

Regional Training Psychosocial Support in Emergencies

Training Report



27-29 February 2024
YUVA Centre, Mumbai



CONTENTS

INTRODUCTION	1
Background	1
Training Objectives	2
TRAINING SUMMARY	3
Day 1	3
Introduction and Icebreaking	3
Session 1: Basics of Disaster management and Impacts of Disaster	3
Session 2: Vulnerability mapping and Needs of the survivors	5
Session 3: Role of Community in Psychosocial Care	7
Session 4: Psychosocial Care for Women and Children	8
Day 2	11
Session 1: Stages of Reaction	11
Session 2: Basic Techniques of Psychosocial Care	12
Session 3: Follow up and Referral Mechanisms	14
Session 4: Role Play Flood Disaster Scenario	15
DAY 3	18
Session 1: Psychosocial Care for People with Disabilities and Elderly	18
Session 2: Self-Care and Caring of Caregivers and Ethics, Action Plan for PSS	19
KEY LEARNING FROM REGIONAL TRAINING	22
TRAINING IMPACT AND SUCCESS	23
Details of Participants	23
Feedback and Testimonials	23
Improved Knowledge and Skills of Participants	24
Potential Challenges related to communication during disasters.	24
Role of PSS in overall well-being and recovery of disaster-affected individuals and communities	24
Responsibilities of a Psychosocial Care Provider during Disaster Response	25

Differential vulnerabilities during disasters	25
Key factors to consider when identifying needs of survivors	26
Challenges faced by People with Disabilities	27
Impact of Disaster on Children	27
Considerations for Gender Sensitivity	28
Health related problems during Disasters	28
Healthy coping behaviours and its role in PSS care in disaster affected community	29
Role of Community support in Psychosocial Care	29
Boarding, Lodging and Venue of the Training	30
Certificates	30
Training Details	30
Language of Instruction	30
Way Forward	30
CONCLUSION	32
ANNEXURE	34
Session Plan	34
List Of Participants	36
List of Resource Persons	37
Training Assessment Form	38
Training Feedback Form	41
Training Photos	43
Link To Training Resources	45

INTRODUCTION

Background

Timely provision of Psychosocial Support (PSS) reduces the chances of full-blown mental and psychological illnesses post emergencies and disasters. To provide such support, it is important to build contextual and culturally sensitive capacities at the grassroot level. Local actors have to toil hard with limited knowledge and skills to prepare and respond to major calamities and disasters. Sphere India in collaboration with Americares India Foundation, and NIDM is organising a training program to strengthen the competencies of stakeholders working in emergencies to establish, support, and scale up Psychosocial Support (PSS) in communities. The training is tentatively scheduled from **27th to 29th February 2024** in **Mumbai, Maharashtra**.

The training aimed to impart knowledge on basics of providing Psychosocial Support in the field to affected individuals. This will enable the creation of a host of volunteers who are committed and equipped for PSS post disasters. Following the regional training, trainees are also expected to join a roster of volunteers who can be part of more advanced trainings and can be mobilized to provide basic psychosocial support during and after emergencies.

The successful training program involved 25 participants carefully selected from the four states of Maharashtra, Gujarat, Goa, and Rajasthan. These individuals demonstrated a robust profile that contributed to the overall success of the training. Each participant possessed relevant qualifications and hands-on experience in humanitarian action, emergencies, and disaster management, ensuring a solid foundation for the training. The emphasis on geographic representation aimed at engaging participants specifically from disaster-prone areas within these states, reflecting a strategic approach to address regional challenges. Affiliation with NGOs, CSOs, or State Departments mandated to provide psychosocial support in emergencies underscored the organizational commitment of the participants. Their availability for the entire three-day duration and unwavering commitment to applying the acquired knowledge and skills in their respective roles further strengthened the program's effectiveness. Additionally, the participants' proficiency in the English language, as outlined in the selection criteria, facilitated seamless engagement in the training sessions. This diverse and qualified group of participants collectively contributed to the success of the training, ensuring its impact on enhancing humanitarian efforts in the specified regions.

Training Objectives

By the completion of this training, the participants will be able to:

- To mention and state different components of basic concepts of disaster management.
- To define disaster psychosocial care and how it is different from disaster mental health services.
- To state the significance of disaster psychosocial care in the entire process of disaster management.
- To describe various impacts of disasters on the community and effects of stress on body and mind.
- List and illustrate the techniques of providing psychosocial care.
- Demonstrate different skills and techniques to work with various vulnerable groups such as women, children, and People with Disabilities (PWD).

TRAINING SUMMARY

Day 1

Introduction and Icebreaking

The training commenced with participants arriving and registering for the training. All the registered participants and resource persons received their training kits including the learner's manual, handouts in Hindi and English, and notebooks and pens for the training. The participants proceeded to join the training and introduced themselves to all the attendees.



The training commenced with an introductory panel featuring Prof. Anil Gupta from NIDM, Mr. Anirban Mitra representing Americares India Foundation, and Mr. Vikrant Mahajan from Sphere India. They shared the importance of addressing psychosocial support needs in the aftermath of disasters and the expectations from the training. They shared their experience on the role of psychosocial support in building resilience within communities in the preparedness phase and its significance in better and quicker recovery post disasters.



Following the introductory panel, there was an ice-breaking session to familiarise participants with each other and develop rapport as a team before proceeding to thematic sessions. The participants also shared their expectations from the training and completed the training pre-assessment to document their knowledge before the training commencement.

Session 1: Basics of Disaster management and Impacts of Disaster

Facilitators: Prof. Anil Kumar Gupta, Head, ECDRM Division, National Institute of Disaster Management (NIDM)

Objectives

- Explore the impact of disasters on individuals and communities.
- Learn components of psychosocial care in disaster settings.
- Analyse case studies and best practices in psychosocial care.

Session Summary

The training session, led by Dr. Anil K. Gupta, Head of the Emergency and Climatic Disaster Risk Management at the National Institute of Disaster Management, delved into two critical aspects: "Disaster Management: Concepts and Linkages with Development" and "Evolution & Principles of Psychosocial Care in Disaster Management in India."



The session outlined the phases of disaster management, emphasizing prevention, preparedness, response, and recovery. It highlighted the increasing frequency of forest fires and their economic, social, and environmental impacts in India. The linkages between disaster management and development were explored, addressing economic, social, and environmental impacts. Initiatives in India, such as disaster risk reduction and community-based approaches, were discussed alongside challenges and the way forward, including research, innovation, and international cooperation. The session also focused on psychosocial care in disaster management, emphasizing its importance and inclusion in India's disaster management frameworks. Key components and principles of psychosocial care were detailed, along with challenges and successful case studies from the Bhuj earthquake in 2001 and the COVID-19 pandemic. The session concluded with a call for more research, collaboration, and capacity building in disaster management.

Learning Outcomes

1. Understanding Disaster Impacts:

- a. Participants gained insight into the multifaceted impact of disasters on individuals and communities, including physical, psychological, social, and economic consequences.
- b. Analysed specific disaster case studies, such as the 2013 Uttarakhand floods and the COVID-19 pandemic, enhancing understanding of diverse challenges.

2. Components of Psychosocial Care:

- a. Participants acquired a comprehensive understanding of psychosocial care components in disaster settings, encompassing emotional support, psychological first aid, mental health assessment and intervention, community engagement, capacity building, and coordination.

3. Analysing Case Studies and Best Practices:

- a. Participants were able to learn through case studies, particularly the Bhuj Earthquake in 2001 and the COVID-19 pandemic.
- b. Identified and discussed best practices in psychosocial care implementation, gaining insights into effective strategies for diverse disaster contexts.

Session 2: Vulnerability mapping and Needs of the survivors

Facilitators: Ms. Atisha Sood and Ms. Fatima Amin, National Institute of Disaster Management (NIDM)

Objectives

- Identify survivors and assess their needs in disaster situations.
- Identify factors affecting vulnerability in India.
- Identifying psychosocial needs of community after disasters

Session Summary

The session on vulnerability mapping and understanding the needs of disaster survivors, emphasized the importance of vulnerability mapping in identifying and analysing populations at risk. India's hazard landscape, with more than half of its landmass susceptible to multiple high-intensity hazards, was discussed alongside the impact of recorded disasters between 1970 and 2023. The



importance of vulnerability mapping in targeting interventions, resource allocation, and informing preparedness and mitigation strategies was highlighted. Factors affecting vulnerability in India, such as socioeconomic status, caste, gender, age, and location, were explored. The session also covered psychosocial support (PSS) in emergencies, detailing interventions to promote psychological well-being, emotional resilience, and social connections.

Activity

The session included a group activity involving scenario-based needs assessment for flood, earthquake, cyclone, and landslide situations. Participants were divided into four groups with representation from different states. Participants were asked to identify potential vulnerabilities based on the assigned scenario and list specific needs of survivors in terms of PSS. These needs were to be identified on the basis of the following categories.



- **Mental and emotional well-being:** Addressing anxiety, fear, grief, and trauma.
- **Social support:** Promoting connection, belonging, and social interaction.
- **Practical support:** Providing information, accessing resources, and addressing practical challenges.

Following the activity, all the groups presented their respective assessments and there was a group discussion on the identified needs of the survivors and critical areas for intervention.

Learning Outcomes

1. Understanding Vulnerability Mapping:

- a. Participants learned the significance of vulnerability mapping in identifying and analyzing populations at risk during disasters.
- b. Explored the relationship between hazard, exposure, and vulnerability in the context of India's hazard landscape.

2. Factors Affecting Vulnerability in India:

- a. Participants gained insights into various factors, including socioeconomic status, caste, gender, age, and location, that contribute to vulnerability in the Indian context.
- b. Understood the complexities of vulnerability and how it varies across different communities and regions.

3. Psychosocial Support in Emergencies:

- a. Participants acquired knowledge about psychosocial support (PSS) interventions and their role in promoting emotional well-being and social connections in the aftermath of disasters.
- b. Explored the importance of PSS in addressing the emotional and social challenges faced by individuals and communities.

