Training Module for Female Health Workers on building Understanding and Skill to address Psycho-social concerns for addressing Coronavirus Pandemic



Training Manual (Section One)



A cross the world, there has been increasing recognition of the need to provide mental health support to HCWs in the frontline of COVID-19 pandemic. Mental health issues among health care personnel are well recognised even before the COVID-19 pandemic. Multiple studies have consistently reported higher rates of depression, anxiety, substance use, poor life satisfaction and suicide among HCWs as compared to the general population.

The most common psychiatric disorders diagnosed were post-traumatic stress syndrome (PTSS), depression and anxiety. There is empirical evidence that female nurses with close contact to COVID-19 patients appeared to have the highest mental health risks. Suicidal ideation was identified amongst 6.5% of healthcare workers with lower self-perceived health status listed as an additional risk factor. There is evidence from a study conducted in India and Singapore which demonstrated significant association between the prevalence of physical symptoms and psychological outcomes among healthcare workers during the COVID-19 outbreak. In another study conducted in India, the healthcare workers expressed their fear, anxiety and stress because of being isolated/quarantined, putting family members and other staff at risk of infection, lack of knowledge on proper use of personal protective equipment, household problems due to lockdown and lack of medical insurance.

If not effectively recognised and treated, such stress can transform into more persistent illness, even leading to suicidal thoughts and feelings. Psychological difficulties have been consistently linked to reduced competency at work and the stress faced at work can worsen mental distress. Hence, it is important to identify their specific needs and create adequate systems and mechanisms to support them. For the wellbeing of FHWs, areas of personal health and safety measures, women's rights and support, prevention of gender-based violence, mental health support and social protection schemes are to be looked upon.

Overall findings:

- Macro level (policy environment)
 - Differences in incentives/stimulus packages for ASHA, AWW and ANM and awareness regarding same.
 - Job security remains a critical challenge for all FHWs.
 - With the on-set of pandemic work-load has nearly tripled.
 - Lack of medical benefit provided in the job, and limited awareness about COVID Suraksha insurance.
 - Limited inclusion of gender related aspects into policy and programmes due to immediate nature of response.

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^{1.} Lancee W.J. Prevalence of psychiatric disorders among Toronto hospital workers one to two years after the SARS outbreak. *Psychiatr. Serv.* 2008;59(1):91–95.

^{2.} Romero C.-S. COVID-19 psychological impact in 3109 healthcare workers in Spain: the PSIMCOV group. *Psychol. Med.* 2020:1–14.

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> Meso level (community and institutional environment)

- Push backs was faced by FHWs in the communities they serve. This has been especially observed in urban/peri-urban parts of Delhi NCT as the FHWs come from outskirts/rural areas and residents are not very comfortable in letting them in.
- Access to protective gear has not been easily available, especially during early stages of pandemic
- Limited growth/career path for FHWs
- · Limited access to allied facilities like WASH and transport
- Limited security provided to FHWs completing field tasks

Micro level (interpersonal and individual level)

- Isolation was faced by FHWs in the communities they live. Most families have the fear of FHWs contaminating their households and being a carrier
- Limited incentives/benefits to keep FHWs motivated such as holidays/leaves/recognition/rewards etc. (Witnessed more in the case of ASHA and AWW)
- Limited trainings provided on psych-social issues and support mechanisms for FHWs during pandemic
- Limited possible alternate employment options in case of inadequacy/ability to continue work due to COVID and related factors

This training module has been prepared to support FHW with understanding and resolving psychosocial issues to handle such pandemic situation presently and in future. These three days sessions will help them in improving their understanding to **assess and mitigate select psycho-social challenges along with improved resilience** response such crisis. The module can be used by the development professional, departmental supervisors/ training and mentoring staffs to provide hand-handing support to FLWs in addressing their psycho-social challenges for effective handling of pandemic in future.

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Tips for Facilitator

To develop the art of good facilitation one has to learn to minimize influence of one's own values and norms during the training sessions. While imparting psycho-social capacity building program which is highly gender based and normative in nature, one tends to carry one's personal experiences, values and norms into the session. It is therefore; important to ask oneself what you are comfortable talking about, and identifying your own strengths and limitations. There are many areas that can be sensitive and difficult to address as per our own value, so it is important to find one's comfort level to facilitate the sessions. However, nobody is perfect the first time; there is need to practice and learn from the mistakes. Each step of training provides an opportunity to the facilitator to overcome their hesitation and practice the skills that are required to be a good facilitator. Here we are providing broadly three steps of facilitation. These steps are given below so that as a facilitator you should prepare your session accordingly.

Process of Facilitation

1. Before the session:

Training requires prior study and preparation irrespective of the fact that many of the time facilitator has organized training on the same issue.

- 1. Get to know your participants
- 2. What are their cultural backgrounds?
- 3. Do they have any previous knowledge on issues that will be addressed through the training program?
- 4. Which region do they belong to (e.g., which state, rural or urban setting)?
- 5. What are the common myths and misconceptions prevailing among the participants or in their local community related to the training issue?
- 6. Are there any cultural or religious taboos among that may inhibit discussion on these topics?
- 7. Familiarize yourself with the day's topic for discussion, the resource material and other essentials such as transparencies, cards, articles, the games to be played, handouts, questionnaires, etc.
- 8. Setting up the room: Try to create some open space for the exercises and role-plays they will be involved in. If feasible, move desks and chairs to form a semi-circular arrangement.

1. During the session:

- 1. As it is an adult learning process, keep presentations to a minimum. Conduct exercise-based activities to impact perception, thought as well as skills of participants. This has been provided in the module to support your activities. The session should take into account personal believes so that it can have impact on person's behaviour. Participatory methods should be used to validate the learners' experience and to give them confidence, knowledge and skills.
- 2. Introduce the topic of the day and allocate adequate time to various exercises, activities, discussions, question box, reinforcing key messages at the end of the activities.

