

A STORY EVOLUTION OF BRAC HUMANITARIAN PLAY LAB (HPL) IN ROHINGYA CAMPS OF BANGLADESH



A Story

Evolution of BRAC Humanitarian Lab (HPL) in Rohingya Camps of Bangladesh

**This document is an excerpt of Chapter 5:
Capacity Development**

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Acknowledgements

This study has been led by the BRAC James P Grant School of Public Health (JPGSPH), BRAC University with the financial support from the BRAC Institute of Educational Development (IED), BRAC University.

We are grateful to BRAC IED in particular Dr. Erum Mariam, Executive Director of the Institute for her overall guidance and valuable insights on the project. Sakila Yesmin and Sazia Zaman deserve very special thanks for their generous and continued support during the field work and report writing. We would also like to thank all the HPL Management team from BRAC IED especially for their valuable time and spontaneous aid which made this process documentation successfully done and useful for the project.

Special thanks are due to Mohammed Abdus Salam, Programme Head, and BRAC Humanitarian Crisis Management Programme (HCMP) who helped facilitate approval from the Refugee Relief & Repatriation Commissioner (RRRC) that enabled us to conduct the data collection smoothly as well as his continuous support and co-operation. As such thanks also goes to Mohammad Abul Kalam, Additional Secretary, RRRC for ensuring our access to the Rohingya camps for data collection.

We are also thankful to A.K.M Fakhru Alam and Riffat Jahan Nahreen and the team members from Child Protection Sub-Sector of BRAC HCM Including field management and frontline workers for all of their support and cooperation. Without their extensive help and cooperation it would not be possible for us to accomplish this in such an organized manner.

We would like to express our gratitude to the BRAC Humanitarian Play Lab (HPL) implementers in Rohingya camps-Managers, Programme Organizers, Programme Assistants, Play Leaders and Mother Volunteers for their undivided effort and support during our field visits. *Majhees* from Camps 11 and 7 in particular also deserve special thanks for their support in creating a supportive and safe environment during data collection period.

We are grateful to our colleagues from BRAC JPGSPH administration, finance, and logistics for their support. We would like to convey our sincerest thanks to our field interpreters for their hard work during the data collection and transcription periods.

Last but not the least, we would like to acknowledge all the community participants who gave us their generous time for the interviews and provided necessary assistance. This study would not have been possible if they did not share their experience and thoughts with us.

Chapter Five: Capacity development & strengthening

Building and strengthening capacity of human resources are two key elements for creating an effective intervention. BRAC IED has invested in capacity building of their HPL staff in play based learning, mental health and child protection as a part of the strategy to ensure quality. In this chapter, we will discuss how the capacity development component of the HPL programme has evolved over time. We aim to describe what types of training were provided and the rationale behind them, the trainees, the trainers, and training outcomes.

Overview of Training Activities

Initially, trainings have been developed and rolled-out on a need-basis. Prior and post HPL implementation, trainings have been conducted according to action plan and framework. The following table presents a snapshot of timeline of training activities taken place from the start till March 2019 in CFS and HPL.

Timeline	Activities
November 2017- December 2017	Half day orientation was provided to all the field staff, such as Outreach Workers, Rohingya Volunteers, Managers, Para Counselors, etc.
January 2018	Monthly Refreshers started commencing inside the camps
December 2018- April 2019	Five-Day Training of Trainers was provided to PAs, POs, Managers in three Phases
January- 2019 March	Five-Day Basic Training on Centre Based Activities was provided to the play leaders in three phases
January- 2019 March	Three-Days Basic Training on Home Based Activities was provided to the mother volunteers
February, 2019	Monthly Refreshers training on Centre Based and Home Based Activities started inside the camps

Having illustrated the broader picture, we will now discuss chronologically the details of how the different types of training were organized and their contents.

Identification of Training Needs: The Early Days

In September 2017, senior management from BRAC IED along with the psychosocial team visited the Rohingya camps for situation scoping analysis. The BRAC IED team went to visit the Rohingya camps in September 2017 right after the influx, and organized interactive meetings in the HCMP office every evening after returning from their field visits. In these meetings everyone used to share their observations from the camps every day. They had deep interactive discussion on the field observations. The primary need assessment was done for about 15-20 days. Repeated visits to the Rohingya camps allowed them to observe the needs of children of the Rohingya community and the issues were identified. In order to address these issues, BRAC IED started working based on the three following objectives:

1. To ensure that CFS offers a safe and secured place for the children
2. Nurture the spontaneity of the children through their engagement in the play based curriculum and provide psychosocial support to the children
3. Ensure that the culture and heritage of the children attending the centres are preserved.