4. Needs Assessment Skills:

- a. Engaged in a group activity that involved scenario-based needs assessment, allowing participants to apply knowledge in identifying potential vulnerabilities and listing specific psychosocial support needs.
- b. Developed practical skills in brainstorming and addressing the mental, emotional, and practical needs of disaster survivors based on specific scenarios.

Session 3: Role of Community in Psychosocial Care

Facilitators: Mishel Mohan and Nupur Tyagi, Sphere India

Objectives

- Understand the roles of a psychosocial caregiver in disasters.
- Understand the community's role in psychosocial care during disasters.
- Explore the Circle of Support and its importance in caring for survivors in disasters.

Session Summary

The session focused on the crucial role of communities in providing psychosocial care during disasters. Psychosocial support in the aftermath of disasters involves comprehensive interventions to address a range of mental health problems and facilitate the rebuilding of human capacities, social cohesion, and infrastructure. Psychosocial caregivers play a vital role in assessing the mental and emotional well-being of survivors, providing crisis intervention, educating the community about psychosocial impacts, and coordinating access to mental health services. The vulnerability exercise engaged participants in assessing their preparedness for specific disaster-related scenarios, emphasizing the importance of confidence and capability in responding to challenges. Reflections on the role of communities in psychosocial care highlighted the significance of social support, effective communication, resilience building, and inclusion in aiding recovery.



Activities

The session included an activity on exploring differential vulnerabilities within communities. Each participant was given a cue card with an assigned identity and presented with a series of disaster scenarios. The participants were expected to step forward if they believed their assigned role could respond effectively in the assigned scenario or step backward if they couldn't respond to the scenario. After each round of scenarios, there was a discussion on why they believed they could or could not respond to a given scenario. Many participants were able to relate to their field experiences of discrimination and lack of access to resources by certain community members and sections of community. Participants were able to address their own biases and discuss with others about limitations on the field while distributing relief materials or talking to affected communities.



Learning Outcomes

1. Understanding Psychosocial Support:

- a. Participants gained a comprehensive understanding of psychosocial support, encompassing its role in addressing mental health problems and aiding in the recovery of individuals, families, and communities' post-disaster.
- b. Explored the multifaceted nature of psychosocial care, including its impact on reducing stress and preventing adverse psychological and social consequences.

2. Role of Psychosocial Caregiver:

- a. Participants learned about the multifaceted role of a psychosocial caregiver, including assessment, crisis intervention, education, and resource coordination.
- b. Developed insights into the challenges faced by psychosocial caregivers in disaster contexts and the importance of their role in immediate and long-term recovery.

3. Vulnerability Exercise:

- a. Engaged in a practical vulnerability exercise, allowing participants to assess preparedness and response for specific disaster-related scenarios.
- b. Explored the significance of capability and capacities in responding to challenges and uncertainties during disasters.

4. Role of Community in Psychosocial Care:

- a. Explored the role of communities in psychosocial care, including social support, effective communication, resilience building, and inclusivity.
- b. Recognized the collective strength and coping mechanisms that communities can foster to aid in the recovery process.

5. Circle of Support:

- a. Learned about the concept of the Circle of Support, encompassing family and friends, neighbours and community, professional services, and government/NGOs.
- b. Understood the importance of diverse support networks in providing emotional, practical, and long-term assistance during and after disasters.

Session 4: Psychosocial Care for Women and Children

Facilitators: Mishel Mohan and Nupur Tyagi, Sphere India

Objectives

- Explore the impact of disasters on the physical, emotional, and social well-being of women and children.
- Develop skills in creating a safe and supportive environment.

Session Summary

The session on "Psychosocial Care for Women and Children" delved into the nuances of providing support to vulnerable groups in the aftermath of disasters. The discussion began by addressing common gender stereotypes to highlight the economic, educational, and social challenges faced by women in crisis situations. The impact of disasters on women, particularly the



heightened security challenges, water sanitation and hygiene issues, and access to education, was thoroughly examined. The session also outlined psychological support strategies for women, emphasizing understanding, assurance, communication, and information provision.

Moving on to children, the session explored their needs after a disaster and the psychological components underlying those needs. The concept of Psychosocial Support (PSS) was introduced, detailing processes and actions that promote the holistic well-being of children. Specific psychosocial support needs were identified, along with corresponding interventions. The participants discussed the principles of working with children, actively listening, validating feelings, providing age-appropriate guidance, and involving children in decision-making.

The importance of Psychological First Aid (PFA) for children was emphasized, recognizing that children react differently to adults in crisis events. Action principles for PFA, including looking for safety, listening to needs, and linking to services, were discussed. The session concluded by highlighting that most children recover well if basic needs are met, they feel safe, and they receive support like psychological first aid.

Activity

The participants were asked to reflect on common gender stereotypes they encounter in everyday lives. Many participants shared stereotypes they have faced or heard about often in their daily lives and in their field experiences.

Learning Outcomes

1. Gender Stereotypes Awareness:

- a. Participants became aware of common gender stereotypes prevalent in society, fostering understanding of the challenges faced by women during and after disasters.

2. Role-Play and Economic Implications:

- a. Engaged in a role-play activity to understand the economic insecurities, worsened working conditions, and increased workload faced by women in post-disaster situations.
- b. Recognized the demographic changes and altered gender roles resulting from crises.

3. Security Challenges for Women:

- a. Explored the heightened security challenges for women, including the risk of sexual violence, especially in displaced settings.
- b. Discussed the various scenarios contributing to security challenges and potential consequences.

4. Children's Needs and PSS:

- a. Identified the psychosocial support needs of children post-disaster, including a sense of belonging, relationships with peers, personal attachments, intellectual and physical stimulation, and feeling valued.
- b. Gained insights into psychosocial interventions that address these specific needs.

5. Working with Children:

- a. Discussed the principles of working with children, actively listening, validating feelings, providing age-appropriate guidance, and involving children in decision-making.
- b. Shared experiences and reflections on the challenges and strategies for working with children.

6. Psychological First Aid for Children:

- a. Understood the importance of Psychological First Aid (PFA) for children, considering their unique reactions and specific needs based on age.
- b. Explored action principles for PFA, including looking for safety, listening to needs, and linking to services.

Day 2

Session 1: Stages of Reaction

Facilitator: Mr. Allen Christopher, NIMHANS

Objectives

- Explore different categories of reactions to disasters (cognitive, emotional, behavioural, relational, and physical)
- Identify Normal and Abnormal reactions to disasters.

Session Summary

The session included participants identifying various reactions and categorising them under emotional, behavioural, relational and physical reactions. Participants were asked to pick up reaction cards from a pile and state and explain the reaction and translate it to Hindi and place it under any one category. Participants were also asked to explain why they placed specific reactions in particular categories. A discussion was facilitated for the same by the trainer and participants based on their knowledge and understanding followed by technical inputs on categories of reactions. After all the reactions were categorised, participants were asked to discuss on what constitutes normal and abnormal reactions following a disaster.



The session also covered the significance of circles of support and how they can be disrupted in disasters. Participants reflected on how circles of support can be established to support affected communities and build resilience to recover.

Activities

1. **Stages of Reaction:** Participants were asked to classify various reactions to disasters and the stages of how different people and groups respond to disasters.
2. **Circle of Support:** Two participants were asked to volunteer for a game and assigned the role of a goat and a tiger. Participants were asked to create a human chain circle around the goat and protect it from the tiger attack. The tiger had to try to break the circle and capture the goat. The tiger was able to successfully break through the circle using a weak link and attack the goat. In the second round, participants were asked to create two circles of human chain around the goat. Participants learning from the first round were alert and refused to leave any weak links within the circles rendering the tiger



attack unsuccessful. Participants including those assigned the role of the tiger and the goat were asked to reflect on their experience after the activity.

Learning Outcomes

1. Understanding Categories of Reactions:

- a. Participants gained an understanding of different categories of reactions to disasters, encompassing cognitive, emotional, behavioral, relational, and physical aspects.
- b. Identified and classified specific reactions under each category through hands-on activities and discussions.

2. Differentiating Normal and Abnormal Reactions:

- a. Explored the distinction between normal and abnormal reactions to disasters.
- b. Engaged in categorizing reactions, leading to discussions on the variability of responses and factors influencing their classification.

3. Enhanced Sensitivity to Varied Reactions:

- a. Developed a heightened sensitivity to the diverse range of reactions individuals and communities may exhibit in the aftermath of disasters.
- b. Gained insights into the complexities of human responses and factors influencing the normality or abnormality of reactions.

4. Importance of Circles of Support:

- a. Explored the significance of circles of support and how they play a crucial role in disaster recovery.
- b. Analysed how disruptions in circles of support can impact affected communities and hinder resilience.



Session 2: Basic Techniques of Psychosocial Care

Facilitator: *Mr. Allen Christopher, NIMHANS and Ms. Shruti Samant, Americares India Foundation*

Objective

- Explore psychosocial care techniques: ventilation, active listening, empathy, social support, externalization of interest, spirituality, relaxation, and recreation.

Session Summary

The session aimed to deepen participants' understanding of psychosocial care techniques, emphasizing the importance of ventilation, active listening, empathy, social support,

externalization of interest, spirituality, relaxation, and recreation. The interactive nature of the session allowed participants to practically engage with these techniques.

Activities

1. Balloon Bursting: Five volunteers participated in an engaging balloon-bursting activity. Two participants quickly blew up and burst their balloons, while three opted for periodic releases, preventing their balloons from bursting. This exercise illustrated the importance of regular emotional ventilation, highlighting the potential adverse effects of repressed emotions. It emphasized healthy behaviour for maintaining mental well-being, encouraging participants to express emotions and seek support within their capacities.



2. Showing Empathy: During the session, participants engaged in an empathy demonstration activity to understand and exhibit empathetic communication. A participant volunteer was presented with a distressing scenario, and three individuals were assigned specific approaches to address the volunteer's situation. The first participant expressed sympathy and pity towards the volunteer's situation. This approach often involves acknowledging the distress but may inadvertently create a sense of helplessness in the recipient. The second participant actively listened to the volunteer's situation and responded by providing multiple solutions. This approach aimed to offer practical advice and problem-solving strategies to alleviate the volunteer's distress. The third participant chose to listen attentively to the volunteer, allowing them the space to articulate their feelings and thoughts. This approach empowered the volunteer to navigate their emotions, encouraging self-reflection and problem-solving.