- 3. Collect ideas on paper, charts, blackboards (individually, without adding your viewpoints or words).
- 4. Present topics in positive terms so that participants are prepared to accept the physical, mental stress and emotional changes and thus have a positive body image and high self- esteem.
- 5. Participants should not be made uncomfortable. Create opportunities during the session where all are given an equal chance to participate in the activities and discussions. However, do not force them to express their views /opinions on an issue if they do not want to respond.
- 6. Never get personal, never be argumentative, or try to prove that you are right. Most of our statements are based on our values, upbringing and belief systems on what we perceive to be right or wrong. Tell them that no question is 'silly' or 'stupid' and they should feel free to clarify their doubts. Never embarrass them by telling him or her that their question is silly.
- 7. Encourage all participants to respond and participate.
- 8. Summarize the discussion ensuring all essential points are covered.
- 9. Be very alert to the moods of the participants yawning/ signs of boredom/ sleepiness etc. Take an energizer when spirits are sagging.
- 10. Issues not pertaining to the sessions, however important, should be placed in a Parking Lot. Ensure that all parking lot issues are discussed before the end of the day/end of the workshop session.
- 11. Any personal questions can be answered at your discretion, but if it is unanswerable, just calmly say that you cannot answer it.
- 12. Do not say "is it clear, have you understood?" Instead say, "Have I made myself clear?" etc.
- 13. Keep track of time.
- 14. Have a contact phone number of a senior/ technical resource person to take advice on any issues during the session.

3. After the session

- The facilitator can use different ways of evaluating the session. This module has two types of formats a) daily evaluation as well as b) pre and post evaluation. Go through it which is attached with this module and in case need more clarification consult with the master trainer.
- Summarize each session at the end and ensure that objectives are realized and topics are covered.
- Put a question box in the training session so that participants can put their queries in the box this can be taken care of at the end of each session. The presence of question box will help the shy participants to ask their questions.

Module I Introductory

Chapter-1

Welcome and Introduction

For a successful training it is important that participants interact freely, without hesitation and fear. They all should feel at par with each other. In trainings participants may not have similar educational, economic or social background. Therefore, at the beginning of, icebreakers or warming up exercises are essential to help the participants get to know each other and relieve the initial tension of working with a new group of people.

1.1 Session : Ice Breaking Session

Learning Objectives:

- 1. To warm up and make FHWs comfortable for thought sharing.
- 2. To brief participants on training objectives
- 3. To communicate their roles and responsibility within COVID context

| Duration | 20 minutes |
|-------------------|-------------------------------------|
| Methodology | Group Activity |
| Material Required | 3 Photographs (Theme based), 1 Bowl |

Facilitator Note

Activity-1: Collate the Images

Provide 4 photographs based on different situations (care giving, covid-19 vaccination, and referral). Tear each photograph into 4-5 pieces and put them together into a bowl. Ask the participants to pick one piece of photograph. After combining each piece to make a complete photograph. This will form 4 group. Now ask the participants to give the insight, how these photographs are associated with their work and life based on following questions:



Key Questions

- 1. Do you relate yourself with these photographs?
- 2. How does it reflect importance as well as challenge of your work during COVID?
- 3. How challenges affect your individual life, work performance as well as family life?

Key Messages: Once they have given their response facilitator should summarize with following statements:

Key Messages

- 1. It is important for the workshop that you all talk to each other; work together; have fun and keep smiling.
- 2. It's clear, your role as FHWs in the community is vital and praiseworthy.
- 3. However, you face tremendous problems in delivery these work
- 4. There is need to address those problems
- 5. In the coming activities we will see how to address those concerns

1.2 Session : Logistics

Participants need to be informed about important logistics in the beginning itself so that they know about the important arrangements and can attend to their needs without disturbing the training session or the larger group.

Learning Objectives:

- 1. To inform participants about the availability of drinking water, refreshment at the training venue
- 2. To inform them about location of washrooms and drinking water.
- 3. To inquire whether boarding and travel facilities need any attention and take necessary actions to address if required.
- 4. To introduce person responsible for any requirement other than training like medical help, travel etc.

| Duration | 20 minutes |
|-------------------|----------------|
| Methodology | Group Activity |
| Material Required | |

Activity 1: Provide the logistics sheet with the contact persons detail and numbers to all participants. Ask them if they have any problem with arrangements or with food. Take note of problems or concerns raised and try to address them.

- Hand out the Photostat copies of the brief on logistics
- Review the logistics for the day: training time, tea and lunch breaks and end time.
- Share important details like contact name and address of the person-in-charge of logistics (and also person responsible for taking care of the travel reimbursements etc). Introduce them to the group for convenience.

Key Messages

- Do not hesitate to contact facilitator or other organizer in case of emergency
- Ask for medical help if required
- Bring issues of harassment and violence to the notice of organizers/facilitators

1.3 Session : Ground Rule

Preparing Ground Rules in a participatory way makes participants more conscious of the rules made by them and helps in maintaining the decorum of the training/workshop. Participants, especially FHW who work in the community with the people, are more responsive when they feel that rules are not imposed on them. This also helps to get volunteers to take charge of upholding the rules during the training among their peers. This session should also be used to prepare a day wise list of Monitors to maintain rules during the session.

Learning Objectives:

- 1. To prepare ground rules in a participatory way
- 2. To make participants learn importance of ground rules and encourage self-discipline and sense of responsibility to influence their peers to follow the rules
- 3. To get day wise list of Monitors, Reporters and Evaluators

| Duration | 15 minutes |
|-------------------|---|
| Methodology | Brainstorming and discussions |
| Material Required | Flip Chart; White Board Pens, Chart Paper |

Activity 1: Ask participants to think and speak about the rules that they feel are important for smooth functioning of the training. Write suggestions on a flip chart. Some of the suggestions could be:

- 1. Respecting others feelings and opinion
- 2. Be Polite
- 3. Be non-judgmental Don't impose your opinion as what is right and what is wrong on others
- 4. Maintain confidentiality Sharing with others or making fun of any individual opinion that was shared by any individual in context of the training
- 5. Be on time and don't use mobile phones; or if emergency then keep ringer on silent mode
- 6. Don't talk during presentations
- 7. Volunteer for the activities if needed
- 8. Select three persons for each day's monitoring

1.4 Session : Training Objectives

It is good to discuss session wise objectives of training prepared by you and relate it with the expectations of the participants. This would help participants see the training in totality and prepare themselves for each session for better understanding and learning interactions.

Learning Objectives

- 1 To make participants understand the objectives of each session.
- 2 To help participants relate their expectations with the planned session during the course of the training.

| Duration | 15 minutes | |
|-------------------|-------------------------------|--|
| Methodology | Brainstorming and discussions | |
| Material Required | Agenda/ Session Plan | |



Activity 1: Provide each participant with a session plan. Read out the session plan one by one starting with day 1. Discuss the objectives of each session. Correlate training objectives with the expectations of the participants. Invite questions from participants and clarify their concerns related to this training.

Activity 2: Prepare a Question Box with a cardboard or a wooden or steel box with a space to put in queries. The box is locked or pasted in a way that no one except for the facilitator can open the box. Introduce Question Box and inform participants that this will be available all through the training for all sessions. The questions will be answered at the end of day of start of the new session.

