



Food and Agriculture Organization
of the United Nations

Running farmer field schools in times of COVID-19: *A resource handbook*



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Food and Agriculture Organization of the United Nations
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INTRODUCTION : WHY A HANDBOOK ON FARMER FIELD SCHOOLS (FFS) IN TIMES OF COVID-19?

This handbook provides guidance and suggestions to farmer field school (FFS) facilitators, master trainers, project coordinators and rural advisors on running FFS and other agricultural training activities in times of COVID-19. It includes basic protective measures, important considerations, proposed FFS activities, links to the World Health Organization (WHO) resources and videos and more.

The handbook has two main purposes. First, it contains guidelines that focus on reducing risks of COVID-19 community transmission when running FFS and other agricultural training activities, based on WHO recommendations adapted to the context of FFS. Second, it aims to guide practitioners in using FFS positively to disseminate basic protective measures and build effective responses to the COVID-19 pandemic. To this end, a set of 21 learning activities – jointly designed by education and technical specialists – take the readers on journeys to integrate COVID-19-related topics in their FFS and help communities respond to the challenges they face.

The handbook was written with FFS activities in mind but will also be very useful for extension and advisory services and anyone running agricultural field training activities.

Please share with us your feedback on this guide or how you have used it at: farmer-field-schools@fao.org

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In this guide, farmer field school (FFS) is used as a generic and widely-recognized term encompassing all FFS variants or adaptations, such as agro-pastoral field school, livestock field school, fisherfolk field school, climate field school, farmer business or market school, and the other derivations of farmer field school that share the same methodology, principles and vision.

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KEEP IN MIND!

Always follow the decisions of your Government and the guidance of your institution when deciding whether it is appropriate to hold FFS or other field training activities.

Keep yourself up to date with reliable information.

FFS and other agricultural training activities can result in spreading the virus...

or can be an opportunity to sensitize people...

if you follow all recommendations carefully.

BETTER TO BE SAFE THAN SORRY!
BE CAREFUL. BE SAFE!

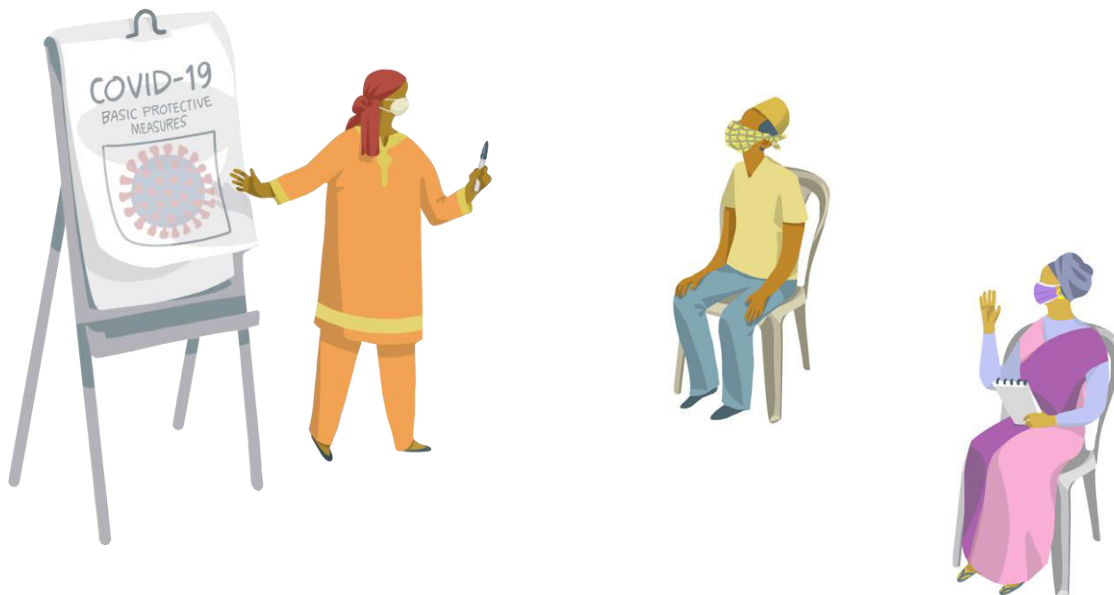


Table 1 | Deciding how to adjust training activities based on the local situation

IF...	THEN...
Your country or area is in lockdown due to COVID-19 emergency	<ul style="list-style-type: none"> • Postpone all FFS and other field training activities. • Liaise with FFS host farmers to manage the FFS plot or herd (see Part II point 1). • Keep in touch with FFS members and farming communities, making sure to reach also women and youth; disseminate reliable information about basic protective measures through phone, FFS WhatsApp groups and other available means. • Increase the use of phone and digital tools to continue learning (see Activity 18: Using information and communication technologies (ICTs) to share information). • Partner with rural and community radios to raise awareness about the virus and basic protective measures. • Adhere to government regulations and protective measures when implementing any cash, voucher or relief distribution activities, if they are permitted.
Your country or area has adopted restrictive measures, but meetings and field activities are allowed	<ul style="list-style-type: none"> • Consider cancelling or postponing FFS and other agricultural training activities. • Reduce the number of sessions to a minimum (i.e. critical activities only) • Postpone open field days and FFS graduation. • Reduce FFS participants to a small number to take care of the plot/ herd; they will later share findings with others. Facilitators and host farmers can also carry out field activities themselves. • Use phones, digital tools and videos to disseminate relevant information and support continued learning (see Activity 18 and Activity 19) • Strictly implement recommended basic protective measures if and when FFS or other training activities take place, (see Basic protective measures and Important considerations when running farmer field schools) • Use farmer field schools to raise community awareness on the virus causing COVID-19 (see Basic information on COVID-19 and Suggested FFS activities on COVID-19) • Partner with other community development and communication approaches such as Dimitra Clubs and community radios for coordinated outreach and awareness raising
Your country or area has little or no restrictions on group activities, but there are concerns about how the situation may evolve	<ul style="list-style-type: none"> • If FFS or other training activities take place, strictly implement basic protective measures (see Basic protective measures) • Use FFS and field training activities to raise awareness of rural communities on safety and hygiene measures to prevent spread of COVID-19 and other viruses and diseases (see Basic information on COVID-19 and Suggested FFS activities on COVID-19 including Activity 9: Demonstrating how to wash hands correctly, Activity 10: Making a tippy-tap or handwashing station in the farmer field school, Activity 14: Cleaning the house)

I – BASIC INFORMATION ON COVID-19

What do we know about this virus?

This section draws on WHO's excellent "[Q&A on coronaviruses](#) (COVID-19)" which provides information about SARS-CoV-2 – the virus responsible for COVID-19. **This information is subject to change and constantly updated to reflect new findings.** For latest updates and recommendations on COVID-19, please keep checking the [WHO website](#).

What is COVID-19?

COVID-19 is an infectious disease caused by the newly discovered coronavirus SARS-CoV-2, which has not been previously identified in humans. It is likely that COVID-19 originated in wildlife, similar to Ebola and Severe Acute Respiratory Syndrome (SARS) - but the current spread of COVID-19 is between humans. "CO" stands for corona, "VI" for virus, and "D" for disease. Formerly, this disease was referred to as "2019 novel coronavirus" or "2019-nCoV". Coronaviruses are a large family of viruses found in both animals and humans. In humans, several coronaviruses are known to cause respiratory infections which range from the common cold, to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS).

What are the symptoms of COVID-19?

The most common symptoms of COVID-19 are **fever, tiredness, and dry cough**. Some patients may have pains, nasal congestion, headache, conjunctivitis, sore throat, diarrhoea, loss of taste and smell, a rash on skin or discoloration of fingers or toes. These symptoms are usually mild and begin gradually.

Be careful! **Some people become infected but only have very mild symptoms.** But they are contagious and can infect others!

Most people (about 80 percent) recover from the disease without needing special treatment.

Approximately one out of every five people who gets COVID-19 becomes seriously ill and develops **difficulty breathing**. Older people and those with other medical problems like high blood pressure, heart and lung problems, diabetes, or cancer, are at higher risk of developing serious illness. **However, anyone can catch COVID-19 and become seriously ill.**

What should I do if I have COVID-19 symptoms? When should I seek medical care?

If you have minor symptoms, such as a slight cough or a mild fever, there is generally no need to seek medical care. Stay at home, self-isolate and monitor the symptoms. Follow national guidance on self-isolation.

However, if you live in an area with malaria or dengue fever, **DO NOT IGNORE** symptoms of fever. **Seek medical help.**

If you have difficulty breathing, pain or pressure in the chest, or loss of speech or movement, seek immediate medical care.

If possible, **call your health care provider in advance**, so he or she can direct you to the right health facility. When you visit the health facility, wear a mask if possible, keep at least two metres distance from other people. Do not touch surfaces with your hands. If it is a child who is sick, help the child stick to this advice.

How does COVID-19 spread?

People can catch COVID-19 from others who have the virus, even if they do not show any symptom. The disease can spread from person to person through small droplets from the nose or mouth, which are spread when a person with COVID-19 coughs, sneezes, or speaking.

People can catch COVID-19 if they breathe in droplets from a person infected with COVID-19. This is why it is important to stay at least two metres (six feet) away from others.

These droplets can land on objects and surfaces around the person such as tables, doorknobs and handrails. Other people then catch COVID-19 by touching these objects or surfaces, and then touching their eyes, nose or mouth. Although viral transmission through banknotes has no particular significance, experts note that washing hands after touching cash or objects is important to reduce the risk of transmission.

WHO is assessing ongoing research on the ways COVID-19 is spread and it will continue to share updated findings. The [Resources section](#) provides links with updated information.

Who is most at risk?

Anyone can catch COVID-19. We still need to learn more about how COVID-19 affects people. Older people, and people with other medical conditions, such as diabetes, lung disease, high blood pressure, cancer and heart disease, appear to be more at risk of developing severe illness. But it is everyone's responsibility to avoid contracting or spreading the virus to others who are vulnerable.

What is the treatment for COVID-19?

Some Western, traditional or home remedies may provide comfort and alleviate the **symptoms** of COVID-19. But there is no evidence that any current medicine can **prevent or cure** the disease.

There are several ongoing clinical trials evaluating potential treatments from both Western and traditional medicines. WHO and research centres will continue to provide updated information as soon as findings are available.

COVID-19 in agriculture and rural livelihoods

Many members of our FFS community worldwide are affected by COVID-19 in different ways. Access to healthcare, medicine, water and sanitation is often inadequate in rural areas where most of the world's poorest and hungriest people live and depend on agriculture for their livelihoods. Disruptions in agricultural value chains as a result of restrictions of movements and border closures, are already threatening the livelihoods of small-scale farmers and access to food and livelihoods in cities. In many countries, restrictions and precautions also mean that FFS or other field training activities cannot take place at all, or that activities have to be adapted.

So far, rural areas have not been affected as much as urban centres by the health aspects of the pandemic. Nevertheless, containment measures pose new challenges to rural people (and particularly to rural women) regarding their roles in household food security and as agricultural producers, farm managers, processors, traders, wage workers and entrepreneurs. Rural women tend to be disproportionately affected in a number of ways, including but not limited to food security and nutrition, health, time burden and productive activities, as well gender-based violence (GBV). Further, women's work burden is increasing due to school closures and the additional care needs of sick household members.

Basic protective measures

The information in this section, drawing from the WHO website, is subject to change based on new findings. For latest updates on COVID-19, please check regularly [WHO's official advice on basic protective measures](#).

1. Wash your hands frequently

Wash your hands with soap and water or, if you cannot see any dirt, use a hand sanitizer (if possible 80 percent alcohol-based).

Why? Washing your hands with soap and water or using alcohol-based hand rub kills viruses that may be on your hands.

2. Cover your mouth and nose with a flexed elbow or tissue when you cough or sneeze

Do not cough into your hand! Your hand may spread the virus to objects or other people. **Cough into your flexed elbow or a tissue.** Dispose safely of the tissue immediately. You can throw it in the fire, in a closed dust bin, or dig a hole in the ground (throw a handful of sand over the tissue so that it does not fly away). If possible, the used tissue and other waste generated while looking after a sick person should be kept in the home compound, sealed for at least three days. After coughing or blowing your nose, wash your hands with soap and water or use an alcohol-based sanitizer.

Why? Droplets released when speaking, coughing, sneezing or spitting can land on surfaces, objects or people around you and spread the virus. By following these practices, you protect the people and objects around you from any virus released through coughs and sneezes, such as cold, flu and the virus causing COVID-19.

3. Maintain physical distancing

Maintain at least two metres (six feet) distance between yourself and anyone outside the home, especially if they are coughing or sneezing. Avoid handshaking or any form of physical contact. In FFS or group sessions, do not undertake any group dynamics exercises that involve physical contact nor let people sit too close to each other.

Why? When someone coughs or sneezes, they spray small liquid droplets from their nose or mouth, which may contain the virus. If you are too close, you can breathe in the droplets, including the virus causing COVID-19 if the person coughing has contracted the disease.

4. Avoid touching eyes, nose and mouth

This is especially important when outside your home.

Why? Hands touch many surfaces that can be contaminated with the virus. If you touch your eyes, nose or mouth with your unclean hands, you can transfer the virus from the contaminated surface to yourself.

5. If you have fever, cough and difficulty breathing, seek medical care immediately. Phone ahead to inform the health centre before any visit.

If you have **minor symptoms, such as a slight cough or a mild fever**, there is generally no need to seek medical care. Stay at home, self-isolate and monitor your symptoms. Follow national guidance on self-isolation.

However, if you **live in an area with malaria or dengue fever** it is important that you do not ignore symptoms of fever. Seek medical help. When you attend the health facility wear a mask if possible, keep at least two metres distance from other people and do not touch surfaces with your hands. If it is a child who is sick, help the child stick to this advice.

Seek immediate medical care if you have difficulty breathing, pain or pressure in the chest. If possible, call your healthcare provider in advance, so he or she can direct you to the right health facility. By avoiding visiting medical facilities without warning, you will protect yourself, medical staff and other patients from the virus causing COVID-19 and other viruses.

Beating fake news: Busting myths about COVID-19

- People of all ages, nationalities and races can be infected by SARS-CoV2 – the virus responsible for COVID-19 disease. Older people, and people with pre-existing medical conditions (such as asthma, diabetes, and heart conditions) appear to be more vulnerable to becoming severely ill with COVID-19.
- There is no evidence that current medicine can prevent or cure the disease. But there are several ongoing clinical trials that include both western and traditional medicines.
- Antibiotics do not work against viruses, only against bacteria.
- Vaccines against pneumonia, such as pneumococcal vaccine and Haemophilus influenzae type B (Hib) vaccine, do NOT provide protection against COVID-19.
- Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from COVID-19.
- 5G mobile networks DO NOT spread COVID-19.
- Exposing yourself to the sun or to temperatures higher than 25 °C does NOT prevent COVID-19.
- You can recover from COVID-19. Catching COVID-19 does NOT mean you will have it for life.
- Being able to hold your breath for 10 seconds or more without coughing or feeling discomfort DOES NOT mean you are free from COVID-19 or any other lung disease.
- Drinking alcohol does not protect you against COVID-19 and can be dangerous.
- The virus causing COVID-19 CAN be transmitted in areas with hot and humid climates.
- Cold weather and snow CANNOT kill the virus causing COVID-19.
- Taking a hot bath does not prevent COVID-19.
- The virus causing COVID-19 CANNOT be transmitted through mosquito bites.
- UV lamps should not be used to sterilize hands or other areas of skin. UV radiation can cause skin irritation.
- COVID-19 is not a punishment from God (people don't get COVID-19 because they are sinners or hated by God).

