to improve the quality of service statistics they keep. Supervisors can use the maps to monitor the field workers performance, to maintain up-to-date information about contraceptive trends in the community and to involve both volunteers and residents in the management of the family planning program.

In Bangladesh, FPMD is implementing a project known as Local Initiatives Program (LIP). For improving the family planning services at the grass-roots level, LIP has deployed a cadre of female volunteers to assist the government field workers in the door-steps service delivery. The LIP volunteers provide short-term methods only. To record their services they maintain a map known as 'ELCO map' to show where each of their clients live and the type of contraceptive method they are currently using. The map is also used to keep track of each couple's reproductive status and any changes in the contraceptive method they use. ELCO mapping has proven to be an extremely helpful management tool for the community leaders, managers, supervisors and field workers/volunteers for effective planning and implementation of their work. To improve Family Planning Association of Kenya's (FPAK's) CBD MIS at the grass-roots level FPMD/Kenya organized a training program on ELCO mapping for FPAK's CBD project staff. FPMD/Kenya organized this training through one FPMD project staff from Bangladesh during April 19-29, 1994. After completion of this training FPMD and FPAK organized a half-day dissemination seminar for other NGOs on the advantages of ELCO map.

The idea of using maps to improve FP services was first known to (MYWO) Maendeleo ya Wanawaka through "The Family Planning Manager" newsletter, the FPMD of MYWO also attended the FPAK dissemination workshop held in 1994 and the pilot phase dissemination workshop held in May, 1995.

The idea of drawing maps for each CBD is appropriate to the MYWO CBD program since it will complement the recently completed catchment area survey. The CBDs now need the maps to have a clear understanding of their area of coverage. The other benefits of the MWORA maps will be:

- (1) facilitate individual planning and implementation process.
- (2) Improve client services e.g, identifying potential clients for long term clinical methods
- (3) Improve record keeping

For the CBD managers the MWORA maps will assist them in:

- (1) Verifying accuracy of data
- (2) Monitoring quality of service
- (3) Planning program activities.

Consequently, with the above purposes this Action Plan has been developed with the technical assistance from the FPMD.

### III. PILOT AREAS FOR FP-MAPPING

MWORA mapping will be implemented on a pilot basis for one year in nine CBD agents' area under Machakos district. These sub locations are:

Table below details the area wise CBD field agents where MWORA-Map will be implemented.

Sub-Location Name	Person Responsibility
Koma Rock, Mitaboni Location	Jane Ngui, CBD Agent
Miumbuni Sub-Location	Jane Muia, CBD Agent
Mumbuni Sub Location	Lilian Nzula Musyoka, CBD Agent
Mitaboni Emale Sub-Location	Pauline Mwongeni Muok, CBD Agent
Mitaboni Location Miumbuni Sub-Location	Rachok Syomit Kigi , CBD Agent
Mitabon Location Nzambani Sub-Location	Grace N Katnuku, CBD Agent
Mitaboni Location	Veronican Noho, CBD Agent
Mitaboni Location	Monica M. Sauh, CBD Agent

#### IV. GOAL AND OBJECTIVES

##### GOAL

The overall goal of MWORA-Map pilot testing is to improve CBD MIS system of Maendalio ya Wanawake Organizations at the field level.

##### OBJECTIVE

To prepare nine MWORA-maps in nine CBD Agent's area under Machakos district (Mitaboni Location) for a pilot testing, for one year, June 1995 through May 1996, and implement these maps in accordance with ELCO/MWORA-map implementation guidelines. This would enable CBD field agents to understand their community and its contraceptive needs better and also, to use them as a management tool.

#### V. DESCRIPTION OF PROJECT ACTIVITIES

##### (a) Start up activities

- i. In June 1995, prior to preparing MWORA-maps, each CBD field worker and CBD agent will collect a copy of sub-location map from sub-location administrator or chief's office or sketch the entire map of the CBD agent's area.
- ii. The CBD field agents will carefully review this sub-location map and in consultation with the CBD divisional coordinator/supervisor and sub-location chief will select the pilot area for MWORA-map implementation where at least 65-75 MWORAs exist and the place is easily accessible for frequent monitoring. Once the operational area is selected the CBD agent under the supervision of CBD divisional coordinator will circle the pilot area in the sub location map. Similarly, the CBD divisional coordinator and supervisor will also collect sub-location/ area map from the district administrator's office and will show pilot areas drawing circles in those maps.
- iii. In early June 1995, the CBD agents will conduct house-hold surveys in the MWORA-map area as per MWORA-map preparation guidelines provided to each CBD agent during MWORA map training. During this house-hold survey the CBD agents will register all Men and Women of Reproductive Ages (MWORA) of that area as per MWORA-Map house hold questionnaire developed during MWORA-Map training (Annex-1). The CBD divisional coordinator will supervise this work and will provide all necessary assistance and guidance for any improvement. The CBD divisional coordinator will also ensure quality of these house-hold surveys through conducting verification tests in the pilot area. As soon as the house-hold surveys are completed the CBD agent under the guidance of CBD divisional coordinator will analyze survey data and will transfer MWORA information in the MWORA-map. The survey data analysis will include the following:
  - total number of MWORAs in the pilot area;
  - number using any type of modern contraceptive method;
  - number of MWORAs not using any contraceptive method, with the reasons for non-use if known;
  - number of women who are currently pregnant;
  - contraceptive prevalence for the area;