Question Box

Question Box is a method to encourage participants to put in their queries regarding session or their experiences or anything which they want to share with the larger group without their identity being disclosed. The facilitator introduces the box and keeps it in a place accessible to all participants. The box has an inlet like a post box to drop queries. It is locked so that no one else can open it. Facilitator asks participants to write down their concerns or experiences on a piece of paper without disclosing their identity and put them in the question box. The questions are reviewed at the end of session or day in the presence of larger group

Module II: Psychological Distress Among Women Healthcare Workers

2.1 Session : Special problems needs out of the box solutions

The sudden outrage of COVID 19 had imposed an unprecedented health emergency of this century as the virus was unknown and there is very limited information available on the spread and prevention of this virus. Hence it was a great challenge in front of every country to manage it and the situation is same with the Indian government too as India being the second most populous country in the world, managing COVID in the country was a huge task. The Indian government is working intensely to minimalize the number of cases and consequences daily and is taking all necessary steps to combat the challenges and threat posed by this growing invisible pandemic war. This whole situation taught us that in this changing world we need to be prepared to deal with the unseen situations with optimal use of available resources. Also, as the solution of any problem might not be as simple or strait and hence, we should evaluate strategies and barriers to solve the problem. Also, we need to be creative, challenge our own assumptions and look at things from a fresh angle. It is also important to break out of conventional thinking and take off the blinkers formed by past experience.

The present exercise will help the participants to understand that we can't solve the problem as long as we are thinking 'inside the box' created by our assumptions. Once we start to think 'outside the box' we open up many more possibilities and it becomes easy to solve the problem. This is true in so many areas of life – our education, past experience and habitual thinking patterns keep us trapped in limiting assumptions. It takes a real effort to challenge the assumptions and think outside the box.

Learning Objectives:

1. The participants will be able to develop out of the box problem solving skill

| Duration | 20 minutes | |
|-------------------|---------------------------------|--|
| Methodology | Group Activity | |
| Material Required | Black board/Chart Paper, Marker | |

Activity 2.1.1: Think Out of the box

Place a Black board or chart paper on the wall and draw total 9 dots parallel to each other. Ask the participants to join all the dots without lifting the marker and should not be overlapped. After allowing the sufficient time to think and try to complete the task, the facilitator will demonstrate the trick to join all the dots and deliver the key message out of performing this activity.





Key Questions:

- 1. What did you understand from this activity?
- 2. Do you think we can sort the things by thinking out of the box?
- 3. Do you think this applies in our life to perform the daily task?

- 1. The challenging situation may happen to anyone.
- 2. The individuals should think out of the box to deal with the situation
- 3. Now in the next activity we will see how to solve our problems that we have mentioned above which we have faced during COVID

Note for the facilitator: This activity can be given to the participants to repeated the same with their peers and family members with key message. It will help in building supportive environment at all levels.

2.2 Session : Impact of COVID-19 on FHWs

Since the time COVID 19 has been declared as pandemic, many countries including India sets up COVID guidelines to involve and get the support from frontline healthcare workers. A key strategy of India for managing COVID-19 is mitigating community transmission via awareness and preventive methods through frontline workers. These health workers are playing a crucial role for equitable delivery of healthcare services to the community and they carried a heavy burden during the COVID-19 crisis and, in the challenge to control the virus, have directly faced its consequences.

They are working day and night to save the lives of people impacted by virus and as they are directly involved in the diagnosis, treatment, and care of patients with COVID-19, they have been exposed to multiple difficult situations every day. Which has not only increased the burden of the work on them but also caused the mental health consequences such as stress, burnout, anxiety, depression, moral injury along with many other mental health concerns.

Also, pandemics like COVID-19 could disrupt personal and professional lives severely and affect people and societies on several levels. Distress is an inevitable feeling in such circumstances and it is common for individuals to feel fearful, stressed, worried and anxious during COVID-19. Social discrimination and stigmatisation are another ill-effect of the current crisis that one could face and this kind of discrimination has been faced not only by the FHWs but also by their family members. While as they try to cope with these consequences of the pandemic, they are experiencing immense psychological distress, burnout, stress, anxieties, and sometimes even a mental health disorder if the stress continues for long, remains unaddressed

Therefore, the skills should be explained to the frontline healthcare workers to better overcome with the mental health illness.

2.2.1 Activity : Body Mapping

Learning Objectives:

1. Learning to identify stress in the body

| Duration | 20 minutes |
|-------------------|--|
| Methodology | Group Activity |
| Material Required | Body Map on A4 sheet, 1 Glass, 1 Water bottle 1.5 to 2 litters |

Note for facilitator

This activity focuses on exploration of bodily feelings of psychological stress by doing a body scan. These maps help to bring awareness to the body, emotions, feelings, and also bring a sense of control over symptoms.

Ask the participants to split into groups of five. First, ask each group to label in the body where they experience physical pain such as aches. Second, ask them to reflect deeply and label areas where they feel their stress shows up in the body.

The group should use the following colours to level their pain / stress as mentioned below:

- 1. Aches and pains due to psychical RED
- 2. Parts where stress shows up GREEN





Activity 2.2.2: Recognition of stress

Learning Objectives:

- 1. Understanding of the invisible nature of stress
- 2. Understanding the importance of

| Duration | 20 minutes | |
|-------------------|---------------------------------|--|
| Methodology | Skit (Role Play) | |
| Material Required | Black board/Chart Paper, Marker | |

Suggest participants to volunteers them for two role plays. Each role play will need four participants. Once groups are formed the facilitator will explain the following:

Group - 1: One FHW is on its out-reach activity in the community. She fells down while crossing the road. The moment she fell she gets support from the community people. One provides her water, other cotton to stop blood flow. One person offers her to nearby medical centres

Group - 2: One FHW is on its out-reach activity in the community. When she is going out for duty, she is experiencing anxiety due to conflict with her family members. All are strongly opposing her going to work due to the fear of getting infected through her. In the community too, she gets opposition from the community members. When she meets her supervisors, she gets strong reaction of not completing her task. She is very nervous, disappointed, stressed and when she gets back to home, she is being blamed by the husband for not completing her household duty. She feels she is not a responsible home maker as well as FHW.

Once role play is over, ask following questions from the group

- 1. Is it linked with their actual life?
- 2. Which is more painful a) physical hurt or b) mental hurt/ tension/ pressure etc

3. In the next exercise we will see how physical and mental health impacts us and how important is it to address?

The facilitator will then explain to the participants that we can only help someone when we **recognise** their burden or hurt. In physical pain we are most of the times able to see if someone is hurt but it is never the case with mental stress.