II – IMPORTANT CONSIDERATIONS WHEN RUNNING FARMER FIELD SCHOOLS

**Farmer field school (FFS)¹ sessions can either result in spreading coronavirus...
or
can be an opportunity to sensitize people ... if you follow all recommendations carefully.**

Better to be safe than sorry... Be careful. Be safe!



- It is important to continue to support rural populations and their livelihoods, taking into account the specific needs of men and women, boys and girls. However, it is essential to review and act in line with official indications and recommendations to ensure that FFS or other field training activities are not doing any harm contributing to the spread of the disease, but on the contrary, they are helping to keep communities safe.
- Programme managers, master trainers and facilitators are advised to review whether FFS activities can still take place or should be cancelled, based on government measures and the local situation. If activities can take place, they may prepare a plan reducing ALL activities requiring physical contact to a strict minimum.
- If possible, prioritize digital solutions to continue supporting smallholder farmers.
- For continuing activities involving gatherings, plan according to the following principles and precautions to minimize the spread of COVID-19.

¹ In this guide, farmer field school (FFS) is used as a generic and widely recognized term encompassing all FFS variants or adaptations, such as agro-pastoral field school, livestock field school, fisherfolk field school, climate field school, farmer business or market school, and the many other derivations of farmer field school. They share the same methodology, principles and vision.

Key principles if field activities take place

- Follow the guidance of your Government and your institution when deciding whether it is appropriate to hold FFS sessions and other agricultural training activities in your current context.
 - Wash your hands. Handwashing is not optional. Everyone (facilitator and participants) must wash their hands at least at the beginning and end of the FFS session.
 - Keep a distance of at least two metres to prevent transmission.
 - Wear a mask and ask participants to wear one. If not available, they can use a cloth face cover.
 - Avoid touching eyes, nose and mouth at any time.
 - Be aware! If the facilitator or a participant is not feeling well and is showing COVID-19 symptoms, he or she should NOT participate in the training session and should call a local health authority for guidance.
 - Help each other! Participants should remind each other when guidelines are not followed. If a member does not wish to follow guidelines, then they should not attend the sessions.
-

1. Consider cancelling all FFS and training activities, or some FFS sessions

- The health of FFS members and their communities takes priority over continuing activities! Consider whether FFS and other rural advisory activities should be cancelled (see [Table 1: Deciding how to adjust training activities based on the local situation](#)).
- If you do cancel activities, call FFS members to remind them to timely and regularly check fields/animals in small groups and to share information. Use phone/video calls and instant messaging. When necessary, participants can go in shifts (of four to five participants, remembering to keep a physical distance of two metres) to observe and monitor the results of a field study.
- Task people who do convene to call others in the FFS community and share information and lessons learned.
- If you meet, only discuss the most important topics and limit the number of people convening per session (possibly 4–5 people, always respecting government recommendations on gatherings).
- Delay field days. Delay graduation and closing events.
- Begin all sessions with reminders about the risk of COVID-19 and basic protective measures to be followed to prevent its spread.

Box 1 | Running farmer field schools in times of COVID-19: case study from the project “Building Disaster Resilience in Pakistan”

In Pakistan, the Government implemented a range of measures to contain and mitigate the spread of the virus causing COVID-19. These include quarantines in localized areas, school and university closures, cancellation and banning of public events, social distancing measures, and varying levels of lockdown in cities and provinces across the country.

Staff in the FAO Pakistan Office swiftly implemented key smart farmer field school actions in their ongoing project “Building Disaster Resilience in Pakistan”. The aim was to allow FFS to continue to act as a channel for farmers’ learning and empowerment while respecting lockdown (and likely post-lockdown) measures and sharing basic protective measures, especially limiting gatherings and social distancing.

1. The **large FFS learning group is reduced** into small subgroups who **adopt all recommended COVID-19 basic protective measures**.
2. The **25 farmers** of each FFS are divided into **five subgroups**.
3. Each subgroup **chooses its leader**.
4. Only the **leader of each subgroup attends the FFS session** with the facilitator.
5. The next day, **each subgroup leader convenes a session with the other four members** of his or her subgroup.
6. The **number of FFS learning sites** is increased, using one to five, depending on the geographical and social distribution of farmers.
7. The **session workload is kept to a minimum**, focusing on **technical aspects**: crop monitoring using predesigned agro-ecosystem analysis (AESAs) forms and implementation of climate-resilient good practices in the fields for further learning.
8. If possible, the **lead farmers should be literate** and have **access to communications**: mobile/internet/social media channels.
9. **Learning can be facilitated** by using already-developed and available key data collection forms – FFS data books, predesigned AESA boards with “Jam’s4Colors” (stickers) and predesigned AESA sheets.
10. **Social media channels provide continuous support** while **facilitators provide technical backup** and carry out field visits.
11. An AESA support application is under development to support activities on both FFS and coronavirus protocols and protective measures.

2. Agree on and strictly follow special hygiene procedures in FFS and other field training activities

- Bring material for FFS participants to wash hands during activities.
- If needed, set up a hand-washing station with running water and soap (see [Activity 10: Making a tippy-tap or handwashing station in the farmer field school](#)). Do not let participants reuse water that others have used to wash their hands.
- Avoid sharing notebooks, pens, educational materials shovels, and other tools during FFS activities. Coronaviruses can remain infectious for several days on objects and surfaces.
- Ensure that all participants wash their hands at the beginning and end of the training session, and before and after key activities. For example, BEFORE agro-ecosystem analysis (AESA) or pastoralist-ecosystem analysis (PESA), so that participants do not contaminate common objects such as rulers; AFTER AESA/PESA, in case participants did share tools or markers; and as a general good hygiene practice after manipulating soil or animals.
- Avoid anyone touching their eyes, nose and mouth throughout the session.
- Ask participants to come with their own water and/or food. Avoid providing food and drinks. Participants should not eat or drink from the same cups, plates or jars.
- Consider contacting local health authorities to discuss whether they want to do health or temperature screenings during FFS meetings and provide information on the virus and basic protective measures.



3. Avoid physical contact between FFS participants

- Do not touch (shake hands, embrace, kiss etc.) when greeting. Use creative greetings (see [Activity 8: Using creative non-touch icebreakers](#)).
- Do not touch during activities:
 - Only use group dynamics that require no physical contact.
 - In group activities, maintain two metres distance between participants and allow maximum 4–5 participants per group (two metres is equivalent to six feet).
 - Find ways of adapting AESA (or PESA) and poster preparation to maintain physical distancing. Adjust existing mini-group settings to reduce the number of participants per group.
 - Take special care during village savings and loan scheme meetings:
 - Divide into mini-groups to avoid large numbers of people; revise timetables so that people arrive at different times; sanitize cash boxes before and after meetings; place markings or barriers to help people respect the two metres physical distance; do not pass money from hand to hand (instead you can place money on the far end of the table where the other person can then pick it up); consider different ways to share or lend money; choose to do money transfers if possible.

- Make sure the treasurer can continue receiving money to keep it safe.
- During transactions, wash hands regularly and do not touch your mouth, nose or eyes.
- Why? Money-changing hands poses a risk of physical contact – especially in countries where people use mainly cash.
- Work, sit or stand far apart throughout the FFS session or field activity. Consider making markings on the ground or moving seats to help respect physical distancing measures.
- Whenever feasible, consider replacing physical meetings by phone or online contact (such as WhatsApp groups and Skype meetings).
- All participants are advised to wear a mask or cloth face cover² covering their nose and mouth during the entire FFS session. However, keep in mind that **masks alone are not sufficient** to protect people from COVID-19. Even while wearing a mask, ask participants to follow the basic protective measures: wash your hands, avoid touching your face and stay two metres from anyone when outside the home (see [Activity 12: Using and making masks](#)).

4. Include special topics on COVID-19 to discuss with participants

- See [Part III – Suggested FFS activities on COVID-19](#) for ideas.
- Call in health workers to support facilitation of technical topics on the virus causing COVID-19 such as the Q&A on what is a virus.

5. Stay informed and disseminate essential information on COVID-19

- FFS WhatsApp groups and other tools can be an excellent way to disseminate basic protective measures against COVID-19 to project staff, colleagues, other facilitators, rural advisors and communities. Use ICTs to continue learning at a distance (see [Activity 18: Using information and communication technologies to share information](#) and [Activity 19: Tips to make good quality videos](#)).
- Beware of fake news circulating on the internet and social media (see [Activity 5: How to recognize rumours and fake news about COVID-19](#)). Always share verified information from reliable sources such as WHO and your national health service.

6. Take particular caution with vulnerable people

- **Remember that someone can catch COVID-19 and have no or very mild symptoms but still transmit the virus to other people.** So basic protective measures are a way not only to protect yourself, but also and especially to protect vulnerable people, such as the elderly and people with fragile pre-existing health conditions.
- Encourage people who are more at risk to be prepared in case there is a shortage of medication or they cannot access medical facilities.

² There is a strong body of evidence that the general adoption of non-medical masks when out in public – in combination with other public health measures – could successfully reduce spread of the virus causing COVID-19 (see for instance Howard *et al.*, 2020, and Hong Kong University, 2020).

- In many communities around the world, **elderly people have fundamental customary roles** at local level (leading councils and general assemblies). They might be very exposed to COVID-19 if they continue with their business as usual. FFS groups can help to discuss and mainstream knowledge of COVID-19 risks. Communities might need to adapt their own practices to reduce these risks.
- Provide specific advice for people – usually women – who care for children, the elderly and other vulnerable groups, and who may not be able to avoid close contact while caring for the sick (see posters in the [Annexes](#) and [Box 2: The impact of COVID-19 on women and girls](#)).
- Remember that anyone can be infected by the virus causing COVID-19, but that **disease outbreaks affect women and men differently**, and epidemics increase existing inequalities.
- As a facilitator, always keep in mind the most vulnerable and at risk socio-economic groups and households in your community. Deal with any issues that may arise with tact. Seek advice from local professionals, if needed.

Box 2 | The impact of COVID-19 on women and girls

- Special attention should be given to **potential increases in women's health risks and workload**, as they are often the primary caregivers for children, the sick and the elderly, and most often look after hygiene in the household (see [Activity 15: Discussing gender-related impacts of COVID-19](#)).
- Women and girls are often the first to feel the **impact of food insecurity during public health emergencies** and are often the first to go hungry. Social norms in some contexts dictate that they eat last and least.
- Rural women and girls may have **fewer opportunities to access support services and essential healthcare** due to reduced availability of legal, social and policing structures.
- Women may also be **employed in informal activities** (including market selling or informal cross-border trade) that are particular prone to disruption during lockdowns or movement restrictions.
- In many places affected by the COVID-19 outbreak, confinement and tensions in households and communities have also increased **women and girls' exposure to domestic and sexual violence**. When schools in Sierra Leone were closed for nine months during the Ebola outbreak, an estimated 18 000 teenage girls became pregnant, according to the UN, as they were more vulnerable to sexual assault during the quarantine (see [Activity 15: Discussing gender-related impacts of COVID-19](#)).
- Food scarcity and restricted circulation may also **force women and girls into transactional sex**, which can result in sexual exploitation for commercial purposes.

Sources and further references:

- UN Secretary General Brief / UN Women, *The Impact of COVID-19 on Women*, April 2020
- CARE and International Rescue Committee, *Gender Implications of COVID-19 Outbreaks in Development and Humanitarian Settings*, March 2020 https://www.care-international.org/files/files/Global_RGA_COVID_RDM_3_31_20_FINAL.pdf
- WHO Q&A on *Violence against women during COVID-19*, April 2020 <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/violence-against-women-during-covid-19>

Box 3 | COVID-19 and xenophobia (social stigma)

Crises like the COVID-19 pandemic remind us that we are all connected and our well-being is interdependent. Instead of using the internationally-recognized name of the virus (SARS-CoV-2) or referring to “the virus causing COVID-19”, some have adopted names with geographic references, typically referring to where the virus emerged. As a result, people from certain origins have received attacks ranging from hateful slurs to denial of services and brutal acts of violence, because of the stigma surrounding coronavirus.

In other parts of the world, international professionals working for NGOs, the UN or other civil society organizations have received unwanted attention because local populations believe that foreigners are to blame for spreading the virus causing COVID-19.

What is xenophobia?

Xenophobia is fear and dislike of strangers or foreigners, or of anything that is strange or foreign.

What are the facts?

The virus responsible for COVID-19 has no borders and does not discriminate: it can infect anyone. Because many people show no symptoms at all or only mild symptoms (which can be confused with a common flu), and because many people do not get tested, it can be hard to know exactly when and how coronavirus entered a given country. It is possible that the virus causing COVID-19 was present in a country much earlier than initially thought, but went undetected. It is also possible that cases get detected first in social groups with better access to medical facilities and testing, while cases among vulnerable groups remain undetected.

How to address the social stigma?

There is clear evidence that stigma and fear around contagious diseases do not help the response.

Helpful responses include: is understanding the disease itself; building trust in reliable health advice; adopting effective and practical measures so that people can help themselves and their loved ones; and showing care for those affected.

How we communicate about COVID-19 is essential to effectively combat the spread of the disease and to avoid fuelling fear and stigma. It is essential to create an environment in which the disease and its impact can be discussed and addressed openly, honestly and effectively.

As a facilitator, correct misconceptions, while acknowledging that people’s feelings are very real, even when the underlying assumption is false. Promote the importance of prevention, life-saving actions, early screening and medical care.

7. Be a role model at all times!

- As a facilitator, you are often well placed to build trust within communities and with community leaders. It is important to listen to people and to respond to their questions and fears with reliable and useful information.
- **Be the First!** Set a good example by taking measures to contain the spread of COVID-19: wash your own hands, avoid touching your eyes, nose and mouth, cough into your elbow instead of your hand, keep physical distance at all times when outside the home.
- **Keep up to date!** Obtain the most recent information regarding COVID-19 from reliable sources, so that you can update the community. Make sure everybody understands the information you give. Ask questions to assess people's level of understanding.
- **Do not spread stigma!** Do not attach race, nationality or location to the disease (such as calling it "the Chinese virus"). Avoid overemphasizing the role of specific groups or nationalities in spreading the virus, or referring to people as "cases" or "victims." Talk about "people who have or are being treated for COVID-19" (see [Box 3: COVID-19 and xenophobia \(social stigma\)](#)).
- **Do not repeat rumours!** (see [Beating fake news: Busting myths about COVID-19](#)).
- Talk positively about preventive and treatment measures. Most people can safely recover from this disease.
- Be honest when you do not know something and tell the community that you will try and find out and come back to them.

8. What if a community member is sick or is suspected to have contracted the disease?

If an FFS or community member develops symptoms related to COVID-19 (fever, cough or difficulty breathing), they should:

- Seek medical care early.
- Stay at home and call the local health centre or a doctor before travelling to any health facility, to avoid infecting others (patients and health workers) if they have been contaminated.
- Stay hydrated and follow the [Basic protective measures](#) on COVID-19.
- Self-isolate prior to testing (and continue to isolate if test is positive).
- Remember, if an infected person does not ask for medical help early, they may face a higher risk of becoming very ill and of spreading the virus.
- See [Activity 20: Role play – Community action in the event of a COVID-19 case in the community](#).

Box 4 | Malaria and the COVID-19 pandemic

Malaria is a widespread endemic disease that causes illness in approximately 230 million people and kills approximately 430 000 people each year.

There is an urgent need to aggressively tackle COVID-19. As work to find preventive and treatment tools continues, it is essential that other killer diseases, such as malaria, are not ignored. The COVID-19 pandemic could be devastating on its own – but this devastation will be substantially amplified if the response undermines the provision of life-saving services for other diseases.

