

Formative Research on 'P Ashe Achhi' for 0-6 year age cohort

BRAC Institute of Educational Development (BRAC IED)
BRAC University



Introduction

'*Pashe Achhi*' Telecommunication Model is a remote learning mechanism which has integrated psychosocial support with learning through play approaches. Through various phases of uncertainty during the COVID-19 pandemic, using telecommunication helped us to stay connected with the front liners, caregivers and the children. '*Pashe Achhi*' combines tele-counselling and tele-learning and was developed to discuss with the Rohingya mothers and children topics like self-care, play-based learning, Covid-19 related safety and awareness through a respectful and mutual conversation. This model provides the frontline workers with 1 hour of basic training. Beneficiaries receive a phone call once a week based on a 20 minute tele-conversation script. It has been found that children feel excited to hear from Play Leaders and parents and caregivers feel safe and valued to receive calls. Also, frontline workers show growing dedication to stay connected to families and support children.

The objective of the formative research is to explore the understandings and the reflections of the frontline workers, facilitators and other staff about the script of '*Pashe Achhi*' Tele-communication model.

Methodology

In June a formative research was conducted over the phone with Project Assistants (PA) and Rohingya Mother Volunteers/Myanmar Language Facilitators (MLF) working in various camps of Cox's Bazar in an effort to develop the content of the '*Pashe Achhi*' script.

This study intends to understand the reflections of the frontline workers and the field staff on the '*Pashe Achhi*' script. Therefore, Mother Volunteer/Myanmar Language Facilitators for the 0-2 age cohort and Project Assistants, as the direct supervisors of Play Leaders for the 2-6 age cohort were selected as research participants.

Qualitative methods like Focus Group Discussion (FGD), Key Informant Interview (KII) were used to collect the data. On the 14th and the 15th of June 2020, FGDs and KII were conducted with a total 19 respondents. To collect the data, a semi-structured questionnaire with mostly open-ended questions was developed. The instrument was developed to serve the specific purpose of this study and collect appropriate qualitative data. Both the FGDs and KIIs were conducted through phone and the data was recorded manually.

For the 2-6 age cohort, FGDs were conducted with Project Assistants through a web-based app and due to poor network connection, four respondents frequently dropped off from the call. The online interview was conducted with the guidance of the research team.

For the 0- 2 age cohort, Key Informant Interview was conducted with 11 Mother volunteer/ Myanmar Language Facilitators (MLF). One to One interview of the MLFs was conducted through a conference call. During every call one researcher from the curriculum development team, one para-counselor and one MLF were present. The MLFs connected using their cell phones.

Findings

The findings are presented under themes and sub-themes:

Reflection from the Frontline Workers and Field Staff on Tele-counseling Part:

Both MLF (0-2 age cohort) and PA (2-6 age cohort) interviews showed that most of the mothers wanted to know how they can deal with emotional turmoil during the COVID-19 Pandemic.

0-2 age cohort

Most of the family members are home now without any work, and it is causing arguments and restlessness among the family members and between the husbands and wives. In the interviews with MLFs, it is seen that most of the mothers think that they need to know how to deal with this problem and how to calm down. They also want to know how to solve their family problems and quarrels with their husbands. Some of them also want to know how they can keep a good relationship with their partner and live peacefully. From the interviews with MLFs, it is clear that many of the mothers find peace in sharing their problems, but they cannot talk freely when the family members are around them. So, some of the mothers want to meet with the Mother Volunteer/Myanmar Language Facilitator directly. Few mothers requested Mother Volunteers to come to their home so that they can share their feelings and thoughts directly. In addition to that, almost every mother wants to know when this situation will be over, and when everything will get back to normal so that mothers can attend the sessions in their designated home-based pockets. From the interviews, we learn that mothers were more comfortable in the group sessions and it was usual for them to come to the para-counselor and share their problems and feelings after the session.

From the responses of MLFs, it is clear that most of the mothers usually want to talk about themselves, their families, their daily frustrations and troubles, or issues created by their husbands. Most of them want to know about new things like how they can keep themselves happy and how they can manage negative emotions. As everyone is at home now, there is insufficient space and that affects everyone.

2-6 age cohort

In the interview with the PAs/Field staff, it can be seen that the interviewers need more time to gain trust from the mothers so that mothers feel comfortable to share their problems. To make it

easier for the mothers to trust the Play Leader and reveal their troubles to them, some elements to support that should be added into the script.

COVID-19 Awareness Messages:

0-2 age cohort

In the interviews with MLFs, it was recorded that most of the Rohingya mothers wanted to know the reasons of the COVID-19 pandemic and how to prevent it. Few mothers want to know how they can take care of their children and keep them safe during this situation. Many mothers are also worried because the family members do not have any income during this pandemic, they have to depend on government relief and it is tough for them to manage their regular life with it. As a result, many of them become restless and tend to lose their mental peace. Few mothers wanted to know if they fall sick, where they can get health care services. Among them, few are scared to visit the doctor because they think they will be in quarantine and will not be able to return home.

2-6 age cohort

In the interview with PAs, it was seen that the main issue for many mothers is mental and emotional health rather than concern about the disease. A point has come out from the FGD that fathers also want to be a part of the intervention so that they can know about the diseases. Some patients tested positive for COVID-19 had died, so few mothers wanted to know more about it repeatedly. Also, a discussion on some seasonal infectious diseases can be included in the tele-counselling part, as most of the Rohingya community members are not aware of the outbreak of these seasonal infectious diseases.

