Providing Mental Health and Psycho-social Support to School Teachers and Students in Punjab in the COVID-19 situation:

- a Module for Master Trainers

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INTRODUCTION TO THE MODULE

The overall goal of this Mental Health & Psycho-social Support (MH&PSS) Module is to build the capacity of selected, Assistant Educational Officers (AEOs) as Master Trainers (MTs) from 36 districts of Punjab to conduct MH&PSS awareness trainings for field level staff at the district level.

Specifically, the modules aims at providing a basic level of awareness and skills to the MTs enabling them to:

- Engage with communities affected by the COVID-19 crisis in Punjab, and provide a basic awareness of mental health and psychosocial issues
- Raise awareness amongst school officials, teachers, communities and parents in reducing the stigma around mental health related issues; and
- Provide basic support to teachers and students in effectively coping with stress, anxiety during the COVID-19 impacting school closure and disrupted learning amongst children.

The content of the module is based on the basic principles outlined by the IASC MHPSS (Action Sheet 7.1) which outlines the following actions:

- Make formal and non-formal education more supportive and relevant
- Prepare and encourage educators to support learner’s psychosocial well-being
- Strengthen the capacity of the education system to support learners experiencing psychosocial and mental health difficulties

It is further strengthened by the efforts of The National and Provincial Disaster Management Authorities, Disaster Risk Reduction Policies, UN agencies and numerous NGOs working in Pakistan, and around the world, with additional needs based on the unique features of the current COVID 19 situation.

The module is divided into two parts.

**Part 1** addresses the basics of MH&PSS, including definitions of mental health issues, stigma, the psychosocial impact of crises on adults and communities, and basic coping strategies.

**Part 2** focuses on the stigma attached to mental health concerns among children, the impact of COVID-19 on children, ways of informally assessing signs and symptoms for stress and anxiety among children (boys and girls) and outlines specific skills and strategies that teachers can use and in turn share with caregivers and families to reduce students’ stress and anxiety and to make the transition back to school easier once the pandemic comes to a halt.

The module includes a set of activities in each, with a suggested time and method, and all the material to be discussed and presented by the Master Trainers and the teachers.
PART 1: MENTAL HEALTH, STRESS AND COPING

Learning outcomes:

By the end of the section, participants will have acquired:

- a basic understanding of mental health, wellbeing and MH&PSS
- an awareness of the stigma around mental health and its impact on support seeking
- a basic understanding of stress and trauma
- an awareness of the impact of the COVID 19 situation on individuals, communities and vulnerable groups especially children and adolescents (both boys and girls both) and special children
- A basic understanding of when to refer someone to a mental health professional
- An improved understanding of coping and stress management.

Activity 1.1 - Welcome and Introductions

Time: 10 minutes

Method:

1. Welcome the participants to the session and thank them for their time.
2. Starting with yourself, have everyone introduce themselves by saying their names and where they are located (5 minutes).
3. Briefly (2 minutes) go over the norms of the workshop (outlined below) and ask the participants if they would like to add anything. If any suggestion is made, ask the participants if they all agree to it, and if so, add them to the list and read it out once.
4. Show the participants how to use the Raise Hand feature on Zoom and let them know you may mute them for parts of the workshop and unmute them when they raise their hands.

Workshop norms

- Listen to and respect each other’s opinions - even if you disagree
- Speak one at a time (refer to hand raising feature on Zoom)
- Ask questions for clarifications
- Try and participate as much as possible
- Put phones on silent/do not take calls during the session (except in emergencies
- Maintain confidentiality of any personal/sensitive information shared
- Turn video on so everyone can be seen
5. Briefly (3 minutes) present the objectives of the workshop.

Workshop objectives

By the end of today you will have acquired:

- a basic understanding of mental health, wellbeing and psychosocial support
- a basic understanding of stress and trauma
- an awareness of the impact of the COVID 19 situation on individuals, communities and vulnerable groups
- a basic awareness of when to refer someone to mental health professional
- an improved understanding of coping and stress management

Activity 1.2 - Understanding mental health in the COVID 19 crisis

Topics covered:

- Definition of mental health and wellbeing
- Key features of the COVID-19 situation affecting mental health
- Impact of stigma on seeking mental health support
- Definition of MH&PSS

Time: 25 minutes

Method:

1. Ask participants what they understand by mental health; and take 3 to 4 responses (3 minutes).
2. Provide a brief definition and explanation of mental and health and wellbeing, as outlined below (3 minutes):

What is mental health and wellbeing?

Mental health is a positive concept related to the social and emotional wellbeing of individuals and communities. It is important to note that not having a serious mental illness does not mean we are mentally healthy and well. Having good mental health and wellbeing means we:

- feel worthy and look after ourselves
are able to enjoy life most of the time
- are able to cope with stress and function even in difficult times
- are aware of and can manage our emotions (anger/fear/sadness)
- are able to set goals for ourselves and reach many of them
- Are able to build and maintain relationships with others
- Have an overall positive outlook on life

3. Ask the group why it is important to talk about mental health and psychosocial support in a crisis and take 2 - 3 responses (2 minutes) and briefly (2 minutes) present the following information below:

**Crises and mental Health**

*A crisis* is an event is a major event outside the range of ordinary everyday experience that is extremely threatening to those involved, and gives rise to feelings of powerlessness, horror or terror, e.g. deaths, accidents, disasters, serious illness, pandemics, etc.

**Crises and emergency situation affect mental health because of:**

- The shock and trauma caused by it
- Severe injury/illness, suffering and death
- Collective damage and loss (livelihoods, property, lives)
- Sense of insecurity, fear and anxiety about the future
- Disruption in daily life – life comes to a standstill
- Increased abuse and violence at home
- Rumours and misinformation
- Lack of and limited awareness on COVID-19 prevention as well as well-being amongst communities
- Long recovery process

4. Ask them how the COVID-19 crisis is different, take 3 or 4 responses (2 minutes) and then briefly present the information below (3 - 4 minutes):

**Special features of the COVID-19 crisis that affect mental health**

- Highly contagious and spreading fast
- Mixed messages, misinformation, rumours and confusion
- Prolonged situation
- Constant news media coverage
- Lockdowns and social distancing
- Unpredictability/ fear of the unknown
- No definite signs or hope of an end yet
- Disruption in basic individual/community-religious ways of coping
- Stigma of disease
- Global crisis – fear for Pakistan

2. Ask the group (3 minutes) how a person with any emotional or mental health issue seen by society in general? For example, what kind of words come to mind or are used by people around them, or opinions and behaviours that are seen in people when it comes to mental health? Ensure that the participants are keeping in mind the definition of mental health and wellbeing discussed above, and are not focussing on people with severe mental health issues.

3. Briefly explain that stigma and the fear of being labelled as mad or abnormal can stop people from seeking support when needed.

4. Let the group know that around the world, there now exist MH&PSS approaches to help individuals and communities recover (2 - 3 minutes).