Key recommendations:

- National and local programmes should continue to provide **essential preventive and case management interventions for malaria** (and other communicable diseases or conditions affecting the population), **even with the risk of transmission of COVID-19**.
- Encourage communities to **seek early care for fever and suspected malaria**. To prevent a spike in severe malaria cases and deaths, national and local programmes should continue encouraging populations to seek care early, while being aware of local personal protection and physical distancing guidelines established by facilities and local authorities.
- In places where malaria is not widespread, potential COVID-19 patients are advised NOT to visit health facilities because they may infect much-needed health workers and other workers (they should call health facilities in advance to receive guidance by phone). In places where malaria is endemic, it is important that patients who may have malaria can access a parasitological diagnostic test, and receive early treatment with an effective antimalarial.

If you live in an area with malaria or dengue fever, do not ignore symptoms of fever. Seek medical help. When you attend the health facility, wear a mask if possible, keep at least two metres distance from other people and do not touch surfaces with your hands. If it is a child who is sick, help the child stick to this advice.

Source: WHO, 2020

III – SUGGESTED FFS ACTIVITIES ON COVID-19

If after a careful review of the country situation and government recommendations, it is decided that some FFS sessions or other field training activities can take place without unnecessary risks for the community (see [Part II – Important considerations when running farmer field schools](#) and [Table 1: Deciding how to adjust training activities based on the local situation](#)), facilitators and trainers will need to revisit the training plans, and should include basic protective measures in training activities.

Every participant should understand the main points and general guidelines on COVID-19. The facilitator and the participants should agree that everyone needs to follow basic protective measures in the FFS or training sessions. The activities below provide ideas on how to integrate COVID-19 in FFS activities.

Suggested activities include:

- Activity 1: Discussing basic protective measures
- Activity 2: Questions and Answers about the virus causing COVID-19
- Activity 3: Mental maps
- Activity 4: Demonstrating how viruses spread (using flour)
- Activity 5: How to recognize rumours and fake news about COVID-19
- Activity 6: Role plays – Reducing risks at home, on farm, going shopping, at prayer, in the bank, visiting family or a neighbour
- Activity 7: Drafting a care plan for self and others
- Activity 8: Using creative non-touch icebreakers
- Activity 9: Demonstrating how to wash hands correctly
- Activity 10: Making a tippy-tap or handwashing station in the farmer field school
- Activity 11: Preparing home-made hand sanitizers
- Activity 12: Using and making masks
- Activity 13: Handling food safely at home, in the market and in food businesses
- Activity 14: Cleaning the house
- Activity 15: Discussing gender-related impacts of COVID-19
- Activity 16: Identifying various types of gender-based violence (GBV)
- Activity 17: Should we worry about our animals?
- Activity 18: Using information and communication technologies (ICTs) to share information
- Activity 19: Tips to make good quality videos
- Activity 20: Role play – Community action in the event of a COVID-19 case in the community
- Activity 21: Exploring local or indigenous knowledge and Western science to respond to COVID-19

Activity 1: Discussing basic protective measures

Objective

By the end of the session, participants will be able to describe key points and basic protective measures about COVID-19.

Materials and preparation

- Posters on key protective measures in [Annex 3. Prevention measures to protect yourself and others from getting sick](#) (optional).
- Carefully read [Part I: Basic information on COVID-19](#) and [Part II: Important considerations when running farmer field schools](#).
- To ensure accurate information, you may ask a local health professional for assistance: if possible, they could join you in facilitating the training session; if not, they may help you prepare for the session beforehand. They may have useful educational material in local languages and can share vital information: an update on the local situation, advice on what to do if there is a suspected case in the community, emergency phone numbers, and the latest guidance from local authorities.
- In many countries, the websites of the Ministry of Health and of the WHO Country Office provide important information, including videos in the local language, relevant educational material and calls to action by prominent personalities and religious authorities. Keep up to date at all times and share reliable information among colleagues and in your community.

Steps

1. Ask participants: What do you know about this new coronavirus? What have you heard? How do we protect ourselves and others from infection by the virus causing COVID-19?
2. Read below. Check that all words are clear. The basic idea for each point should be clear before you advance to the next point. Get participants to rephrase each point, so you are sure it is well understood. Many words are foreign, so the group may need to discuss.
3. Together with the group, you may (also) use posters or a song (see [Activity 8: Using creative non-touch icebreakers](#)) to capture the key points and guidelines on COVID-19.

Key points about the coronavirus disease (COVID-19):

1. It is easy to get the disease from another person without knowing.
2. It is easy to transmit the disease to another person without knowing.
3. Even when people have no symptoms, they can transmit the disease to another person.
4. The virus moves through the air in our breath when we talk, sneeze or cough.
5. The virus can also stay on surfaces for several hours. If you touch a contaminated surface and then touch your mouth, nose or eyes, you can be infected by the virus. “Surfaces” include everything from tables, dishes and doorknobs, to packaging, pens, phones and ATM keypads, as well as all tools and implements.

6. Everyone, both rural women and men, can be infected by the virus. Yet existing gender disparities might increase women's workloads and expose them to risks such as gender-based violence (see [Activity 15: Discussing gender-related impacts of COVID-19](#)).

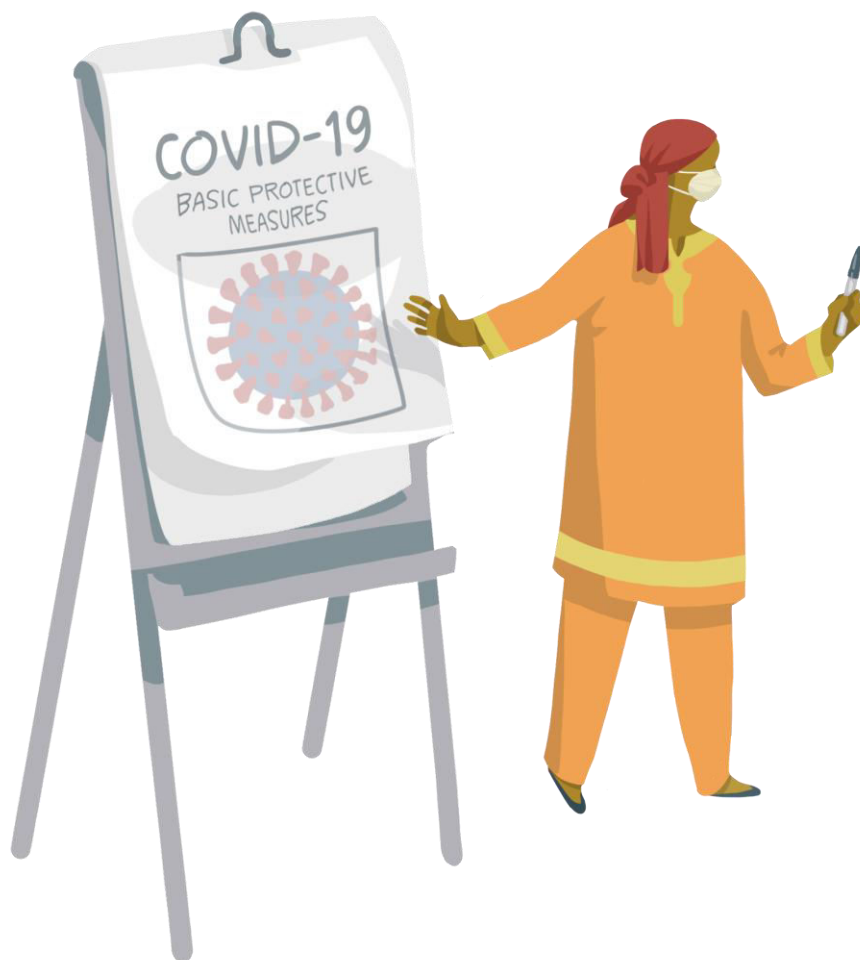
General guidelines:

1. **Staying at home.** Meet as few people as possible. Many countries do NOT allow meetings of over five people at a time. Stay home. Skip worship. Skip group sports. Skip any meetings or gatherings.
2. **Greetings.** Do not touch while greeting (no handshakes, no embraces, no kissing). Nod heads or bow and keep appropriate two metres distance.
3. **No touching eyes, nose and mouth.** Avoid touching your face always, especially when outside your home.
4. **Handwashing.** Wash your hands often with soap. If you touch other surfaces – wash your hands. When you come home – wash your hands. When you go out – wash your hands. Use alcohol-based hand rub or disinfectant if water and soap are not available.
5. **Going out.** Go out alone if possible. Leave children at home. But – do share reliable information on the spread of COVID-19 and on basic protective measures with others in your households and communities. Use social media to share information. But beware – avoid sharing fake news!
6. **Travel.** Keep travel to a minimum so as to not meet other people.
7. **Distance.** When meeting people, keep a safe distance from each other. two metres is recommended. This applies when meeting in the street, shopping, standing in line, going to the bank etc.
8. **Distance during gatherings.** During any small meeting, sit or stand at least two metres apart from other people.
9. **Masks.** Wear a mask, any mask (even a cloth), if you have **symptoms** or if you are **caring for sick people**. It is also advised that everyone wear a mask when **outside the home** in a crowded place. Masks help prevent you from touching your nose and mouth, and may reduce exposure to the virus and prevent you from spreading the virus to others, including if you have contracted it but do not have any symptoms. Masks reduce the amount of spit or breath we give or receive. Do not feel ridiculous – millions of people around the world are using masks! Remember that **masks alone cannot protect you from COVID-19**. Even while wearing a mask, continue following the [Basic protective measures](#) (see [Activity 12: Using and making masks](#)).
10. **Sneezing and coughing.** When you sneeze or cough, cover your mouth with the inside of your elbow. If you use a tissue, dispose of it safely: throw it in a closed bin, throw it in the fire or put it in a hole in the ground and cover with sand or dirt.
11. **Self-isolation.** Travellers, including migrant workers returning home, should self-isolate for 14 days when coming from a city or another country or anywhere with COVID-19. Travelling increases the risk of meeting people and so it increases the risk of contamination.

12. **Symptoms.** If showing symptoms, stay at home. Stay away from other family members as you can easily pass the disease to others. Symptoms include:
- Fever
 - Dry cough (cough without yellow phlegm/mucus)
 - Shortness of breath or difficulty breathing (the virus attacks the lungs)
13. **Persistent symptoms.** If you show symptoms **for two days or more**, stay away from others and call a local health authority, doctor, or COVID-19 emergency number if available. Do not go inside hospitals or health centres directly – call beforehand to avoid infecting others. If you decide to go, wait outside, wear a mask, and keep two metres distance from others.

Remember, people may catch COVID-19 without knowing it as it is common not to have any symptoms, or to have only mild symptoms. This coronavirus can be passed to others even if you have no symptoms.

Minimize social interaction and keep your distance. Better to be safe than sorry.

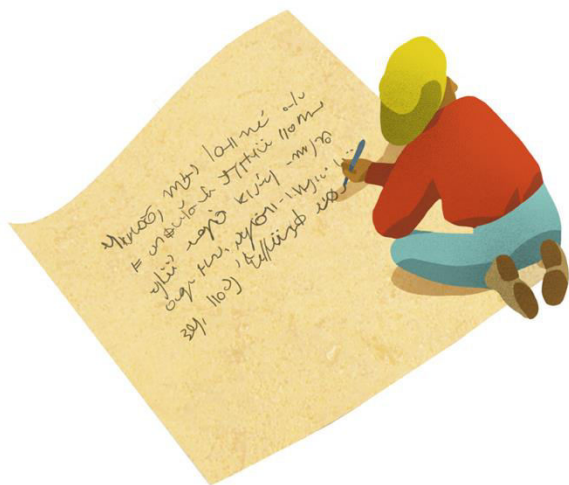


Activity 2: Questions and Answers about the virus causing COVID-19

Objective

By the end of the session, participants will have learned what is a virus.

Materials and preparation



- Picture of the virus causing COVID-19 (optional).
- Posters on basic protective measures in [Annex 3](#) (optional).
- To ensure accurate information, you may ask a local health professional for assistance: if possible, they could join you in facilitating the training session; if not, they may help you prepare for the session beforehand. They may have useful educational material in local languages and can share vital information: an update on the local situation, advice on what to do if there is a suspected case in the community, emergency phone numbers, and the latest guidance from local authorities.
- In many countries, the websites of the Ministry of Health and of the WHO Country Office provide important information, including videos in the local language, relevant educational material and calls to action by prominent personalities and religious authorities. Keep up to date at all times and share reliable information among colleagues and in your community!
- WHO's [Q&A on coronaviruses](#) (COVID-19) provides excellent up-to-date information.

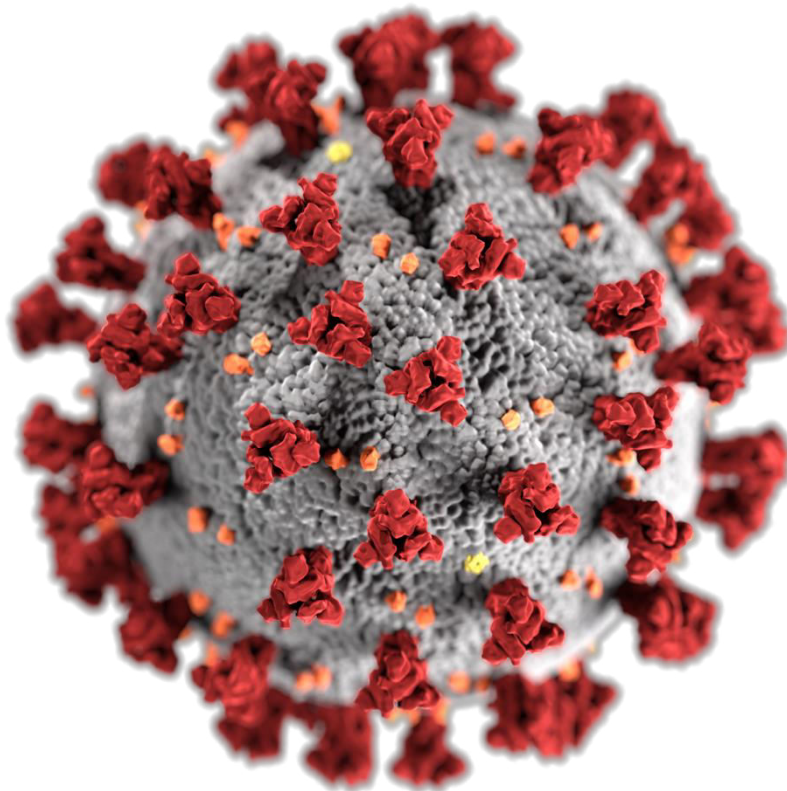
Questions and Answers

Note to facilitator: Ask the question. Wait to see if anyone can answer (count to five). If there is no answer, read aloud the answer and check if it is understood. Some words may be difficult to translate in local languages. You may use a picture of the virus causing COVID-19 to support the discussions.

1. **What is a virus?** A virus is a very small organism that can infect all animals, plants and people. It is smaller than bacteria and fungus. It is not a living organism; it only reproduces when inside its host, for example humans.
2. **What are some diseases caused by viruses?** In people, diseases caused by viruses include HIV- Aids, the common cold, measles, smallpox, polio, Ebola, and COVID-19.
3. **How do viruses enter the human body?** Viruses can enter the body through the eyes, nose and mouth. Based on current knowledge, there is no proof that COVID-19 can be

transmitted through the blood. But it is not certain and precautionary measures should be taken.

4. **How to prevent the virus?** Many diseases caused by viruses are prevented with vaccines. But many do not yet have vaccines (for example, HIV-Aids, COVID-19).
5. **How to cure this new coronavirus?** Diseases caused by viruses are difficult to cure. Antibiotics do NOT work against viruses. Some drugs reduce the health consequences of disease (such as HIV) but do not cure the disease. Do NOT take antibiotics against COVID-19. There are currently no drugs for COVID-19.
6. **What are antibodies?** Our body has natural defences called antibodies, but you have to be exposed to the disease in order to develop the antibodies (this is what vaccines do).
7. **When will there be a vaccine?** Globally, there is a lot of ongoing research, but it may take several months or even a year or more. Meanwhile, we need to follow basic protective guidelines and find ways of avoiding the virus so that we can prevent its spread.