Throughout their visits to the already established UNICEF-funded CFSs, three of which existed at the time, they were able to gather some important observations. They had observed that the children would like to recite *kabbya* (rhymes) and engage in physical activities. Based on the assessment of the children's preference and choice, for example, reciting *kabbiyas* and physical plays, some activities were included in the initial routine of the CFS. Initially, the CFS routine was designed as such - welcome session has 15 Minutes, 30 Minutes are allocated for *kabbiyas*, 30 minutes for physical play, 30 Minutes for free play, and 15 minutes for goodbye session.

This routine was initiated for implementation in the last week of October 2017. The team observed that the outreach workers, who were the only frontline workers at the time, were struggling to manage crowds of children who attended the centres due to massive demand. Within the CFSs, they were also conducting a few activities, such as rhymes and games with the children to help the children engaged by creating a congenial environment. However, the team's observation was that in order to effectively help the children who had undergone such

traumatic experiences, outreach workers needed to actively listen to them and to interact with sympathy and empathy.

The management had some ideas on what was required from the frontline staff in an ECD setting as they were also involved with setting up activities for the mainstream Play Labs all over Bangladesh. Besides, based on the observations from regular field visits and the interactions with the frontline workers, the management team had gathered some ideas of the capacity strengthening requirements for them. They decided to carry out firstly the orientation activities for the CFS frontline workers.

Human Resources: Engaged in Training and Service Provision

Trainers

The trainer team consisted of members from the BRAC IED core team who designed and provided the trainings according to curriculum. There were 25 members from the BRAC IED team having expertise in ECD, mental health and child protection were involved in training, curriculum and capacity strengthening activities. PAs were trained to be master trainers to provide Basic Training to the PLs and MVs. According to our findings there are about 50 master trainers amongst PAs.

Frontline Staff

Initially, the outreach workers had been recruited from the host communities surrounding the camps who spoke the Chittagonian *Bengali* dialect, as it has some similarities with Rohingya dialect. At that time, one outreach worker was responsible for each centre. The outreach workers were struggling to execute the tasks of a centre by themselves, as hundreds of children were coming every day. They were also finding it difficult to engage the children and conduct activities due to language and cultural barriers.

Due to these issues, BRAC decided to implement the **one host one Rohingya policy**, which means for each CFS one outreach worker would be selected from the surrounding host community and one Rohingya volunteer from within the Rohingya community (details described in chapter on management and coordination). Around November 2017, Rohingya

volunteers were recruited and as a result, outreach workers got an associate to run the centre with. Now, the outreach worker looked after the administrative works of the centre such as maintaining attendance registers, managing and keeping the toys and occasionally conducting English rhymes while the Rohingya volunteer became responsible for holding the sessions with the children by playing games, reciting rhymes, and participating in physical play, and fetching children from the community.

Orientation

In November 2017, the orientation that had been planned was implemented on-field, and all field staff, such as outreach workers, Rohingya volunteers, para-counselors, POs and managers who had been recently recruited, received a half-day orientation. This was held at BRAC branch offices near the camps. Key orientation contents were divided into two sections. One section contained detailed instructions about holding the sessions according to routine. The participants were provided detailed training on the *kabbiyas*, physical play, and messages that were delivered during welcome and goodbye sessions. Another section contained psychosocial components, such as, empathy, active listening, confidentiality and non-judgmental attitude.

In addition to those, staffs were also oriented on how to maintain spontaneity in order to create a carefree environment and safe atmosphere for the children inside the CFS. Facilitators were from BRAC IED's HPL core team. During the very first orientation session, the outreach workers, especially the Rohingya volunteers, shared traditional rhymes, otherwise known as *kabbiyas*. Training facilitators were able to collect further information regarding Rohingya culture, values and needs through observing the sessions and activities. Some key findings were that Rohingya children enjoyed reciting rhymes and playing their traditional games very much and that they were keen to learn English. These findings helped re-design the curriculum and hence, reflected the need for further training.

A half-day orientation was held at the end of December 2017. From January 2018, refreshers were organized. Since half-day orientations turned into refreshers, the basic contents of the orientation were discussed with every new recruit.

Pre HPL Refresher

In January 2018, there were some changes in the capacity strengthening approaches. The half-day orientations turned into monthly refreshers since there have been regular changes in curriculum, routine and activities every month. For example, changes in *kabbiya*, physical plays, etc. were being added. Therefore, half-day orientation in the area offices was not sufficient to disseminate all these information in the field. Hence, the trainings were moved inside the camps. Participants were all outreach workers. In order to undertake these trainings in the field, master trainers were developed from among the managers and POs based on their facilitation and presentation skills and their familiarity with the Rohingya community's language. The master trainers started receiving TOT (Training of Trainers) before refresher every month.