The facilitator will link back to the body mapping activity and explain that this was a way to recognise the mental burdens and hurts we carry within ourselves. He/she will ask the participants "If we all carry such heavy mental burdens and stress; how come we do not help each other or seek help ourselves to assess what kind of treatment we need for such mental ailments?"

Facilitator will explain that the biggest problem with mental stress is that it is invisible! Ask one participant to look at another participant or the facilitator and guess the burden of stress that they are carrying. One cannot answer since it is not visible. There are no units to measure mental stress and hurt.

Key Messages

- Physical pains are visible and we get sympathy and support from others
- We also get support of medical treatment
- · Mental problem, stress, anxiety is not visible, and nobody provides support
- Physical hurt or mental hurt can be equally painful and harmful
- Even society and family aggravate the situation with humiliation and comments
- In the next session we will see how important is addressing our mental health concerns

Module III: Coping during COVID

3.1 Session : Mental Health – Severity Exercises

The spread of COVID-19 across the globe have induced diverse challenges associated with morbidity and mortality across nations. Fear of catching infection, fear of unknown, perceived stigma from community & family, and stress and isolation are predominant mental challenges faced by FHWs. There is increasing evidence that suggests that COVID-19 can be an independent risk factor for stress in FHWs. This suggests strong need of strengthening capacity of FHWs to deal with their stress for effective address of pandemic like situation. Under this session we will understand stress, its implication and how to address the same to enhance our effectiveness.

Learning Objectives:

- 1 Ignoring mental stress for long can lead to ill consequences
- 2 Unlearning negative behaviours
- 3 Participants will be able to know what to do and from where to get support at in the case to stress, anxiety and mental health concerns

3.1.1 Activity : Understanding the progressive nature of stress

| Duration | 20 minutes |
|-------------------|--|
| Methodology | Individual Exercise |
| Material Required | Body Map on A4 sheet 2 Water bottle of 1.5 litters |

Identify two volunteers from the group and ask them to hold an empty water bottle for as long as they can. Their hands must be straight, and they should not take support against walls or furniture. Keep adding water to the bottle in regular intervals. See how long they can hold the bottle. Once the bottle is dropped/ or declared too difficult to hold, ask following questions:

- Why were they not able to hold the bottle?
- Is there any similarity with the mental stress/ problem that we face in our day-to-day life?
- What is a real-life example of the bottle dropping?
- Ask them what kind of support would have helped in holding the bottle longer
- What can be consequences of not getting support in the case of anxiety, stress, depression (explain the same with the help of Handout provided)
- Inform that in the next exercise we will see that can be done in the case of mental stress and from where we can get support

Key Messages

- The sympathy towards a person undergoing mental health illness is crucial.
- This is important to recognize the mental health issues and perceived stress.
- Stress can hinder the daily activities, performance and quality of work.
- Early recognition of mental health illnesses and addressing the same is important alike physical health

| Duration | 20 minutes |
|-------------------|---|
| Methodology | Group exercise |
| Material Required | 30 to 40 balloons and equal tooth pick, format as provided as Handout 2.2 Map on A4 sheet |

3.1.2 Activity : Unlearning negativity

Provide one balloon and one toothpick to each participant. Suggest them to blow the balloons and hold it till next instruction

Statement for Action: Now start moving in the hall and save your balloons from others

Keep repeating the statement so that they will start pricking others balloons with the toothpick. After some round suggest them to stop the activity and come forward to show how many have saved their balloons.

Now clarify that you had not asked them to prick others' balloons. Its natural state of mind, to resort to negative action to protect ourselves. Therefore, we are getting negative reaction, comments, opinion from all over.

Now invite some people to reveal how they were able to protect their balloons. Some of the response could be a) they were able to listen the statement carefully b) they were not indulged in pricking others balloons etc.

Key Messages

- We should focus on our action without getting influenced from others reaction to protect our mental health
- We should not get indulge in negative criticism (picking others balloons)
- Yoga, pranayama, chanting can be good instrument to address mental health at individual level
- In the next activity we will see what support is available to address our psycho-social concerns

3.1.3 Activity : Leveraging resources to address psycho-social concerns

| Methodology | Group exercise |
|-------------------|-------------------|
| Material Required | Chart paper, pens |

Put chart paper on the wall/ blackboard and suggest participants to brain storm what support they feel is available at different level address their psycho-social concerns.

| Family level | Department level | Village /Community level | Hospitals |
|--------------|------------------|-----------------------------|-----------|
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Once they have filled the form help them to include some more support that is missed out which has been initiated in for the FHWs recently on the issue of Psycho-social concerns.

Once this chart is prepared, suggest them to take photographs of this format for their use. If possible, provide photocopies the filled format by end of the training program that can be used as as a resource material to ensure their as well as other FHWs psycho-social concerns

Key Messages

- Department of health is very concerned on improving psychosocial concerns of FHWs
- It's in the interest of our individual, family wellbeing to take care of our psychosocial concerns
- Instead of holding our problem, consult organisations/ institutions to address our concerns
- Its our responsibility to support our colleagues/ friends in ensuring appropriate support

Module IV: Improving understanding to Enhance Resilience at work

4.1 Session : Understanding Stigma during COVID-19

The Covid-19 pandemic has brought with itself an "infodemic". Infodemic is a term coined by WHO and UNICEF to explain that the "misinformation and rumours is spreading more quickly than the current outbreak of the new coronavirus (COVID-19)." These infodemic not supported by scientific evidence has led to mass fear, anxiety, stress among the population. The period has seen discrimination as well as violence toward medical service providers leading to harassment and loss of employment as well. In this session we will see what leads to stigma, its impact and how to address the same.

Learning Objectives:

- 1. Lack of scientific information and communication gap may lead to confusion and mistrust
- 2. Confusion and mistrust may lead to stigma towards people associated with the concerns
- 3. The participants will learn the strategies to deal with those confusion and mistrust

4.1.1 Activity : Stigma and its impact on FHWs

| Duration | 20 minutes |
|-------------------|---------------------|
| Methodology | Brain storming |
| Material Required | Chart paper, marker |

Ask participants to name some of the stigma that prevailed during the COVID period such as "meeting health works may lead to infection"

List down all on the white board / chart paper. Once some of key stigma is compiled suggest them to explore how this stigma has impacted their work, individual social life etc. Some of the response could be a) threat from the people, stress, fear of violence, lack of support etc

Now conduct a brain storming the reason behind stigma. It's basically lack of scientific information, fear and confusion. (Use following diagram to explain them)

Why is there Stigma?