Learning Outcomes

1. Comprehensive Understanding:

- a. Participants gained a comprehensive understanding of various psychosocial care techniques, recognizing their significance in addressing emotional needs.

2. Practical Application:

- a. Through the balloon-bursting activity, participants practically applied the concept of ventilation, linking theoretical knowledge to real-life scenarios.

3. Promoting Healthy Behaviours:

- a. Emphasized the promotion of healthy behaviors, particularly expressing emotions and seeking support, as essential components of psychosocial care.
4. **Awareness of Adverse Impacts:**
 - a. Participants developed awareness regarding the potential adverse impacts of repressed emotions, reinforcing the importance of emotional release.
 5. **Diversity of Techniques:**
 - a. Explored the diversity of psychosocial care techniques, empowering participants with a range of tools to cater to individual needs.
 6. **Creating Supportive Environments:**
 - a. Highlighted the role of psychosocial care techniques in creating supportive environments that foster emotional expression and well-being.
 7. **Encouraging Capacity-Based Support:**
 - a. Encouraged participants to seek and provide support within their capacities, acknowledging the variations in individuals' abilities to express emotions.
 8. **Integration of Theory and Practice:**
 - a. Bridged the gap between theoretical knowledge and practical application, ensuring participants could effectively implement psychosocial care techniques in their respective roles.

Session 3: Follow up and Referral Mechanisms

Facilitator: Mr. Allen Christopher, NIMHANS

Objective

- Assessing needs and process of referral for serious cases.

Session Summary

Participants were asked to review the various checklists and list of suggested questions to ask affected people to assess their mental health and well-being. There was a discussion following what constitutes normal and abnormal reactions following disasters and the timeframe for the same. The facilitator highlighted what would be the areas of concerns and how to follow-up with affected individuals and referral mechanisms for serious cases.

Learning Outcomes

1. **Comprehensive Assessment Skills:**
 - a. Participants acquired skills in assessing the mental health and well-being of affected individuals by reviewing checklists and suggested questions. This encompassed a holistic understanding of the diverse aspects contributing to mental health.

2. Differentiating Normal and Abnormal Reactions:

- a. Through discussions, participants developed the ability to distinguish between normal and abnormal reactions exhibited by individuals following disasters. This nuanced understanding helps provide appropriate support based on the nature of reactions.

3. Referral Mechanisms for Serious Cases:

- a. Participants were able to gain knowledge of referral mechanisms for serious mental health cases. Understanding when and how to refer individuals to specialized support services enhances the overall effectiveness of psychosocial care.

4. Identification of Areas of Concern:

- a. Participants learned to identify specific areas of concern related to mental health and well-being during the assessment process. This included recognizing signs or behaviours that may indicate serious challenges requiring further attention.

5. Empathy and Sensitivity:

- a. Through practical scenarios and discussions, participants cultivated empathy and sensitivity in their approach to assessing mental health needs. This is crucial for establishing trust and fostering a supportive environment.

Session 4: Role Play Flood Disaster Scenario

Facilitator: Ms. Mishel Mohan and Ms. Nupur Tyagi, Sphere India

Objective

- Examine the impact of disaster on different individuals and the psychosocial effects of shifting to a relief camp and how to address the needs of affected people.

Session Summary

Volunteers were assigned roles of individuals in different families. Some participants were assigned the roles of being walls of a house and then of a relief camp. A flood alert was provided. The participants were asked to shift to the nearest relief camp once the flood struck. All the participants shifted to the relief camps in their respective roles and enacted what



they thought would be the reactions of their characters to the disaster. Two participants were assigned the role of psychosocial care providers who arrive at the relief camp in the immediate aftermath of a disaster. These two participants were asked to enact how they would provide psychosocial care to the distressed individuals. Following the activity, the participants were

asked to reflect on their various challenges, observations, etc. There was a group discussion following the activity where participants shared their experiences from the activity. Many participants were also able to relate it with their field experiences and insights from the same and connect it with psychosocial needs and care strategies.

Activities

Role Play in Disaster Scenario: Participants were asked to enact certain character based on minimal cues regarding their identity. They were to be impacted by a flood and shift to the nearest relief camp with other families in the neighbourhood. Participants were also assigned the roles of walls of a home and later a relief



camp. Dynamics of a family with a drunk father and a mother who was the bread winner as well as the primary caregiver was displayed prior to the flood. Following the flood, many such families with varying levels of challenges were shifted to a relief camp with limited space and experience the ensuing challenges. Psychosocial care givers were asked to enact how they would interact with the distressed community based on the strategies and techniques discussed earlier in the training.

Learning Outcomes

1. **Understanding Diverse Psychosocial Reactions:** Participants gained insights into the varied psychosocial reactions of individuals facing a disaster, including those with complex family dynamics. This involved a nuanced understanding of diverse challenges individuals may encounter during such situations.
2. **Application of Psychosocial Care Strategies:** Through the role-playing activity, participants had the opportunity to practically apply and enact psychosocial care strategies in a realistic scenario. This enhanced their ability to understand how learned PSC techniques would be implemented in a dynamic and challenging environment.
3. **Identification of Unique Challenges in Relief Camps:** The session allowed participants to identify and navigate through the unique challenges presented in relief camps, such as limited space, diverse family dynamics, and varying degrees of distress. This heightened awareness contributes to more effective and tailored psychosocial care.
4. **Reflection and Connection to Field Experiences:** Participants engaged in reflective discussions, drawing connections between the role-play activity and their real-world field

experiences. This connection facilitated a deeper understanding of the psychosocial needs and care strategies relevant to disaster-affected individuals.

5. **Enhanced Group Understanding and Communication:** The group discussion following the activity fostered enhanced communication and understanding among participants. Sharing experiences allowed for the collective exploration of challenges, observations, and insights, promoting a collaborative learning environment.

DAY 3

Session 1: Psychosocial Care for People with Disabilities and Elderly

Facilitators: Dr. Anil Koparkar, AIIMS Gorakhpur

Objectives

- Explore the impact of disasters on the physical, emotional, and social well-being of women, children, people with disabilities and elderly.
- Develop skills in creating a safe and supportive environment.

Session Summary

The session focused on Psycho-Social Care for individuals with disabilities and the elderly in the context of disasters. Participants explored the concepts of impairment and disability, recognizing the barriers individuals face in accessing resources and environments. Various issues concerning the elderly, including frailty, non-communicable diseases, and dependency, were discussed. Group activities were conducted to identify challenges faced by persons with disabilities and the elderly in post-disaster situations. The session emphasized understanding psychosocial needs, addressing ageism, and implementing inclusive mental health support.



Activities

Identify Physical, Social, Emotional and Evacuation issues for People with Disabilities and Elderly: Participants were divided into four groups and each group was asked to enlist the physical, social, emotional and evacuation issues for People with Disabilities and Elderly in a disaster scenario.



Learning Outcomes

1. **Understanding Caregiver Challenges:** Participants developed a deeper understanding of the challenges faced by caregivers in humanitarian settings, exploring the reasons for becoming caregivers and recognizing the responsibility associated with it.
2. **Stress Management Knowledge:** Participants gained knowledge about stress, its potential harm, and practical tips for preventing and handling stress. This included the importance of identifying stressors, implementing stress management techniques, and fostering open communication.

3. **Self-Care Strategies:** Participants learned a variety of self-care strategies tailored for caregivers, such as self-compassion, breath awareness, mind-body practices like yoga, and the significance of maintaining a healthy lifestyle, regular eating, and sleeping patterns.
4. **Group Collaboration for Care Planning:** The group activities encouraged collaborative thinking and planning for better caregiver care. Participants shared insights and ideas on how to support caregivers effectively, fostering a sense of collective responsibility.
5. **Take-home Messages:** The session concluded with key take-home messages, summarizing the importance of self-compassion, physical activities, social connections, and ongoing professional development for caregivers. These messages served as a reminder of the holistic approach needed for effective caregiver support.



Session 2: Self-Care and Caring of Caregivers and Ethics, Action Plan for PSS

Facilitator: Dr. Anil Koparkar, AIIMS Gorakhpur

Objectives

- Implement effective strategies for managing stress and preventing burnout.
- Promote self-care practices among psychosocial caregivers.
- Ethical considerations for PSC
- Action plan for support & resilience

Session Summary

1. Self-care and Caring of Caregivers

The session centered on the crucial theme of self-care and caring for caregivers, particularly in humanitarian settings. Participants engaged in group activities to explore the challenges and importance of being a caregiver, along with stress management strategies. The session delved into the significance of caring for caregivers, recognizing the potential impacts of stress on health, job performance, and personal life. Practical tips and techniques for managing stress and preventing burnout were discussed, emphasizing the importance of self-care plans, mindfulness, and social connections. The session concluded with a group activity focused on planning for better caregiver care.

2. Ethics, action plan for PSS

This session focused on the ethical considerations and action plans in providing psychosocial support (PSS). Participants engaged in group discussion on ethical issues in given conditions and preparing a checklist for fulfilling ethical standards in PSS. The session covered basic principles of ethics in PSS, emphasizing autonomy, consent, confidentiality,

cultural sensitivity, competence, avoiding harm, boundaries, equity, accessibility, and self-care. Additionally, the importance of follow-up and referral mechanisms was highlighted as crucial for continuous psychosocial care.

Activities

1. **Chicken Dance:** Participants were asked to follow the video on kids performing the chicken dance. The dance was able to ease and served to destress all the participants. The activity encouraged the participants to destress regularly and the importance of catering to their own needs in a disaster scenario. Participants were also encouraged to take care of their physical and mental health regularly to be able to function better in everyday lives.



2. **Group Discussion on Ethical Considerations for providing Psychosocial Care:** Participants were asked to reflect on the ethical considerations for providing psychosocial care in certain scenarios.



This was followed by a facilitated group discussion where participants reflected on their experiences in similar scenarios and what are the ethics of providing care in such cases. This was followed by a discussion on what is considered ethical practices in psychosocial care.