On completion of the survey analysis, the CBD agents will prepare a draft MWORA-Map as per the following steps:

- MWORA maps will be prepared in a paper measuring 36 cm. by 50 cm. .
- on the top of the paper, CBD agent, field worker and program's name will be written,
- in the lower three-quarter of the sheet, the general shape of the area will be drawn and major features and land marks will be shown. A sample land mark legends are in Annex-2.,
- on the bottom, a box will be placed for the legend to explain the meaning of the symbols,
- each MWORA's location will be shown drawing a square/box,
- in the middle of the box, each MWORA's number (as per survey) will be shown,
- contraceptive acceptance and pregnancy status of the MWORAs will be shown drawing a circle around each MWORA box and contraceptive method status will be shown by a specific color. Method-wise allocated colors are in Annex-3. A MWORA map preparation guidelines are in Annex-4.

As soon as the draft maps are prepared, the CBD agents will submit the maps and survey records to CBD divisional coordinator for her review and feed-back. It is assumed that these works will be accomplished by end June 1995.

iv. The CBD divisional coordinator will review these draft MWORA-Maps carefully and will ensure that all MWORAs' information have been properly shown in the MWORA-map boxes, appropriate colors are used to represent each FP method user and legends of land marks are properly shown. She will also conduct consistency check of at least 10%- 15% of MWORA's to re-ascertain correctness of the MWORA boxes and their current FP acceptance status. During this consistency check all necessary corrections will be made and a final draft map will be prepared. As soon as the final draft map is prepared the CBD divisional coordinator will submit the final draft map to district manager.

v. In the first week of July 1995, the district manager will review all final draft MWORA-maps. During this review process, the district manager will conduct site visits to each of these MWORA-Mapping locations and will conduct verification check to reconfirm correctness of the maps, particularly whether the land marks, MWORA information and FP method colors are appropriately used and whether they correspond to the survey records. In case of any inconsistency, on-the-spot corrections will be made in-consultation with the CBD field agent. After making necessary corrections (if applicable) the district manager will submit the final draft maps including the survey records to the Research Officer of MYWO headquarters

in Nairobi for their review and comment.

**(b) Finalization of MWORA-Maps and hold Implementation Workshop**

i. The Research Officer/Assistant Research Officer/Training Officer of Maendeleo Ya Wanawake Organization (MYWO) will review these final draft MWORA maps. They will conduct some consistency checks to ascertain accuracy of MOWRA boxes and utilization of appropriate colors to represent FP methods. On the basis of this review they will also design and finalize necessary information for house-hold survey register.

ii. In the 3rd week of July 1995, the MYWO headquarters staff will conduct a one-day MWORA-Map implementation workshop at a convenient place to provide their feed-back on the final draft MWORA maps and house-hold survey records. The MYWO District Coordinator will assist in organizing this Implementation Workshop. In this Implementation Workshop all nine maps will be reviewed and necessary steps for any corrections will be suggested. The MYWO headquarters staff will also explain the final house-hold survey register to the CBD field agents. At the end of the workshop the MYWO headquarters staff will also supply necessary materials for final MWORA-Map preparation.

**(c) Refresher Training**

To augment knowledge and skills of the CBD field workers/agents on the preparation and utilization of MWORA maps for decision making the MYWO headquarters will organize a one-day refresher training for CBD Agents. This training will be organized in November 1995. The Research Officer/Assistant Research Office and the Training Officer will prepare the training curriculum. Following topics will be included in the refresher training:

1. How to update MWORA maps.
2. Data Analysis and how to generate management decisions from the analysis result.

**(d) MWORA-Map Implementation in the pilot areas**

On return from the Implementation Workshop, the CBD agents will transfer house-hold survey information in the house-hold survey register and will finalize the MWORA-Map under the direct supervision and guidance of divisional coordinator. There after, the CBD agents will regularly maintain and update these maps as per following order.

As the main geographic landmarks on a map are not likely to change very much over time, but the contraceptive methods and family planning status of the MWORA's may change frequently, this information, therefore, will be updated during each field visit. Similarly, information will also be updated on the house-hold register. Necessary updates will include:

a. **Addition of new households and MWORA's:** Whenever a new MWORA will be identified, a new square/box to the map will be placed and also a new MWORA number will be given. When a MWORA moves to another house in the community, his/her MWORA number will also be moved on the map to show his/her new location. If a new MWORA moves into the community, a new number will be assigned.

b. **Changes in the contraceptive method used by each MWORA:** Whenever any MWORA would change contraceptive methods, a new circle of using appropriate color outside of the previous circle will be drawn. In this way, the last color will always signify the most recent contraceptive method used by that MWORA. The updated information will also be corrected in the register.

c. **Changes in the reproductive status of MWORA's:** Whenever any MWORA is no longer in need of contraception, a colored circle to show the new status of that MWORA will be placed.