After receiving the TOTs the master trainer started holding the refreshers in their respective camps. The principle was to disseminate information in the field regarding the changes in activities and curriculum inclusion or changes to the outreach workers through refreshers by the master trainer. The master trainers trained in the TOTs educated the respective audience in their camps. The content of the refresher was similar to the content of the TOT. The half-day orientation prior to TOTs was need based and its content was fixed, but, the content of the refresher afterwards was changed every month. For example, if the curriculum of this month includes a rhyme called *hatti matim tim* , the next month the rhyme will change. Actually, the changes or inclusions in the curriculum for a following month were informed in the monthly refreshers to the frontline staffs. Since the implementation of this new policy, refresher trainings were regularly being held every month. The need assessment was a continuous process in the field and based on the findings, the content of the TOT and refreshers was organized. According to one of the team members from the BRAC IED team, "We used to organize orientation sessions with the master trainers every month prior to refreshers. It went on like this. It used to be held every month from January 2018 and from March 2018, we started it doing bi-monthly."

Restructuring Frontline Workforce

In November 2018, major changes took place after the HPL model was implemented. The BRAC CFS centres were now known as HPL centres or 'Kelle Peyo Nera' (Burmese), also locally termed as 'Khela Khana'. The outreach workers' designation was changed to Programmeme Assistant (PA) and Rohingya Volunteers had their designations changed to Play Leaders (PL). Mother Volunteers (MV), were recruited from Rohingya community to run home based sessions.

Programmeme Organizers' (PO) major responsibility was in assisting the managers in site-selection and management of the CFS centres that were being scaled up throughout the year. Twelve POs had been recruited in the first batch for this purpose. In September 2018, more POs were recruited due to the increasing numbers of centres. Later, after HPL implementation, each PO was given the responsibility to oversee 6-8 HPL centres depending on the resources and the number of centres in every camp.

Training Guidelines Development

In the meantime, centre-based and home-based curriculum and list of required materials were prepared. The integration of curriculum was important as training and curriculum went hand in hand. A Lead Curriculum Developer stated:

"Curriculum, training and materials - these are correlated. It depends on the curriculum that how the training will be designed. In reality, training and curriculum are related to each other. The people who prepare the curriculum are in the training team too. Therefore, the training and curriculum team are basically included in one team."

Training manual/guidelines were thus developed based on the curriculum. In August 2018, focus group discussions (FGDs) were conducted with parents and the community to gather important and culturally relevant information. Some issues were focused on their education system, traditional games and play materials, and child rearing practices. After analyzing the FGD narratives, preparation of curriculum and training guideline began. We discovered that, while the work on curriculum and training guideline was commencing, another team was in the field to test out activities and assess the relevance of the play materials with the Rohingya culture. It was important to assess whether children would be able to play with materials

prepared and to understand the difficulties and applicability of physical play to the age groups targeted by the HPL model.

Developing the pictorial instructions of the activities also remains an ongoing process till now. A team of graphic designers has been recruited for this purpose. They went to the field with camera, took pictures of the activities and photoshopped the pictures in Adobe Illustrator. It went through a lot of trial and error to design those pictorial instructions. One of the challenges involved depicting females from the Rohingya community was that it should be acceptable to the community. Other challenges were also present: at first the children of specific ages on the pictures were inconsistent, for example, the picture of children aged 6-7 years and 2-4 years old looked the same. These changes were edited in workshops in the presence of the curriculum team.

With so many new staff additions, curriculum, designation and responsibility changes, the management felt the necessity to reorganize and include new materials in the training curriculum. From the Deputy Manager, we learnt that several workshops on curriculum were held in October 2018, with the goal of organizing the training for all the frontline workers in December 2018. The Basic Training (BT) that they had designed in December was supposed to be held at the initial stage. The trainers from the core team found it difficult to provide Basic Trainings to the PLs and MVs due to language barriers as they were not fluent in the Chittagonian dialect. As such, a necessity of substitute for the trainers was felt. They decided to carry out a training of trainers – essentially training of PAs in order for them to provide basic training to PLs. As one member of the core team described,

“At one side curriculum work was going on. And on the other side we were deciding whether we will provide the basic training or the TOT. At first we had decided that we would provide Basic Training first. Later, everyone decided that we will provide the TOT first since we would not be able to provide the training in the field in the Chittagonian dialect.”