Learning Outcomes

Self-care and caring of caregivers:

1. **Understanding Caregiver Challenges:** Participants developed a deeper understanding of the challenges faced by caregivers in humanitarian settings, exploring the reasons for becoming caregivers and recognizing the responsibility associated with it.
2. **Stress Management Knowledge:** Participants gained knowledge about stress, its potential harm, and practical tips for preventing and handling stress. This included the importance of identifying stressors, implementing stress management techniques, and fostering open communication.
3. **Self-Care Strategies:** Participants learned a variety of self-care strategies tailored for caregivers, such as self-compassion, breath awareness, mind-body practices like yoga, and the significance of maintaining a healthy lifestyle, regular eating, and sleeping patterns.

4. **Group Collaboration for Care Planning:** The group activities encouraged collaborative thinking and planning for better caregiver care. Participants shared insights and ideas on how to support caregivers effectively, fostering a sense of collective responsibility.
5. **Take-home Messages:** The session concluded with key take-home messages, summarizing the importance of self-compassion, physical activities, social connections, and ongoing professional development for caregivers. These messages served as a reminder of the holistic approach needed for effective caregiver support.

Ethic, Action Plan for PSS

1. **Ethical Awareness:** Participants gained a heightened awareness of ethical issues associated with providing psychosocial support. They explored the complexity of ethical considerations in diverse conditions, recognizing the importance of upholding well-being, dignity, and autonomy.
- 
2. **Principles of Ethics in PSS:** Participants acquired knowledge about the fundamental principles of ethics in PSS, including autonomy and consent, confidentiality, cultural sensitivity, competence and training, harm prevention, setting boundaries, equity, accessibility, and the significance of self-care.
 3. **Action Planning for Follow-up and Referral:** Participants learned about the essential components of follow-up and referral mechanisms in psychosocial care. The session provided insights into the framework for effective follow-up, continuous support, and access to specialized services when needed.
 4. **Checklist Preparation:** Through the group activity, participants actively engaged in reviewing a checklist to fulfil ethical standards in providing PSS. This practical exercise facilitated a hands-on understanding of how to address and integrate ethical considerations into their psychosocial support practices.
 5. **Integration with Existing Services:** The session highlighted the importance of integrating psychosocial care with existing services and established coordination with local authorities. Participants understood the significance of collaborative efforts and feedback mechanisms in ensuring the effectiveness of PSS.

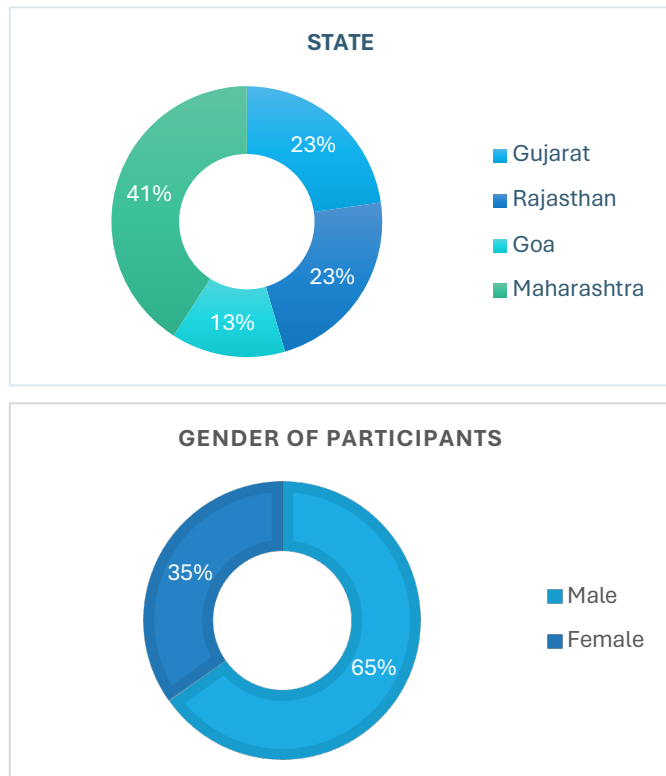
KEY LEARNING FROM REGIONAL TRAINING

- ✓ The selection process that aimed to bring together diverse stakeholders passionate about psychosocial support resulted in a diverse pool of participants of hailing from various states, age groups, educational, professional and life experiences. This enriched the training by expert inputs on content, methodology and future plan of action.
- ✓ The content developed for the training was rich in theory and methodology. The participants were curious and interested to learn more in-depth information on psychosocial interventions. For ex. methods and strategies to provide PSS, would require additional sessions and a lengthened training duration to cover beyond introduction to the topics. The reference materials provided to the participants was also appreciated and can help the participants glean additional insights and reflect on the training content in future.
- ✓ 14% of the participants reflected that the training duration should have been longer up to 5 days to cover all the topics listed. This would provide adequate time to cover specific topics in detail and give the participants more technical information on methods and practical exercises to provide PSS.
- ✓ Participants appreciated the different methods used by the facilitators to deliver content on various topics. However, participants also indicated that more real life examples and role-play of providing PSS might have enriched the trainings further.
- ✓ The group activities, discussions and feedback sessions provided the participants a platform to raise their queries, engage with peers and provide insights based on their personal and professional experience. Additionally, the pointed queries of participants enabled the facilitators to provide in-depth information on topics of interest and direct them to additional resources where necessary.
- ✓ The training ensured that all participants irrespective of their individual backgrounds understood the importance of psychosocial support in emergencies. The participants left with an enhanced capacity to gauge the psychosocial needs of affected populations and methods of intervention to provide PSS.

TRAINING IMPACT AND SUCCESS

Details of Participants

The training was attended by 25 participants from the states of Maharashtra, Gujarat, Goa, and Rajasthan. Out of the 25 participants, nine participants (41%) were from Maharashtra followed by five participants (23%) each from Gujarat and Rajasthan and three participants (13%) from Goa. The age distribution of the participants was diverse with both experienced and new professionals' part of the training. The average age of participants was 35 years with the oldest participants being 52 years and the youngest being 24 years. In terms of gender distribution, 65% of the participants were male and 35% of the participants were female.

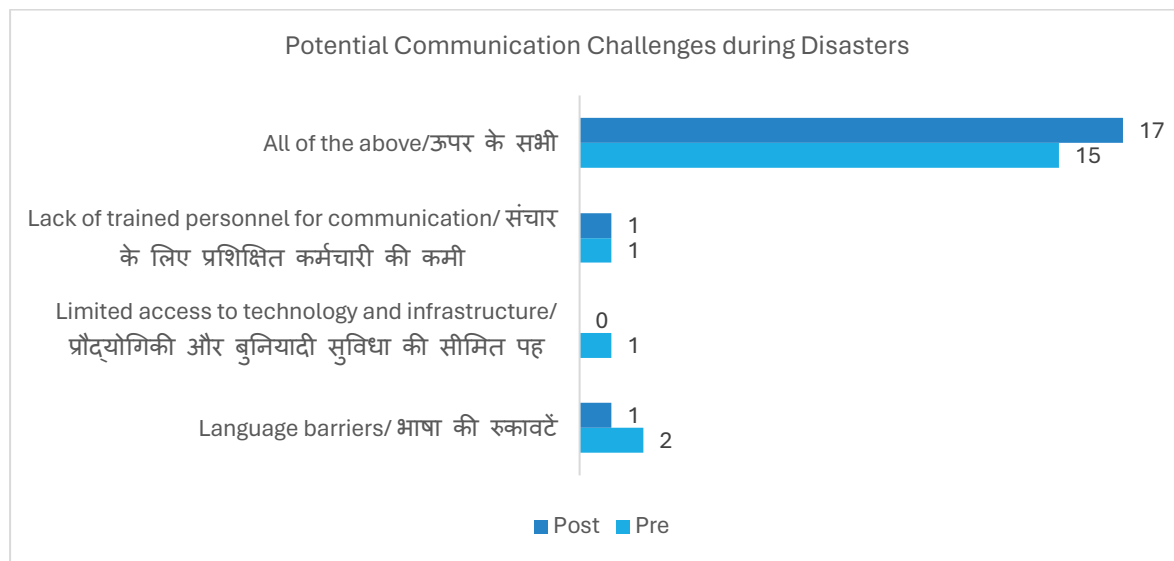


Feedback and Testimonials

- *“The training was a very good learning experience. We got to learn about theoretical aspect through practical activities.”*
- *“More trainings on the topic and can be conducted online as well.”*
- *“Looking forward to next level training. Thank you for value creation at the grassroot level profile.”*
- *“Program schedule was good. Program was coordinated well.”*
- *“Training of Trainers (ToT) can be organised state-wise. Action plan can be prepared by the participants for the same on last day. Use more time for the session for maximum benefit.”*
- *“Training time can be increased to cover all topics adequately including activities.”*
- *“Training was simple, clear and activity based. In less training time, all topics were covered.”*

Improved Knowledge and Skills of Participants

Potential Challenges related to communication during disasters.