An illustration released by the Centers for Disease Control and Prevention showing the coronavirus, including the characteristic spikes from which it gets its name.

Credit: Lizabeth Menzies

Activity 3: Mental maps

Objective

By the end of the session, participants will know more about COVID-19 and its prevention.



Materials

- Big sheets of paper for each group (flipchart paper, art paper)
- Marker pens (one per participant, which they should keep for the entire duration of the training session, avoiding sharing with others)
- Masking tape



Activity

1. Ask participants to think for five minutes about what they know about COVID-19.
2. Put several sheets of paper on the floor and with each paper a few markers (make sure markers are not shared among participants).
3. Ask the participants (in small groups, respecting the physical distancing of two metres) to go to the pieces of paper and write or draw their thoughts about COVID-19.
4. Allow enough time for everybody to add their thoughts on the sheets.
5. Put the papers in front of the group and discuss the ideas and thoughts written on them.
6. At the end of the FFS season, repeat the exercise and evaluate if there is any change in knowledge of and attitudes towards COVID-19.

Some guidelines for discussion

1. Discuss all the points that were written down.
2. Stimulate exchange of views between the participants while discussing the thoughts they wrote down.
3. If needed, write down any additional points that came up during the discussion.

Activity 4: Demonstrating how viruses spread (using flour)

The virus causing COVID-19 primarily spreads between people, through droplets of saliva or discharge from the nose. A person who is in close contact (within two metres) with someone infected could be at risk of exposure to potentially infective droplets spreading through the mouth and nose. The virus can also spread through objects or materials in the immediate environment such as furniture, clothes, telephones, books, pens and tools, as well as soils and food.

It is important to know how a disease spreads to prevent a pandemic or reduce the incidence of the disease.

Objective

By the end of the session, participants will understand about the spread of viral diseases.

Materials

- Flour
- Tarpaulin to sit on (optional)

Steps

Note to the facilitator: At the start of the activity, do NOT explain the exercise to participants. This will make the situation more similar to the real world – where people are not aware of how viruses spread. If you want, assign one person to film the activity (see [Activity 19: Tips to make good quality videos](#)).

1. Organize participants in small groups.
2. Before the activity starts, identify one “volunteer” from each group, take them aside to explain the exercise, and give them a handful of flour (*use any kind container to safely scoop the flour and avoid contamination*).
3. The volunteers each have a handful of flour but should still be able to keep their hand closed.
4. Ask the other participants to sit safely (at least two metres from each other) in their small groups – if possible, on a coloured tarpaulin or around a dark table (this will allow participants to see the flour well).
5. Ask everyone to put one object of their own in front of them (such as pen, pencil and notebook).
6. Once everyone is in position, the volunteer holding the flour PRETENDS to sneeze, spreading the flour he or she is holding by fanning it through the air with a piece of cardboard. The volunteer can even pretend to “sneeze or cough” (and spread the flour by fanning it) two or three times. **Be careful that the flour does not go into people’s eyes! Remember... Do not really cough or sneeze! It is important that the volunteer does not spread their own germs.**

7. Ask everyone to observe carefully for traces of flour around the volunteer – on clothes, tables and chairs, the tarpaulin or floor...
8. Ask participants to pick up the object they had placed in front of them. Is there flour on the object? Do they have flour on their hands now? Ask them to look at each other's faces, always maintaining the required physical distance. Do they have small traces of flour on their face?
9. Explain that the flour represents the virus that is carried by a person. They can spread it by sneezing, coughing, spitting, blowing, breathing hard... The droplets are so small that they can land in someone's nose, eyes or mouth without them realizing it, or it can contaminate objects around them. If you touch contaminated objects and then touch your mouth, eyes or nose, you can get infected by the virus causing COVID-19.

Discussion:

- What did you observe?
- Where did you see traces of flour? How did the flour get there?
- What would have happened if someone was sitting very close to the volunteer?
- Imagine that the flour is a virus and a person touches his or her eyes, nose after touching contaminated objects. What do you think will happen?
- How do viruses spread to other people?
- Which surfaces or objects were covered with flour? What happens if others touch those objects?
- How can we protect ourselves and others? Discuss key protective measures (see [Part I – Basic information on COVID-19](#)). They include coughing into the elbow or a disposable tissue; washing hands very often with water and soap or hand sanitizer; keeping two metres distance; avoiding as much as possible contact with people outside the family circle in areas with heavy infection.

Note to facilitator:

- Help participants understand that the flour particles may travel far away from the source depending on the strength and direction of wind. Droplets discharged through sneezing or coughing may follow a similar pattern to the flour, but not travel as far. For this reason, a minimum **physical distance of two metres (six feet) remains a safe distance**.
- If you filmed the activity, share the video of the exercise and discussions with other FFS members who did not attend, or with members of the community (see [Activity 18: Using information and communication technologies \(ICTs\) to share information](#)).
- After the activity, make sure all participants **wash their hands** – remind them how important it is because they have been touching objects and the flour has touched them.

Activity 5: How to recognize rumours and fake news about COVID-19

The proliferation of fake news about the COVID-19 pandemic has been labelled a dangerous “infodemic”. Fake news spreads faster and more easily today through the internet, social media and instant messaging. Messages may contain useless, incorrect or even harmful information and advice, which can hamper the public health response and add to social disorder and division.

Objective

By the end of the session, participants will know where to find and how to recognize and disseminate reliable information on COVID-19.

Activity

Ask participants the following questions:

1. Have you heard rumours or fake information about the virus causing COVID-19? Have you believed something about this coronavirus at some point and later discovered it was wrong? (see [Beating fake news: Busting myths about COVID-19](#)).
2. Where did the wrong information or rumour come from? How did you find out it was not true? How can we identify fake news? (see What to look out for).
3. What are reliable sources of information in our country or context?
4. How can we share correct information around us?

Keep in mind

- Some fake news contain a mixture of correct and incorrect information, making it difficult to spot.
- Fake news may also be shared by trusted friends and family, including doctors and nurses. They might not have read the full story before sharing.
- Before you decide to share, make sure you read stories properly and do some checks (see what to look out for) to determine the accuracy.
- Any story that claims a much higher level of certainty than other stories may be questionable. People seek certainty in a time of uncertainty, anxiety and panic. It is only natural to more readily accept information that resolves, reassures and provides easy solutions – but be careful: the easy way may be the false way.
- Similarly, if a story is especially surprising or upsetting, it is worth double-checking – fake news will try to grab your attention by being more exaggerated than real stories.
- Be cautious – people may try to launch cyberattacks and commit crimes. Hackers and cyber scammers are taking advantage of the COVID-19 pandemic by sending fraudulent emails and WhatsApp messages (sometimes pretending to be WHO or another reputable organization) to trick you into clicking on malicious links or opening attachments – and if you do you may reveal your username and password, which can be used to steal money or sensitive information.

Reputable organizations such as the World Health Organization will:

- **never** ask for your username or password to access safety information.
- **never** email attachments you didn't ask for.
- **never** ask you to visit a link outside of www.who.int.
- **never** charge money to apply for a job, register for a conference, or reserve a hotel.
- **never** conduct lotteries or offer prizes, grants, certificates or funding through email.

Important! The only call for donations WHO has issued is the *COVID-19 Solidarity Response Fund* (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/donate>). Any other appeal for funding or donations that pretends to be from WHO is a scam.

What to look out for (The conversation, 2020)

- **Source.** The golden rule is: “**Question the source of information**”. References have been made to “Taiwanese experts,” “Japanese doctors,” and “Stanford University” during the outbreak. Check on official websites to see if the same story is repeated there. If a source is “a friend of a friend”, this is a rumour unless you also know the person directly.
- **Logo.** Check whether the logo of the organization used in the message is the same as on the official website.
- **Incorrect English.** Credible journalists and organizations do not usually make repeated spelling and grammar mistakes. Also, anything written entirely in capital letters or containing a lot of exclamation marks should raise your suspicions.
- **Fake social media accounts.** Some fake accounts mimic the real thing. For example, the unofficial Twitter handle @BBCNewsTonight, which was made to look like the legitimate @BBCNews account, shared a fake story about a celebrity testing positive for coronavirus. Media platforms try to remove or flag fake accounts and stories and to verify real ones – but they do not always manage, so beware!
- **Over-encouragement to share.** Be wary if the message pushes you to share – this is how viral messaging often works.
- **Fact-checking websites.** Use websites such as [APFactCheck](#) and [Full Fact](#) that highlight common fake news stories. You can also use a search engine to look up the title of the article to see if it has been identified as fake news by the mainstream media.

Who to trust

The best sources to go to for health information about COVID-19 are your national **government health websites** and the [COVID-19 disease section](#) of **World Health Organization website**. Primary sources are generally better than news articles. See [Part V – E-resources for coronavirus disease prevention and management](#) for links to key e-resources.

Activity 6: Role plays – Reducing risks at home, on farm, going shopping, at prayer, in the bank, visiting family or a neighbour

Objective

By the end of the session, participants will know how to implement basic protective measures.

Role play 1: Staying at home

Action

1. Everyone wears a mask to cover their mouth/nose.
2. Members of the group sit at least two metres apart (two metres is equivalent to six feet).
3. The group reviews basic protective measures – discussing appropriate behaviours, reviewing posters if available, or singing their “COVID-19 song” on protective measures if they created one (see [Activity 8: Using creative non-touch icebreakers](#)).
4. Role play begins (before the activity, you will have chosen a few volunteers and discussed with them what to do). Each volunteer demonstrates one important protective measure to adopt during the day at home, for example, how to properly wash hands (see [Activity 9: Demonstrating how to wash hands correctly](#)) or how to sneeze or cough inside a flexed elbow.
5. Other participants observe (with their masks on and at a distance!) and note if anything can be improved. The group discusses why these basic protective measures are recommended and why some behaviour is unsafe (see [1 – Basic information on COVID-19](#) and [Activity 1: Discussing basic protective measures](#) and [Activity 2: Questions and Answers about the virus causing COVID-19](#)).
6. One or more volunteers can then be asked to simulate home activities following the basic protective measures.
7. Some volunteers can be secretly asked to pretend *not* to comply with basic protective measures! For example, they could PRETEND to sneeze/cough into their hand (instead of their elbow) or they could quickly rinse their hands (instead of washing them well for 20 to 30 seconds). But make sure – even in a role play – that participants ALWAYS maintain two metres distance, NEVER actually touch each other, and wash or sanitize their hands properly after the exercise.
8. Participants are encouraged to discuss whether the guidelines were properly followed by the volunteers. Participants can examine relevant posters (see [Annex 3](#)) and discuss further (optional).

Role play 2: Going out

Action

1. Everyone wears a mask to cover their mouth and nose.
2. Everyone sits at least two metres apart.
3. The group reviews basic protective measures – discussing appropriate behaviours, reviewing posters if available, or singing their “COVID-19 song” on protective measures if they created one (see [Activity 8: Using creative non-touch icebreakers](#)).
4. Different mini-groups are asked to prepare for role play. They need to show how to act responsibly in a range of situations: crossing the village to go to the field, going shopping, to the bank, to the mosque, church or other place of worship, visiting neighbours, participating in FFS learning, conducting agro-ecosystem analysis (AESAs) or pastoralist-ecosystem analysis (PESA) etc. Each group is given a few minutes to prepare and then performs the role play, seeking to demonstrate protective measures. They can demonstrate wearing mask in a crowded place (see [Activity 12: Using and making masks](#)), standing at a distance of at least two metres, going out alone without children, washing or sanitizing hands before and after going out, greeting others without physical contact (see icebreaker on [Creative greetings](#)), pretending to sneeze or cough inside the elbow, not touching eyes, nose and mouth, not touching anything. **Remember: two metres distance must be maintained at all times during role play!**
5. Other participants observe (with their masks on and at a distance!) and note if anything can be improved.

Discussion:

- What should each person avoid?
- Are these behaviours easy to implement? If not, why not? Which ones are more difficult?
- Are we likely to forget them as we go about our day? What can we do to remember them? Can family and community members make a commitment to gently remind each other about implementing the measures? Some people suggest reminding each other to wash hands, many times a day.
- Some people suggest using phones more often. Do we need to clean our phones?
- How can neighbours and relatives support each other when they cannot meet?
- How can members of the farmer field school maintain the essential parts of the learning process while abiding by the prevention and control measures for COVID-19?

Activity 7: Drafting a care plan for self and others



Source: FAO Syria

Objectives

By the end of the session, participants will know how to:

- support the mental health of themselves and others and provide psychological support among FFS members and their families and communities – this may be especially useful in countries or areas where lockdown is ongoing.
- write a step-by-step “self-care plan” – including elements to improve day-to-day life in times of COVID-19.

Materials

- Flip chart
- Markers

Steps

1. Bring participants together, respecting the two metres physical distance.
2. Use a flipchart and draw five categories: Mind; Body; Spirit; Supportive people in my life; I want to accomplish (see above).
3. One category at a time, discuss and fill in the chart. For each category, ask “What can I do to get better during stressful times like the COVID-19 emergency?”:
 - **Mind** (logic, information, repetitive or negative/positive thoughts, anxiety)
 - **Body** (physical health, sleep, exercise, food)
 - **Spirit** (loneliness, connection, happiness, in peace, God)
 - **I want to accomplish** (objectives)
 - **Supportive people in my life**

As facilitator, you can use yourself as an example (sharing what you feel comfortable with); for example, for “Body”, you might say: “It helps me to do some mild exercise even during lockdown. Every morning I do 20 minutes of stretching, and I try to get up and stretch several times during the day. It helps clear my mind and gives me energy.” Or you could write a generic self-help plan with ideas from participants.

4. Once you have developed the example, invite participants to take 15 minutes to reflect and write their own Self Care Plan individually on a sheet of paper or in their notebook. Be sure to explain that this exercise will remain confidential – participants will not be asked to hand the plan in or to share it with anyone (unless they want to). If someone cannot write (or prefers not to), tell them they can think about it in silence, or discuss it with someone of their choice.
5. **Open up for discussion.** What thoughts and ideas did you have? What difficulties are we likely to face when isolated or in lockdown? What are common fears or stresses created by the COVID-19 emergency? Do you have relatives or friends whose situation worries you? What can we do to cope, and to help others?
6. You can **discuss what can be done to improve:**
 - MIND: staying informed (but not obsessively), life-long learning, talking with friends and relatives, and reading
 - BODY: physical health, sleep, exercise, healthy food, and staying hydrated
 - SPIRIT: prayer, meditation, self-reflection, and connecting with plants

Activity 8: Using creative non-touch icebreakers

Icebreakers are fun games used in FFS and other field training activities to help participants relax and ease into a group meeting or learning situation, to communicate important ideas while having fun, and to build positive group dynamics.

Participants are encouraged to be innovative and come up with their own unique icebreakers.

Remember! Do NOT use traditional icebreakers or group dynamics involving physical contact.

1. Best song and dance on basic protective measures

Objectives

By the end of the session, participants will have:

- practised and learned how to remember basic protective measures.
- discovered fun ways to share precautions with FFS participants, family, neighbours and on social media.

Activity

1. Divide the participants into small groups, making sure to respect the two metres distance between everyone.
2. Give each group 15 minutes to come up with a song and dance on the most important basic protective measures (coughing in elbow, no spitting, no touching with greetings, no touching of eyes, nose and mouth, thorough handwashing with soap and water, and what to do if someone shows symptoms etc.).
3. Invite groups one at a time to present their song and dance.
4. Be creative and innovative!
5. Encourage participants to use their phone (if they have one) to film the song and share it on social media.