Training of Trainers (TOT)

In December 2018, the first phase of Training of Trainers (TOT) was rolled out. It was designed as a five-day residential training, primarily for the PAs. The goal of this training was to cultivate

a pool of trainers from among the PAs. Depending on their performance during this training course, those with the potential were to be selected and groomed up to become Master Trainers (MT). MTs would provide the basic training to PLs and MVs. A curriculum and training specialist narrated the rationale behind choosing PAs to become master trainers:

“We needed to groom up PAs as trainers. Besides mother volunteers, all our play leaders are female, therefore they (PAs) will be able to communicate with them (play leaders). And that is why our main target was the PAs. Since they (PAs) will supervise and oversee the centres and home-based activities and will work beside the play leaders and mother volunteers.”

POs and Managers were also kept as participants, since they were supervisors to the PAs and could observe their performance. According to the Deputy Manager, Training and Material Development, whom we interviewed:

“If the Managers or POs are there (in the training) then they will be able to observe the trainings (Basic trainings; that will be conducted by the PAs in the Rohingya Camps); and if necessary, they will be able to facilitate the trainings as well. That is why we needed to provide the TOT.”

Initially, these trainings were held at various hotels located in Cox’s Bazar such as Orchid Blue, Zarman Bangla and Pulse Bangladesh. One PO shared:

“The POs, PAs and managers received the training, and everyone received it at the same time. Therefore, this training was held at different venues and hotels. For example, some had attended the training held at Hotel Orchid Blue, some at Pearls, someone at Hotel Bangla General Shompriti, etc.”

The benefit of organizing training events in these places was that they were easily accessible due to being located in the middle of Cox’s Bazar city and Rohingya Camps. Trainings were designed to be residential as it was thought that the trainees could concentrate better in a quieter environment.



A Practical Session of Kabbiya demonstrated by One PA (Master Trainer) at TOT

The TOTs were conducted by the HPL core team members with assistance from Child Protection and Cox’s Bazar team members. Theoretical content included familiarizing participants on basic concepts, for example, definition of children, child development, child rights and protection and so on in emergency situations and barefoot counseling. They were taught the principles of the HPL model, its curriculum, and job responsibilities of PAs and PLs. Besides, practical training was given on how to conduct *kabbiya/kissa*, physical play and

free play sessions among others. Overall, they received extensive training on all the activities of the HPL, play-based learning and ECD. This gave them the opportunity to enhance their skills as trainers while acquiring in-depth knowledge of HPL activities.

The following table highlights the topics covered in the TOTs.

Table 5: Schedule and Contents of Training of trainers	
Days	Topics Covered
Day-1	<ul style="list-style-type: none"> - Introduction of the BRAC HPL Project - Definition and Characteristics of Children, Child Rights and Child protection - Child protection in Emergency Situation - Barefoot Counseling Active Listening, Empathy, Values Impartial Behavior, Maintaining Anonymity and Data Security, Symptoms of Mental Problem and the steps of referral and Referral Scopes
Day-2	<ul style="list-style-type: none"> - Introduction to the Home Based HPL - Introduction to the Home Based HPL curriculum - Breathing Exercise - Holding a Home based sessions with an associate and Participant - Responsibilities of Mother volunteers, PAs, Para Counselors
Day-3	<ul style="list-style-type: none"> - HPL Goals and Objectives - HPL Structure and Characteristic

Table 5: Schedule and Contents of Training of trainers

Days	Topics Covered
	<ul style="list-style-type: none"> - Play and its importance on ECD - Play to heal and Play to Learn - Early childhood development and its scopes - Curriculum of HPL <ul style="list-style-type: none"> Weekly Schedule, Monthly Play Plan Familiarity of HPL Play based activity - HPL Plays <ul style="list-style-type: none"> Welcome Session - Kabbiya, Kissa
Day-4	<ul style="list-style-type: none"> - Ideal Play Presentation <ul style="list-style-type: none"> Welcome Session Physical Play Art Kabbiya, Kissa Free Play Goodbye sessions
Day-5	<ul style="list-style-type: none"> - Ideal Play Presentation <ul style="list-style-type: none"> Art, Free Play, Good Bye Sessions. - Administrative Works <ul style="list-style-type: none"> Responsibilities of PAs Responsibilities of PlayLeaders - Involvement of Community <ul style="list-style-type: none"> HPL administrative committee (CBCPC) and Parents Meeting

There were three phases of TOTs until April, 2019. We already know that the first phase of TOT was in December, 2018; the second was in mid- March, 2019 and the third one was in the second week of April, 2019., The TOT was provided in these three phases to 230 PAs, 58 POs and 31 Managers.