#### **(e) Updating of MWORA maps**

There will be two types of updating:

1. Major updating
2. Regular updating

**Major Updating:** Major updating will be done once in every two years. Major updating will be done on the basis of the updating of house-hold survey register, when a fresh house hold survey will be conducted. During this fresh house hold survey the MWORA register will be updated with the following important information:

1. Over aged women (49+) will be dropped from the register
2. Dead, moved out MWORAs will be dropped.
3. MWORA numbers will be rearranged in the register

As per above information the new MWORA maps will be prepared.

**Regular Updating:** This will be done regularly on the basis of following:

- Add new comers (MWORAs only)
- Allocate new MWORA numbers (last number from the register)
- Any Change in FP methods
- Record moved out MWORAs
- Record dead MWORAs
- Record drop-outs

- Other source recipient
  - Inter area migration
- (f) **Replacement of MWORA maps:** MWORA maps will be replaced when these will become un-useable and also when these maps are:
- Torn
  - Lost
  - Untidy
  - Over crowded with too many boxes.

(g) **Monitoring and Supervision**

i. The divisional coordinator and district manager will conduct regular field visits to CBD agent's area to monitor progress of MWORA-maps and provide necessary technical assistance for any improvement. The monitoring activities will be done as per MWORA-map monitoring guidelines supplied by the FPMD/Bangladesh staff during the training. During each monitoring visit they will also fill out a monitoring checklist as illustrated in the monitoring guidelines.

The district coordinator will conduct a fortnightly monitoring visit and the headquarters staff will conduct quarterly monitoring visit. The district coordinator and the headquarters staff, during their monitoring visits will conduct MWORA map monitoring activities as per MWORA map monitoring guidelines. After completion of each visit both the district and headquarters staff will send follow-up and/or feedback letter to the CBDs.

(h) **Evaluation/Assessment**

In early May 1996, the Evaluation unit of MYWO will conduct an assessment/evaluation of MWORA-Map implementation. MYWO will determine their next course of action on MWORA-Mapping implementation as per results of this evaluation. MYWO will also hold a dissemination seminar on the outcome of this MWORA map pilot testing.

ACTIVITY CHART FOR MWORA MAPPING IMPLEMENTATION  
FPA, KENYA

ACTIVITY CHART:

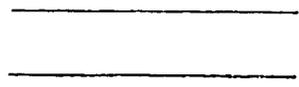
ACTIVITY	PERSON RESPONSIBLE	TIME LINE															
		J	J	A	S	O	N	D	J	F	M	A	M				
		1	2	3	4	5	6	7	8	9	0	1	2				
1. Collect sub location map from administrator or Chief's Office.	CBD Agent	x															
2. Determine area of operation	Div. Coord.	x															
3. Prepare a geographical map of the area	CBD Agent	x															
4. Determine number of MWORAS to be covered in the FP maps	CBD staff	x															
5. Conduct house-hold survey	CBD Agent	x	X														
6. Analyze survey data	CBD/agent		X														
7. Prepare first draft FP maps	CBD Agents		X														
8. Provide feed-back on draft FP maps.	Div. Coord.		X														
9. Make necessary changes in the first draft FP maps as per divisional coordinator's feed-back	CBD Agent		X	X													
10. Submit draft maps to divisional coordinator	CBD Agent			X													
11. Review draft maps.	Div. Coord.			X													
12. Conduct consistency check with the baseline survey data	Div. Coord.			X													
13. Provide feed-back on draft maps and baseline survey.	Div. Coord.			X													

ACTIVITY	PERSON RESPONSIBLE	TIME LINE																	
		J	J	A	S	O	N	D	J	F	M	A	M						
		1	2	3	4	5	6	7	8	9	0	1	2						
14. Incorporate necessary changes as per CBD supervisor's feed-back and re-submit the draft map to CBD supervisors.	CBD Agents			X															
15. Submit draft maps to Evaluation/ Assistant Evaluation Officer at the headquarters with the baseline survey data.	Dist. Manager			X															
16. Review draft maps and survey data	RO/ARO			X															
17. Design final house-hold survey register	RO/ARO			X															
18. Hold one-day implementation workshop and provide feed-back on the draft maps and survey data	RO/ARO/TO			X															
19. Provide materials for MWORA mapping	RO/ARO			X															
20. Finalize maps and transfer survey data to survey register	CBD Agent			X															
21. Implement MWORA maps	CBD/Agn.		X	X	X	X	X	X	X	X									
22 Plan refresher training.	RO/ARO/TO					X													
23 Develop training curriculum in consultation with the District Manager	RO/ARO/TO					X													
24 Inform CBD agents about the refresher training	Dist. Manager/ Div Coord.					X													
25 Attend refresher training	CBD Agent					X													
26 Conduct refresher training	RO ARO/TO					X													
27 Prepare a training analysis report	RO					X													