The COVID 19 crisis and MH&PSS

- Mental Health and Psycho-social Support (MHPSS) is an approach to improve the wellbeing of a community and reduce stress;
- It combines many different kinds of activities, some of which promote wellbeing and good mental health, others that help prevent stress and mental health issues in individuals as well as the community, and others that focus on improving or treating them;
- They therefore combine social (including educational and cultural) and psychological services;
- These can be provided by teachers, health workers, community workers, mental health professionals or any community members trained on modules of MHPSS identification and interventions.

Activity 1.3 - Understanding Stress and other key mental health issues

Topics covered:
- Stress
- Common mental health conditions: Depression, Anxiety and Trauma

Time: 25 minutes

Method
1. Ask the group what they understand by the world stress. Take 3 - 4 responses (2 minutes) and briefly present the definition and features below (5 minutes):

**Understanding stress**

- Stress can be defined as the body's reaction to any demand or change in the social and physical environment.
- Usually associated with negative life changes, but could also be a reaction to positive changes, such as a new job, a move to another city, etc.
- Changes are stressful because they require us to adjust and to adapt
- It is normal and universal
- The experience of stress varies person to person.
- While stress is normal and we can usually adapt to it, there are times when our bodies and minds are unable to cope so easily: when it lasts too long, occurs too often, or is too severe, it can make us feel out of control and have a negative impact
- Stress can be Acute (severe but at one time) or Chronic (prolonged, could be low level, moderate or severe)

1. Ask the group what they know about the signs and symptoms of stress.
2. Take 4 – 5 responses (3 minutes) and briefly present the physical, psychological and behavioural symptoms of stress below (3 minutes):

**Signs and symptoms of stress**

- Frequent aches (head, shoulder, back, neck, etc)
- anxious habits (teeth grinding, stuttering, nail biting, etc)
- Frequent mood changes, overreacting
- excessive worrying
- panic symptoms (rapid pulse, palpitations, sweaty hands, dry mouth)
- sadness hopelessness, frequent crying
- Increased irritability, anger and aggression fatigue, weakness and dizziness
- blood pressure (high or low)
- frequent sweating
- low immunity: frequent colds/infections; sores, allergies
- digestion issues: heart burn, nausea, constipation, diarrhea
- breathing problems
- skin issues;
- lack of motivation
- changes in appetite/eating and sleep
• forgetfulness, disorganisation, confusion
• difficulty focussing, concentrating, making decisions
• low self-esteem
• self-neglect
• sexual issues
• increased number of minor accidents
• reduced work efficiency or productivity
• relationship issues, social withdrawal, conflict
• frequent use substances – medications, drugs, etc.
• weight gain or loss without dieting

3. Point out that in their most severe form, some of these stress symptoms can take the shape of some common mental health issues such as depression and anxiety. For example sadness and hopelessness can turn into depression, and worry and overthinking can turn into anxiety.

4. Ask the participants what understand from the word Depression, take 2 or 3 responses (2 minutes) and briefly present its definition and key features (2 minutes).

What is Depression?

We often use the word Depression to talk about a low mood or sadness that we experience every now and then. Those are indeed features if Depression, but in reality, Depression is a mood disorder in which symptoms (such as: constant sadness and a low mood, unexplained fatigue, negative thinking, hopelessness, irritability, loss of interest, feelings of self and life being worthless) are more severe and continue over a period of time (often more than 3 or 4 weeks), affecting how you feel, think, behave and sometimes even handle daily functions, such as sleeping, eating, working, parenting, etc. Symptoms can be very severe and can cause serious impairment.

5. Repeat for Anxiety (4 minutes)

What is Anxiety?

Experiencing some level of anxiety is normal and may even help as function, and be motivated to learn and perform well. But when it is an excessive and irrational fear of and worry over everyday situations, it can be very difficult to cope with. When anxiety interferes with daily activities, it may be an anxiety disorder. It involves extreme fear or worry, constant or frequent nervousness, restlessness, tension, overthinking, panic, physical symptoms (increased heart rate, breathing rapidly sweating, trembling, stomach issues), avoidance because of fear, etc,
6. Explain that sometimes the body and mind can also go into what we call trauma, which is an extreme form of stress. Ask the participants what they understand by trauma (2 minutes and briefly present the following: (2 minutes).

**What is trauma?**

- An event or a prolonged situation that is shocking, dangerous and makes us feel out of control
- Often involves actual or a real fear of injury or death (self or loved ones)
- May also be caused by an incident/situation that is emotionally too much to take, such as prolonged isolation, intense humiliation, etc.
- Examples: serious accidents, disasters, war, armed conflict, armed robbery, epidemics/pandemics, shootings, sexual abuse/rape, physical violence (including witnessing violence), traumatic loss, etc.

Reactions to trauma vary widely, with people experiencing a wide range of physical and emotional reactions such as shock, denial, confusion, anger, mood swings, sleeping issues/nightmares, flashbacks, anxiety and depressive symptoms, fears, etc. All these responses are NORMAL reactions to ABNORMAL events.

**Activity 1.4 - Psychosocial impact of the COVID-19 crisis**

**Topics covered:**

- Identification of vulnerable groups
- Impact on COVID-19 in general and specifically on women, men, families and communities

**Time:** 30 minutes

**Method:**

1. Ask participants what kind of emotional reactions and behaviours the COVID-19 crisis has contributed to or caused in people. Take 3 - 4 responses (3 - 4 minutes) and present the information below (4 - 5 minutes):

**Psychosocial impact of the COVID 19 situation**

- Fear, stress, restlessness, anxiety (sometimes severe)
- Isolation and loneliness due to social distancing
- Loss - missing people, old life, routine, support, outdoors, etc.
- Changes in sleep or eating patterns.
- Difficulty sleeping
- Irritability, frustration and anger
- Depressive symptoms, helplessness and hopelessness
- Worsening of existing health/mental health problems
- Increased use of substances and tobacco
- Grief due to loss of lives

2. Ask the group what groups they think are particularly vulnerable to stress in the current situation, and briefly (5 minutes), present the following:

   **Groups most vulnerable to psychosocial impact**

   - Older people and people with underlying health conditions
   - Children and young people (boys and girls both)
   - Frontline workers such as health care providers and first responders,
   - Essential workers who work in the food industry
   - People who have existing mental health conditions.
   - Survivors of abuse including women, girls, boys, special children, adults and old aged people
   - People caring for family members or loved ones
   - People who use substances
   - People who have lost their jobs, had their work hours reduced, or had other major changes to their employment
   - People who have disabilities or developmental delay
   - People who are socially isolated from others, including people who live alone
   - Minority groups who may face discrimination
   - People who do not have access to information in their primary language
   - Socio-economically disadvantaged groups (who live in crowded situations, etc)

3. Make the point that while all people have been affected in some way or another by the COVID-19 situation, some effects are more common in certain groups compared to others.