We already know that the first training was not very difficult since the PAs worked in CFSs as outreach workers and had received some training before. In fact, the first batch of PAs, POs and Managers who had received the TOT were all involved in CFSs prior to joining HPL. However, it was comparatively difficult with new recruits. As described by the Deputy Manager, Training and Material Development,

“...later when we went to provide TOT to the new recruits, there were some challenges. I felt that if we could keep them (new recruits) in the centres for 15 days and then provide the training, then it would have been more effective.”

During the TOT, PAs were observed and given scores. After the training was complete, the trainers would sit together and select potential candidates to be master trainers based on performance and understanding of the curriculum. As described by a trainer from the core team:

“After the five days of training, the trainers have understood the content of the training well, but, they have not developed the skills to facilitate training. Then we told them over and over again that they would learn how to facilitate the sessions slowly through refreshers. I mean, they have to be reminded constantly that they would soon be trainers.”

Lessons learnt from the first TOT session were useful in revising the subsequent training guidelines. From the interviews we learnt that, for example, the core team realized the need for changes to the barefoot counseling section. This was because participants had found the section to be too hard to grasp and too long to follow. Hence, before the next TOT took place, they had made the section easier and more concise.

After the first TOT, a member from the HPL core group attended subsequent PL and MV trainings conducted by the newly minted MTs in order to guide and assist them,

“...we told them (PAs) if you face any problem then just ask us, “Apa, do you have to say anything else on this regard? We will say and you will translate. At that time first one or two month we stayed with them. Still if there is any workshop or training any one from the core team remains present.”

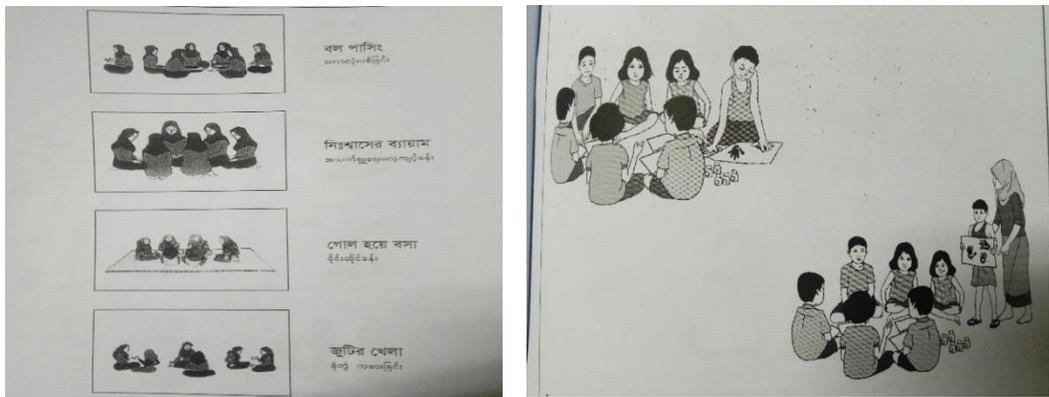
PAs, who received the TOT, told us that the training was quite effective and certainly very helpful for them as they got to learn managerial and supervision skills to facilitate the BT. They expressed their gratitude in being given a role involving greater responsibility since they did not have the opportunity to perform these duties previously as outreach workers. Hence, through TOT, PAs had become capable personnel who could oversee PLs and MVs.

After selection of trainers post-TOT, they receive a one-day orientation before they start facilitating BT sessions. This allowed them to clarify their concept regarding facilitating the BT.

For example, it could be difficult for PAs to keep the training contents and its chronological sequence in mind; when faced with such difficulties, they were suggested to noting down the chronology of the topics of the training contents in their notebooks. During the orientation, they also received a refresher on how to interact with children.

Basic Training (BT)

Having received the TOT and orientation, MTs were ready to provide BT based on their learning. The content of the five-day BT for PLs and three-day BT for MVs were similar to that of the TOT but were more concise and were presented in a simpler manner. Initially, as PAs used to supervise both centre-based and home-based activities, they were provided with a 'Home-based Training Guideline' and 'Centre-Based Training Guideline' for home and centre-based activities, respectively. Guidebooks were written in Bengali with Burmese translations for each instruction/activity to make it easier for the PL and MVs to understand. Pictorial instructions of the activities were included in the training guidelines so that it is easier for the PLs and MVs to grasp easily. This enabled PLs and MVs to understand the content.



Pictorial Instructions in Centre Based and Home-based Training Guideline

The BT would basically equip PLs and MVs with all the basic concepts of the HPL and prepare them to run centres and home-based sessions respectively. Content of BT for PLs included how to conduct age-specific centre-based activities for 2-4 and 4-6 categories respectively; including Kabbiyas, Kissas, Welcome and Goodbye sessions, Basic Hygiene messages; how to manage and

upkeep centres; hold CBCPC meetings and identifying and referring psychosocial cases from their centres.