Reflection from the Frontline Workers and Field Staff on Tele-learning Part:

During the interviews both the MLFs and PAs mentioned that most of the mothers stated that their children enjoy *Kissas* (stories) and *Kabbiyas* (poems). The respondents shared the questions mothers ask related to keeping their children engaged during this time.

0-2 age cohort

In the interviews with MLFs, it was found that few mothers wanted to know how they should discipline and manage their children without beating them. Some of them wanted to know how they could introduce indoor games to their children. Most of the mothers love to talk about their children. According to the MLFs, the tele-learning part is enjoyable to teach.

In the interviews, when MLFs are asked what kind of games the Rohingya mothers are interested to play with children, it is stated that both children and mothers like "*Tuki*"/peek-a-boo, the pillow

game, grabbing soft things/balls, Tip tap, etc. the most. Mothers are interested in games where they can be connected physically with their children. Both the mothers and children want to hear new *Kissas* or stories from the curriculum team. Mothers mentioned that listening to *Kabbiyas* helps children to sleep easily. Some of the mothers also love *Kissas* that praises their children. Few of them want toys.

Some of the mothers said that they love the activities given in the mother's mental health and wellbeing part conducted in the group sessions in the pockets. Most of the mothers want to hear *kissas* like the *Bibijan's Kissa*- the story about not blaming herself. Few of them also want to be praised by others - they want to hear some words of comfort.

2-6 age cohort

The PAs during the interviews mentioned that most of the mothers and children were quite enthusiastic about reciting *Kabbyas*. As they are familiar with the practice, it was not difficult to discuss at all. Most of the children ask about how Play Leaders are doing and they express their wish to start going to the Play Labs again. Besides listening to *Kabbyas* and *Kissas*, the children wanted to do play activities. However, the PAs suggested that it would be better to include the play activities after 3-4 months since most of the activities are conducted in a group and it will be difficult for the Play Leaders to keep the concentration and engagement of the children over the phone. PAs mentioned that they liked the segment where mothers can talk about their feelings and emotions.

From the FGD, we learn that mothers would find helpful if some topics like Breathing Exercises, Eating Nutritional Food, Regular Handwashing, Drinking Clean Water are included in the script. Also, activities which are enjoyable to do for the mothers while staying at home could be added in the future.

From PAs' interviews, it has been found that most of the mothers and children love certain activities and *Kissas* in the HPL curriculum and these could be included in future versions of the '*Pashe Achh*' script. These activities and *Kissas* were selected after a discussion among the team members and consultation with the PAs. These are given below:

Kissa: Duijon Poain o Lal Paik, Jaillyaar Boro Macher Kissa, Tin Fojjyyar Kissa, Boga ar Bago rKissa, Chalak Shiyaler Kissa, Goru o Badshah'r Kissa, Machir Kissa, Teko Bouer Kissa, Banor o Kumirer Kissa.

Activity: Echi-Bichi, Dori Laaf, Thal Majuni, Si Si Khela, Ani Bhai o Toni, ABCD Loar Kechi, Bakkum Bakkum, Sumaiya Go Sumaiya, Moja Kore Guni, Bondhu Boleche, Ami Korte Pari, Shobder Khela.

Challenges

The MLFs mentioned during the interview that it is difficult to make the mothers understand the tele-counselling part. During the FGD of PAs, it came up that a lot of mothers cannot put the phone on loudspeaker. In these situations, the mothers and the children held the phone to their ears and recited along with Play Leaders. PAs did not think any of the topics were difficult to discuss.

Suggestions for P Ashe Achhi

From both of the interviews, it has come up that the father's involvement in the telecommunication session would be good because the fathers also expressed their willingness to participate in it. It would also be helpful if the time duration for each session could be increased, as the Rohingya families generally consist of a large number of members and they all want to talk.

The Myanmar Language Facilitators (0-2 age cohort) during the interview shared that they want to learn about new games so they can teach those to the Rohingya mothers. As mothers love to discuss their children, MLFs enjoy talking with them about childcare a lot. MLFs suggested that we could add some points about how mothers can utilize their leisure time - for example planting vegetables if they have lands adjacent to their houses. We can include more exercises like '*Breathing Exercise*' to help mothers reduce their stress and tension. MLFs also want to talk about how the mothers can learn sewing so that they can earn money. Besides, mothers can teach her children to read and write.

Conclusion

The findings of the research provide some initial data about the perception of the script among the targeted groups. This data provides evidence about how the respondents perceive the tele-counselling practices, tele-learning practices and what is needed to add more value in this intervention. The suggestions from the beneficiary groups should be added in the next phase. Overall, the research findings suggest that connecting with the Rohingya mothers through telephone has created a chance for them to speak with someone they trust with their day to day stories. Frontline workers listening to the mothers without being judgmental have worked as a measure to reduce the stress and anxiety mothers are going through due to COVID-19. Furthermore, the study reveals that learning about ways to keep children engaged at home through play has helped the mothers to utilize their time more effectively.

For the future development of the '*Pashe Achhi*' script the respondents shared the need to include fathers during the call, which the Rohingya mothers felt would be beneficial for her and her children's wellbeing and development. Besides, the Rohingya mothers want to learn more stress management techniques to keep themselves calm and anxiety free.

Tele-counseling is an integral part of the '*Pashe Achhi*' model and the frontline workers have shown interest to receive more training in understanding psychosocial issues so they can build more trust with the mothers and help them create a better home environment for their children.

This research report has discussed how the beneficiaries, frontline workers and field staff view the '*Pashe Achhi*' script. This will help to further strengthen the model so that the needs of the Rohingya mothers and children in the camps can be better catered for.