4. Ask participants to think of specific effects the crisis has had on women and take 2 – 3 responses (3 minutes) and present the following briefly (3 - 5 minutes):

   **Effects on women**

   Women in particular may face: stress and fatigue because of increased burden of household work and caretaking (children, husband, in-laws, the elderly and sick) increased educational responsibilities; isolation due to disruption of regular community/family support, and social interactions and breaks from household
routine; stress of managing budget and expenditure; juggling job plus increased household burden; financial anxiety if female headed household; conflict in relationships, increased abuse and violence; safety system limited; and health issues (including limited care in pregnancy and child birth)

5. Repeat for men, and present the following:

**Effect on men**

Men in particular may face: financial stress as primary earner; sense of inadequacy as household head; social/outdoor life limited; anxiety because of increased exposure (outdoor chores, high risk work, etc); substance abuse, increased smoking; frustration, anger, conflict and aggression; stress-related health issues; and risk taking behaviour

6. Ask the group what impact COVID-19 has had on families and communities, take 3 – 4 responses (2 – 4 minutes) and briefly (3 minutes) present the following:

**Effect on the family and community**

Family: increased frustration and irritability; conflict; increased violence or abuse; relationship breakdown; distance/physical bonds disrupted, etc.

- Community: Conflicts and lack of trust, insecurity and loss of hope; absence of respected leadership; frustration with people’s behaviour; loss of networks and support systems; and pre-existing: e.g. poverty and discrimination of already vulnerable groups

7. Briefly (1 - 2 minute) present signs indicating that professional help may be needed and provide free helpline numbers.

**When to refer**

Usually, feelings of anxiety, numbness, confusion, guilt, and despair following a disaster or traumatic event will start to fade within a relatively short time. However, if your stress reaction is so intense and persistent that it’s getting in the way of your ability to function, you may need help from a mental health professional, Signs of this include:

- Symptoms of depression, anxiety or trauma continue for over a month/get worse
- Day to day functioning disturbed
● Severely disturbed sleep
● Increasingly withdrawn from people
● Experiencing extreme uncontrollable rage and are, or fear hurting others
● Sense of reality disturbed
● Severe self-neglect
● Self-harm or suicidal thoughts or attempts

**Helplines numbers to call:**
● Punjab Mental Health Helpline: 0304-111-0063
● Rozan Counselling Helpline: 0304-111-1741

**Activity 1.5 - Coping with Stress and Anxiety**

**Topics:**
● Harmful coping strategies
● Healthy strategies to cope with stress
● Visual meditation for relaxation

**Time:** 30 minutes

**Method:**

1. Ask the participants what kind of strategies people use to reduce stress that may provide temporary relief but are harmful in the long run.
2. Take 2 – 3 responses (2 minutes), and briefly present the following information (2 minutes):

**Harmful coping strategies**

● Social withdrawal/over socialising
● Overeating/insufficient eating
● Overspending on shopping
● Overworking/overexerting
● Over exercising
● Self-neglect
• Risk taking
• Excessive use of social media
• Substance abuse
• Avoidance/denial
• Excessive sleeping
• Aggression
• Blaming others/self-blame
• Self-harm

3. Ask participants to identify a few specific strategies (activities, habits, attitudes) than can help people deal with the stress, anxiety and low mood they are experiencing during this crisis, and take 4 or 5 responses (5 minutes).

4. Ask them to call out their responses (not repeating what has already been identified) and take, and present the following (6 - 8 minutes):

**Healthy strategies to cope with stress**

• Distract yourself with activities that keep your mind occupied, such as TV, reading, cooking, playing with kids, etc., so you’re not dedicating all your energy and attention to the stressful situation

• Re-establish routine as much as you can. Try and structure your day with regular times for eating, sleeping, spending time with family, and relaxing. Make a schedule, plan things that you can do even in a difficult situation, try and complete some tasks a day.

• Allow time for your feelings – for example by talking to a family member or friends who can listen and support you, by letting yourself cry at times to ease pent up emotions, to write about them

• Try and take out time for positive thoughts and actions – for example, happy memories, fantasising, doing something that gives you a sense of achievement, purpose or learning, doing something new, making time for hobbies, becoming involved in volunteering for a cause, etc.

• If things are getting too much to take, take a little break from them if you can, take a nap, rest, distract, etc.

• Find ways that relax your mind and body, such as meditation, prayer, yoga, spending time around nature, deep breathing, etc.
• Put major life decisions on hold. Making big life decisions about home, work, or family while under stress will make it worse.

• Limit media exposure. Excessive exposure to images of a disturbing event can overload your brain, especially in the evening or at night. If needed, even take a complete break from the news for a while until your stress eases up.

• Remember that any feelings you are feeling are normal reactions to the abnormal events you are experiencing, and it is your right to take care of yourself.

• Give yourself time to heal and to mourn any losses you’ve experienced. Be patient with yourself and don’t try to hurry recovery.

• Connect with others, people at home or friends/family (safely) and participate in community events and rituals in any way you can without putting yourself or others at risk. Connection can be for support, for companionship or for fun.

• Get physical exercise

• Get creative – art, music, making something with your hands

• Try and ensure you are eating and sleeping well

5. Let the participants know that you will now demonstrate a brief relaxation exercise that can help in times of stress and anxiety.

6. Demonstrate a relaxation exercise through a visual meditation by gently reading out the script below (7 - 8 minutes):

**Script for visual meditation**

• Find a relaxed position, get comfortable and close your eyes.

• First, relax your body. Starting at the top of your head, allow a feeling of relaxation to begin. Feel the relaxation grow with each breath you take.

• Inhale... Relax your head.... exhale.... Let the tension go away even more....

• Breathe in relaxation.... Feeling your face and ears relax... exhale all the tension.

• Inhale.... Feeling your neck and shoulders relaxing, now your arms and hands...chest and upper back, now your back and stomach... breathe out, and as you inhale, relax your legs now all the way down to your feet.

• Continue to breathe in relaxation, and breathe out tension. Now you are feeling deeply relaxed. Deeply relaxed and calm...

• Begin to create a picture in your mind. Imagine that you are floating on a soft, fluffy white cloud.
Feel the surface beneath you becoming softer... more cloud-like.... soon you are floating on just the cloud.

Let it rise a little further, see the walls and ceiling around you disappearing as you float into the sky on the cloud.

Feel the cloud beneath you. It is soft but supportive. Feel the cloud supporting your whole body.

Notice each place where your body is touching the cloud. Feel how soft and comfortable the cloud is. It is almost like floating in the air.

Notice how the cloud feels. It might be a little bit cool, and moist, like fog. Your body is warm, very warm and heavy, and sinking into the cloud. It is a wonderful feeling. The temperature if perfect.

Start to create an image in your mind of where you are. You might be flying just barely above the ground. You can choose to float wherever you like. The sky above you can be any way you like...sunny and blue or grey.

There are some other clouds in the sky, floating gently. See them lazily passing by, far above.

Your cloud can float wherever you choose. If you enjoy being high up, you can let your cloud rise into the sky. It is very safe. Very calming. Very relaxing. You are so relaxed. Floating on a cloud. Supported gently but firmly by your cloud. Surrounded by the cloud’s protective embrace.