According to one PA:

“Play leaders received a 5-day basic training; like the ones we had received. This training is held inside the camps. This training could not be provided to everyone at the same time. They have to be divided into groups for the trainings since if 2 of the play leaders from one centre attend training at the same time it hampers with that centre’s activity. Sometimes there are drop outs. For the new recruits, when there are about 10-12 new recruits then we provide another training for them.”

The following table highlights the themes of the Basic Training for the Play leaders

Training Days	Themes Covered
Day-1	<ul style="list-style-type: none"> - Introduction of the BRAC HPL Project - Definition and Characteristics of Child, Child Rights and Child protection - Child protection in Emergency Situation - Barefoot Counseling <ul style="list-style-type: none"> Active Listening, Empathy, Values Impartial Behavior, Maintaining Anonymity and Data Security, Symptoms of Mental Problem and the steps of referral and Referral Scopes
Day-2	<ul style="list-style-type: none"> - Barefoot Counseling <ul style="list-style-type: none"> Values, Impartial Behavior, Maintaining Anonymity and Data Security, Symptoms of Mental Problem and the steps of referral and Referral Scopes
Day-3	<ul style="list-style-type: none"> - Introduction of the Project HPL, its Goals and Objectives - Play and its role on Early Childhood Development - Early Childhood Development in HPL - Curriculum of HPL <ul style="list-style-type: none"> Weekly Schedule, Monthly Play Plan Familiarity of HPL Play based activity - HPL Plays <ul style="list-style-type: none"> Welcome Session Kabbiya, Kissa
Day-4	<ul style="list-style-type: none"> - HPL Plays <ul style="list-style-type: none"> Physical Play,

Table 6: Schedule and Contents of Basic Training for the Play Leaders

Training Days	Themes Covered
	Art, Free Play, - Goodbye Session
Day-5	- Ideal Play Presentation Art, Free Play, Good Bye Sessions. - Administrative Works Responsibilities of PlayLeaders - Involvement of Community - HPL administrative committee (CBCPC) and Parents Meeting

The sessions were interactive and group discussions were done according to the sessions demand. The sessions of HPL plays such as Kabbiya, Kissas, Welcome and goodbye sessions were practical and participatory. In the practical sessions, the participants learned how to conduct each of the sessions with demonstration from the PAs and also these sessions were participatory. The practical sessions were extensive and elaborate.

About 570 play leaders attended a 5-day basic training that was commenced in between January-March 2019. Similarly, mother volunteers also received a three-day basic training on home-based activities. Training content included nurturing practices, diet of the children and the mothers, Positive Thinking etc. In the training, the mother volunteers are trained on the holding sessions with the 7-9 months pregnant mothers, mothers of 0-45 day's old children and the mother of children below the age of 2 years.

The following table contains the themes that were covered in the Home-based training for Mother Volunteers:

Table 7: Schedule and Contents of Basic Training for the Mother Volunteers

Training Days	Themes Covered
Day-1	- Introduction of the BRAC HCMP Project - Definition and Characteristics of Child, Child Rights and Child protection - Child protection in Emergency Situation - Barefoot Counseling

	Active Listening, Empathy, Values Impartial Behavior, Maintaining Anonymity and Data Security, Symptoms of Mental Problem and the steps of referral and Referral Scopes
Training Days	Themes Covered
Day-2	<ul style="list-style-type: none"> - Familiarity of Home-Based activities - Familiarity of the Mother Volunteer’s Training Manual - Pictorial Demonstration of Activities During Home-based Sessions - Session conduction practice - Breathing Exercise
Day-3	<ul style="list-style-type: none"> - Session Conduction Practice - Responsibilities of Mother Volunteers

Findings indicate that it was a little difficult to provide trainings to MVs in the beginning as they felt uneasy and shy about opening up in front of others. PAs used to struggle to communicate with them due to the language and cultural gaps. Over time, they learnt how to communicate better with them and were able to provide training to them with ease.

About 336 Mother volunteers had received 3-day basic training for home-based activities in between January-March 2019.

From interviews, we learnt that the BT for both PL and MV was conducted in Chittagonian dialect. Usually two MTs (Master Trainers) were paired up, one as trainer and the other as co-trainer, to facilitate the BT for PLs . The trainer was usually more skilled than the co-trainer. The former provided the training while the latter assisted. One trainer said,

“The ones who are good trainers, they just listen, the ones who are a little weak, we orient them on how to assist another trainer, distribute the works between them, having preparation prior to coming to the training, involving the play leaders and mother volunteers in the training, listing down the problems and talk about it on the training.”