ACTIVITY	PERSON RESPONSIBLE	TIME LINE												
		J	J	A	S	O	N	D	J	F	A			
		1	2	3	4	5	6	7	8	9	0	1	2	
28 Update MWORA-maps	CBD/Agent													
29 Conduct monitoring and supervision on MWORA map implementation	CBD Agent			X	X	X	X	X	X	X				
30 Ensure appropriate color codes are used for each method	CBD Agent			X	X	X	X	X	X	X				
31 Conduct consistency check to ascertain accuracy of the data	Div. Coord.			X	X	X	X	X	X	X				
32 Provide feed-back and on-the-job training on proper maintenance of MWORA maps.	Div. Coord.			X	X	X	X	X	X	X				
33 Conduct site visits to CBD sub locations and review maps and survey register	Div. Coord.			X	X	X	X	X	X	X				
34 Make sure that all necessary information contains in the house-hold survey and those are consistent with the maps.	Dist. Manager			X	X	X	X	X	X	X				
35 Conduct house visits for verification and ensure that map are updated properly	Dist. Manager Div. Coord.			X	X	X	X	X	X	X				
36 Provide necessary TA and feed-back on proper maintenance of FP maps	Div. Coord. Dist. Manager			X	X	X	X	X	X	X				
37 Conduct site visits to each of these locations and monitor MWORA map implementation as per MWORA map implementation guide	RO/ARO/TO			X	X	X	X	X	X	X				
38 Provide necessary TA on MWORA map	RO/ARO/TO				X	X		X	X	X				

ACTIVITY	PERSON RESPONSIBLE	TIME LINE											
		J	J	A	S	O	N	D	J	F	A		
		1	2	3	4	5	6	7	8	9	0	1	2
38 Provide necessary TA on MWORA map	RO/ARO/TO				X	X		X	X	X			
39 Design impact evaluation on MWORA mapping	MYWO/Evaluation								X				
40 Field test evaluation questionnaire	MYWO evaluation								X				
41 Finalize impact evaluation questionnaire	MYWO evaluation								X				
42 Conduct impact evaluation	MYWO evaluation								X				
43 Conduct a dissemination seminer and share FP map experience	MYWO evaluation								X				





Road



Railroad



River/Stream



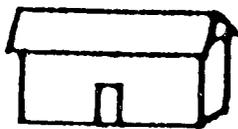
Market



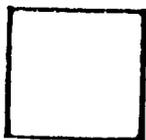
Hospital/Clinic



Mosque



School



House



Volunteer/Fieldworker

Colors to represent different FP methods for the use in FP maps.

FP Method		Color
1.	Pill	Blue
2.	Condom	Green
3.	Injectable	Yellow
4.	IUCD	Pink
5.	Foam Tablet	Brown
6.	Tubal Ligation	Red
7.	Vasectomy	Purple
8.	Norplant	Dark Green
9.	Cream/Jelly	Dark Blue
10.	Non-User	Orange
11.	Pregnant	Black

## HOW TO PREPARE A MWORA MAP

Before preparing a FP-MWORA map, it is necessary to collect following reproductive and family planning data of the Men and Women of Reproductive Age (MWORAs).

1. **DEFINE MWORA:** At the outset, it is important to develop a standard definition of MWORA. Although the definition varies, in most cases women of reproductive ages are between 15-49 years of age and is capable of childbearing. In case of men the reproductive age generally starts at the age between 13-15, after crossing the puberty. Whatever definition you decide to use, the map should include only those people who fit your definition.
2. **CONDUCT HOUSEHOLD SURVEY:** To collect this kind of data, volunteers or field workers who are responsible for providing family planning services in the community will be required to conduct a simple household survey (also called a baseline survey). By means of a brief interview with the man and woman or couple of reproductive age in each household while conducting this survey, the field workers will obtain information about the MWORAs contraceptive use and reproductive health history.

### How to conduct this household survey?

In general, the steps to be followed in carrying out a household survey for a MWORA map are as follows:

- (a) Determine the area to be covered by the MWORA map. If the community or area covered by the map contains fewer than 75 households, this task can be done quickly.
- (b) Choose one household where a man or women of reproductive age or a couple lives as a starting point. Give the couple in this household the number 1. This is their MWORA number, and they will retain this number in all future record-keeping, even if they subsequently move to another household in the community.
- (c) Give the number 2 to the MWORA living in the household nearest to the first one, the number 3 to the next, and so on, until all the MWORAs have been numbered.
- (d) Make a separate information card or an entry in a register designed by your program for recording personal information on the MWORAs in the community. The information card (or register) is important because it will give more specific information than is noted on the map, such as the number of children born to the couple or dates of method changes. Mark the MWORA number on the card (or register). While interviewing the couple, collect the following information:
  - The man/husband's name and occupation;
  - The women/wife's name and occupation;
  - The contraceptive method they currently use (any methods used in the past, and

if they are not using a method, possible reasons for not using contraception);

- Whether or not the woman is pregnant;
- Whether or not she has just give birth;
- Whether or not she is breastfeeding;
- The number of children born to the couple.

When conducting a household (baseline) survey, remember that the information is very personal and that even though you assure couples of confidentiality, some of them will not be willing to discuss these matters. Some women may not want their relatives to know that they are using a contraceptive method. In programs that gather information about married and unmarried women of reproductive age, unmarried women who are sexually active may be in need of services but may not want other members of the household to know about it. In such cases, arranging to meet at a location outside the home may be necessary. For these same reasons it is important to consider, for each community, who is the best person to conduct the survey. This person could be someone from the same community, someone from outside the community, a volunteer, or a nurse.