See the sights around you as you are floating on a cloud. Imagine the green grass below, gently blowing in the wind. The grass recedes further away as you rise into the sky. From here, the grass looks like a soft carpet, the wind creating gentle waves in the grass as if it were water.

What else do you see? Perhaps some trees, their leaves whispering in the gentle breeze. You can gaze down on housetops, roads, hills.

From this amazing viewpoint, you can see around you 360 degrees. The horizon stretches out in a complete circle around you.

Notice in the distance how the hills appear almost blue.... slightly hazy.

How does it feel to be floating on a cloud? Does it sway gently, like a boat on almost-smooth water? Does it drift in the breeze? Can you feel the movement as you gently float on the cloud? You feel so comfortable.... So relaxed.... Floating on a cloud....

(pause)

Continue floating on a cloud, enjoying the sights around you. Up here, the air is so clean.
• Look up at the beautiful sky. The clouds that were high above you are much closer now. Some are so close you can almost touch them. Not quite.

• Continue floating on a cloud, drifting, down low so you can almost touch the trees or higher if you wish.

• Relax and enjoy this beautiful scene, floating on a cloud. You are so close now to another cloud above you, that if you reach out, you can touch it. What would it feel like?

• You can pass through other clouds. Feel the mist on your cheeks as you rise through the clouds.

• You can look down on the cloud you just passed, and see the white, fluffy peaks and valleys of this cloud below. It looks like perfect snow. Looking around below you...it is as if you are above a land of snow.

• Lay back on your cloud, floating... Relaxing.... Floating on a cloud.

• Feel the cloud beneath you... Still supporting you smoothly and comfortably.

• Take your cloud wherever you wish.... Higher, lower, side to side... Drift wherever you want to go.

• Enjoy the sights around you, as you are flying wherever you wish....

• (pause)

• Continue floating on a cloud, relaxing... Imagine wherever it is you would like to go. Your cloud can take you there. Mountains, forests, rain, fields of flowers, green fields, the ocean, houses and buildings, trees, snow, dessert, your own home

• (pause)

• Now it is time to return to your day. Let your cloud take you there. Feel your cloud flying through the sky, back to where you need to go. Let your cloud lower you down, back toward the ground. Float back to where you were when you started this visualization. Let the cloud meld with the bed, chair, or whatever surface you are on. Feel the cloud slowly disappear as the real surface becomes more solid beneath you.

• Notice now your surroundings. Gradually come back to the present. Feel the surface beneath you. Hear the sounds around you. Become more and more aware and alert. Continue to rest for a few moments longer, but open your eyes and look around. See your surroundings.

• Wiggle your fingers and toes, feeling your body reawaken. Shrug your shoulders. Move your arms and legs. Turn your head. When you are ready, you can return to your day, feeling refreshed and alert after your journey floating on a cloud.
7. Ask the group what it was like to do the exercise and take 2 – 3 responses (2 minutes)

8. Explain the following briefly (2 minutes):

- this exercise can be used as a regular activity to stay calm or in time of need when feeling tense or panicky
- it can be done as a quick 5 minutes calming technique, as a full version or anything in between
- It can be done indoors in a comfortable and preferably quiet place or even outdoors, sitting comfortably or lying down

9. Let the group know that other activities ideas will also be given to them as part of a supplementary activity booklet.

10. Briefly summarise the key points of the training (3 minutes)

11. Ask the group if they have any questions and take 3 – 4 (3 – 4 minutes).

**Key points**

- Mental health is part of health, and important to talk about in a crisis situation
- Stigma is a hurdle to support
- The COVID-19 crisis has given rise to a range of stressors and mental health issues such as stress, depression, grief, anxiety and trauma
- MH&PSS is an approach that helps relieve individual and community stress and trauma through both social interventions and psychological care
- Everyone has been emotionally affected by the COVID-19 situation, in both similar and different ways depending on their contexts, with some groups being more vulnerable
- Coping techniques, both short-term and long-term, can be learnt and taught to reduce stress and help them deal better with the crisis and with life in general.
PART 2: IMPACT OF COVID-19 ON STUDENTS MENTAL HEALTH AND PROVISION OF PSYCHOLOGICAL SUPPORT

Consultant - Sana Wasiq

Overall objectives of Part 2

- Welcome participants to the group and creating group norms
- Destigmatise mental health concerns among children and identify prevalence of such conditions among the youth
- To help the school administrators understand the impact of COVID 19 on children’s mental health, well-being and functionality
- Identify possible signs and symptoms in which anxiety or traumatic experiences can manifest among children and help participants understand the basics of informal assessment of children who may be struggling after COVID-19
- Provide the school staff and administrators with an adequate skill set to be passed on to teachers e.g. coping skills, interventions, activities to do and general classroom management ideas to deal with the on-ground situation after schools reopen
- Make sure that provision of culturally responsive coping mechanisms and activities are passed on to the trainees so they can in turn use them with students inside or outside classrooms to help them deal with the uncertainty.
- Help administrators understand the need to bridge the gap between teachers and caregivers so that the same messages are reinforced both at school and home once schools reopen.

Activity 1: Welcome and Tone-setting

Time: 10 mins

Steps/ Method

1. Welcome the participants to the session and thank them for their time.
2. Starting with yourself, have everyone introduce themselves by saying their names and designation. Add an icebreaker question along e.g. What is the first thing you would do once the quarantine/ intermittent lockdown is over? (Any other question works as well)
3. Ask the participants to brainstorm on norms/group guidelines that would help the workshop process run smoothly and effectively. For each suggestion, ask the participants if they agree and if so, note these down on the board. Ensure that norms such as speak on at a time, confidentiality, phones on silent, are brought up. This does not need to be done for this specific training as Part 1 will be covering it.
4. Present the objectives of the workshop
Activity 2: Destigmatising the word mental health and the occurrence of mental health concerns among children

Learning Outcomes

By the end of the section, participants will have acquired:

- a better understanding of facts, figures and prevalence of mental health concerns among children
- a baseline knowledge about some general mental health concerns on the rise among children
- an understanding of why stigma is attached to children having mental health concerns
- a better understanding of the need to eradicate the stigma attached to children’s mental health conditions

Time: 15 minutes

Steps/Method

1. Ask the participants to answer the following questions to help understand the general trend. Take three responses for each of the questions.
   Question 1: Can a child have a mental health concern?
   Question 2: What comes to your mind when I say that children have mental health concerns e.g. any specific issues, problems, disorders?

2. After asking the above questions, share with the participants some mental health related facts and concerns/disorders prevalent among children. The information is given below. (5 mins)

   Some facts and prevalent mental health conditions among children
   - 1 in every 5 children have a diagnosable issue
   - 1 in every 10 children have a mental health issue that causes a significant dysfunctioning
   - Most of the signs and symptoms become apparent in early years and can warrant a disorder later on in life.
   - Most kids can be diagnosed by the age of 7 to 11 years.
   - According to UNICEF up to 20 percent of adolescents globally experience mental disorders.
   - Suicide is the third leading cause of death among 15-19-year-olds worldwide.
   - Around 15 per cent of adolescents in low-and middle-income countries have considered suicide.
Prevalent mental health conditions among children with definitions

Share with the participants the list of these disorders to help them understand that these are also prevalent among children.