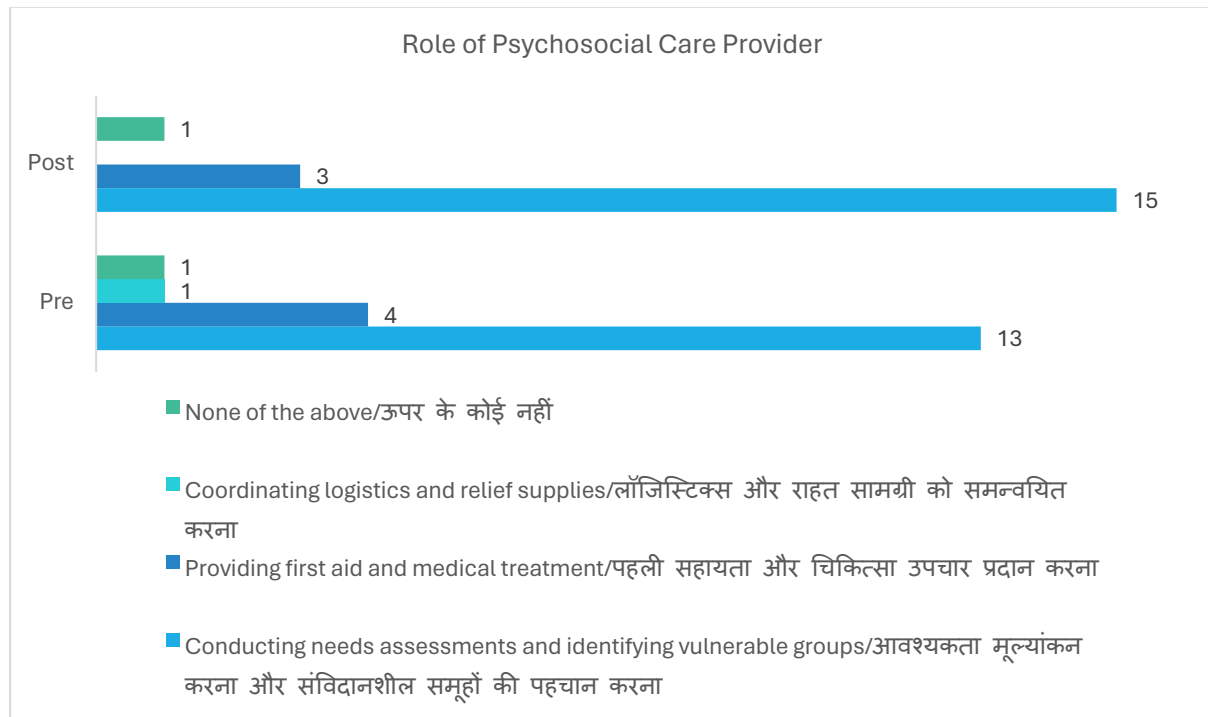
Participants were able to identify the potential challenges that may arise during disasters related to communication. Before the training, 78.9% of the participants were able to identify that potential challenges would include all the listed factors of limited access to technology and infrastructure, language barriers, lack of trained personnel for communication. The remaining participants identified any one factor they felt would lead to communication challenges during disasters. In the post-training assessment, 89.5% of the participants identified all the factors that would impact communication challenges during a disaster.

Role of PSS in overall well-being and recovery of disaster-affected individuals and communities

In the pre-training assessment, participants identified that psychosocial support can help cope with trauma in the affected individuals and give them mental stability. It could help communities in assisting each other during difficult times, reduce stress, increase confidence and foster positivity in people. Some people also stated that they were unsure how it would be helpful and would like to know about the same during the training.

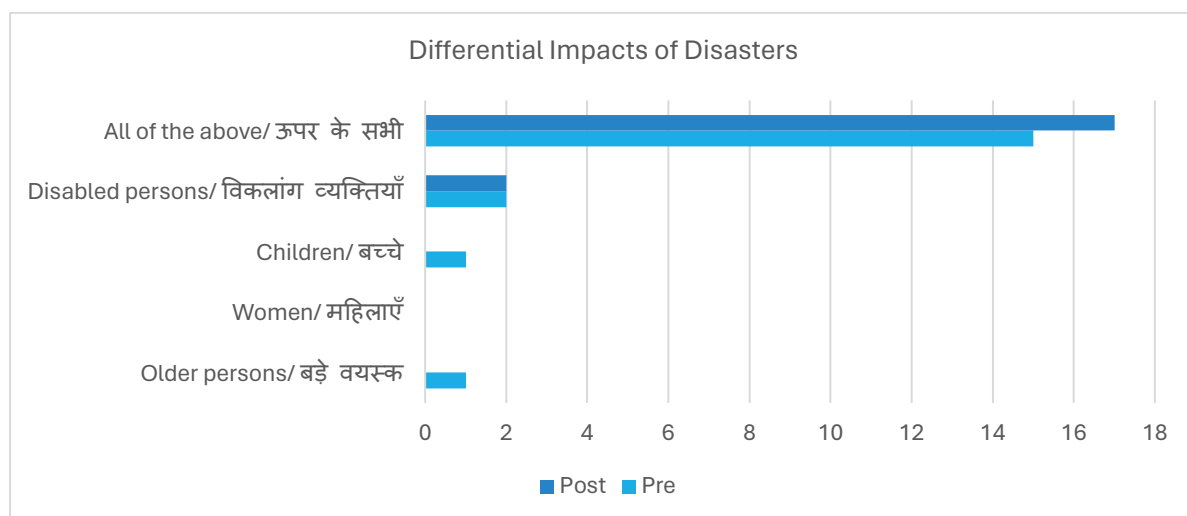
In the post-assessment, all the responses mentioned that psychosocial support can help in rebuilding and assisting each other during disasters. Psychosocial support they believed can help generate hope, courage and compassion within the community and help them cope with the trauma of disasters. Participants stated that through active and empathetic listening, support and by fostering a sense of belonging catering to the emotional and social needs of affected can help build resilience.

Responsibilities of a Psychosocial Care Provider during Disaster Response



Participants were asked to list the specific responsibilities of a psychosocial care provider during disaster response. In the pre-assessment participants listed conducting needs assessment and identifying vulnerable populations, providing first aid and medical treatment and coordinating logistics and relief supplies. In the post-training assessment as well, most participants identified conducting needs assessment and identifying vulnerable groups as the key responsibility of a psychosocial care provider in disasters.

Differential vulnerabilities during disasters



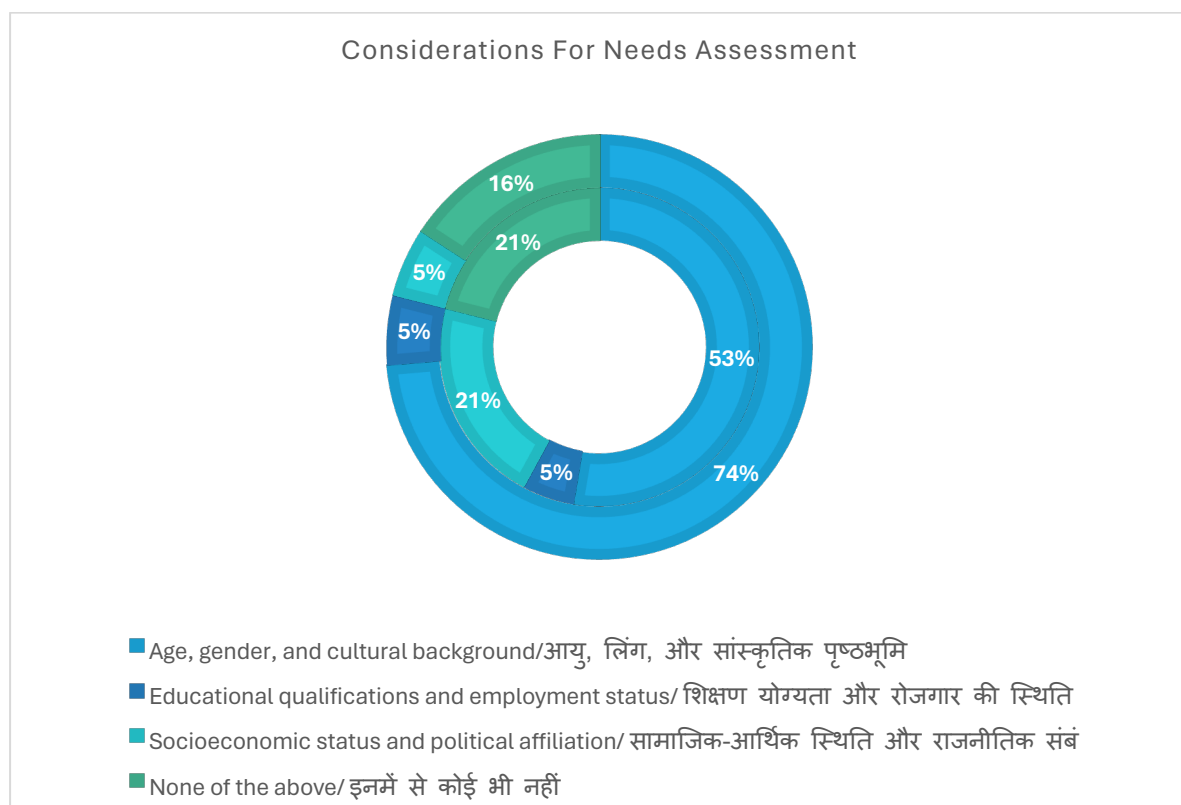
To understand the differential impacts of disasters on specific sections of affected population, participants were asked to enlist challenges faced by children, women, and people with

disabilities. In the pre-assessment, 78.9% responses suggested all the listed groups of older persons, people with disabilities, children and women tend to be more affected than others during a disaster. In the post-training assessment, 89.5% identified all the listed groups tend to be more affected than others during a disaster.

Key factors to consider when identifying needs of survivors

Participants were asked to enlist what are the key factors to consider when identifying the needs of survivors. In the pre-assessment, 52.6% of responses listed age, gender, and cultural background as the most important factor to needs identification of survivors followed by 21% citing socioeconomic status and political affiliation and none of the listed factors.

In the post-assessment 73.7% listed Age, gender, and cultural background as the most important factor to needs identification of survivors followed by none of the factors listed (15.8%), educational qualifications and employment status and socioeconomic status and political affiliation.



Challenges faced by People with Disabilities



In the pre-assessment, participants enlisted several challenges faced by people with disabilities. This included challenges in communication, access to relief shelters, lack of accommodating spaces, lack of resources, challenges in rescue, discrimination, etc. Participants displayed high awareness of the common challenges faced by people with disabilities in disabilities.