Some inspiration...

From Viet Nam: <https://youtu.be/BtulL3oArQw>

From Singapore: <https://youtu.be/wYlm-k8XaJ0>

2. Best song to use during handwashing

Objectives

By the end of the session, participants will have:

- understood the importance of washing hands properly with soap for at least 20 seconds.
- found fun ways to implement hygiene measures.

Activity

1. Divide the participants into small groups, making sure to respect the two metres distance between everyone.
2. Give each group 10 minutes to choose or invent an easy-to-remember song which lasts 20–30 seconds, and then present it to the entire group.
3. The FFS participants or group of trainees can vote for the “handwashing song” to use while washing hands during training to make sure they wash hands for 20 seconds (i.e. until the end of the song). In some countries, people sing “Happy Birthday to you” (twice!) while they wash their hands: try it... most people would have normally stopped washing well before the end of the song!

Some inspiration...

Italian Red Cross staff singing happy birthday in Italian:
<https://www.tiktok.com/@fao/video/6802530431108418821>

FAO security guards using the trumpet to time 20 seconds of handwashing:
<https://www.tiktok.com/@fao/video/6801442241681378565>

Create your own poster song: you can put any lyrics of any song and it will insert them in the washing hands posters! <https://washyourlyrics.com/>

3. Creative greetings

Objective

By the end of the session, participants will have explored and practised new ways to greet others without touching, but with the same level of warmth and politeness.

Activity

1. Gather participants in a circle, making sure to respect the two metres distance between everyone.
2. Ask participants what traditional greetings are acceptable to prevent transmission of the virus causing COVID-19.
3. If any of the greetings involves physical contact, discuss why you shouldn't use it.
4. Brainstorm together on new and fun ways to greet each other such as waving and explore acceptable traditional greetings. Remember to practise your greetings at all times...
5. If farmers in your area use smartphones, film your best creations and share them.

ALTERNATIVES TO HANDSHAKES, HUGS, HIGH FIVES AND HONGI



THE WAVE



THE HAND ON HEART



NAMASTE



NZSL: HOW ARE YOU?

Source: The Spinoff, 2020

4. Guess the task

Objective

By the end of the session, participants will know what precautions to take to avoid transmission of COVID-19.

Material

- Small pieces of paper

Activity

1. Before the exercise, prepare some pieces of paper with “tasks”. When participants gather make sure they respect physical distancing of two metres.
2. Ask one of the participants to start and show him/her one of the pieces of paper.
3. This person mimes/acts out what is on the paper – without speaking!
4. The other participants try to guess what is written on the paper.
5. Start with easy tasks, gradually progressing to more difficult ones. Tasks are related to COVID-19 and could include:
 - Cough, fever and difficulty breathing (COVID-19 symptoms)
 - Washing hands
 - Safe greetings
 - Safe sneezing
 - Physical distancing
6. The first person to guess the task must then share correct information about that task (basic precautions and best behaviour in this case) and is then the next person to play a role. If several people answer at the same time, the role player decides who is next.

Activity 9: Demonstrating how to wash hands correctly

Objective

By the end of the session, participants will have learned how to wash their hands properly.

Materials

- Flour
- Soap
- Bowls with water or tap with running water (the water does not need to meet drinking water standards)
- Relevant posters presented in [Annex 3](#) (optional).

Activit

1. Ask the group what the best way is to wash hands. Discuss some good ideas (see illustration below).
2. You may ask a participant to make a video of the exercise.
3. Ask three people to cover their hands with sticky flour dough so they are dirty.
4. Tell one of the three secretly (but keeping the right distance!) not to wash their hands well.
5. The three people wash their hands with soap in separate bowls or with running water.
6. Check: wash front and back of hand, between fingers, around nails.
7. Each person shows their hands (at a distance) to check if wet flour is washed off. If yes then applaud. If not, try again.
8. Tell the group about the person who was asked not to wash well, and give a clap for good acting.
9. Make a tippy-tap if there is no safe way to wash your hands (see [Activity 10: Making a tippy-tap or handwashing station in the farmer field school](#)).

Discussion

- When is it important to wash hands?
- Why do we use soap when washing hands?
- What to do if no soap or water is at hand?

Keep in mind

- Hands need to be washed for **at least 20 seconds** (see [Best song to use during handwashing](#) in [Activity 8: Using creative non-touch icebreakers](#)).
- Hands need to be washed with soap. Soap kills the virus by breaking the surface of the organism.

- Share the video of the exercise and the group discussion with participants who did not attend or with members of the community (see [Activity 18: Using information and communication technologies \(ICTs\) to share information](#)).
- If you can't wash your hands after exposure to possible virus, avoid touching your face (mouth, eyes, nose).



Source: WHO

Video resource

Washing hands with a tippy-tap: https://www.youtube.com/watch?v=HNkl1Zqs_40

Activity 10: Making a tippy-tap or handwashing station in the farmer field school

A tippy tap is a handwashing station that works even when there is no running water on the FFS site. The foot taps a lever to tip water out of a container. It means hands can be washed without touching the stand or jug – thus preventing the spread of the virus. Remember, coronaviruses can remain infectious on objects! With a tippy tap, you can wash your hands without touching the station or the water used by others.

Objective

By the end of this session, participants will have learned how to make a tippy tap – a handwashing station useful for washing hands without touching objects.

Materials

- 3–5 litre jerrycan, plastic jug (for milk or water) or container
- 2 long sticks (about 1.2 m)
- 2 shorter sticks (about 90 cm)
- Tools for digging
- Stones
- Screwdriver or nail or wire
- String
- Rope or wire
- Candle and matches (if needed)



Activity

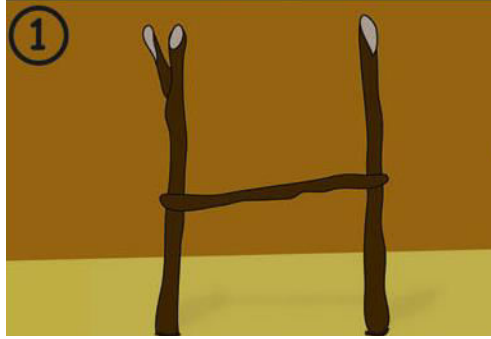
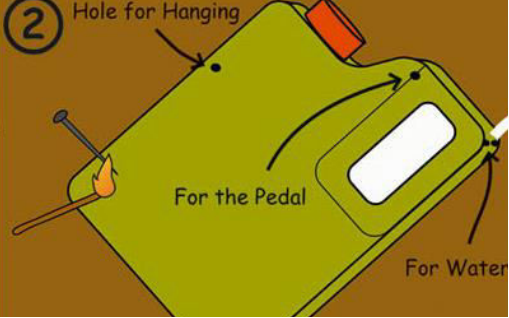


1. Discuss with participants how they can ensure they wash their hands while at the farmer field school without spreading the virus.
2. Introduce the idea of the tippy tap, explaining how it can help comply with basic protective measures.
3. Dig two holes one metre apart in the ground. Push the two longer sticks into the holes.
4. The tippy tap needs a hole in the jug for the water to pour out. The hole should be positioned a finger length from the top of the container. Mark where the hole should be.
5. If the jug does not have a handle, you will need to create a way to attach it: make two holes in the top of the container, on either side of the lid (if it helps, heat the screwdriver or the nail with the candle/fire).
6. Place stones on the ground underneath to stop muddy puddles from forming.
7. Lay one of the short sticks horizontally across the two longer sticks.
8. Tie a piece of string to one end of the other short stick. Then tie the other end of the string to the neck of the jug.
9. Tie a piece of soap to the crossbar

- Half fill the bottle with water and place the crossbar through the handle (or pass the rope or wire through the two holes – see steps for building a tippy tap below). When you place your foot on the stick, the container tips forward and you can wash your hands!

Keep in mind

- Clean the outside of the tippy tap with a brush and soap daily, and clean the inside of the tippy tap once a week with clean water and disinfectant.
- Use soap every time you wash your hands.
- Use treated water to fill the tippy tap.
- Avoid touching the container or other parts of the tippy tap when washing your hands as the surface may be contaminated by the virus.

Steps for building a tippy tap

 <p>1. Make the frame using three wooden sticks</p>	 <p>2. Heat a nail, screwdriver or piece of wire to make holes in the jerrycan – for hanging, for the pedal and for water to come out.</p>
 <p>3. Attach the jerrycan to the pole with a rope or a wire.</p>	 <p>4. Add the pedal to the jerrycan so that water pours when stepping on it. Add a small dish for the soap and fill the jerrycan with water.</p>

Source: Agromisa (adapted)

Video resource

How to build a tippy-tap: <https://www.youtube.com/watch?v=Qdpd3roZjYw>

Activity 11: Preparing home-made hand sanitizers

Objectives

By the end of this session, participants will have:

- discovered how to make hand sanitizers at home – especially useful when there are none in the shops or when there is a general lack of availability in rural areas.
- improved their knowledge about home-made sanitizer including risks, safety and official recommendations.
- understood positive hand hygiene habits.

Materials

Table 2 | Materials needed to make three types of hand sanitizers

METHOD 1 (PREFERRED METHOD)	METHOD 2	METHOD 3
<ul style="list-style-type: none"> • 90 ml ethyl alcohol, 90 percent+ (180+ proof) or 91 percent+ isopropyl (rubbing) alcohol • 30 ml pure aloe vera gel or pure glycerine • 20 drops vitamin E oil (optional – to soften hands) • Rubber gloves • Measuring cup • Three small bottles • Funnel 	<ul style="list-style-type: none"> • 76 ml ethyl alcohol (80 percent) • 24 ml pure aloe vera gel or pure glycerine • 20 drops vitamin E oil (optional – to soften hands) • Rubber gloves • Measuring cup • Three small bottles • Funnel 	<ul style="list-style-type: none"> • 87 ml ethyl alcohol (80 percent) • 13 ml pure aloe vera gel or pure glycerine • 20 drops vitamin E oil (optional – to soften hands) • Rubber gloves • Measuring cup • Three small bottles • Funnel

Activity

1. Put on rubber gloves to protect hands while mixing alcohol.
2. Measure the liquids and mix together.
3. Pour the liquid mixture into the bottle that will be used for the sanitizer.
4. Mix the liquids by shaking the closed bottle.
5. Store in an area that is not exposed to sunlight.

Keep in mind

- Ensure that the ingredients are available locally.
- Share key messages with participants. Remind everyone that **handwashing is more effective than using hand sanitizers**. Sanitizers that do not contain alcohol will not kill coronaviruses.

Key messages

- Handwashing is one of the most effective ways a person can protect themselves and their family from getting sick. However, if soap and water are not immediately available, people can also use hand sanitizers.
- Commercial hand sanitizers and home-made hand sanitizers with less than the recommended 60–95 percent alcohol may not kill all pathogens that can cause infections, including the virus responsible for COVID-19. These hand sanitizers reduce the growth of germs but do not kill them.
- Due to a potential shortage of hand sanitizers in stores, people can try to make it at home.
- Using hand sanitizer is a useful alternative to soap and water, but it is **not a substitute for proper handwashing**.
- **Non-alcohol-based hand sanitizers will not kill coronaviruses.**
- Some people may think rubbing alcohol directly on hands is an option. Do NOT apply pure alcohol directly to the skin repeatedly! It will dry the skin out by removing oils and may cause inflammation and irritation.
- Vodka typically contains only 40 percent alcohol. WHO recommends that hand sanitizers contain at least 80 percent alcohol.
- Hand sanitizers – even alcohol-based sanitizers – do not kill some other pathogens, including:
 - Cryptosporidium
 - Norovirus
 - Clostridium difficile
- **When possible, always choose to wash your hands for 20 to 30 seconds!**

Caution

- The chemicals required to make hand sanitizers may cause skin irritation, injury or burns.
- Exposure to hazardous chemicals via inhalation can cause harm.

Discussion

1. Knowing that washing hands is more effective than using hand sanitizer, might this change your views or behaviour?
2. How often should we practise hand hygiene?
3. When would hand sanitizer be preferable to handwashing? (such as on public transport, at the market, when exchanging money, in public places where handwashing stations are not readily available).
4. Could this activity turn into an income-generating activity for FFS participants?

Activity 12: Using and making masks

Objective

By the end of the session, participants will be able to make and use face masks.

Key learning points (WHO, 2020)

1. WHEN to use masks



- Wear a mask (at home and outside) if you are coughing or sneezing frequently and have other COVID-19 symptoms (fever and breathing difficulties).
- Wear a mask (at home and outside) if you are taking care of a person with suspected COVID-19 infection.
- Even if you feel healthy, wear a mask outside your home if you have to go into crowded or closed places or meet others.
- Masks help prevent you from touching your nose and mouth, reduce exposure to the virus and prevent you from spreading the virus to others if you have contracted it, even if you do not have any symptoms. Depending on the type of mask used, they may reduce the amount of droplets of spit or breath we give or receive.
- **Beware: using a mask may give you a false sense of security. Using a mask alone is not enough to stop infection!** It must be combined with other basic protective measures: frequent handwashing, keeping a minimum physical distance of two metres from people outside your household, not touching nose, eyes and mouth, avoiding contact with anyone with cold or flu-like symptoms (coughing, sneezing, fever), avoiding crowded places, covering sneezes and coughs with your elbow or a tissue.
- If you wear a mask, you must know how to use it and dispose of it properly (see WHO poster below on “How to wear a medical mask safely”).
- If you make a cloth mask, you must wash it after every use (so it is a good idea to have several masks). If you wear a surgical mask, you need to discard it safely after each use.

2. HOW to wear masks to protect against COVID-19

- Before putting on a mask, clean hands with soap and water or alcohol-based hand rub.
- Cover your mouth and nose with the mask and make sure there are no gaps between your face and the mask.
- **DO NOT TOUCH** the mask while using it (there may be contaminated droplets on it!); if you touch it, clean your hands with alcohol-based sanitizer or soap and water.
- **DO NOT share your mask with family members and friends!**

- Replace the mask with a new one as soon as it is damp. Do not re-use single-use masks or sanitize them.
- To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin, in the fire or in a hole in the ground (covering with sand or soil so it cannot fly away); clean hands with soap and water or alcohol-based handrub after removing your mask.

HOW TO WEAR A MEDICAL MASK SAFELY

who.int/epi-win

Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



Find the top side, where the metal piece or stiff edge is



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



Adjust the mask to your face without leaving gaps on the sides



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

Don'ts →



Do not Use a ripped or damp mask



Do not wear the mask only over mouth or nose



Do not wear a loose mask



Do not touch the front of the mask



Do not remove the mask to talk to someone or do other things that would require touching the mask



Do not leave your used mask within the reach of others



Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 1 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.