- Anxiety - It is an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure. People with anxiety disorders usually have recurring intrusive thoughts or concerns.
- Depression - It is a mood disorder that causes a persistent feeling of sadness and loss of interest. Also called major depressive disorder or clinical depression, it affects how you feel, think and behave and can lead to a variety of emotional and physical problems.
- Conduct disorder - It is a group of behavioral and emotional problems that usually begins during childhood or adolescence. Children and adolescents with the disorder have a difficult time following rules and behaving in a socially acceptable way.
- Attention Deficit Hyperactivity Disorder - Attention-deficit/hyperactivity disorder (ADHD) is a disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.
- Developmental disorders - It is a severe, chronic disability of an individual who has a mental or physical impairment by the age of 22 which is likely to continue indefinitely and results in substantial functional limitations in three or more areas of major life activity.

3. Ask participants to identify why mental health especially among children is still a stigmatised topic, and the role of parents and society in it. Take two responses for this discussion.

The trainer can add the following points to the discussion points. (5 mins)

Why does stigma exist around children’s mental health?

- Stigma exists as a product of some constructs namely devaluation (underestimation of the importance of something), negative stereotyping (negative traits and characteristics attributed to a social group) and discrimination.
- Most of the time because of these existing constructs caregivers become over analytical and end up in a similar rut as others around them.
- Parents do not want to accept that their child is struggling because it is difficult for them to imagine their child struggling.
- Even when they see their child struggling, they usually invalidate it by saying it’s nothing, it will be okay in no time, or you are overthinking or over reacting
- Parents also don’t want their child being labelled a certain way e.g depressed, slow learner, autistic.
- There is also a concern around what would people think or say if they find out about my child’s struggles?
- With reference to the treatment of people with mental illnesses, parents know prognosis, treatment and services are very limited.

4. Ask the participants and take two to three responses for the question: Why it is important to erase the stigma and understand the need to normalise the existence of mental health concerns among children. Add the following points to the responses from the participants. (5 mins)

**Why is there a need to eradicate the stigma?**

- Children need help, support, acceptance and empathy
- If we invalidate their experience of any mental health concern, we may be signalling to them that what you’re feeling doesn’t exist.
- Helping a child acknowledge their concerns will increase the changes of the child coming out of their issues quicker
- Children will be able to learn coping skills at a much younger age than landing into tough spots throughout life.

**Activity 3: Impact of COVID 19 on children’s wellbeing**

**Learning Outcomes**

By the end of the section, participants will have acquired:

- an improved understanding of COVID’s impact on a child’s well being
- an increased knowledge on COVID’s impact on protection of children
- a detailed guide to what areas of a child’s life/ functioning are affected by the pandemic

Time: 15 minutes

**Steps/Method**

1. Present to the participants some major aspects/ areas of a child’s life affected by the pandemic like Social, Academic, Health, Emotional, Psychological, Behavioural
and Protection of children. If need be give an example of each from the pointers mentioned below. (The pointers below will be mentioned on the powerpoint presentation as well)

2. Trainer can assign two participants at random to briefly identify the potential impact on a child’s life that the pandemic has on each of these (1: Social; 2: Academic; 3: Health; 4: Psychological/Emotional; 5: Behavioral and 6: Protection of children)

3. Add the points written ahead, for each subheading, to the discussion conducted in the previous step. You can display slides for the respective topic as you go along. E.g while discussing the social aspect, the slide displaying social aspect impact shown and so on.

   COVID’s Impact on a child’s Social aspect of life
   - School closure and isolation causing distances in friendships and socialisation
   - Family life is extremely different. A huge shift for a lot of people and that may be affecting them positively or negatively
   - Interacting from a distance is causing a huge shift in the socialization process, people going into their shells, living a virtual kind of reality majorly based on using social media
   - Social skills deficit, kids who had started to develop social etiquette back to life at home, social learning is restricted to family which could be bad in cases of neglect

   COVID’s Impact on Child’s Academics/Learning/Education
   - With schools closed learning of children affected a great deal
   - The challenge of distance learning if applicable
   - No access to electronic devices and internet facilities
   - The access of gadgets if present is mostly for boys so girls are sidelined a great deal, giving rise to inequity
   - Children with special needs are even more difficult to serve through distance learning
   - The financial inequities and loss of family members will give rise to a huge drop out of children
   - Kids need constant reinforcement for memory and retention
   - Understanding of concepts would be highly affected.
   - Testing anxiety or stress that we may not know enough now. Not being able to perform as well.

   COVID’s Impact on a Child’s Health
   - No Immunization due to lockdowns or unavailability, government’s focus on the current crisis
   - Infant mortality rate will go up again as women are not getting the desired help at the right time because of the lack of medical facilities/ overworked hospitals and staff
   - Lack of resources and reduced household income leading to scarcity of food, leading to malnutrition or under nourishment
- Children of frontline workers are constantly being put under different child care situations affecting their regular eating, sleeping and general life leading to poorer health outcomes
- Most regular health care facilities and initiatives have been suspended
- Water, sanitation and hygiene (WASH) services are also at risk of disruption by lockdown measures, posing further threats to children’s health through water-borne diseases

**COVID’s Psychological/Emotional impact on children**
- Give rise to stress and anxiety (separation anxiety)
- It is a form of shared trauma
- So much uncertainty and ambiguity
- Children may be feeling too much or too little leading to confusion
- Grief - loss of people in the family, fear around losing close people because of it
- Developing serious mental health conditions like OCD, Anxiety, Depression or be a trigger to major mental health issues
- Social isolation could lead to suicidal ideation as well

**COVID’s Impact on a child’s behaviour**
- Children may act differently than their usual selves - be more clingy, cranky, easily upset, withdrawn etc
- Some may develop behavioural and conduct related issues staying isolated for so long
- Social etiquettes may be forgotten
- Major mood and behaviour shifts may be observed as socialisation plays a huge role in a child’s learning process and with limited socialisation or socialising into the same circles will impact behavioural outcomes and stunt the growth process
- Social learning is restricted to family which could be bad in cases of neglect
- More prone to Anger, frustration and aggression as lack of spaces for venting it out

**COVID’s Impact on Protection of Children**
- Lockdowns come with an increased risk of children suffering or witnessing violence and abuse.
- Children in conflict settings, as well as those living in unsanitary and crowded conditions such as migrants, refugees and IDP settlements, are also at considerable risk.
- Children’s reliance on online platforms for distance learning has also increased their risk of exposure to inappropriate content and online predators.
- Social workers and related legal agencies working on child protection may have suspended operations because of the lockdown
- A reduction in household income will also force a lot of children to resort towards child labour and a lot of girls in specific will end up in underage marriages and child rearing
Activity 4: Manifestation of stress, anxiety and trauma among children

Learning Outcomes

By the end of this section, participants will have acquired:

- an increased understanding of the signs and symptoms that could be indicative of a mental health concern
- a sound knowledge about how mental health conditions could manifest in children so they can in turn identify these children and informally diagnose so they are able to provide immediate support and if needed get them the right kind of additional support.
- a basic understanding of assessment of the symptoms and doing a consultation if needed

Time: 20 minutes

Material: Case studies

Steps/Method

1. Display the case studies on the power point presentation and read them out to the participants. With the help of the case studies, ask the participants to identify what the children in the case study were experiencing and list down the signs and symptoms that children who are disturbed by the pandemic could be going through.