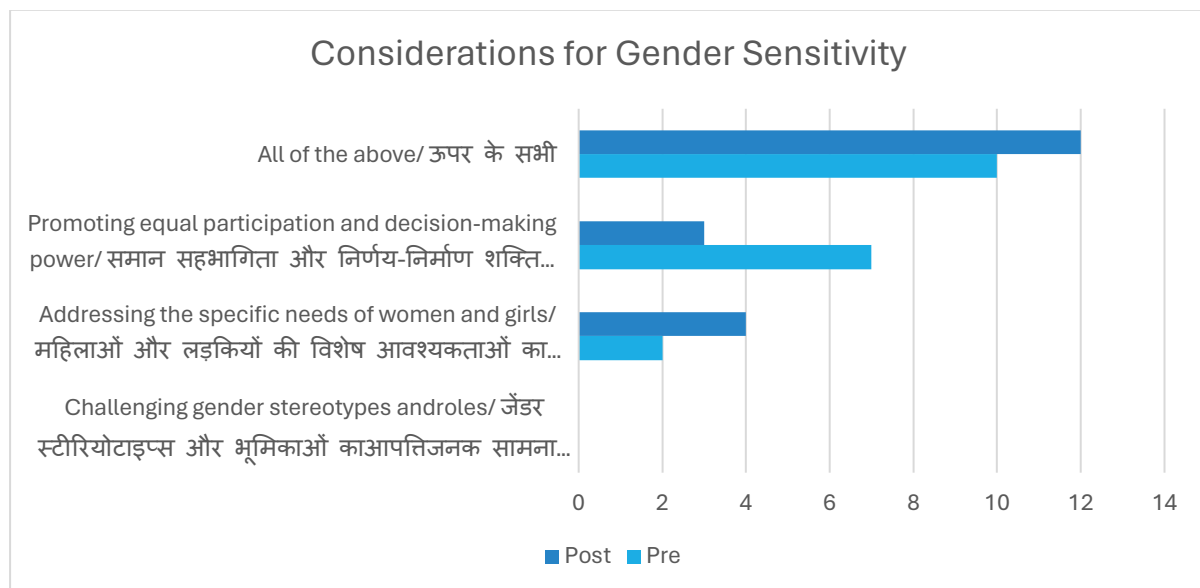
In the post-assessment as well, participants cited several challenges including nuances of the challenges faced by people with disabilities. This included lack limited education of responders, lack of knowledge on response mechanisms and requirements for people with disabilities, lack of daily activity, dependency, limited resources, communication problems and challenges in evacuation.

Impact of Disaster on Children

Participants were able to identify fear, shock, loneliness due to isolation, PTSD, losing social support, learning issues, lack of interest in activities, fear of losing loved ones, disruption in education and long term mental trauma as some of the impacts of disasters on children prior to the training.

In the post-assessment, participants further developed their knowledge with nuanced understanding of issues faced by children post disasters. They identified uncertainty, loss, fear of future, adjustment issues, insecurity, harassment, trauma, separation from caregiver, stress, lack of daily activities/routine, disruption of education as the impacts of disaster on children.

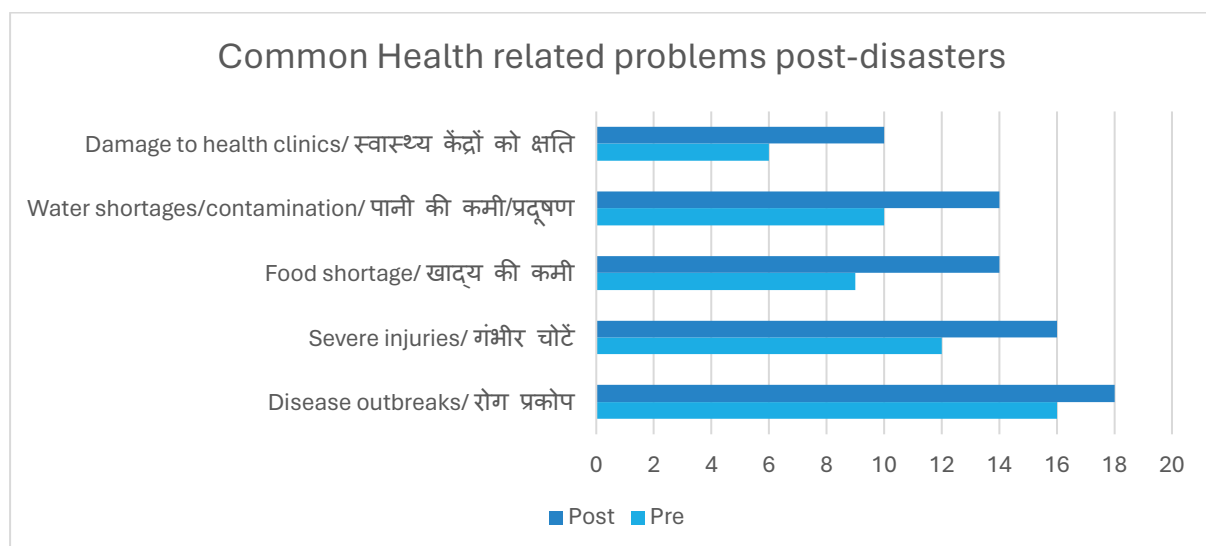
Considerations for Gender Sensitivity



For listing considerations for ensuring gender sensitivity in disaster management, 52.6% participants cited all of the listed factors important for gender sensitivity followed by promoting equal participation and decision-making power (37%) and addressing the specific needs of women (10.5%).

In the post-assessment, 63.2% responses suggested all the listed options as considerations for gender sensitivity, followed by addressing the specific needs of women and girls (21%), followed by promoting equal participation and decision making (16%).

Health related problems during Disasters



Participants were asked to enlist the common health-related problems during a disaster. In the pre-assessment, majority of the participants listed disease outbreaks (84%) followed by severe

injuries (63%), water shortage and contamination (53%), food shortage (47%) and damage to health clinics (32%).

After the training, majority of the participants listed disease outbreaks (95%) followed by severe injuries (84%), water shortage and contamination (74%), food shortage (74%) and damage to health clinics (53%).

Healthy coping behaviours and its role in PSS care in disaster affected community



Participants were asked about what they considered healthy coping behaviours and how they could help disaster affected community. Participants listed several behaviours including seeking support by talking to a professional or trusted person, positive thinking, physical activities, practicing mindfulness, helping each other, establishing, and maintaining routines under challenging circumstances.

After the training, participants were able to list numerous healthy coping mechanisms including appropriate reactions like crying, ventilation, engaging in spiritual and recreational activities, active participation and building social connections, seeking support, etc.

Role of Community support in Psychosocial Care

In the pre-training assessment, participants were asked to list the role of community support in psychosocial care. A majority of the participants responded that offering emotional support and a sense of belonging (47%) was the most important role of community. This was followed by conducting awareness campaigns on disaster preparedness (32%) and providing financial assistance to survivors (21%).

Similarly, in post-training assessment, a majority of participants responded that offering emotional support and a sense of belonging (74%) was the most important role of community. This was followed by conducting awareness campaigns on disaster preparedness (21%).

Boarding, Lodging and Venue of the Training

The boarding and lodging for the participants and resource persons were arranged by the organising team of Sphere India and Americares India Foundation. The training was held at YUVA Centre, Kharghar, Mumbai. The training commenced at 09.00 AM Tuesday, February 27th, 2024 and concluded on Thursday, 29th February, 2024. Accommodation facilities were provided at the residential campus of YUVA training centre.

Certificates

Certificates were awarded to the participants on successful completion of the course.

(NOTE: Only those who had registered, enrolled, had more than 80% attendance and submitted feedback received a certificate of training program.)

Training Details

This training programme was scheduled for 3 days, based on classroom learning module covering 8 hours each day during the training from 9.30 AM to 4.30 PM. Twenty-five participants attended the training.

Language of Instruction

The medium of instruction was English and Hindi. The resource persons conducted the session using bilingual medium of English and Hindi to cater to the needs of all participants.

Way Forward

- **Continued Learning in Hybrid Mode:** To ensure continuous learning and knowledge dissemination, participants proposed hybrid learning methods. Regular virtual sessions on similar topics and in local languages of various states using online platforms will complement acquired knowledge. This will enable participants to access additional resources, engage in discussions, and participate in webinars and workshops. This approach will help us adapt to diverse learning needs and reach a wider audience across the region.
- **Regional Groups:** Regional groups will be established comprising trained facilitators, participants, and stakeholders. These groups will serve as platforms for knowledge exchange, peer support, and collaborative efforts in providing psychosocial support at the community level. Regional groups will encourage networking and mutual learning, fostering a strong sense of community and shared responsibility. Additionally, state-level trainings of a similar nature will also be explored as suggested by the participants.

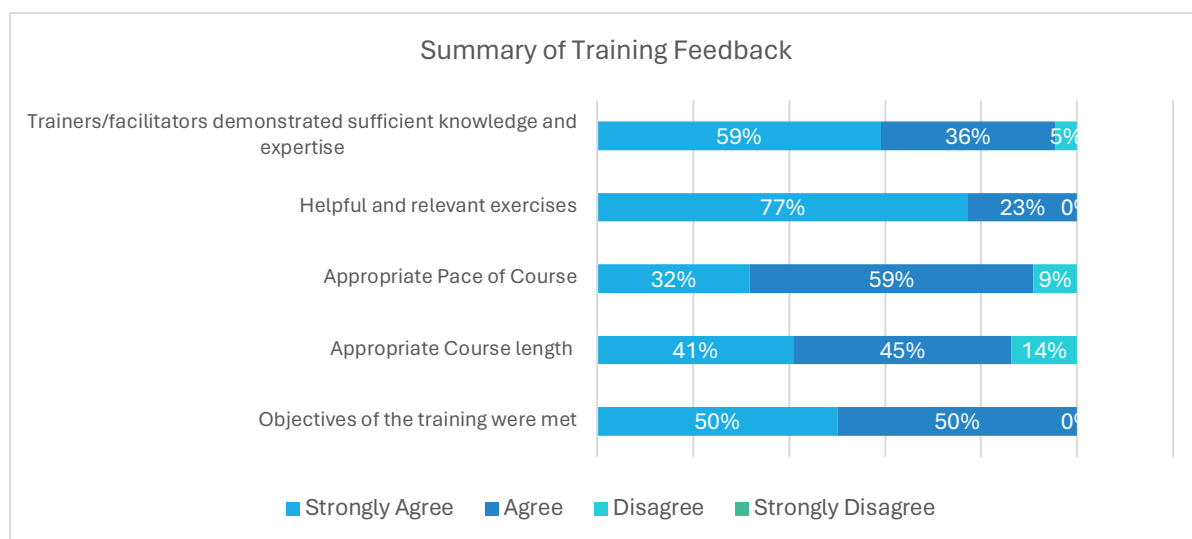
- **Reference Materials:** Participants found the provided reference materials valuable. As we move forward, we will continue to curate and update these resources, making them accessible to all participants and stakeholders. These materials will serve as a repository of best practices, case studies, and innovative approaches in psychosocial support, supporting ongoing learning and professional development.