**3. SUMMARIZE/ANALYZE THE SURVEY DATA:** The survey data that were collected and recorded on cards or on a register now should be summarized in a separate reporting form for each community or area. The summary information should include the:

- total number of MWORAs in the area covered by the map;
- number using any type of modern contraceptive method;
- number of MWORAs/couples using each different method;
- number of MWORAs/couples not using any contraceptive method, with the reasons for non-use if known;
- number of women who are currently pregnant;
- contraceptive prevalence for the area;

**4. DEVELOP SYMBOLS:** Once the necessary information are collected, it is necessary to allocate some symbols to represent various features and landmarks of the area.

To address the above it is advisable to develop symbols for the following visible features and land marks those are generally available in every area/community.

Symbols for:

- Road
- Railroad
- River/Stream
- Market
- Hospital/Clinic
- Mosque
- School
- House
- Volunteer/Fieldworker

**5. DEVELOP COLOR CODES:** Once the symbols are developed, now it is important to come to a consensus on the use of colors that would represent different family planning methods. Thus, decide the different colors that would be used for the following FP methods:

- Oral Pill
- Condom
- IUD
- Injectable
- Foaming
- Diaphoum
- Male sterilization
- Female sterilization
- Pregnant
- Non users

It may be mentioned here that your choice of symbols and colors to represent the different landmarks, contraceptive methods, and categories of reproductive status will depend on the materials available in your community. You can use colored pencils, crayons, colored stickers, or draw appropriate symbols. The sample MWORA map shown here uses commonly used, easy-to-draw symbols to represent geographical landmarks. Different colored circles on the map represent the various contraceptive methods used in the community. The symbols are only examples; you can, of course, choose your own that are appropriate to your particular setting. Colors can also be used to indicate pregnant women, women who have recently given birth, and breastfeeding women. Once the legend is complete, you are ready to draw the map, using the data that you have collected.

**6. MAKE A MWORA MAP:** Once you have collected the above information now you are ready to prepare the map.

(a) **Standard:** MWORA maps should be small enough for the fieldworker to be able to carry, but large enough to show the necessary information clearly. A reasonable size would be 36 cm by 50 cm. It should contain only relevant and required information to avoid overcrowding symbols, colors, and other items on the map, and the items should be large enough to be easily readable.

Because there is a limitation on its size, a MWORA map should not cover too large an area, and the number of MWORAs eligible couples represented on any map should not exceed 75. If the fieldworker serves more than 75 MWORA/couples, she or he may need to draw more than one map.

**(b) Materials Needed:** Before you proceed to preparing the map you will in need of following materials:

- Art Paper
- Colored Pencils/Markers
- Ball Point Pen
- Pencil
- Scissors
- Wooden Rods
- Thread
- Scale

**(c) Instructions for preparing a MWORA Map:** The necessary instructions in connection with preparing the MWORA maps are mentioned below:

- (i) Take a large sheet of paper about 36 cm by 50 cm. On the top of the paper, write the number of the program, the name of the fieldworker who covers the area, the name of the area or community, and the date of the last survey.
- (ii) Draw the general shape of the area in the lower three-quarters of the sheet of paper. Put in the major features or landmarks in the area, such as roads, rivers, schools, health centers, mosques, temples, churches, market places, canals, bridges, or other appropriate and recognizable landmarks. On the bottom of the sheet, make a box for the legend (or key) to explain the meaning of the symbols.
- (iii) Show where each household with an MWORA is located by drawing a square at that point on the map. Number each square in sequence, making sure that the MWORA number on the map corresponds to the number assigned to that MWORA on the information card register that you have prepared.
- (iv) Show the contraceptive method that each MWORA currently uses by drawing a circle around the numbered square that represents the MWORA's house. Each contraceptive or reproductive status should be represented by a specific color. The legend in the box should explain the meaning of each color.
- (v) Draw a square marking the location of the fieldworker's (or volunteer's) house if he or she lives in the community and put a "V" or "CW" inside the square. Using arrows, mark the quickest route that the fieldworker can take to go from one household to another. The routes or paths that you mark do not have to be completely accurate, but they should give a general idea of how the fieldworkers/community workers or volunteer could best organize his or her visits

to ensure that each household is visited regularly (for example, once every 4-6 weeks).

(vi) When MWORA map is completed, attach it to a thin stick or wooden rod, using glue, tape, or thread, so that the volunteer can roll it up when she goes on her round of visits. Then, using a needle and thread, attach a loop to the top of the map, so that the volunteer can hang it in her house, or from a tree or wall, when she is showing it to her supervisor, or to the managers of other programs providing services in her community.

**Updating the MWORA Map:** Once the map is prepared it should be updated regularly to ensure that the information is complete, accurate and timely.

### How to update the map?

The main geographic landmarks on a map are not likely to change very much over time, but the contraceptive methods and family planning status of each couple may change frequently. This information, therefore, may have to be updated during a field worker's visit. Similarly, information will need to be updated on the information cards (or MWORA register). Necessary updates will include:

Addition of new households or MWORAs/eligible couples, or changes in MWORA/eligible couple's or changes in a MWORA/eligible couple's location in the community. The number of MWORA/couple will change, as people leave or move within (or outside of) the community, as young people marry and form a new eligible couple, or enters into reproductive age group or as MWORAs/couples no longer need family planning as a result of death, aging, or divorce. Whenever a new MWORA is identified, add a household (a new square) to the map and give the MWORA/couple a new number. Remember that the number refers to the MWORA/couple and not to their place of residence. When a MWORA/couple moves to another house in the community, their MWORA number needs to be moved on the map to show their new location. If a new couple moves into the community, a new MWORA number should be assigned to that MWORA/couple.