However, the co-trainer provided back-up support in case the trainer was unavailable due to an emergency. During our field visits, we also had the opportunity to attend a BT session for PLs wherein we saw training activities in action.

PLs and MVs have to follow some basic rules of conduct. They are instructed to always have a smiling face and be cordial to the children. They have to be soft spoken while interacting with the children, never scold anyone or speak in a loud voice. If children break toys, they are not to

be scolded but they will have to be told softly that the toys are for them and they will not have anything to play with if they break it. Sometimes, children do not want to act according to the activity process. However, they are never to be forced. In the trainings they are instructed never to force the children to do anything. For example, due to a conservative upbringing, sometimes boys and girls become uneasy holding hands. In the training it was instructed to the participants not to force if the boys and girls do not want to hold each others' hands.

Post HPL Refreshers

However, at the beginning of 2018; the outreach workers attended refresher class/meeting/training every month, where they were told about the implementation of HPL model followed by the first phase of TOTs and BTs; refreshers started commencing from February, 2019. The Master trainers selected amongst the PAs received an orientation prior to a refresher regarding the inclusions into the curriculum or changes in the activities. They were also instructed on how to run the centres. Importantly, they used to be instructed on the contents of the curriculum for a following month. As per an HPL core team member, "In the training they are provided instruction and direction regarding the issues or concerns they share. Also, they are provided instruction about the contents in the following month because the contents were not similar. One explained how it was conducted,

"If *Kabbyas* and physical play were to be conducted in a following month, in the refresher, the outreach workers rehearsed and practiced the *kabbyas* and physical play which they were supposed conduct in the following month."

The refresher in 2019 was followed by a more focused basic training. PAs are aware of the need of refreshers quite well. As they had received the trainings months ago so they tend to forget many things. Mainly, the PAs inform the play leaders of schedule and venue of trainings. Especially, the PAs do the activities briefly and teach them and, in some cases, refresh their memories on which *kabbiya* and *kissa* have to be done. This schedule was not mentioned in the manual as it is decided in the field depending on the situation and circumstances there. Therefore, refresher meetings are essential. One of the PAs opined that a refresher is helpful for both PAs and PLs because it helps them learn about the gaps in service delivery and find solution or coping strategies by sharing.

Training of Mental Health Support Providers

Right after the influx, in September 2017, the BRAC IED, Mental Health and Psychosocial Support (MHPSS) team came to Cox's Bazar. With the goal of providing psychosocial support services in the Rohingya Camps, 10 Para Counselors were brought in Cox's Bazar. These para counselors had prior involvement in other BRAC IED Programmes as 'Shomaj Shongi' and had received trainings on mental and psychosocial health and counseling. Due to their previous experience the team members did not require further training. According to one of the MHPSS team members,

“From BRAC IED we had provided basic training and had developed para counselors for other BRAC IED programmes. We brought about 10 para-counselors here... who were already trained. Because there was no time to provide training at that time, we initiated providing the services with those trained para-counselors who had experience and had been working as para-counselors.”

Later, more para-counselors were recruited from the Cox's Bazar host community. New recruits received a 2-day Basic Skill Training. The components of this training were as follows: basic psychosocial support, parenting sessions, assertive communication, observation methods, identification of cases and referral pathway. In addition, they were also trained on management of stress, anger, trauma, PTSD (Post-Traumatic Stress Disorder), depression, anxiety and other disorders. Many techniques, such as mindfulness, deep breathing, PMR (Progressive Muscle Relaxation) were also taught in the training session. The training sessions were made interactive using role-playing. These trainings were facilitated by the psychologists from the MHPSS team. New recruits were placed in the field attaching them to the experienced ones to learn more about psychosocial services.

Para-counselors were attached to CFSs to provide psychosocial support. After HPL implementation the para-counselors were involved in HPL as well. For the HPL home based activity sessions para-counselors turned out playing more effective role. According to one of the MHPSS team member,

“Para-counselors are familiar with parenting sessions. They had received extensive sessions on parenting in their basic trainings. Besides, since they

provide psychosocial support, that is why, they can build better rapport and be more empathetic.”