Source: WHO, 2020

Activities

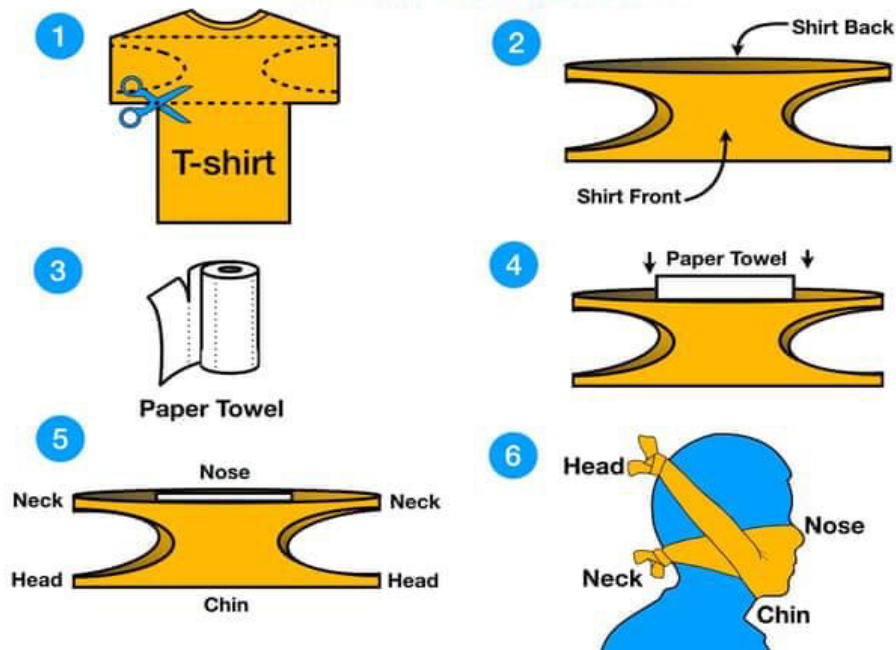
Option 1. Making a mask from a T-shirt

(Centers for Disease Control and Prevention, US Department of Health and Human Services, 2020)

1. Take an old and clean and washed T-shirt, preferably 100 percent cotton – but other cloth like wool or silk will do, as long as it is not too thin. Draw the shape of the mask. The bottom line should go just beneath the armpits of the shirt. Make sure the part that goes on your face is large enough to cover your nose and mouth.
2. Cut along the lines through both sides of the shirt so that your mask has two layers.
3. Place a safety pin along the bottom and insert a piece of paper towel or coffee filter in between the two layers of the T-shirt. This acts as an additional filter, and rests on top of the safety pin.
4. Secure the mask around the front of your face, covering your nose and mouth. Tie the top straps under the back of your head and the bottom straps at the top of your head. This will ensure a good fit underneath your chin.
5. By covering your mouth, you have now protected those around you, and the better the fit, the more you will also protect yourself.
6. **Remember! Wash your mask with soap and water every day. The filter needs to be replaced every time you use the mask.**
7. **Do not share your mask with any family members and friends!**

My mask protects you. Your mask protects me.

#Masks4All <http://masks4all.co>



Source: Masks4All

Option 2. Making a mask with a handkerchief

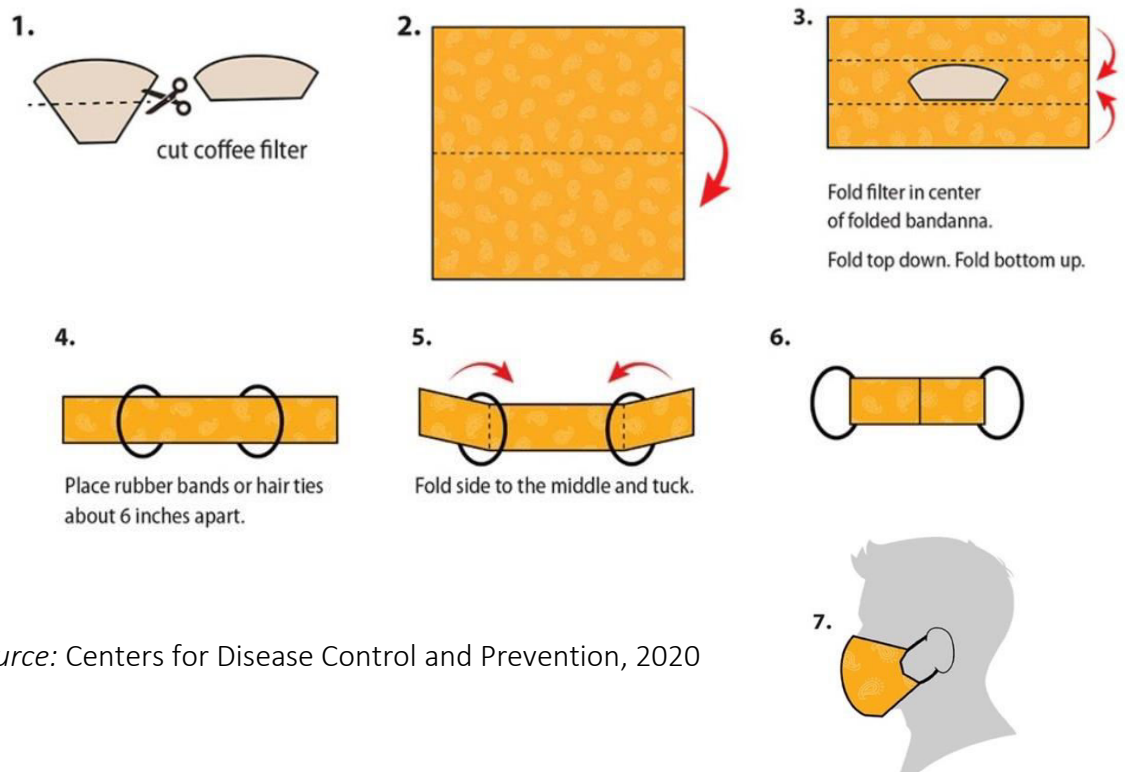
(Centers for Disease Control and Prevention, US Department of Health and Human Services, 2017)

Materials

- Bandana (or square cotton cloth approximately 20 x 20 cm)
- Coffee filter
- Rubber bands (or hair ties)
- Scissors (if you are cutting your own cloth)

Steps

1. Start with a handkerchief and two hair ties. Rubber bands are okay as well, although they will be less comfortable.
2. Fold the handkerchief in half, along a horizontal axis, and make a crease.
3. Place piece of paper towel or coffee filter at the centre of the handkerchief. Fold the top down and the bottom up, so that the coffee filter or paper towel rests in the fold.
4. Place your first elastic about one-third of the way in from the edge of the handkerchief. Place the second elastic one-third of the way in from the other side. The two elastics should be about one hand width apart.
5. Fold the left side in towards the centre and then fold the right side in towards the centre, tucking the right side into the left-side flap.
6. **Remember! Wash your mask with soap every day. The filter needs to be replaced every time you use the mask.**



Source: Centers for Disease Control and Prevention, 2020

Activity 13: Handling food safely at home, at the market and in food businesses

Ensuring production and supply of food during a health emergency is a critical service to society, to which all actors along the food chain contribute (crop and livestock producers, fisherfolks, transporters, processors, wholesalers, retail operators in formal and informal markets, restaurant and street food stall owners, and more). Minimizing risks of contamination from COVID-19 during food production, handling and purchase is important.

Supply chain operators are required to continue to work in their usual workplaces. Keeping all workers in the food production and supply chains healthy and safe is critical during the current pandemic.

Objective

By the end of the session, participants will know how to handle food at home, at the market and in food businesses.

Steps

1. Ask participants:
 - What role do you play in the current epidemic (as food producers, retailers and consumers)?
 - What fears do we have about the spread of COVID-19 through food and food packaging? What do we know about this?
 - What precautions should we take when handling food on the market or in shops (as a consumer or a shopkeeper or trader)? What about at home?
 - What to do if I have contracted COVID-19 or have symptoms, but I have to handle food products at home or in the market or shop?
 - Who are the most vulnerable individuals and households, in terms of their socio-economic, health and lifestyle risks?
 - Do both men and women have adequate access to PPE and information?
2. Review and discuss the essential facts (see [Basic information on COVID-19](#))
3. Discuss basic protective measures and behaviours participants should adopt to avoid spreading the virus causing COVID-19 in their daily work and to protect the most vulnerable people.

Key information (WHO, April 2020)

- Studies have shown that the virus causing COVID-19 can survive for up to 72 hours on plastic and stainless steel surfaces and objects, 24 hours on cardboard and 4 hours on copper.
- BUT the most important thing to know is that surfaces can easily be cleaned with common household disinfectants that will kill the virus.

- There is currently no confirmed case of COVID-19 transmitted through food or food packaging.

What to do as a customer:



- When grocery shopping, keep at least two metres distance from others and avoid touching your eyes, mouth and nose. Only touch things when absolutely necessary. Avoid touching door handles if possible. If possible, use sanitizer or alcohol to clean the handles of the shopping trolley or basket before you start shopping.
- Once home, wash your hands thoroughly. Wash your hands again after handling and storing your purchased products (clean your hands with an alcohol-based hand rub or wash them with soap and water). Avoid touching your eyes, mouth and nose.
- Fruit and vegetables are important components of a healthy diet. Wash them as you always should: before handling them, wash your hands with soap and water; then, wash fruit and vegetables thoroughly with clean water, especially if you eat them raw.

What to do as a food grower, trader or shopkeeper:

Enforce good personal hygiene practices to reduce the risk of food surfaces and food packaging materials becoming contaminated with the virus causing COVID-19 from food workers or customers:

- Reinforce personal hygiene measures like frequent handwashing or use of hand sanitizer.
- Use personal protective equipment (PPE), such as masks (see [Activity 12: Using and making masks](#)). If using gloves, change them before and after preparing food.
- Practise good respiratory hygiene: cover your mouth and nose with your elbow or a tissue when coughing or sneezing. Dispose of tissues safely.
- Introduce physical distancing of two metres on farm (such as during harvest or seeding) – especially if you contract external labour – and in the shop or market.
- Avoid close contact with anyone showing symptoms of respiratory illness such as coughing.
- Stay home if you have any symptoms and ask employees to do the same.

Manage open food operations and food displays hygienically:

- Frequently clean and disinfect work surfaces and touch points such as door handles.
- Frequently wash and sanitize all food contact surfaces and utensils – **at all stages** of food processing, manufacture and marketing.
- Frequently clean and sanitize counters, serving utensils and condiment containers.
- Follow food hygiene principles.
- Make available hand sanitizer for consumers on their way in and out of the food premises.
- Ask customers not to touch food that they do not intend to buy (WHO, 2020).

Activity 14: Cleaning the house

Objectives

By the end of the session, participants will have:

- discovered how common household cleaning products can be used for disinfecting during the COVID-19 pandemic.
- dispelled myths about cleaning agents that do not kill coronaviruses.
- learned how to maintain a clean household.

Materials

- Any of the following disinfectant cleaning products:
 - Disinfectant product that contains at least 70 percent alcohol
 - Hydrogen peroxide
 - Bleach (sodium hypochlorite)
- Rubber gloves
- Bucket
- Rag
- Water
- Measuring cup

Before the exercise, find out which common cleaning products and disinfectants are locally available. Note the prices of products for comparison and assess potential risks to human health.

Activity

How to clean

If a surface is dirty, first clean it with soap or detergent and water. Then use a disinfectant product containing alcohol (at least 62 percent) or bleach. Use a rag along with the cleaning product mixed with water at an appropriate dilution to disinfect surfaces. Practise routine cleaning of frequently touched surfaces.

It is important not to wipe cleaning solutions off as soon as you apply them to a surface. Many disinfectant products, such as wipes and sprays, need to stay wet on a surface for several minutes to be effective. Always read the directions to make sure you use the products as recommended and to avoid damaging sensitive items such as mobile phones and other electronic devices.

What to clean

Every home is different, but think about the things you touch multiple times a day and what you should be cleaning and disinfecting:

- Door handles
- Tables

- Chairs
- Kitchen and bathroom surfaces
- Toilets
- Faucets
- Light switches
- Telephone
- Electronic remotes
- Bank cards
- Identification cards (plastic or laminated)
- Children's toys

Doing laundry

- Clean bed sheets, towels and clothes regularly.
- Do not shake dirty laundry – shaking could disperse the virus in the air.
- Wash items with soap or detergent (using warm water if possible) and dry items completely — both steps help to kill the virus.
- Immediately after doing laundry, wash your hands with soap and water or use an alcohol-based handrub.
- Remember to also wash or disinfect your laundry bag and hamper.
- Consider storing laundry in disposable bags.

Doing laundry outside your home

If you need to use laundry facilities outside of your home, take sensible precautions:

- Prepare laundry before leaving your home to help minimize the amount of time you spend outside.
- Try to go at a time when there are fewer people.
- Do not touch your eyes, mouth and nose with your hands.
- Maintain physical distance of two metres from other people.
- Consider wearing a mask.
- Fold your laundry at home.
- Immediately after doing laundry, wash your hands with soap and water or use an alcohol-based hand rub.

Main messages

- Coronaviruses have a protective envelope or coating that is much weaker than the coating of some other viruses. So they are among the easiest types of viruses to kill with appropriate cleaning.
- Surface disinfectants that are **effective** against coronaviruses include:
 - hydrogen peroxide
 - bleach (sodium hypochlorite)
- Other surface disinfectants are **not effective** against coronaviruses:

- vinegar
- vodka – it is alcohol, but most vodka is only 40 percent alcohol, not the recommended 80 percent alcohol level needed to inactivate the virus causing COVID-19.

Hydrogen peroxide

Hydrogen peroxide isn't only effective for whitening teeth – in fact, three percent hydrogen peroxide is able to inactivate rhinovirus within eight minutes. When you pour the substance directly on surfaces such as your sink, countertops or toilets, you need to let it soak for 10 to 15 minutes. This gives it time to completely do its job. After you let it sit, scrub the area and then rinse with water. It is also safe to clean your toothbrush with hydrogen peroxide since the bristles can harbour bacteria.

Bleach (sodium hypochlorite)

Bleach is an effective surface disinfectant when prepared correctly. Always follow the instructions on the packaging and use it with care, as bleach can burn or irritate the skin. Use a bleach mixture to clean floors. Your shoes step on a lot of dirt during the day – if possible, take shoes off when entering the house to avoid spreading viruses and other germs. To clean the floors in your kitchen and bathroom, it is recommended to use 65 ml of bleach per 5 litres of water to mop your floors. The highest level of disinfection recommends 50 ml bleach per 500 ml of water.

Discussion

- What are some common cleaning products utilized that were not mentioned in the list? Why is it important to understand that only certain cleaning products can kill the virus causing COVID-19?
- Are there any other surfaces that you can think of around the house that need to be disinfected?
- How do these recommendations affect how you will clean now, and in the future?
- Are there certain practices or behaviours you may need to change in order to practise social distancing and proper hygiene when it comes to doing cleaning and laundry for your household?

Activity 15: Discussing gender-related impacts of COVID-19

(Dimitra Clubs training guide, 2020)

Objectives

By the end of the session, participants will:

- understand if and how COVID-19 impacts differently women and men, young and old.
- be able to identify ways to overcome potential challenges and risks for the most vulnerable individuals and households.



Materials

- Flip chart
- Markers (each participant or person in charge of writing should have their own marker – remember that participants should not share tools and stationery to avoid possible contaminations)

Steps

Phase 1: Group work

- Ask participants to divide into separate groups of men and women (keeping minimum distance of two metres).
- Ask each group to brainstorm on how the COVID-19 crisis has impacted their lives (personal and work activities): health, food, safety, workload, water access, education... (15 minutes).
- Ask each group to brainstorm on how organization of their daily activities has changed due to COVID-19 (10 minutes).
- Ask participants to identify strategies to address the constraints and risks identified (15 minutes).
- Ask one person to take notes and write the main issues on the flipchart.

Phase 2: Discussion in plenary

- Ask participants to present in plenary the results of their group discussions.
- Discuss: how do health crises such as COVID-19 impact women and men differently?
- Emphasize that women's workloads may increase in many ways, as rural women tend to have both productive and carer/reproductive roles; they are often the primary responsible for their household's care work, food security and nutrition, and caring for the sick.
- Guide the discussion engaging both women and men to find gender-sensitive solutions, such as commitments to share domestic activities between women and men, and new opportunities to engage women and girls in decision-making and planning the emergency response.