CHILD CASE STUDY 1

Child named Ali, 6 years old returns to school and displays some complaints. The child arrives at school very cranky, upset and crying. He is very clingy and does not want to let go of his older brother who comes to drop him. Once he does get to class after a lot of persuasion, he cries throughout the school day missing his parents. Parents are feeling very stressed as this child used to be a very happy child before the pandemic. How can the child be helped? What can the teacher do? How can the parent be helped?

CHILD CASE STUDY 2

A 10 years old female child has returned to school post COVID 19. Before the COVID, she used to be a shy introvert kid but would make efforts to talk to peers. She was academically at the top of her class and would always ask her teachers questions at the end of the day. After returning to school, she seems withdrawn, not
interested in school/ academics, she has become even more introverted, avoids eye contact and as soon as school ends, she immediately leaves school. The class teacher is concerned about her star student. How can she/he help?

2. Help formulate an informal diagnosis for the child, in order to get them the right support and interventions. Please make sure to add here that informal diagnosis is by no means a clinical/formal diagnosis for any child and in case the situation is unclear get the child professional help by referring them out to helplines mentioned in Part 1 of the module. (15 mins)

3. Alongside step number 2, the trainer can share some of the common signs and symptoms of stress, anxiety and trauma among children that can be picked on by the child’s behavioral observation. The list is given ahead of this point.

**Common signs and symptoms of stress, anxiety and trauma among children**

**Physical**
- Decreased appetite, other changes in eating habits.
- Headache
- New or recurrent bedwetting
- Nightmares
- Sleep disturbances
- Upset stomach or vague stomach pain
- Other physical symptoms with no physical illness

**Behavioural/ Emotional**
- Difficulty concentrating and Inconsistent academic performance
- Unpredictable and/or impulsive behavior such as moodiness, aggression, a short temper, or clinginess
- Poor control of emotions
- Fears (fear of the dark, being alone, or of strangers)
- Development of a nervous habit, such as nail biting
- Withdrawing from family or friends
- Refusal to go to school
- Getting into trouble at school
- Lack of joy in life
- Hoarding items of seeming insignificance

4. Explain to the participants that in case a child is displaying any of the symptoms discussed earlier, they could make use of the following set of ideas to make an
intervention plan to help guide the child better around their academic and emotional needs. In case it is beyond their scope, refer them out to government initiated helplines. (5 mins)

**Tools needed to formulate an informal diagnosis for a child**

- Observation of the child - making observations daily for at least two weeks called a functional behaviour analysis
- Interviewing the child, peers and parents if possible
- Peer supervision - discussing with another fellow teacher or subject teacher or school administrator what they think about the child’s struggles
- Academic and personal records - are a good way of assessing how the child was doing before compared to now and making a fair judgment call.

**Helplines available**

1. Punjab Youth HelpLine
   Youth Affairs, Sports, Archeology, and Tourism Department
   Punjab Stadium, Gulberg III Lahore.
   Help Line: 080012145
   Fax: +92-42-99231087

2. Umang
   +92 317 4288665

3. Rozan Counseling Helpline
   0304 -1111741

**Activity 5: Coping strategies and Culturally responsive techniques for helping children with their stress, anxiety and trauma around the COVID19**

**Time: 45 - 60 minutes**

**Learning Outcomes**

By the end of this section, participants will have acquired:

- a sound understanding of how to start a conversation about COVID-19 with children to lessen their stress around COVID-19
- a better understanding of how the school staff can be trained in understanding the coping skills children would need when schools reopen
- a better understanding and ideas about contingency plans that need to be shared by teachers with parents, families and communities to get children/ students the help they need
- a potential referral list for getting children professional support if need be that could be assembled district wise
- a detailed guide to share with parents/caregivers/ families around activities that they could do with their children at home and ways of supporting children around them during these difficult and uncertain times

5.1 How can teachers and school staff help students with stress and anxiety triggered by COVID-19

Time: 45 minutes

Steps/ Method

1. Share with the participants a guide that they could relay to the teachers so they can use it while talking to children about COVID-19 once they rejoin schools. Below are some of the important points around psychosocial needs of students and some dos and don'ts of conversations that could be shared with children by teachers. (5 mins)

How to talk to students about COVID-19, address psychosocial support needs and avoid stigmatization/ discrimination

- Children rely on adults for information and guidance about reactions to different events and situations. Therefore as teachers it would be essential to ensure that a teacher’s own anxieties are managed before they converse with a child about the COVID-19. If a teacher feels anxious, a child may read that and feel overly anxious too.
- Ask the child open ended questions like How much do they already know about the pandemic. Once you have this information, dispense information at an age appropriate level.
- If they are relatively young use age appropriate language and give them honest and limited information
- Assess what information needs to be relayed to them and what information should be held back. E.g. to a 6 year old child, you do not have to scare them by telling you see all those people dying because of COVID-19. Instead telling them people survive if they take care of themselves and take precautions.
- Create a safe space with them and talk about how it has impacted all of us and allow them speak freely about their fears. Don't shut them out by ignoring or minimising their concerns.
- Watch your child’s reactions and body language and respond to them accordingly. E.g. if you are sensing that a child is feeling very anxious take notice and talk to them or their parents.
- If you don't have answers to their questions don't guess or give wrong answers, instead visit credible websites and look for answers together.
- Explain the concept of processing situations and showing resilience. Tell them that it is a sad and testing time for all of us but we are in it together and together we'll face it and take care of each other from a distance.
- Tell them to protect themselves and others around them. Encourage hygiene protocols and make them fun. Washing hands every few hours for 20secs, coughing, sneezing in the elbow, changing clothes daily, cleaning frequently touched surfaces and so on.
- Respond to children’s reactions in a supportive way and try explaining to them that whatever they are feeling is real and valid and it is only a normal reaction to a very abnormal and unprecedented situation.
- Offer constant reassurances. Remind your children that they are not likely to catch the disease, that most people who do have coronavirus don’t get very sick, and that lots of adults are working hard to keep your family safe.
- Teachers would need to ensure that vulnerable populations are supported through these times. Ensuring that marginalized groups like students with special needs may need additional support and how girls could be impacted more than boys, being asked to do house chores, taking care of the sick and elderly and so on.
- Framing the COVID in a positive manner, framing school closure positively. You could say something like the schools were closed to ensure that you all stay safe within your private spaces.
- If children are stressed about the death toll, talk about survival rates as well, helping them see the other side of the coin
- Check with them if they are spreading any stigma around to others. If someone they know has symptoms of COVID-19, making sure that they are not ridiculing them. Make sure that children are not bullied or bullying others. Remind them that everyone deserves to be safe at school. Bullying is always wrong and we should each do our part to spread kindness and support each other.