Changes in the contraceptive method used by each MWORA/couple. Whenever the MWORA/couple changes contraceptive methods, draw a new circle of the appropriate color around the outside of the previous circle. In this way, the last color will always signify the most recent contraceptive method used by that couple. If you are using colored stickers, update the map by placing a new sticker on top, and slightly to the side, of the old one. Then update the information on the MWORA register. Since the map does not indicate when a MWORA/couple started using a method or when a MWORA/couple changed methods, always write the dates in the register.

Changes in the reproductive status of each MWORA/couple. Whenever MWORA is no longer in need of contraception, add a colored circle to show the new status of that couple. For example, if a woman becomes pregnant, gives birth, begins or stops breastfeeding, or if the eligible couple is not currently practicing any method of family planning.

When a map is routinely updated, it provides both field workers and their supervisors with a rapid review of the changes in contraceptive use in a given community or area. It indicates trends in the use of the various contraceptive methods and helps to identify discontinues who may be in need of special motivation. It also shows if contraceptives are effective in helping couples avert unwanted births. To keep abreast of changes of this type, some field workers in Bangladesh draw a new map every year, or whenever they conduct a new household survey.

**Maintaining the MWORA Map:** Like any tool once the MWORA maps has been introduced it must be used and updated regularly.

How to maintain the map?

Following conditions are needed for maintaining the MWORA maps:

**Commitment:** All staff members must be committed to collecting and using simple and reliable information.

**Consistency:** Colors, symbols and numbering should be the same from one map to the next, and should be consistent with other records used in the program.

**Use of Information:** Information from the map should be used to update registers and other reporting forms. This process also services to demonstrate the value placed on the map.

**Verification:** The data on the map should be verified by the supervisor, and appropriate feedback and approval should then be communicated to the field worker or volunteers.

**Decision-making:** Local-level planning decisions, strategy development, and performance supervision should be based on information from the map.

**Reference:**

1. *Using maps to improve FP services in Bangladesh, FPMD, Dhaka, Bangladesh.*
2. *The Family Planning Manager, November/December 1992 Volume-1, November 5, Management Sciences for Health, 400 Center Street, Newton, Massachusetts, USA.*

## Follow-up Training Schedule on MWORA Mapping for CBD field Staff

**Objectives:** To provide a follow-up training to the CBD field staff on the meticulous use of MWORA maps. At the end of the training the participants will be able to:

1. update MWORA maps showing the FP acceptance status of the MWORAs of the catchment area.
2. use MWORA map as a management tool for planning and organizing their work.

Day - 1	Time
1. Introduction	10 min.
2. Expectations of the participants	10 min.
3. Reviewing of Agenda/topic	10 min.
4. Learn MWORA map implementation experience from the CBD field workers and field agents: <ul style="list-style-type: none"> <li>○ Identify major issues</li> <li>○ List down major problems</li> <li>○ Other concerns etc.</li> </ul>	1 hr.
5. Address issues and concerns of the CBD field staff and supervisors on MWORA maps	1-2 hrs
6. Case-Study.	1 hr.

7.	Analysis of an ELCO/MWORA map to calculate: <ul style="list-style-type: none"> <li>○ Contraceptive Prevalence</li> <li>○ Method-mix</li> <li>○ Develop IEC strategies in order to educate/motivate non acceptors on FP</li> <li>○ Other points/items from which MWORA map could be used.</li> </ul>	1.11.
8.	Feed-back on these case analysis	
9.	Conclusion	

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**GUIDELINES FOR CONDUCTING MWORA/ELCO MAP  
TRAINING FOR FIELD STAFF**

**Family Planning Management Development  
House # 40/C, Road # 11 (New)  
Dhanmondi R/A, Dhaka, Bangladesh  
Phone: 818153, 817935**

## Preparation and Use of ELCO Maps

### Objectives

**Field Workers:** On completing this session, participants will be able to:

1. List and explain 5 benefits of ELCO/MWORA mapping for planning, carrying out, and monitoring activities and achieving desired method-mix (see handout #5 for list of benefits).
2. Use ELCO/MWORA maps and ELCO/MWORA registers to update FWA registers.
3. Draw an accurate ELCO/FP-MWORA map using given data.
4. Demonstrate to volunteers/CBD worker/agents how to use ELCO/MWORA maps to plan their visits.

**Supervisors:** On completing this session, participants will be able to:

1. Meet all objectives above.
2. Assist field workers in drawing ELCO/MWORA maps.

### Approximate Time

3 hours 45 minutes

### Methodology

Brainstorming, small group discussion, presentation and discussion, case study, practical application, roleplay.

### Materials

#### Overheads/Handouts

1. What is ELCO/MWORA Mapping?
  2. What do you need to make an ELCO/MWORA Map?
  3. Conducting a Household Survey
  4. Steps in making an ELCO/MWORA Map
  5. Uses and benefits of ELCO/MWORA Maps
- Case study, parts 1 and 2 (handout)  
Trainer's note: Questions on Case  
Incomplete ELCO/MWORA Map (handout)  
Instructions for completing and revising map (flip chart)

Instructions for FWs and volunteer/agents in roleplay (trainer's note)

**Trainer's Preparation**

Review case and instructions for completing and revising map.  
Recruit and instruct volunteers for roleplay.