Activity 16: Identifying various types of gender-based violence (GBV)

Objectives

By the end of the session, participants will:

- have a better understanding of gender-based violence.
- be able to identify the various types of GBV, with a focus on the increased risk of domestic violence during the COVID-19 crisis and other health emergencies.

Materials

- Flip chart
- Markers (each participant or person in charge of writing should have their own marker – remember that participants should not to share tools and stationery to avoid possible contaminations)

Steps

Note to facilitator: Consider asking a GBV or local health official to co-facilitate this session with you.

Phase 1: Group work (according to gender)

- Ask participants to divide into two separate groups of men and women.
- Ask participants to reflect on all kinds of violence that men and women face in their context. Invite participants to reflect about any behaviour, attitude or action that can be perceived as violence, recognizing that it can be also verbal, psychological, legal and economic, and not only sexual and physical violence.

Phase 2: Plenary

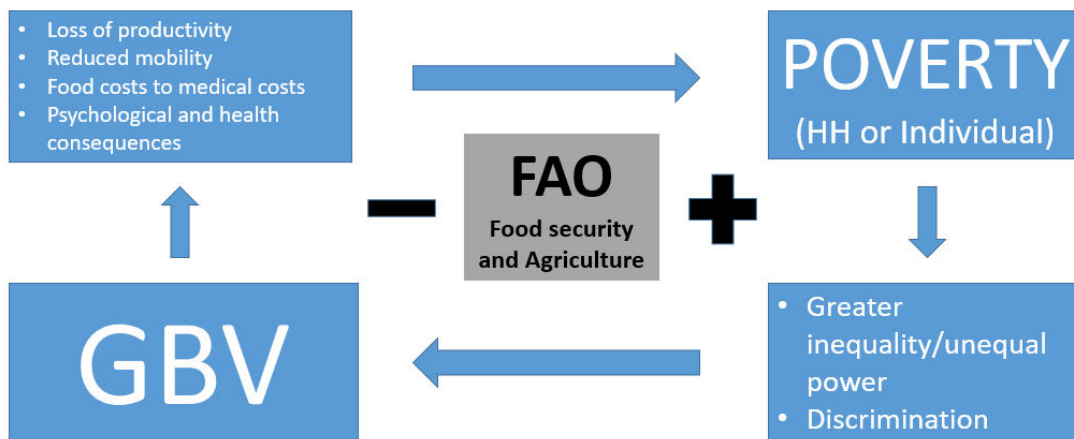
- Each group presents its group work.
- Discuss the following: differences between violence suffered by women and girls, and violence suffered by men and boys; classify them by types of violence (see Examples of gender-based violence).
- Ask: Do you think violence (and in particular domestic violence) might increase during the COVID-19 crisis? Start by sharing examples that the group has already provided and take into account the challenges and tensions created by the pandemic (food security and nutrition, extra work burden, closed schools, unemployment, limited healthcare, restricted mobility and safety issues, reduced availability of legal, social and policing structures).
- How can we identify the most vulnerable men and women and households and communities at risk?
- Is there anything we can do to support change of behaviours, and to prevent GBV and help GBV survivors?

- What type of risk mitigation measures can be adopted to prevent and minimize unintended negative effects that can increase people’s vulnerability to physical and other risks?
- How can we sensitize men and boys on protection against GBV?

Examples of gender-based violence

- **Physical abuse** – such as punching, slapping, kicking and torture.
- **Sexual abuse** – such as rape, unwanted touching and pressuring into any kind of sexual activity.
- **Verbal abuse** – such as yelling or screaming at someone and making hurtful or humiliating jokes.
- **Social abuse** – such as excessive possessiveness or control over someone else’s behaviour, or stopping a woman from seeing her friends and family.
- **Economic/financial abuse** – such as preventing a woman from finding employment, or controlling a woman’s finances.
- **Cultural and religious practices** – such as child marriage, or setting a bride price when used to commit acts of violence.
- **Technological violence** – such as using social media, text messages or emails to harass, threaten, and intimidate or humiliate a woman.

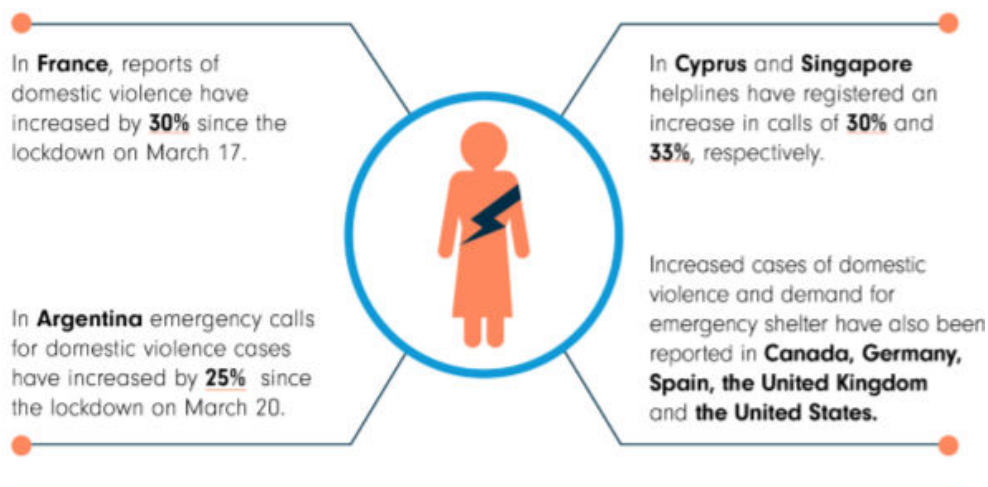
How does GBV link to FAO work?



Source: FAO, 2019

Emerging data shows that since the outbreak of COVID-19, violence against women and girls (VAWG), and particularly domestic violence, has INTENSIFIED.

Below are just a few of the dozens of countries reporting an increase in violence against women



As stay-at-home orders expand to contain the spread of the virus, women with violent partners increasingly find themselves isolated from the people and resources that can help them.

Source: [UN Women, 2020](#)

Activity 17: Should we worry about our animals?

Objective

By the end of the session, participants will understand important issues related to COVID-19 and animals.

Questions and Answers

Note to facilitator: Ask the question. Wait to see if anyone can answer (count to five). If there's no response, read the answer aloud and check if understood. Some words may be difficult to translate in local languages.

Is there any risk of getting the virus causing COVID-19 from interacting with animals?

The virus is mainly spread from one person to another – through coughing or sneezing. As always, practise good hygiene and respect while rearing, maintaining and caring for **healthy** pets, draft or draught animals, and farm animals.

Should additional precautions related to the virus be taken when handling live animals?

Treat animals normally and make sure to always:

- Wash your hands with soap and water before and after touching animals or when visiting animal markets.
- When milking, before you begin, always wash the udder and any utensils.
- Treat animals well and with the utmost respect.
- Avoid touching your eyes, mouth and nose.
- Seek guidance from local veterinary officials concerning appropriate treatment of animals.

What do you do if your animals get sick and show unusual symptoms?

You should not touch, sell or eat meat from unhealthy animals. Remember to always report unusual animal illness or death to the local animal health authorities.

What makes meat safe to eat?

Meat is safe to eat if it is: (1) from healthy animals; (2) cooked thoroughly; and (3) prepared safely. Never eat raw and undercooked animal products. Do not prepare your food using dirty equipment or on dirty surfaces.

Is it safe to eat meat from wild animals?

Although COVID-19 is suspected to have originated in wildlife, there is no evidence of humans contracting COVID-19 directly from wildlife.

If it is legal to hunt and consume wild animals within your community, make sure to only consume wild meat that is: (1) from healthy animals; (2) cooked thoroughly; and (3) prepared safely. You should NOT eat raw wild meat or uncooked meals prepared using the blood of wild animals. Also, do not handle, slaughter, dress, sell, prepare or consume any wild animals that are sick or that have died from unknown causes.



Activity 18: Using information and communication technologies (ICTs) to share information

Depending on national COVID-19 prevention measures in place, only a small group of FFS participants or trainees might be able to meet. In some cases, FFS or other community groups may not be able to meet at all. **ICTs can be used to reach out to participants** to make sure that learning continues. For instance, participants can be supported through videos, radio messages, or shared findings using WhatsApp, Facebook or other media.

Moreover, the **knowledge acquired by FFS** participants through the activities of this guide needs to be **widely disseminated in rural communities**. FFS members can achieve this by sharing reliable information in their own households, networks and organizations/associations. All opportunities should be used to ensure wide dissemination of this knowledge and information, in line with the context.

Objectives

By the end of the session, participants will have:

- discovered how to keep learning – even from a distance!
- explored the ICTs available and will understand the right digital tools to use.
- appreciated how to ensure everyone is included in the FFS learning process.

Key considerations

- In times of crisis, classic digital channels of communication like **radio** work well given their wide reach and the weak infrastructure and networks in many countries.
- **Multi-way, participatory, and demand-driven** channels are also **effective**.
- Other effective **digital extension tools** (both one-way and two-way) are:
 - **Short text or audio messages via mobile phones or apps** – sent or received using text messaging or interactive voice response (IVR).
 - **Visual content delivery via mass media** – television (interviews, news, reality shows) and DVDs and videos (including animation) of varying length (1 to 15 minutes).
 - **Audio programmes** – radio with digitized programmes or talking books (such as amplio.org), ideally combined with digital interactive tools like cell phones or text messaging
 - **Digital applications on smartphones, tablets or computers** – online tools including websites, web portals, knowledge repositories, conferencing platforms (such as Zoom, Skype, Google Meet, MS Teams, GoToMeeting etc.), mobile apps, e-learning platforms and social media (Facebook, Twitter). Offline tools include multimedia CDs or DVDs.

- Rather than choosing one system over the other, **integrate channels** to help reinforce messaging and to reach as many people as possible.
- Understand **which channels can share what information with whom**. For instance, you might split the farmer field school into subgroups with only one person from each group attending the farmer field school to carry out agro-ecosystem analysis or pastoral ecosystem analysis in comparative fields or groups of animals and to discuss key technical information. That person will then be responsible for contacting the other members of the sub-group and sharing the information collected (see [Box 1: Running farmer field schools in times of COVID-19: case study from the project "Building Disaster Resilience in Pakistan"](#)).
- Digital technologies can exacerbate existing gender and income differences because **not all participants access information in the same way**. Depending on participants' **literacy levels, income levels, age and gender**, participants will have **different access to technologies**. For example, not everyone owns a smartphone or can buy internet credit. If you cannot find one forum to communicate with all participants, take special care to ensure that nobody in your group is left out. Most often, those who find it most difficult to access information are those who need it the most!
- In addition to sharing information on FFS work, take this opportunity to **share key information on COVID-19 basic protective measures**, as described in previous activities.

Ideas to use ICTs in times of COVID-19

1. **Task a small group of people** who will attend the farmer field school to call and **share information/lessons learned** with other people in the FFS community using all the means at their disposal.
2. **Identify essential information** – in discussion with participants (in person, by phone, WhatsApp) – to be shared with group members who cannot attend the farmer field school in person.
3. **Format the information** – if necessary – so that it can be understood AND to stimulate reflection and questioning (see below Instant messaging applications (WhatsApp, Line, WeChat, Telegram)).
4. **Set up a group for all FFS members** – if possible – to communicate and share information. Use the platform that most members already use (WhatsApp, Facebook...).
5. **Call participants** to remind them to do timely and regular checks of their fields/animals, applying the agro-ecosystem analysis (AESA) (or pastoral ecosystem analysis – PESA), to discuss any question they may have and to share their information. If they have a smartphone, send them a picture of AESA or PESA forms so they can use it to guide their field checks.
6. **Take pictures or make videos** of any unusual occurrence (pests and symptoms of pest damage, disease and nutrient deficiency) identified during field observations and share with members. Ask other participants to do the same.

7. **Do not exacerbate existing differences** (in gender and income) due to unequal access to technologies:
 - **Ensure messages reach everyone** – women and men, elderly and young, well-off and less well-off. Check with all members how they can receive messages. If several members are illiterate, privilege highly visual posters and cartoons and videos in local language. If videos in local language do not exist, use [Activity 19: Tips to make good quality videos](#) to create them.
 - **Ensure content is equally responsive to women’s and men’s needs** – for instance, think about how COVID-19 issues might affect women differently from men and make sure the information you share reflects this.
 - **Communicate with both husband and wife** to enable joint decision-making.
8. **Discuss with your programme manager** about additional activities which may help reach those who have a higher risk of being left behind. These could include: organizing a local radio programme to communicate with community members, collaborating with local health officers by signalling vulnerable households, collaborating with existing Dimitra Clubs to ensure women and youth receive key information, preparing key information leaflets with emergency numbers, procuring smartphones for key members of the farmer field school, and any other innovative way of ensuring nobody is left behind!

Examples of ICTs to consider

1. Instant messaging applications (WhatsApp, Line, WeChat, Telegram)

- **Consider creating a group** on WhatsApp or other instant messaging platforms to:
 - Disseminate essential information on the farmer field school and COVID-19 related themes to FFS and community members.
 - Organize calls or phone calls when doing field activities with FFS participants.
 - Create learning videos and share them with FFS participants and the community.
- **Moderate the messages** posted in the group so that it is used **only for FFS-related discussions**. Otherwise, most of the members will lose interest.
- **Share only verified, true and useful information**. In some countries WhatsApp or WeChat groups are monitored and the administrator is held responsible for sharing of any false message that could cause harm to any particular individual, community or religion.
- **Remember that not everyone has a smartphone**. Or members may not have traffic money to access messaging applications. Only use this platform if most FFS members are able to use it. If any participant does not have it, make sure you follow up with him/her individually so he or she is not left behind! If you don’t have one already, ask your manager to create a group including all the facilitators in your programme so that you can share useful content with each other and brainstorm on ideas on how to support your FFS groups in times of COVID-19.

2. Radios

- In times of crisis, classic digital channels of communication such as radio work great – there is wide access even in areas with weak infrastructure and networks.
- Radios are accessible to most participants and can be a great way to disseminate information at the community level.
- Farm Radio International works with over 1 000 radio broadcasters in Africa to challenge myths and misinformation about COVID-19 (<https://farmradio.org/supporting-radio-journalism-during-covid-19/>).
- Dimitra Clubs are an excellent way to disseminate information as widely as possible, using both new technologies (internet, online databases etc.) and more “traditional” means of communication (newsletters, brochures, community radio, radio listeners’ clubs).

3. Dimitra Clubs

What are Dimitra Clubs?

- Developed by FAO, Dimitra Clubs are groups of women, men and young people – mixed or not – who decide to organize themselves to work together and bring about changes in their communities. They meet regularly to discuss the challenges they face in their daily lives, make decisions and take action to resolve their problems.
- Thanks to this, rural communities, particularly rural women and youth, actively participate in local governance and decision-making processes that affect their lives. They can implement local solutions using their own resources and collective efforts.
- In this approach, community radios and mobile phones are often used to relay and facilitate communication, information flow, interaction and networking between the various Dimitra Clubs existing in other villages in the same region or even country.
- More than 5 000 Dimitra Clubs exist in several countries of sub-Saharan Africa (Burundi, Burkina Faso, Democratic Republic of the Congo, Ghana, Madagascar, Mali, Niger and Senegal). It is estimated that the lives of over six million rural people have improved thanks to the actions led by the Clubs. The approach is embedded in over 30 UN joint initiatives and programmes.

Synergies with farmer field schools

- Dimitra Clubs and farmer field schools are two complementary approaches based on a community-participatory approach, which aim to empower rural populations.
- There are already linkages between farmer field schools and Dimitra Clubs in countries such as the Democratic Republic of the Congo, Mali, Niger and Senegal. This has improved access to information, sensitization and ownership of improved agricultural practices and climate-smart innovations, and the empowerment of rural women and men.
- Experience has shown that where the FFS and Dimitra Club facilitators are the same person, the synergy is much more effective as they master the principles of both

approaches. To this end, it is useful that FFS facilitators are trained on Dimitra Club methodology and, vice versa, that Dimitra Club facilitators are involved in FFS learning processes.