2. With the help of the essentials discussed in the last point, give the participants a scenario of a child who has just come back to school and was tested positive a couple of months back but now is alright, tested negative as well, however the children in class are staying at a distance from him and talking behind his back. Ask a couple of participants to volunteer and try having a similar conversation/ dialogue (one participant to become a student and another one a child) to make it engaging and also making sure they understand how to share this information with teachers. (5 mins)
3. Highlight the role of teachers once schools reopen. Ask the participants to share with the group, interventions that could be inculcated in the school curriculum to help children ease back into a routine. Below is a list of interventions that could be shared on screen once you have taken three to four responses from the participants. (10 mins)

**Intervention Plan to help students in classroom**

- **Flexible expectations around academics.** E.g. Don’t push them if they are feeling overwhelmed by academic tasks. Instead breaking down tasks for them or dividing it over a longer period of time so the student has enough time to work on it.
- **Having an empathetic attitude** towards children who seem overwhelmed because of these difficult times. For instance if a child is feeling anxious about answering questions, don’t put them in a spot and ridicule them for not knowing, instead tell them that they can think about it and answer later or telling them that it is okay to not know the answer and this is why we are all here, to learn from each other.
- **Forming a peer to peer or buddy system** where kids can be paired in a way where a child who is struggling could be paired with a child who seems more resilient. This would be helpful and lessen the burden on the teacher, especially since we know it would be challenging dealing with quite a few struggling children.
- **Extra remedial classes** in case a group of students is struggling more
- **Keeping time aside during the day in which COVID-19 related information** is shared. This could be 10 to 15 minutes before the start of the school day. Information shared should be age appropriate. E.g. sharing with children some basic hygiene practices like washing hands regularly, keeping a safe distance from one another, making sure you’re wearing clean clothing to school, staying home if you feel sick, coughing/sneezing in the elbow, ensuring your school is clean and so on.
- **Yoga or meditation** could be added to the school rituals as well. Meditation/yoga is a great way to help children feel calm and in control of themselves.
- **Teachers could have a circle time every week once, which could work as a support group for children**, so that they can process what they went through or are going through as a result of the COVID-19. Teachers could be facilitating these sessions. If the teacher feels things are getting too deep or difficult and may be triggering for students e.g. talking about death and sick people, they could try putting an end to it by explaining how it could be difficult for some and it is best that we share and process things/situations that we all can talk through together.
- **Teachers could incorporate health topics in different subjects.** E.g. in Science, they could talk about how the virus spreads and technical knowledge about it, in Social studies teacher can talk about the history of pandemic, in English and Urdu students could write an essay about their experience of the COVID-19.
- **Teachers are role models for children** and what they say/think matters to students. If they model certain behaviors it is highly likely that children will pick on them and try to follow them as well. Let your students talk about their feelings and help reframe their concerns into the appropriate perspective. This could be done by using examples of your personal life so they can relate to it.
- After traumatic instances, children may feel a sense of loss of control. If a child seems to be dealing with trauma, try to give children some control with little things in the classroom, like choosing their seat in the class, allowing them to choose between assigned tasks if possible.
- When children are showing problematic behavior, try keeping your calm and refrain from punitive measures like hitting, scolding or calling out the student. Instead try and have a sit down with the child later on and discuss with them why they are acting out or misbehaving.

4. After sharing the school interventions and addressing psychosocial needs, the trainers will share with the participants some skills and techniques to help students around coping and building resilience when stress levels go high. This will be demonstrated to the participants so they can replicate these in the future training to ensure efficacy of these activities. Below are some of these strategies with a step by step guide. (20 mins)

**Coping skills/strategies and building resilience to help children with stress and anxiety**

**Resiliency**

Resiliency comes from both innate and external factors in a child’s life. Teachers can play a huge role in helping a child become more resilient and cope better by

- providing them with support and respect
- provide their students with an opportunity for intellectual growth
- enhance their self esteem and self worth by praising and encouraging them
- help child form a close link or tie to his community and help them understand their role in the betterment of their community

**Breathing exercises**

The goal of calming exercises is to get yourself from a flight or fight mode to a more relaxed rest and digest mode. Deep breathing helps get more oxygen into your bloodstream, opening up your capillaries. It has a physical effect on your body to help you calm down and lower stress.

Use the following script to help the student with the exercise:

Put one hand on the belly and the other in a comfortable position on the side. Whichever hand feels more comfortable, use that and come to stillness.

Next, shut their eyes and take a deep breath, through the nose. Notice the air filling up your lungs. Feel your belly and ribs expand. Pause and count till five.

Now exhale from your mouth, making sure all the air is out of your lungs and belly.
Meditation - Body Scan and Guided Imagery

**Body Scan** - is a form of meditation that focuses on breathing while also keeping a close focus on different parts of your body and how they are reacting to stress. Follow the script below with children in the classroom. This could be practiced daily or every other day.

1) Get yourself in a comfortable posture. Settle yourself in a comfortable position and close your eyes.

2) Start by taking two or three gentle, large breaths. Pay attention to how that feels. Your belly rises and falls. Air moves in and out of your body.

3) Now we’re going to pay attention to the other parts of the body. Start with your feet. They might feel warm or cold, relaxed or restless. It’s also okay if you feel nothing at all. If you can, relax your feet now. Take a moment and notice how that feels. Stay in this posture and relax.

4) Now move your attention to your lower legs, noticing whatever is there. Do they feel heavy, light or in any certain way? In any case, just do your best and give yourself a few moments of rest.

5) Next, move your attention next to your knees and relax them. Feel the front, back, and sides of your knees.

6) After a few more breaths, move your attention to your upper legs. Whatever you feel, or don’t feel, is fine. Notice your legs and let them relax. If you feel tired that’s okay.

7) Now move your attention to your belly. It always moves when you breathe, rising and falling, like waves on the sea. You might feel something on the inside, like full or hungry. You might even feel emotions in your belly, like happy or sad or upset.

8) Next, bring your attention to your chest. Notice it rising and falling as you breathe. If you feel that it’s hard to focus, that’s normal.

9) Now turn your attention to your hands. Relax them if you can, and if not, simply pay attention to your hands for another moment.

10) Move your attention up into your arms. Maybe notice if you can find a moment of stillness inside you, like the pause at the end of each breath.

11) Next, move your attention around to your back. How does it feel? When your mind gets busy or angry or scared, you can always come back to how your body feels in this way for a moment.

Now do the same three to five times again.

Additional exercises are mentioned in the supplemental activity booklet.
12) Now move attention to your neck and shoulders, letting go and relaxing them. If your mind wanders, that’s fine. No one can pay attention all the time. Just keep returning to noticing your body whenever you find yourself thinking of something else.

13) And now feel your face and head. What expression do you have right now? What would it feel like to smile? What else do you notice in your face, your head, and in your mind?