Together, the proposed initiatives will bolster our collective efforts in ensuring the well-being and resilience of communities affected by disasters. By fostering a culture of continuous learning, collaboration, and regional engagement, we can amplify the impact of psychosocial support interventions and contribute to the long-term recovery of survivors. Let us unite in this journey, leveraging our collective expertise and passion to build caring and supportive communities.

CONCLUSION

The regional training on Psychosocial Support in Emergencies for humanitarian professionals was the first in a series of similar trainings. The West Regional Training was held in Mumbai for participants from the states of Goa, Gujarat, Maharashtra and Rajasthan. The training was a remarkable step towards building a roster of locally-trained professionals capable of providing psychosocial support in the aftermath of disasters. This training was an attempt at fostering caring and supportive communities. Through this training, participants gained valuable insights into the importance of a community-centric approach, holistic care, and building resilience. Their improved knowledge and skills will enable them to provide effective psychosocial care and support survivors immediately following disasters.

The selection process ensured that applications were received from grassroots organisations of the targeted states. This brought together a diverse group of passionate individuals with varying degrees of professional and personal experience and exposure to the topic. Participants appreciated the content, resource persons and training methodologies. Feedback sessions and group activities also facilitated engaging discussions and meaningful interactions among peers.



The chart presents the results of the training evaluation. Participants rated their agreement on various aspects of the training using a Likert scale. The majority agreed that the training objectives were met, the course length and pace were appropriate, and the exercises were relevant. They also found the trainers knowledgeable and the training venue suitable. However, a small percentage disagreed about the course length and pace, and knowledge and expertise demonstrated by the trainers. Overall, the training was considered successful in meeting its objectives, but there were mixed opinions about the course length and pace.

The positive impact of the training is evident from the enthusiastic feedback and testimonials received. Participants left with enhanced capacities to gauge psychosocial needs and intervene effectively. To continue this momentum, peer groups and regional networks have been established to ensure ongoing learning and support initiatives.

We are grateful to all the participants, trainers, and supporting organizations for their dedication and commitment. As we move forward, let us continue to advocate for the importance of psychosocial support in emergencies and work collaboratively to build resilient and caring communities. Together, we can make a lasting impact on the well-being and recovery of disaster survivors.

ANNEXURE

Session Plan

#	Time	Topic	Resource Person
Day 1			
0	09.30 AM – 10.00 AM	Registration & Welcome <ul style="list-style-type: none"> Ice-breaking Activity. Introduction 	Facilitated by Sphere India
1	10.00 AM – 11.00 AM (60 min)	Basics of Disaster management and Impacts of disaster <ul style="list-style-type: none"> Explore the impact of disasters on individuals and communities. Learn components of psychosocial care in disaster settings. Analyze case studies and best practices in psychosocial care. 	Prof. Anil Kumar Gupta, Head, ECDRM Division, NIDM
	11.00 AM – 11.30 AM	TEA BREAK	
2	11.30 AM – 12.30 PM (60 min)	Vulnerability mapping and Needs of the survivors <ul style="list-style-type: none"> Identify survivors and assess their needs in disaster situations. Develop effective communication and support skills in high-stress environments. Differentiate between normal and concerning reactions after disasters and recognize common psychological responses. 	Ms. Fatima Amin and Ms. Atisha Sood, NIDM
3	12.30 PM – 01.30 PM (60 min)	Role of community in Psychosocial Care <ul style="list-style-type: none"> Understand the roles of a psychosocial caregiver in disasters. Understand the community's role in psychosocial care during disasters. Explore the Circle of Support and its importance in caring for survivors in disasters 	Ms. Mishel Mohan, Ms. Nupur Tyagi Sphere India
	01.30 PM – 02.30 PM	LUNCH BREAK	
4	02.30 PM – 03.30 PM (60 min)	Psychosocial Care for Women, Children <ul style="list-style-type: none"> Explore the impact of disasters on the physical, emotional, and social well-being of women and children. Develop skills in creating a safe and supportive environment 	Ms. Mishel Mohan, Ms. Nupur Tyagi Sphere India
5	03.30 PM – 04.30 PM (60 min)	Group Discussion <ul style="list-style-type: none"> Experience sharing between participants and facilitators 	Facilitated by Sphere India
Day 2			
6	09.30 AM – 10.30 AM (60 min)	Stages of Reaction <ul style="list-style-type: none"> Explore different categories of reactions to disasters (cognitive, emotional, behavioral, relational, and physical) 	Mr. Allen Christopher, NIMHANS
7	10.30 AM – 11.30 AM (60 min)	Basic Techniques of Psychosocial Care	Mr. Allen Christopher, NIMHANS

#	Time	Topic	Resource Person
		<ul style="list-style-type: none"> Explore psychosocial care techniques: ventilation, active listening, empathy, social support, externalization of interest, spirituality, relaxation, and recreation. 	
	11.30 AM – 12.00 PM	TEA BREAK	
8	12.00 AM – 12.30 PM (60 min)	<p>Follow-up and Referral Mechanisms</p> <ul style="list-style-type: none"> Assessing needs and process of referral for serious cases 	Mr. Allen Christopher, NIMHANS
	01.00 PM – 02.00 PM	LUNCH BREAK	
9	02.00 PM – 03.00 PM (60 min)	<p>Cross-learning Exercise</p> <ul style="list-style-type: none"> Participants share their own experiences of working in disasters and explore opportunities for cross-learning from peers 	Facilitated by Sphere India
Day 3			
10	09.30 AM – 10.30 AM (60 min)	<p>PSC for People with Disabilities and Elderly</p> <ul style="list-style-type: none"> Explore the impact of disasters on the physical, emotional, and social well-being of women, children, people with disabilities and elderly. Develop skills in creating a safe and supportive environment 	Dr. Anil Koparkar, AIIMS Gorakhpur
11	10.30 AM – 11.00 AM (30 min)	<p>Self-care and caring of caregivers and Ethics, action plan for PSS</p> <ul style="list-style-type: none"> Implement effective strategies for managing stress and preventing burnout. Promote self-care practices among psychosocial caregivers. Ethical considerations for PSC Action plan for support & resilience 	Dr. Anil Koparkar, AIIMS Gorakhpur
12	11.00 AM – 11.30 AM (30 min)	Feedback & Training Follow-up	Sphere India
13	11.30 AM – 12.30 PM (30 min)	Parking Lot	Sphere India
14	12.30 AM – 13.30 PM (60 min)	Closing, Certificate Distribution & Vote of Thanks	Sphere India & AIF team

List Of Participants

#	Full Name	Gender	Organization	Designation	State
1	TAHEER JAVED SAIYED	Male	NAYI DISHA FOUNDATION	COORDINATOR	Gujarat
2	Mohammad Arif Vohra	Male	Gram Vikas Trust, Bharuch	Lead Programme Manager	Gujarat
3	Vasudev Charupa	Male	Antyodaya Vikas Shikshan Centre	Project Manager	Gujarat
4	Seema Kanwar Rathore	Female	Mano Matrix Counselling Services and Mind Wellness Centre, Jaipur	Counselor and educator	Rajasthan
5	KUSHAL SINGH RAWAT	Male	ROMAN CATHOLIC DIOCESAN SOCIAL SERVICE SOCIETY (RCDSSS) AJMER	PROGRAM COORDINATOR	Rajasthan
6	Rupesh Bhatt	Male	Jan Chetna Sansthan	Coordinator	Rajasthan
7	Pranay Singh	Male	NCC, hope and beyond	SUO, shelter manager	Rajasthan
8	ADIL (RAJU) JAMAL SORATHIYA	Male	Aga Khan Agency for Habitat India (AKA)	Disaster Assessment & Response Team Member (AKA)	Maharashtra
9	Daich Kishor Medhavi	Male	EFICOR	Zonal Implementer - Central Zone	Maharashtra
10	Masooma Shaikh	Female	Human Touch Foundation	Co Lead	Goa
11	Sandhya Chawan	Female	Human Touch Foundation	Lead-Adolescents Health and Wellbeing	Goa
12	Aniket Kapildas Bambole	Male	Marathwada Gramin Vikas Sanstha (MGVS), Chh. Sambhajinagar	Program Manager	Maharashtra
13	Yogesh Karnik	Male	Common People Social Foundation	CEO	Maharashtra
14	Shilpa Shirwadkar	Female	RISE Infinity Foundation	Program Manager	Maharashtra
15	Amol Shewale	Male	CYDA	Program Manager	Maharashtra
16	LUNA RAM	Male	Roman Catholic Diocesan Social Service Society Barmer	Community Liaison Officer (CLO)	Rajasthan
17	Clifford Castelino	Male	Church	Psychologist	Goa
18	Mansi Manesh Gamre	Female	RISE Infinity Foundation	Senior Thematic Coordinator	Maharashtra
19	Suchak Doli batukbhai	Female	Neo rajkot foundation	Project coordinator	Gujarat
20	Suchak mitalben batukbhai	Female	Neo rajkot foundation	Lab teacher	Gujarat
21	Minu Gandhi	Female	SNEHA (Society for Nutrition, Education and Health Action)	Programme Coordinator	Maharashtra
22	Durga Prasad Mohapatra	Male	National High Speed Rail Corporation Limited	Senior Manager Social Development/Resettlement & Rehabilitation	Gujarat
23	Kratika Pandey	Female	NIDM	Young Fellow	Delhi
24	Prafull Pawar	Male	AIF	Associate Community Health	Maharashtra
25	Rakesh Mishra	Male	AIF	Associate Referral Network Coordinator	Maharashtra

List of Resource Persons

#	Full Name	Gender	Organization
1	Prof. Anil Kumar Gupta	Male	NIDM
2	Mr. Vikrant Mahajan	Male	Sphere India
3	Dr. Anil Koparkar	Male	AIIMS Gorakhpur
4	Mr. Allen Christopher	Male	NIMHANS
5	Ms. Fatima Amin	Female	NIDM
6	Ms. Atisha Sood	Female	NIDM
7	Ms. Nupur Tyagi	Female	Sphere India
8	Ms. Mishel Mohan	Female	Sphere India

Training Assessment Form

REGIONAL TRAINING (WEST) **Psychosocial Support in Emergencies**

Name:

Organisation:

State:

1. During a disaster, what are some potential challenges or issues that may arise related to communication?

एक आपदा के दौरान, संचार से संबंधित कौन-कौन सी संभावित चुनौतियाँ या समस्याएँ हो सकती हैं?