Future Trainings

Training is an ongoing process, dependent on drop-outs and curriculum changes. The trainings are still ongoing. At present, rising number of centres and home-based pockets, due to scale-up, demand more trainers. However, the challenge is that there is a lack of trainers in camps located in remote areas. Trainers are required to visit remote places or camps in order to facilitate the trainings. Sometimes the trainers are late to reach the training venue due to lack of transportation or shared transportation. To address these problems, the PAs have been sanctioned CNG fares so that they could hire CNG, saving them a lot of time and hassle. One PA said,

“Here we are to create more trainers in these remote camps in order not to have difficulties in providing training. Every camp has trainers, be it Leda or Shamlapur. These are the camps... where we faced these challenges. To provide training in these camps... it is difficult to get transportation. That is why we are planning to provide some remuneration/travel allowance to them in order for them to take any transport at any time and they do not have to wait for public transports.”

Rising number of home-based pockets demand substantial increase in the recruitments of Mother Volunteers and Para Counselors. Therefore, in May 2019, a 3-day basic training for the newly recruited mother volunteers will be held. And in June 2019, a 2-day Basic Training on home based activities will be provided to the Para Counselors. Similarly, newly recruited play leaders will also receive a 5-day Basic Training in May, 2019. BRAC IED also plans to conduct another TOT for the PAs, Managers and POs on June, 2019.

Conclusion

While documenting capacity development and strengthening of human resources, we found that the HPL project has meticulously developed a system for this which was not planned at the start. Bringing a skill mix team having expertise and experience in ECD, mental health, psychosocial support and adolescent development and also having experience in training gave momentum to initiate the capacity strengthening of human resources in HPL project. Beginning with orientation and refreshers to TOT and basic training customized for the targeted staff and

frontline workers was an immense task . Now, the local para-counselors are equipped enough to conduct sessions as a result of this continuous training and hands on experience and coaching in the field. Despite success in conducting training, challenges remain. Language barrier was a challenge while providing trainings to the play leaders and mother volunteers from community. In addition, mother volunteers were shy, rarely participated in the session. To mitigate this, master trainers (PAs) who knew Chittagonian dialect provided training to them. Finding training venue was difficult inside the camps due to unavailability of space. Besides, the threat from the religious extremist group, trainings were stopped for sometimes or were conducted indoors in some camps. Lack of literacy of the play leaders and mother volunteers was addressed using detailed pictorials and oral communications. They have been closely followed up and coached in the community. However, the innovative and flexible approach of training is quite successfully conducted to strengthen skills and competency of the human resources supporting HPL activities. In the following chapter, we will describe curriculum design used in HPL.

Abbreviations

B

BEN	Bangladesh ECD Network
BHCMP	BRAC Humanitarian Crisis Management Programmeme
BRAC IED	BRAC Institute of Educational Development
BIGD	BRAC Institute of Governance and Development
BLC	BRAC Learning Centre
BT	Basic Training

C

CBCPC	Community Based Child Protection Committee
CFS	Child Friendly Space
CIC	Camp in-charge
CMC	CFS Management Committee
CNG	Compressed Natural Gas
CODEC	Community Development Centre
CP	Child Protection
CPSS	Child Protection Sub Sector
CYRM	Child and Youth Resilience Measure

D

DAM	Dhaka Ahsania Mission
DMCC	Disaster Management and Climate Change

E

ECD	Early Childhood Development
ED	Executive Director

F

FAO	Food and Agricultural Organization
FGD	Focus Group Discussion

H

HCMP	Humanitarian Crisis Management Programme
HPL	Humanitarian Play Lab
HRLS	BRAC Human Resources and Legal Service

I

IDI	In-Depth Interview
IOM	International Organization for Migration
IRB	Institutional Review Board
ISCG	Inter Sector Coordination Group

J

JPGSPH	BRAC James P Grant School of Public Health
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K

KAP	Knowledge, Attitude and Practice Tool
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KII	Key Informant Interview
KPS	Key Point Summary
L	
LC	Learning Centre
LPG	Liquefied Petroleum Gas
M	
MHPSS	Mental Health Psycho-social Support
MSF	Médecins Sans Frontières / Doctors without Borders
MT	Master Trainers
MV	Mother Volunteer
M&E	Monitoring and Evaluation
N	
NGO	Non-Government Organization
O	
ODK	Open Data Kit
ORW	Outreach Worker
OSF	Open Society Foundation
OXFAM	Oxford Committee for Famine Relief
P	
PA	Programme Assistant
PDR	Process Documentation Research
PI	Principal Investigator
PL	Play Leader
PMR	Progressive Muscle Relaxation
PO	Programme Organizer
PTSD	Post-Traumatic Stress Disorder
R	
RRRC	Refugee Relief and Repatriation Commissioner
S	
SMS	Short Message Service
SPSS	Statistical Package for Social Sciences
STC	Save the Children
T	
TOT	Training of Trainers
TV	Television
U	
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Fund
W	
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme

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