## b. Seven Preparation and use of ELCO Maps

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Content	Activities	Time	Trainer's Responsibility
Warmup	To be determined by participants and trainer	10 min.	Encourage participants to develop and lead warmup.
Review	Questions and comments on previous day's sessions	15 min.	Ask question, lead discussion.
3. What is an ELCO map?	Presentation, questions, brief discussion	5 min.	Show and explain overhead #1, lead discussion. Distribute handout #1.
4. What are the benefits and limitations of ELCO mapping for family planning programs?	Brainstorming	15 min.	Lead brainstorming session.
5. How has ELCO mapping been useful to you and your volunteers?	Small group discussion, summary in plenary session	25 min.	Select groups, explain task, guide plenary session.
6. Review of steps in conducting a household survey and preparation an ELCO map	Presentation, questions	30 min.	<ul style="list-style-type: none"> <li>a. Explain that all overheads will be given to participants as handouts.</li> <li>b. Show and explain overhead #2.</li> <li>c. Review format and uses of FWA and ELCO registers.</li> <li>d. Show and explain overheads #3 and #4.</li> <li>e. Encourage comments and questions.</li> <li>f. Distribute handouts.</li> </ul>
7. Practice in ELCO mapping	Case reading, individual completion of sample ELCO maps, comparisons in groups of three	1 hour	<ul style="list-style-type: none"> <li>a. Distribute part 1 of case with map.</li> <li>b. Give instructions for completing map.</li> <li>c. Give instructions for comparing work in groups of 2 and resolving differences.</li> <li>d. Lead plenary discussion of differences between partner's work and how they were resolved.</li> </ul>
8. Updating ELCO maps	Small group work	15 min.	<ul style="list-style-type: none"> <li>a. Distribute part 2 of case with ELCO and FWA registers.</li> <li>b. Give instructions for updating maps.</li> <li>c. Form small groups of FWAs with one FPI and give instructions for checking updates.</li> <li>d. Lead plenary discussion on analysis of ELCO map data, using questions in Teacher's Note.</li> </ul>

Content	Activities	Time	Trainer's Responsibility
Effective ways to teach volunteers to use ELCO maps.	Roleplay, discussion	40 min.	a. Give FWA roleplayer handout #5. Review list of benefits with her. b. Instruct her in communication skills: listening; giving short, simple, specific messages; giving practical example. Volunteer roleplayer should react naturally to FWA's presentation. c. After roleplay, ask roleplayers how they felt in their roles. d. Lead plenary discussion on FWA's presentation, volunteer's reactions; draw out suggestions for effective ways to teach volunteers. e. Show overhead #5 and distribute handout with guidelines for teaching volunteers ELCO mapping.
Warm up	Responses to questions	10 min.	Ask participants ORID questions.

## AMENA'S ELCO MAP

Amena is a community volunteer. She works in a village named Shikarpur in the district of Bogra. During a recent flood, Amena's ELCO map was washed away, but fortunately she had given her ELCO register to her Family Welfare Assistant, so the register was saved. This register contains information for the past two years. The last household survey was done in February '94.