Stigma associated with COVID-19 is based on three main factors:



Lack of adequate information



Fear of the disease



Rumours or misinformation

Activity 4.1.2 Understanding Stigma

| Duration | 25 minutes |
|-------------------|--------------------------|
| Methodology | Brain storming |
| Material Required | Photograph (given below) |

Note for Facilitator

The facilitator will ask the participants- "How many sticks do you see?" The participants will give different answers - 3 sticks or 4 sticks.



Now the facilitator will explain, Covid-19 is like this picture. It confuses us immensely. But we do not refrain from forming and giving our opinions about it. Stigma around Covid-19 has been prevalent due to fear, lack of scientific knowledge about the disease and spreading of misinformation.

Just like this picture, there are things about Covid-19 that we are unaware of, do not understand or fear. Working on confirmation bias, our brain lets us believe very strongly in the snippets of

information that we believe is true. But it is important to remember that what we believe is true is not always the truth. Think twice before spreading information that has not been backed by scientific evidence. The facilitator will emphasize to probe the participants to get the answers on the skills need to be developed to overcome the challenges.

Key Messages

- · Stigma is based on assumptions and personal opinions
- Stigma must not be confused with facts and it should be from authentic source
- · We should explore scientific knowledge and spread the same to avoid misinformation
- There is also need of learning some skills to deal with such a situation

Note for the facilitator

Tell participants that in the next activity we will learn skills to deal with the problems that aggravates our problem in addressing COVID -19

4.1.3 Activity : Addressing misconception and stigma

| Duration | 25 minutes |
|-------------------|---------------------------|
| Methodology | Brain storming |
| Material Required | 13 PCs. Wooden Toothpicks |

Divide the participants to prepare three groups -A, B and C. Provide the total 4, 4, and 5 wooden toothpicks to groups A, B, and C respectively. The facilitator will ask each group to make four squares independently using the provided toothpicks. After giving the sufficient time to complete the given task, the facilitator will demonstrate the square formation by joining all the toothpicks provided to the groups.

This will look like followings:



Now ask them to brainstorm what they have learnt form the activity. Conclude it with following key message.

Key Messages

- Being out of the box is the key to address the problem.
- Sharing the problem with concerned persons is important to address the problem.
- We should work hard toward ensuring support of community, department as well as of our family to solve the problem.



Module V: Gender sensitivity and Self-Efficacy for enhancing Resilience in FHWs

5.1 Session : Gender

In the society, roles and responsibility are divided amongst men and women. This structural division has created biasness leading to discrimination, stress and demining roles of women and girls. In this chapter we will see how gender-based discrimination has led to low self-skill of women impacting their individual and work life. Moreover, this chapter will also highlight how gender sensitivity toward roles and responsibility and improving self-efficacy will be helpful in progress of human as well as society.

Learning Objectives:

- 1. Participants will be able to understand types of roles and responsibilities that are assigned between men and women
- 2. And how biased division of such roles leads to discrimination and subjugation
- 3. What we should be doing to address biased division at family level, community and work place level.

5.1.1 Activity : Gendered Roles

| Duration | 30 minutes |
|-------------------|----------------------------|
| Methodology | Group Activity |
| Material Required | Activity 5.1 – Handout 5.2 |

Make participants stand on one side of the room. (It is important to have sufficient space in the room while doing this exercise.)

Share the following statement with the participants: "Is it necessary for women and men to have clear division of roles, so the society can function smoothly."



- Now ask participants to choose one category among the five and stand on the made choice.
- Encourage any such participant who is standing alone or hesitating to participate.
- Once participants have made the choice and stand at the chosen category. Facilitator shall fill the following table. (*Table can be drawn on blackboard or on paper. This is helpful for conducting assessment activity successfully*)

| Category | Total participants who performed the activity (This shall be same for all) | Number of students who choose the respective category | Responses shared by participants for choosing the respective category |
|-----------------|---|---|---|
| Completely | | | |
| agree | | | |
| Partially agree | | | |
| Neutral | | | |
| Partially agree | | | |
| Completely | | | |
| disagree | | | |

After filling the chart, facilitator will ask the participants to share their views and reasons for choosing the respective category.

5.1.2 Activity : Who does what?

- Ask participants to write down role / task (minimum four by each participant) they see getting performed during day-to-day life in their locality and society such as gardener, teachers, nurse etc. on the sheets provided
- After they have written request one student to collect all the sheets
- Write all the role / task mentioned by the participants on one chart paper/ black board/ flip chart as shown in the handout-5.2.
- If any important role / task is missed i.e. that has not been mentioned, try to include it / them after discussing with participants.
- Ask the students to indicate out of listed role / task which are the ones that are mainly done by men and which are done by women
- If there is any debate or difference of opinion on any role / task, then indicate it on basis of majority.

| Role / task in society | Male/Boys | Female/ girls |
|------------------------|-----------|---------------|
| Police | | |
| Doctor | | |
| Professor | | |
| Teacher | | |
| Lawyer | | |
| Cook in house | | |
| Nurse | | |
| Judge | | |
| ASHA | | |
| Scientist | | |
| Cook in hotel | | |
| Maid | | |
| Driver | | |
| AWW | | |
| Engineer | | |
| Manager | | |
| Milkman | | |
| Taxi driver | | |
| Conductor | | |
| Businessman | | |

| THE PATHE SOCIETY | MALE/8075 | FEMALE / GRUS |
|-------------------|-----------|---------------|
| POLICE | 1 | |
| DOLTOR | 1 | 11/ |
| PROFESSOR | 1 | |
| TEACHER | | / |
| LAW YER | 1 | |
| COOK IN MOUSE | | - |
| MILITARY OFFICE | K / | |
| JUDGE | 1 | |
| PILOT | 1 | |
| SKIEN TIST | 1 | |
| COOR 34 HOTEL | 1 | |
| MAED | | - |
| DRIVER | 1 | |
| NURSE | | - |
| ENAINEER | 1 | |
| MANAGER | 1 | |
| MILKMAN | 1 | |
| TAXI DREVER | 1 | |
| CONDUCTOR | 1 | |

Chart may look like this after indication of men and women

Facilitator to emphasize: that in case of role/task of cooking, when done at home is indicated for women i.e., reproductive role. While, when done at hotel is indicated for men i.e., productive role.

Discussion after the activity

Facilitator shall ask participants to see the chart and analyze

- Which type of role / task are being done by men?
- Which type of role / task are being done by women?
- How much do they agree that men are doing the type of work that is more productive in nature that provides them respect, wealth, value in the society?
- How much do they agree that women's nature of work is more reproductive, non-monetary and less valuable in the society?
- How much do they agree that this division of work where men are getting more power & respect whereas women are given lesser or no power and respect is creating discrimination, stress, low self-esteem in the society?
- Is it healthy for individual, family, society growth?