14) Finally, spend a few moments, paying attention to your whole body. If it is easier, continue to pay attention to your breath. Slowly count till ten and bring yourself to open your eyes.

Guided Imagery - The following script can be used to help children feel calmer and more relaxed especially when they are tensed and close to a breaking point. While reading through the script make sure to pause appropriately.

1. Find a comfortable position. Notice how you are feeling right now. focus your attention on your body and your mind.
2. Take a deep breath in, through your nose
3. Let the air out through your mouth.
4. Repeat the step a few times until a state of calm starts to prevail
5. Continue to breathe slowly and gently.
6. Breathe in relaxation..... and breathe out all worries
7. Now imagine in your mind a place where you feel totally comfortable and happy.
8. This might be your house, a completely new place, favorite place you have been, or somewhere you have seen, or your ideal space. It’s up to you.
9. Picture a place where you feel calm and happy.
10. Start to add details to this scenario. What are some things you can see? What do you hear?
11. Imagine how your body feels and is reacting to this calm place you are at.
12. You are comfortable, enjoying every bit of it....happy being still and relaxed or doing whatever you feel like.
13. Enjoy the way you feel in this safe place.
14. You feel calm and safe here.
15. Remain in your place while you practice being calm and relaxed.
16. Again notice the environment around you in this place. Take some moments to just enjoy it and be here. Soon, it will be time to leave, but know that you can return here in your imagination any time to relax, feel calm, and feel comfortable and safe.
17. *In a moment I will count to three. You can become more awake and energized on the count of three.*

18. *One... take a deep, cleansing breath in... and breathe out slowly.*
   
   Two... take another deep breath.... and breathe out...
   
   Three.... you are feeling calm, confident, and refreshed.

**Identifying and labelling emotions**

- Use an emotions wheel to introduce children to the vocabulary of emotions and help them in identifying what they are feeling. Identifying and recognizing emotions often results in sharing and expression of them which helps in the process of venting.

![Emotions Wheel](image)

- Create songs around feelings and sing along, giving a situation and asking children to identify what emotions the characters feel.

**Processing Grief**

- Talking about grief is very important. Children need constant reassurance especially when there is a lot of uncertainty. Oftentimes parents are so busy grieving themselves that they are unable to focus on the child. During these times teachers can give support to children and help them process their emotions over the loss of someone close. Keep them busy and give honest answers when needed. You could ask a grieving child to draw a picture of the family before and after the loss.
Another activity that could be done with a child who is grieving is to ask them to finish the following sentences. This helps children go through the memories with the deceased person and helps them understand their own feelings better.

The thing that makes me feel the saddest is ..... 
If I could talk to the person who died I would ask (say)…. 
Since the death my family doesn’t…. 
My worst memory is…. 
If I could change things I would…. 
Since the death my friends…. 
After the death, school…. 
When I am alone…. 
The thing that makes me feel the safest is…. 
The one person who understands me the most is... 
I feel better when...

**Grounding technique using the 5 senses**

This technique will take you through your five senses to help remind you of the present. This is a calming technique that can help you get through tough or stressful situations.

**5 - LOOK:** Look around for 5 things that you can see, and say them out loud. For example, you could say, I see the desk, the chair, the board etc.

**4 - FEEL:** Pay attention to your body and think of 4 things that you can feel, and say them out loud. For example, you could say, I feel my feet warm in my socks, I feel the hair on the back of my neck, or I feel the floor I am sitting on.

**3 - LISTEN:** Listen for 3 sounds. It could be the sound of traffic outside, the sound of typing or the sound of your tummy rumbling. Say the three things out loud.

**2 - SMELL:** Say two things you can smell. If you’re allowed to, it’s okay to move to another spot and sniff something. If you can’t smell anything at the moment or you can’t move, then name your 2 favourite smells.

**1 - TASTE:** Say one thing you can taste. It may be the toothpaste from brushing your teeth, or a mint from after lunch. If you can’t taste anything, then say your favourite thing to taste.

Take another deep belly breath to end.
Making a calm down kit

It could contain a worry stone, journal, calm down jar, positive mantra bracelet, stress ball, and slime, kids may include bubbles for breathing, a photo album filled with happy memories, a stuffed animal, gum, or colouring books and crayons and other things that help your child.

5.2 How can teachers and school staff collaborate with caregivers and families to get involved with and for their children during the period of school closure

Time: 15 mins

Steps/Method

1. Ask the participants to identify how they can share contingency plans with the parents during the lockdown period, and also ensure that some sort of contact is maintained with the communities so that the going back to school transition is smoother. Identify some of the modes of communication e.g. phone calls, text messages, putting notices etc. (5 mins)

2. Brainstorm with the participants different ways/activities to help children stay engaged at home during the school closure period and add them to the existing list. Take a couple of responses. The list could be communicated to parents. (5 mins)

Activities to keep children busy at home during the school closure

- Start the day with a pretend at home school - parents could act as a teacher and other family members could take up roles as well.
- Art and craft - Using different house items to create new things. Teaching the concept of recycling. E.g. Using cardboard boxes or newspapers to create a school building or a building of their liking. New and useful things could also be created using old materials.
- Developing a helpful attitude by helping around with little chores around the house.
- Reading and developing a habit out of it. Whatever mode is easier to use could be used.
- Play - Encouraging imaginative play and employing academics in play could also be a way of making play both fun and educative.
- Religious learning - This time could be used to learn about religion and its teachings as well.
- Making cards for family members who are sick because of COVID-19 or otherwise
- Encouraging children to interact or socialise over phone calls as much as parents deem feasible so they are connected to the world.
- Writing a journal/Diary for COVID-19 sharing their experiences of it
3. Present to the participants a list on how parents can support their children during this outbreak. Take a few responses and add them to the existing guidelines that are also honed by UNICEF. Share these with families and caregivers. (5 mins)

**How can parents support children at home?**

- Stressing on a good personal hygiene
- Playing games together - making learning fun for children
- Having meals together as much as possible and during that time everybody could share something from their day so everybody can stay connected with each other’s feelings
- Parents can encourage conversations around children and their fears and try addressing them at an age appropriate level
- Meditation could be something everybody can make a ritual out of as well
- Stressing on a healthy eating and sleep routine.
- Connecting with nature
- Listen to their concerns and take time to comfort them and give them affection, reassure them they’re safe and praise them frequently.
- If possible, create opportunities for children to play and relax. Keep regular routines and schedules as much as possible, especially before they go to sleep, or help create new ones in a new environment.

**Activity 6: Concluding the module**

**Time:** 10 mins

**Steps/ Method**

1. Close the session with every participant sharing one take away from the session. (5 mins)
2. Thank the participants for their time, patience and enthusiastic participation.
3. Question/ Answer session if there is time.


Smith, M., Robinson, L and Segal, J. *How to Cope with Traumatic Events like Coronavirus*. Help Guide. 2020


UNICEF. *Protecting the most vulnerable children from the impact of coronavirus. An agenda for action*. April, 2020, [https://www.unicef.org/coronavirus/agenda-for-action](https://www.unicef.org/coronavirus/agenda-for-action)