- a) Limited access to technology and infrastructure /प्रौद्योगिकी और बुनियादी सुविधा की सीमित पह
- b) Language barriers/ भाषा की रुकावटें
- c) Lack of trained personnel for communication/ संचार के लिए प्रशिक्षित कर्मचारी की कमी
- d) All of the above/ऊपर के सभी

2. What have you learnt about the potential challenges or issues related to communication during a disasters?

एक आपदा के दौरान संबंधित संभावित चुनौतियों या समस्याओं के बारे में आपने क्या सीखा?

3. How do you think psychosocial support can contribute to the overall well-being and recovery of disaster-affected individuals and communities?

आपको कैसा लगता है कि मानसिक-सामाजिक समर्थन आपदा प्रभावित व्यक्तियों और समुदायों के कुल कल्याण और पुनर्निर्माण में कैसे सहायक हो सकता है?

4. Name two specific roles or responsibilities that a psychosocial care provider may have during a disaster response?

आपके अनुसार, एक आपदा प्रतिसाद के दौरान एक मानसिक स्वास्थ्य प्रदाता के दो विशिष्ट भूमिकाएँ या जिम्मेदारियाँ हो सकती हैं?

- a) Providing first aid and medical treatment/पहली सहायता और चिकित्सा उपचार प्रदान करना
- b) Conducting needs assessments and identifying vulnerable groups/आवश्यकता मूल्यांकन करना और संविदानशील समूहों की पहचान करना
- c) Coordinating logistics and relief supplies/लॉजिस्टिक्स और राहत सामग्री को समन्वयित करना
- d) None of the above/ऊपर के कोई नहीं

5. What are some healthy coping behaviours and how do they contribute to psychosocial care and support in a disaster affected community?

आपके अनुसार, स्वस्थ सहन के कुछ व्यवहार क्या हैं और वे मानसिक-सामाजिक देखभाल और समर्थन में कैसे योगदान कर सकते हैं?

6. What are some of the challenges faced by people with disabilities?

विकलांग लोगों का सामना करने वाली कुछ चुनौतियाँ क्या हैं?

7. What are some of the challenges potential psychosocial impacts of a disaster on children?

आपके अनुसार, बच्चों पर आपदा के संभावित मानसिक-सामाजिक प्रभाव कुछ हैं?

8. In your opinion, what are some key factors to consider when identifying the needs of survivors in a disaster situation?

आपकी राय में, एक आपदा स्थिति में उत्तरदाताओं की आवश्यकताओं की पहचान करते समय कुछ महत्वपूर्ण कारक क्या हैं?

- a) Age, gender, and cultural background/ आयु, लिंग, और सांस्कृतिक पृष्ठभूमि
- b) Educational qualifications and employment status/ शिक्षण योग्यता और रोजगार की स्थिति
- c) Socioeconomic status and political affiliation/ सामाजिक-आर्थिक स्थिति और राजनीतिक संबन्ध
- d) None of the above/ इनमें से कोई भी नहीं

9. What are some common health-related problems that can occur in a community during a disaster? Please select all that apply.

एक समुदाय में आपदा के दौरान कौन-कौन सी सामान्य स्वास्थ्य संबंधित समस्याएँ हो सकती हैं? कृपया उनमें से जो लागू होती हैं, उन्हें चुनें:

- a) Severe injuries/ गंभीर चोटें
- b) Disease outbreaks/ रोग प्रकोप
- c) Damage to health clinics/ स्वास्थ्य केंद्रों को क्षति
- d) Water shortages/contamination/ पानी की कमी/प्रदूषण
- e) Food shortage/ खाद्य की कमी

10. What are the potential psychosocial impacts of a disaster on children?

आपदा के बच्चों पर सामाजिक-मानसिक प्रभाव क्या हो सकते हैं?

- a) Increased socialization and resilience/ बढ़ी हुई सामाजिकीकरण और सहनशीलता
- b) Improved academic performance/ बेहतर शैक्षिक प्रदर्शन
- c) Emotional distress, anxiety, and behavioural changes/ भावनात्मक कष्ट, चिंता, और व्यावहारिक बदलाव
- d) None of the above/ इनमें से कोई भी नहीं

11. How can community support and involvement contribute to effective psychosocial care in disaster management?

समुदाय समर्थन और सहभागिता आपदा प्रबंधन में प्रभावी मानसिक-सामाजिक देखभाल में कैसे सहायक हो सकते हैं?

- a) Providing financial assistance to survivors/ प्रतिजीवियों को वित्तीय सहायता प्रदान करना
- b) Offering emotional support and a sense of belonging/ भावनात्मक समर्थन और समर्थन का एक भाव
- c) Conducting awareness campaigns on disaster preparedness/ आपदा पूर्व सचेतता अभियान आयोजित करना

d) None of the above/ इनमें से कोई भी नहीं

12. In your experience or understanding, what are some important considerations for ensuring gender sensitivity in disaster management?

आपके अनुभव या समझ में, आपातकालीन प्रबंधन में जेंडर संवेदनशीलता सुनिश्चित करने के लिए कुछ महत्वपूर्ण विचार क्या हैं?

- a) Addressing the specific needs of women and girls/ महिलाओं और लड़कियों की विशेष आवश्यकताओं का पता लगाना
- b) Promoting equal participation and decision-making power/ समान सहभागिता और निर्णय-निर्माण शक्ति को प्रोत्साहित करना
- e) Challenging gender stereotypes and roles/ जेंडर स्टीरियोटाइप्स और भूमिकाओं का आपत्तिजनक सामना करना
- f) All of the above/ ऊपर के सभी

13. In your observation, do certain groups in the community tend to be more affected than others during a disaster? If yes, please indicate the groups below.

आपके अवलोकन में, क्या आपको यह लगता है कि आपदा के दौरान समुदाय में कुछ समूह दूसरों से अधिक प्रभावित हो सकते हैं? अगर हाँ, तो कृपया नीचे दिए गए समूहों को चिन्हित करें।

- a) Older persons/ बड़े वयस्क
- b) Disabled persons/ विकलांग व्यक्तियाँ
- c) Children/ बच्चे
- d) Women/ महिलाएँ
- e) All of the above/ ऊपर के सभी

Training Feedback Form

TITLE: Regional Training on Psychosocial Support in Emergencies

DATE: 27th to 29th February 2024

LOCATION: YUVA Centre, Mumbai, Maharashtra

Instructions: Please tick your level of agreement with statements listed below	Strongly Agree पूरी तरह से सहमत	Agree सहमत	Disagree असहमत	Strongly Disagree दृढ़तापूर्वक असहमत
1. The objectives of the training were met. ट्रेनिंग के उद्देश्य पूरे हुए थे।				
2. The course length was appropriate. ट्रेनिंग की लम्बाई उपयुक्त थी।				
3. The pace of the course was appropriate to the content and attendees. ट्रेनिंग की गति सामग्री और प्रतिभागियों के लिए उपयुक्त थी।				
4. The exercises were helpful and relevant. अभ्यास सहायक और संबंधित थे।				
5. The trainers/facilitators demonstrated sufficient knowledge and expertise. रशिक्षकों/सुविधा प्रदाताओं ने पर्याप्त ज्ञान और विशेषज्ञता का प्रदर्शन किया।				
6. The venue was appropriate for the event. ट्रेनिंग के लिए स्थान उपयुक्त था।				

7. What did you learn from this training?

इस प्रशिक्षण से आपने क्या सीखा?

8. Was this training relevant to your work? If yes, how will you use it? If no, please explain what could have been better?

क्या यह प्रशिक्षण आपके काम से संबंधित था? अगर हां, तो आप इसे कैसे उपयोग करेंगे? अगर नहीं, तो कृपया बताएं कि क्या बेहतर हो सकता था?

9. What can be improved in future trainings? Or any other comments or suggestions for future trainings?

भविष्य के प्रशिक्षणों में क्या सुधार किया जा सकता है? या कोई अन्य टिप्पणियां या सुझाव भविष्य के प्रशिक्षणों के लिए?

10. Any other comments?

कोई और विचार?

Training Photos





Link To Training Resources



NIDM

National Institute of Disaster Management (NIDM), Ministry of Home Affairs, Government of India is a premier institute and a Statutory Body (under Disaster Management Act 2005) for training, research, documentation, awareness and human resources and capacity development in the field of disaster mitigation and management.

AMERICARES INDIA FOUNDATION

Americares India Foundation is a health-focused relief and development organization that responds to people affected by urban poverty or disaster with life-changing health programs, medicine and medical supplies. Americares delivers innovative health programs and quality medical aid across India, making it India's leading Non-Profit provider of donated medicine and medical supplies. Americares India's work has been characterized by compassion, expertise, quick response, and effective aid for the people who need it. Over the past 17 years, Americares India has impactfully delivered programs across 21 states serving annually nearly 180K people directly and 3.3 million people indirectly, through quality healthcare support to people living in poverty.

SPHERE INDIA

Sphere India is a National Coalition of Humanitarian Agencies in India. The members include key nodal agencies from Govt. of India, UN Agencies, INGOs, NGO Networks and National NGOs. Sphere India facilitates Inter Agency Coordination, Collaborative Advocacy and Capacity and Knowledge Sharing through a collaborative process for Accountability to affected and at risk population.