Facilitator shall use the examples and explanations for the topic given in the facilitator's section here if needed.

Handout 5.2 Activity on Gendered roles

Make participants stand on one side of the room once again. (It is important to have sufficient space in the room while doing this exercise.)

Share the following statement with the participants: "Is it necessary for women and men to have clear division of roles, so the society can function smoothly."



- Now ask participants to choose one category among the five and stand on the made choice.
- Encourage any such participant who is standing alone or hesitating to participate.
- Once participants have made the choice and stand at the chosen category. Facilitator shall fill the following table. (Table can be drawn on blackboard or on paper. This is helpful for conducting assessment activity successfully)

| Category | Total participants who performed the activity (This shall be same for all) | Number of students who choose the respective category | Responses shared by participants for choosing the respective category |
|---|---|---|---|
| Completely agree | | | |
| Partially agree | | | |
| Neutral | | | |
| Partially agree | | | |
| Completely disagree | | | |
| After filling the chert for literary will only the mention and to chern the invite on a | | | |

After filling the chart, facilitator will ask the participants to share their views and reasons for choosing the respective category.

For Facilitator

Provide these hand-outs to the participants and suggest them to conduct this activity in their family and other colleges in their department. Provide hand-out to them to facilitate the process

- Productive roles are the ones which yield financial gains
- Reproductive roles are the ones which are necessary for human survival emphasis that is the work they are doing at present during COVID-19
- Both reproductive and productive roles are equally valuable and important to fully realize human potential
- Once we value our work it brings motivation, value, satisfaction which improves our selfesteem and self-efficacy to perform even better
- Tell participants that in the next chapter we will be learning how to perform our assigned work by enhancing our self-efficacy.

5.2 Session : Self-Efficacy

Self-efficacy is a belief in one's ability to perform a task that will lead to the desired outcome. One's personal beliefs are highly context specific and influence our effort and attempt. For example, if a person feels more efficacious about his/her speaking skills, he/she is more likely to be seen as a leader and many others will follow his/her lead. Though, high self-efficacy will not result in performance if required knowledge and skills are lacking. Motivation and self-efficacy are enhanced when people perceive that they are performing skilfully or becoming more competent. In this chapter we will learn steps of enhancing self-efficacy to deal with our psycho-social concerns and perform in our life

Learning Objectives:

- 1. Participants will be able to understand self-efficacy and how it is important for them to address their work performance and daily well being
- 2. Participants will be able to understand how to enhance their self-efficacy
- 3. They will learn the steps to address their day-to-day concerns in personal and professional life

5.2.1 Activity : Factors of success in life

Suggest participants to brainstorm on factors that affect one's chances of success.

| Duration | 30 minutes |
|-------------------|----------------------|
| Methodology | Group Exercise |
| Material Required | Handout Activity 5.2 |

Some of the suggestion could be education, money, connection, physical power, family background etc.

Note for the facilitator

- Once brainstorming exercise is over start probing one by one
- Do they know people who are highly qualified but not successful, or with sound family background yet not that successful? If yes, there might be another key to success. There are several factors that matter and one of them is called self-efficacy. Explain the meaning of self-efficacy using handout 5.2

Handout 5.2 high self-efficacy vs low self-efficacy



The above illustration shows the characteristics of people who is high on self-efficacy versus an who is low on self-efficacy. In one picture, you will see one who is confident believes in herself and can make efforts to achieve goal. In the other picture, you will see who feels sad and is not sure of her capabilities and therefore she does not make efforts to achieve her goals. Person with stronger self-efficacy perform better in area of performance e.g. academics, perform than the people with weaker levels of self-efficacy.

Summarize the session with highlighting how self-efficacy can improve their work performance as FHW. Tell the participants that in the next session we will be learning how to improve self-efficacy.

Activity 5.2.2 - Process of improving self-efficacy

In this session we will introduce the steps that can be followed to improve self-efficacy. The participants will learn through case studies, exercises and demonstrations.

| Duration | 1:40 minutes |
|-------------------|--|
| Methodology | Group Activity |
| Material Required | Chart paper, tape, pens, board, and handout of stories |

Step-1: Performance experiences

Narrate Meenakshi's story given below in the training hall

Meenakshi is 18 years old and has been chosen as a new FHW to support community in addressing COVID -19. She has previously been a scouts' leader until class 8 at her school where she was responsible to lead the group. Parents and teachers were praising her and she was awarded a gold medal by the principal as well. However, after class 12 her family members and community leaders started commenting on her outdoor activities and she was discouraged from participating in social activities. Now when she has been selected, she is finding it difficult to mobilize community to perform her work.

- Ask the participants to discuss why Meenakshi was able to perform as scout leader but now finding difficult to perform as FHW?
- What suggestion will you provide to Meenakshi as a friend and well-wishers to improve her outreach in the community?



Highlight that our self-efficacy improves if we focus on our past successful experiences. This will motivate an individual in better performance.

Close the discussion by announcing that now we will see how we can learn from others' experiences and how it can have positive impact on our self-efficacy.



Step-2 : Vicarious performances (learning from others' experiences)

Read out Rohini's story to the participants or suggest one of the participants to read the story.

Rohini is sixteen years old and lives with her younger sister and her parents. Rohini's parents announced to her that they would be marrying her off soon to a boy in the village. Rohini was disappointed but she was not able to express herself in the beginning.

Rohini remembers her distance sister Anita, who was also sixteen years old and was very well appreciated in her village since she had convinced her parents to delay her marriage.

Suggest participants to brainstorm on following questions one by one

- 1. Do you think Anita can be a role model for Rohini?
- 2. Can you remember any task, which you were able to do by getting influenced by your peers?
- 3. How did you feel after completing the task? What was your learning?



- Seeing people similar to oneself succeed in their work helps in motivating us as well to perform better, it increases our self-efficacy.
- However, the opposite is also true; if a person sees someone similar to them fail in a task, then this can lower the self-efficacy of the observer.
- It is important to be aware of this so you can use the positive performances of your peers to motivate

Share with them that in the next session we will be learning how our environment affects our level of self-efficacy.

Step-3: Verbal/social persuasion

Ask participants to respond and write all answers on the chart paper

- a) How they perform if supervisor/ officer is casual/ not interested in the work
- b) How they perform if supervisor/ officer is a good advisor and motivates them
- c) How they perform if supervisor/ officer is tough, hard task makers and critical to their work
- d) What was your feeling while working in the group, positive, negative, depressed or winner?
- e) What did you learn from this?