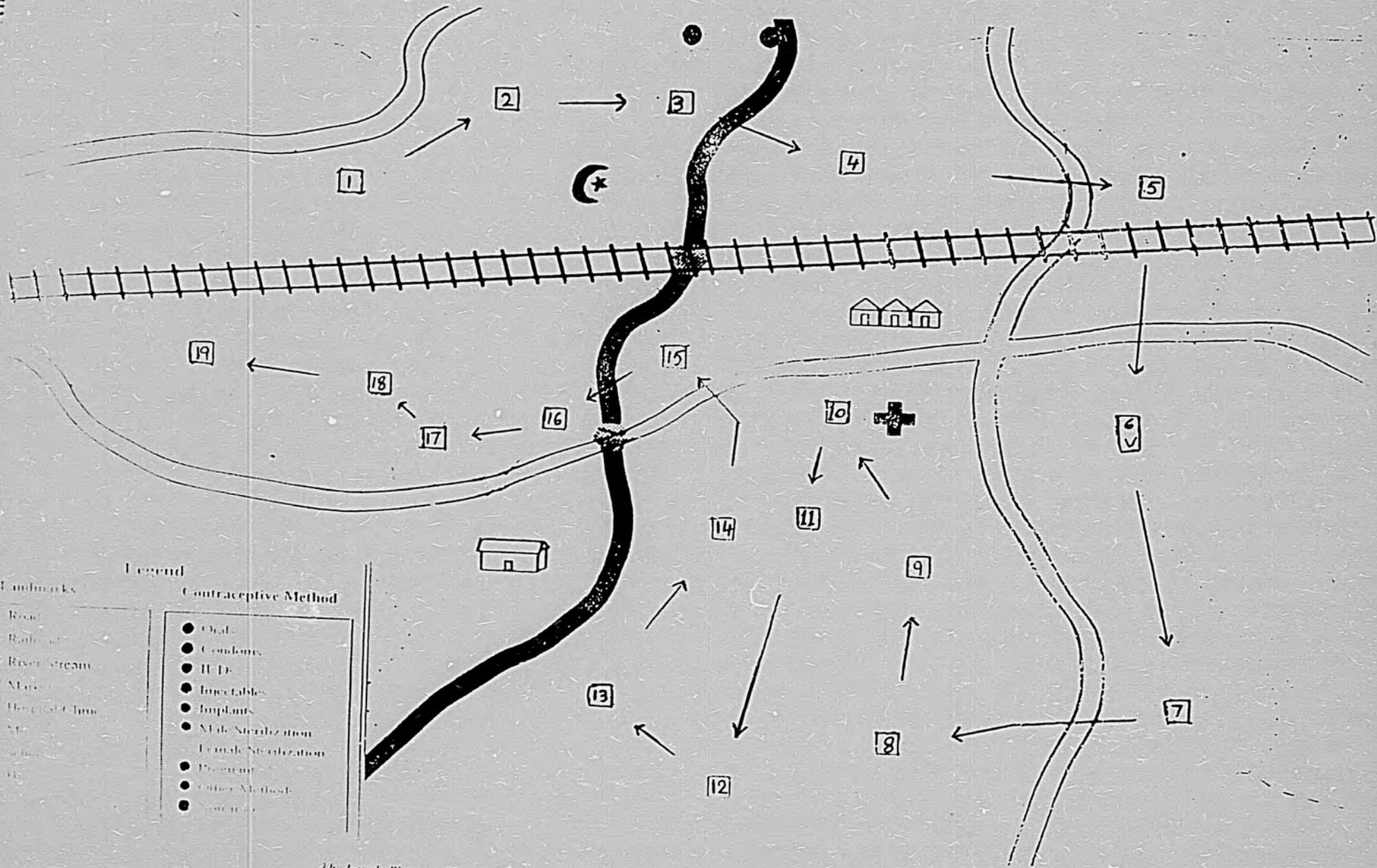
Amena needs to develop a fresh ELCO map using the following information.

ELCO #	Contraceptive practice with sequences up to September '9_
1	OC, dropout, con, tub
2	Con, OC, dropout, inj
3	OC, con, inj
4	Inj, IUD
5	Inj, OC
6	Con, OC
7	Non-user
8	Non-user
9	Non-user
10	Non-user
11	Non-user
12	Non-user
13	Con, inj, OC
14	OC, inj, tub
15	OC, inj, con
16	Inj, dropout
17	OC, IUD, inj, OC
18	Con, inj, IUD
19	OC, inj
20	Con, OC, inj
21	Inj, OC, inj
22	OC, inj, dropout
23	OC, dropout, pregnant
24	Inj, OC
25	OC, IUD, con, vas

## CASE : PART 2

## THE UPDATE

ELCO #	Contraceptive practice with sequences updated in October'9
1	Tub
2	Inj
3	Inj
4	Inj
5	OC
6	OC
7	Non-user
8	Non-user
9	Non-user
10	Pregnant
11	Non-user
12	Non-user
13	OC
14	Tub
15	Con
16	Pregnant
17	OC
18	Dropout
19	Con
20	OC
21	Inj
22	Dropout
23	Non-user
24	Con
25	Vas



Legend

Landmarks

- Road
- ||||| Railway
- ~ River/Stream
- Y Y Y Mosque
- ⊕ Hospital/Clinic
- ☾ Mosque
- House

Contraceptive Method

- Oral
- Condoms
- IUD
- Injections
- Implants
- Male Sterilization
- Female Sterilization
- Permanent
- Other Methods
- Unknown

TRAINER'S NOTES

QUESTIONS ON CASE

1. What IEC interventions might you suggest to motivate ELCOs #7 - #12 to become acceptors?
2. What approaches might Amena use to persuade ELCOs #18 and #22 to resume contraceptive practices?
3. What do you think Amena's responsibilities are in dealing with ELCOs #10 and #16 who are pregnant?
4. Looking at the map, what do you think is the status of the method mix in Shikarpur?
5. In what ways might Amena influence ELCOs #5, #6, #13, #17, #19, #20 and #24 to switch to longer-term methods?

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**SAMPLE DATA ANALYSIS FORMATS FOR  
ELCO/MWORA REGISTER/MAP INTERPRETATION**

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*F*amily planning organizations worldwide are striving to make it possible for every individual to choose the number and spacing of their children, and are working to support national strategies for reducing population growth rates. The managers of these organizations must rise to the challenge of providing high-quality, effective family planning services to ever-increasing numbers of couples. The Family Planning Management Development (FPMD) Project strengthens family planning organizations in both the public and private sectors by identifying their managerial problems, applying practical solutions to these problems, and enhancing the quality and sustainability of their services.

*F*PM D works at the national, regional, and local levels throughout Africa, Latin America and the Caribbean, Asia, the Near East, and Eastern Europe. The project provides management assistance to national family planning programs and organizations to improve the effectiveness of service delivery. FPMD's approach to organizational development is built on extensive experience, which includes the provision of technical assistance to family planning organizations in over 30 countries and management training to over 2,000 family planning managers worldwide.