Write all the responses of the participants on a chart where everyone can see them.

Conclude the session with following message

Key Messages

Verbal or social persuasion affects one's perception of self-efficacy. Verbal or social persuasion can provide a temporary boost in perceived ability. People who are persuaded verbally that they possess the capabilities to master an activity are likely to mobilize greater effort and sustain it. This increases their chances of success.

Mentors' high self-efficacy tend to explore more alternative methods and instructions, seek improved teaching methods and experiment more extensively with instructional material.

Therefore, it is important to see who your mentor is. A positive leader will help in improving your self-efficacy

At the end of this exercise mention that in the next exercise we will learn how our physical and emotional status can affect our self-efficacy.

Step 4: Physical and Emotional status

Labels interactive game

Form the large group of participants, request one participants to volunteer and call her out to a silent spot. Stick following statement on her back cloth that she is not able to see

"Poor lady going house to house"

Ask her to move into the large group.

The other participants read the label stuck behind her and have to react to them as the society members would do! Ask other volunteers to go through the same experience.

Once each of the participants with the labels at their backs have walked through the large group, ask them the following questions



- 1. Ask the participants if they could draw any connections between this exercise and their personal experiences?
- 2. How did it feel to be labelled?
- 3. Was there a feeling of stress, anxiety, low mood?
- 4. Did you feel your confidence and belief in yourself were affected negatively?
- 5. Did you feel that you will be able to perform with these kinds of feelings?

- Experiences of negative thoughts and fears about an individual can lower their self-efficacy perceptions. In order to address everyday labels, it is required that we develop a sound awareness that these labels are a result of power dynamics within our society.
- In order to raise one's self-efficacy it is extremely important to maintain a physical and emotional well-being and, when possible, reduce negative emotional state.
- Surrounding oneself with people who can provide support is one way

| Hang-Out: 5.2- STEPS OF SELF-EFFICAY | | |
|--------------------------------------|---|--|
| Step | Description | |
| Performance experiences | When a person does well and succeeds in a task, he/she usually believes that they will succeed again at any given task. | |
| Vicarious performances | If a person relates to someone and they succeed in a task, then one usually believes that they can succeed too. | |
| Verbal/social persuasion | Influential people or mentors in a person's life can influence a person's self-efficacy. Negative feedback can reduce the self-efficacy of a person. | |
| Physical and Emotional status | If person is in anxiety, fear, doubt it reduces self-efficacy. If the person is in an environment where all their concerns are getting addressed, it improves self-efficacy | |

Provide hand-out 5.2 to participants in their tool kit to refer the same in future

Module VI: Annexures The purpose of this module is to support facilitator in conducting assessment of the leanings while applying participatory strategies. This will have three levels

- Pre-Assessment Questionnaire for a comprehensive base line assessment
- Day one and day two format for assessing level of comprehension of contents and understanding of participants
- Post assessment format for measuring level of change

These formats will be filled by the participants during the session while ensuring privacy and confidentiality.

6.1 Annexure : Assessment of Day One Training

Use the question given below to assess learning of participants of day one. It is mentioned as following

| S.No | Name of the session | Level of learning (1 very less 5 is extremely beneficial) | | | |
|------|---|---|---|---|---|
| | | Strongly Agree Agree Disagree Stro Disa | | | |
| | I learnt need of applying out of box strategy while addressing unique/ especial situation | 1 | 2 | 3 | 4 |
| | Training helped in realising importance of my work during COVID | 1 | 2 | 3 | 4 |
| | Training helped in realising importance of stress management to achieve better outcomes | 1 | 2 | 3 | 4 |
| | I learnt what to do and from whom take support in addressing my problems | 1 | 2 | 3 | 4 |

On completion of assessment thanks, them for their participation. Suggest them that on day two, we will be learning what to do and how to address psycho-social concerns to perform better in our individual and work life.

6.2 Annexure : Assessment of Day Two Training

Ask for their feedback on learnings on today's topic. It is mentioned as following

| S.No | Name of the session | Level of learning (1 very less 5 is extremely beneficial) | | | |
|------|---|---|---|---|---|
| | | Strongly Agree Agree Disagree Stron | | | |
| | I know what is stigma and how to address it | 1 | 2 | 3 | 4 |
| | I learnt the need of taking support of family, department as well as community to deal with situation like COVID-19 | 1 | 2 | 3 | 4 |



6.3 Annexure : Pre and Post Assessment Questionnaire

Assessment Format for Participants

The purpose of this assessment is to measure level of knowledge, attitude and skill the capacity building process has inculcated with the female health workers to address psycho-social concerns to deal with the concerns of Covid-19. The format / questionnaire used here is based on A.Bandura's self-efficacy tools and Promundo- H, Gender Equitable Male scale tool. The information provide by you will be useful to develop material and methods to address psychosocial problem, self confidence that is needed to address pandemic like situation with the help of Female Health Workers. I will ask you some questions. There are no wrong answers and at any stage if you feel not to respond any particular question you are fee to do so. If you have any questions or need any clarifications, please feel free to ask. The information you provide will be kept confidential so please feel free and be truthful in your responses.

| Date of the Interview | |
|---|--|
| Respondent Id | |
| State | |
| District | |
| Village/Mohalla/Locality/HCL Center Address | |
| Beginning Time | |
| Ending Time | |
| Name of the investigator | |
| Name of the supervisor | |

TO BE FILLED BY THE INTERVIEWER:

SECTION – 1: Background Characteristics

| Q. No. | Questions | Response categories | Skip |
|-----------|---|---|------|
| 1 | What is your current age? (Write in completed years) | Age | |
| 2 | What is your educational status | Mention complete class | |
| 3 | What is your economic status | a) APL b) BPL c) Antodya Card Holders d) Not Known | |

SECTION – 2: Self-Efficacy: Measuring Perceived Capability

Thank you for responding about your personal details. Now, I will read some statements. Just think about the situation and answer how would you respond to that situation/ condition. It's all about your perception of addressing such condition not actual performance. Please let me know the extent to which you agree with the following statements?

| S. No. | Statement | Strongly Agree | Agree | Disagree | Strongly Disagree | | |
|-----------|---|-------------------|-------|----------|----------------------|--|--|
| | Self-efficacy index | | | | | | |
| 1 | I can always manage to solve difficult problems if I try hard enough | 1 | 2 | 3 | 4 | | |
| 2 | If someone oppose/ disregard me, I can find the means and ways to get what I want | 1 | 2 | 3 | 4 | | |
| 3 | With my status/ situation it is easy for me to stick to my aims and accomplish my goals | 1 | 2 | 3 | 4 | | |
| 4 | I am confident that I could deal efficiently even if events/ situation is unexpected | 1 | 2 | 3 | 4 | | |
| 5 | I feel I am resourceful and know how to handle unforeseen situations | 1 | 2 | 3 | 4 | | |
| 6 | I can solve most problems if I invest the necessary efforts | 1 | 2 | 3 | 4 | | |



| 7 | I can remain calm when facing difficulties because I can rely on my coping/ problem solving abilities / skill | 1 | 2 | 3 | 4 |
|----|---|--------------|-----|---|---|
| 8 | When I am confronted with a problem, I can usually find several solutions | 1 | 2 | 3 | 4 |
| 9 | If I am in trouble, I can usually think of a solution | 1 | 2 | 3 | 4 |
| 10 | I can usually handle whatever comes my way | 1 | 2 | 3 | 4 |
| | Self-Esteem a | nd Agency In | dex | | |
| 11 | I do lots of important things | 1 | 2 | 3 | 4 |
| 12 | Overall, I have a lot to be proud of myself- my work | 1 | 2 | 3 | 4 |
| 13 | I can do things as well as most people | 1 | 2 | 3 | 4 |
| 14 | Other people think I am good person | 1 | 2 | 3 | 4 |
| 16 | I have lots of friends | 1 | 2 | 3 | 4 |
| 17 | I make friends easily | 1 | 2 | 3 | 4 |
| 18 | Other FHW want me to be my friend | 1 | 2 | 3 | 4 |
| 27 | If I try hard, I can improve my situation in life and at work place | 1 | 2 | 3 | 4 |
| 31 | I have no choice/ voice at my home and work place but obey the command / order | 1 | 2 | 3 | 4 |

Section 3: GEM Scale- Gender attitudes, Roles and Responsibility

Thank you for responding to the above statements. Now, I will read some statements to talk about attitudes towards men and women. Please let me know the extent to which you agree with the following statements? You may select not responding some / any of the statement if you wish so.

| S. No. | Statement | Strongly Agree | Agree | Disagree | Strongly Disagree |
|-----------|--|-------------------|-------|----------|----------------------|
| 1 | A woman should always obey the instruction of her husband | 1 | 2 | 3 | 4 |
| 2 | Women should keep their parents/elders happy even if they have to leave their desire/ interest | 1 | 2 | 3 | 4 |
| 3 | It is unsafe for a girl/ woman to go out of | 1 | 2 | 3 | 4 |

| | house even for her duty / job related responsibility | | | | |
|----|---|---|---|---|---|
| 4 | A woman's most important role is to take care of her home and cook for her family | 1 | 2 | 3 | 4 |
| 5 | A women should take domestic responsibilities whereas men should go out for earning livelihood | 1 | 2 | 3 | 4 |
| 6 | Boys are naturally better than girls in studies | 1 | 2 | 3 | 4 |
| 7 | It is more important to educate boys than to educate girls Men should share the work around the | | | | |
| | house with women such as cleaning and cooking | | | | |
| 8 | Investing in girls' education is not financially beneficial | 1 | 2 | 3 | 4 |
| 9 | Girls should not go to the areas where men and boys usually gather | 1 | 2 | 3 | 4 |
| 10 | A man should only have the final say in all family matters | 1 | 2 | 3 | 4 |
| 11 | It is not safe to send girls to school due to violence | 1 | 2 | 3 | 4 |
| 12 | Women/Girls should tolerate violence in order to safeguard her reputation in the house/community | 1 | 2 | 3 | 4 |

Section 4: Access and Control

Thank you for responding about your opinion of gender equal norms. Now, I will read some statements related to access and control of various provisions that has been established during Covid -19. The provisions are basically to support FHWs in better performance of their responsibilities. Please let me know the extent to which you agree with the following statements?

| S. No. | Statement | Strongly Agree | Agree | Disagree | Strongly Disagree |
|-----------|---|-------------------|-------|----------|----------------------|
| 4 | I know how mental stress; anxiety can impact my work as well as life | 1 | 2 | 3 | 4 |
| 2 | I know how to address my mental stress caused by some situation/ condition | 1 | 2 | 3 | 4 |
| 3 | During COVID-19 my personal and professional life got impacted due to biased comment and behavior of people | 1 | 2 | 3 | 4 |



| 4 | I know how to address bias comment and behavior of people | | |
|---|--|--|--|
| 5 | I am aware about the provisions established by the government to support our psycho- social concerns | | |

6.4 Annexure : References

- 1. COVID-19 RESPONSE AND CONTAINMENT MEASURES TRAINING OF ANM, ASHA, AWW Ministry of Health & Family Welfare, Government of India
- 2. Doing What Matters in Times of Stress: An Illustrated Guide World Health Organisation (WHO)
- 3. Psychological first aid: Guide for field workers In collaboration of WHO, WARTRAUMA FOUNDATION, and World Vision
- 4. Caring for Health Care Warriors-Mental Health Support During COVID-19 NIMHANS, Bangalore in collaboration of Government of Karnataka
- 5. PSYCHOSOCIAL CARE FOR FRONTLINE HEALTH CARE WORKERS: An Information Manual In collaboration of NIMHANS, Bangalore and UNICEF
- 6. A GUIDE TO MENTAL HEALTH FOR SOCIAL WORKERS National Mental Health Program
- 7. LIVING LIFE POSITIVELYA Facilitator's Manual for Conducting Workshops in the Domain of Life-Skills Education Stress Management And Sensitization Program for Suicide Prevention - In collaboration with Directorate General of Health Services, MOHFW and The National Institute of Health and Family Welfare New Delhi Supported by World Health Organization, Country Office for India
- 8. Mental Health in the times of COVID-19 Pandemic Guidance for General Medical and Specialised Mental Health Care Settings NIMHANS Bangalore
- 9. Minding our minds during the COVID-19 NIMHANS Bangalore
- 10. Psychological First Aid For All Supporting People in the Aftermath of Crisis Events -World Health Organisation (WHO)
- 11. Resource Material: Online Training of Psychologists for providing brief and basic telephonic psychological support in the context of COVID19 Department of Clinical Psychology National Institute of Mental Health and Neuro Sciences, Bangalore
- 12. PSYCHOSOCIAL ISSUES AMONG MIGRANTS DURING COVID-19: Understanding the issues of the migrant population- COVID-19
- 13. MANUAL OF MENTAL HEALTH FOR SOCIAL WORKERS: National Mental Health Program