- Dimitra Clubs have been effective in engaging rural communities and empowering rural women during the Ebola response in the Democratic Republic of the Congo and Senegal. For more information: *Senegal/Dimitra Clubs in the frontline against Ebola*: http://www.fao.org/fileadmin/templates/dimitra/pdf/dim_26_e_p3.pdf
- In response to COVID-19, the Clubs are implementing strategies to protect the livelihoods of poor rural communities by promoting two-way communication and access to information, improving social cohesion and trust, while also empowering rural women and men, and facilitating local ownership of emergency measures.

Advantages of combining the two approaches

- **Increased community participation** – by linking groups with different aims (farmer field schools and Dimitra Clubs), more people debate together and share important information.
- **Awareness raising and greater information sharing** – communication actions are more effective and wide-reaching, as a combined package of media is used, such as community radios and mobile phones.
- **Increased strength of an alliance in times of a health crisis** – Dimitra Clubs allow rural communities to discuss the knowledge acquired within the farmer field school, and to take action to adopt them, while FFS learning-by-doing exercises may be replicated by other villages and communities through the Dimitra Clubs' network.
- **Support of FAO** – in the framework of COVID-19, FAO promotes pathways to boost this collaboration.

4. Video-sharing platforms

- Discovery learning platform such as Access Agriculture (<https://www.accessagriculture.org/>) or Digital Green (<https://www.digitalgreen.org/>) create a lot of original high quality learning content that may be shared with FFS participants.
- Digital Green's COVID-19 videos are 2 to 3 minutes in length in Hindi and other regional languages of India and reach more than 100 000 community members through WhatsApp (<https://www.youtube.com/watch?v=hG4TZpDWLFw>).
- If you make videos for your FFS members or trainees, you may consider sharing them more widely than just through WhatsApp:
 - YouTube (www.youtube.com/) allows you to share videos with the entire world.
 - Tiktok (www.tiktok.com/) is a video-making and video-sharing platform which allows you to edit your videos and share them easily directly on your phone! Just tag the videos **#FarmerFieldSchools** so that others can find them too.
 - AgTube (<https://www.agtube.org/en>) is a dedicated video-sharing platform focusing on agricultural practices and videos.

5. Email

- During the COVID-19 emergency, keep in touch with other facilitators, master trainers, rural advisors and colleagues to share information on basic protective measures and to support each other with practical information. Organize discussion groups through emails to discuss FFS-related subjects or disseminate useful information among facilitators and master trainers.



Activity 19: Tips to make good quality videos

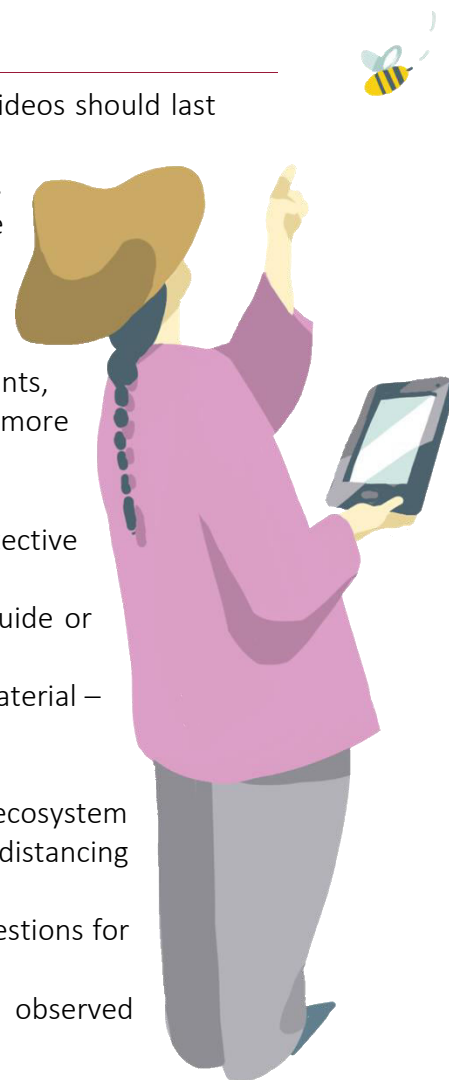
(Access Agriculture, 2020)

Objective

By the end of the session, participants will know what to keep in mind when making their own educational videos.

How to develop content of your video?

- **Keep content short and simple.** Short community and testimonial videos should last maximum 2 to 3 minutes to avoid fatigue.
- **Adapt to local context** (i.e. local language, relevance, content needs). This can be done by looking into existing content which might be publicly available and can be reworked (such as shortened/combined) to achieve new objectives.
- **Stimulate learning and critical discussions!** Remember to apply the principles of FFS learning to any content you create! Use experiments, observations and questions to stimulate curiosity, learning and more questions from other participants.
- **Ideas of content for videos or audio messages:**
 - Role plays and song and dance on COVID-19 basic protective measures
 - Videos of COVID-19-related icebreakers suggested in this guide or others of your own creation
 - How to build a handwashing station, with locally available material – in local language
 - How to wash hands properly – in local language
 - How to do your agro-ecosystem analysis (AESA) or pastoral ecosystem analysis (PESA) while respecting two metres physical distancing between people
 - Videos of FFS special topics or experiments, ending with questions for viewers to stimulate thinking
 - Videos of field studies with participants explaining observed differences and findings to members who could not attend



Why use videos?

- For documentation and as a future resource
- To share important messages
- To share basic protective measures against COVID-19
- To remind people of good practices before certain times of the year (such as dipping, harvest or sowing)
- It is cost effective

- It can easily be duplicated and spread to other areas
- It is not necessary to be able to read and write to learn from a video
- It can provide motivation and encouragement (farmers will pay most attention to what other farmers say)
- It is easy to learn from – the viewer both sees and hears information (this can be enhanced by providing practical exercises to do after watching the video)
- It can stimulate new practices and demand for new support
- It can help farmers understand the ‘why’ behind new practices
- It has lasting impact – seeing and hearing information makes it easier to remember
- It can be translated into other languages

Steps for filming your video

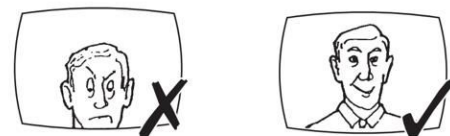
1. **Scriptwriting/content development** – think about the exact content you want to film.

Structure your video:

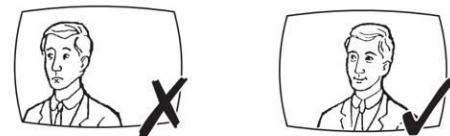
- Introduction: tell the audience what you are going to tell them
- The main body of the script: tell/show them the information
- Conclusion: summarize what you have told them
- Keep it simple!

2. **Production, filming** – use a camera and tripod (for stability) if possible; if not, a smartphone works fine.

- While filming, everyone must be checking for continuity (the process to combine related shots or scenes into a unique video to ensure there is consistency of story across time and physical location). Also check that things are said and done correctly.
- Be careful of light reflecting off very bright surfaces (such as white shirts, flipchart sheets or even tin roofs) into the camera or smartphone, especially at midday.
- For activity shots, if there is the time, you may need to ask the farmer or other person to do an action two or three times so that you can get different angles, but always be aware that people may have busy schedules.
- Make sure to frame your video correctly, as shown below:



Always leave a space in the direction in which the interviewee is looking



Source: Access Agriculture

3. **Editing:** you can cut off some parts of the video that are not useful or badly framed. Note: If you are using platforms like TikTok (www.tiktok.com/) to share your video, you can edit the video directly through the platform!
4. Your video is ready to be sent!

Activity 20: Role play – Community action in the event of a COVID-19 case in the community

If you, a fellow FFS member or a member of the community show symptoms of COVID-19 or become infected with the virus causing COVID-19, the community should know what to do and how to relate with local health officers.

Objective

By the end of the session, participants will know what to do in case they – or someone they know – show symptoms or is confirmed to be infected with COVID-19.

Activity

1. Discuss with participants: What are the symptoms of COVID-19? What to do if you think you or a community or family member has become infected? What basic protective measures to adopt? (see [Basic protective measures](#)).
2. You can turn this into a role play. Ask participants to break into small groups and prepare a role play in which one person develops symptoms of COVID-19. In each mini-group, one participant will play the role of the sick person; other roles include family members, local health worker or operator at COVID-19 emergency number (on the phone), FFS facilitator and neighbours. You can give mini-groups different scenarios: in one mini-group they can respect basic protective measures, while you can ask another group to purposefully ignore some protective measures...
3. Open a discussion: What did we see in the role plays? Did everyone respect all precautions? What are the dos and don'ts? Why?
4. Acknowledge the good acting of the group asked not to respect precautions. Give a clap to everyone.

Key guidelines for people who experience COVID-19 symptoms

1. **Stay home if you or another household member feel unwell even with mild symptoms** (such as headache or slight runny nose) until you recover. Why? Avoiding contact with others and avoiding visiting medical facilities without warning them will help protect you and others from the virus causing COVID-19.
2. **If a person has a fever, cough and difficulty breathing, seek medical advice by phone.** Always follow the guidance of healthcare professional or national health advisories. Keep at hand the number of the local health professional or national COVID-19 helpline (if available).
3. If you or a family member suspect you are sick with COVID-19 or have similar symptoms, **identify and prepare an isolation room** (if possible – it may be recommended by the healthcare provider or it may be your voluntary decision). An isolation room is a room in the household where the person who has symptoms can live without coming into contact with others in the household. If not possible, try to separate part of a room, for instance with a curtain or a table, and make sure that the person sleeps alone at least two metres

from anybody else. If a person is in self-isolation, it is because he or she is ill – but not severely ill (requiring medical attention). Self-isolation is an important measure taken by those who have COVID-19 symptoms to avoid infecting others in the community, including family members.

Important! If you live in an area with malaria or dengue fever it is important that you do not ignore symptoms of fever. Seek medical help. When you or the sick person attend the health facility wear a mask if possible, keep at least two metres distance from other people and do not touch surfaces with your hands. If it is a child who is sick, help the child stick to this advice.

4. If you do not live in an area with malaria or dengue fever, and you or a family member experience COVID-19 symptoms, please do the following:
 - Set up the isolation room.
 - Stay two metres away at all times.
 - Ensure that the isolation room has a large, well-ventilated area with hand-hygiene and toilet facilities. If this is not possible, place beds at least two metres apart.
 - Do not allow visits of neighbours or relatives, especially village elders or people with fragile health.
 - Do not hand food directly to the sick person. Leave food plates, cups and cutlery at the door or at a safe distance (two metres). Do not share plates, utensils, glasses with the person with symptoms. Do not eat from the same dish.
 - Wash immediately with soap and water any object touched by the sick person. If the person has access to running water in the isolation room, he or she may clean the objects to minimize transmission risk.
 - In case of emergency where physical contact is needed (such as medical care), use a mask and gloves to protect yourself. Immediately wash your hands and clothes in soap and hot water afterwards. Do not touch your face unless you have washed your hands.



- Find ways to express affection and care for your sick loved one. You can chat or read the news to them from a distance, cook favourite foods and drinks, tell stories, play music... Check regularly that they are fine.
 - Stay positive while you or your loved one are in self-isolation – keep in touch with family and friends by phone or online and stay active if possible.
 - Monitor symptoms of the sick person daily.
 - **Remember to seek medical advice early by phone.** Do not wait till the person experiences high fever or difficulty breathing! Getting advice early from a competent health professional will reduce the risk of the disease getting serious.
 - Carry out the isolation for 14 days – even if the sick person feels healthy.
5. Health professionals track people who contacted the person with symptoms.
 6. People in the household should monitor their health in case they show any symptoms of COVID-19. They should avoid contacts with others as much as possible.

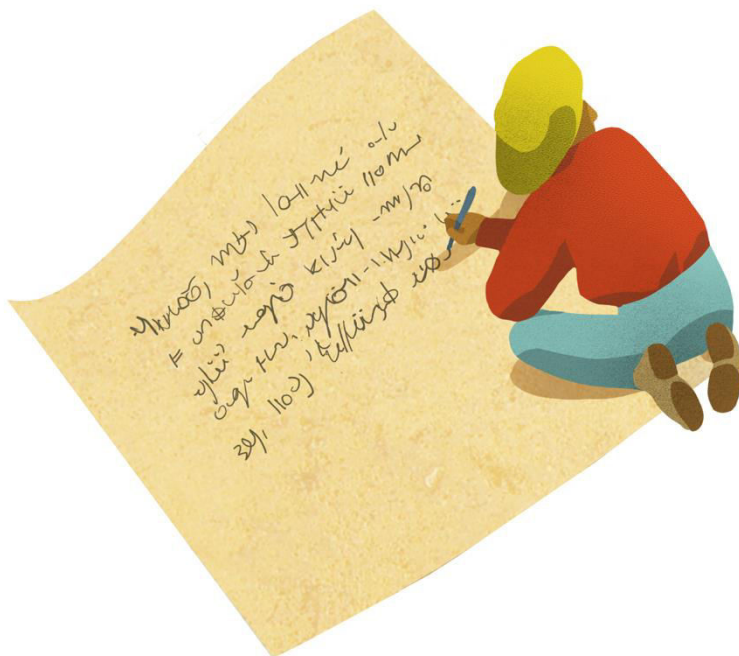
Activity 21: Exploring local or indigenous knowledge and Western science to respond to COVID-19

Note to facilitator: Prepare this activity with a local community health officer or invite them to support the session facilitation to ensure that the responses discussed are safe.

Objectives

By the end of the session, participants will have:

- built on existing local indigenous knowledge and capacity in rural communities as well as the most recent and science-based information to identify the best responses to COVID-19.
- co-created knowledge on how to handle COVID-19.



Steps

1. Gather participants, respecting the two metres distance between participants.
2. Ask participants what they know about epidemics. Have they already experienced one? Has someone in their family or a community member experienced one?
3. If the answer is yes, discuss with them the measures taken by the community. Was there a community response? What were the protective measures taken by the community? Was there an alternative medical care system?
4. Now reflect with participants on any alignment between their local knowledge on community care and available science-based information for dealing with COVID-19. If there are any lessons learned from previous experience, try to draw on them.
5. Reflect with participants on actions that can be taken at community level based on these discussions to prevent the spread of the virus.
6. Discuss: Although a lot of research is underway, there are currently no known traditional or Western medicines that can prevent or cure COVID-19. However, are there traditional medicines that may **alleviate the symptoms** of COVID-19 (such as fever, dry cough, difficulty breathing)? Are they considered safe? What kind of symptom relief do they bring?

IV – ANNEXES

Annex 1. Safe greetings

To prevent COVID-19 it is safest to avoid physical contact when greeting. Safe greetings include a wave, a nod, or a bow.

How should I greet another person to avoid catching the new coronavirus?



World Health Organization

#Coronavirus #COVID19

9 March 2020

Yes. Respiratory viruses can be passed by shaking hands and touching your eyes, nose and mouth.

Greet people with a wave, a nod or a bow instead.

Should I avoid shaking hands because of the new coronavirus?



World Health Organization

#Coronavirus #COVID19

9 March 2020

Annex 2. Be ready for coronavirus: be smart, be kind and be safe

Be **SMART** & inform yourself about #coronavirus



Follow accurate public health advice from WHO & your local health authority



Follow the news on latest coronavirus updates



To avoid spreading rumors, always check the source you are getting information from



Don't spread rumors

Learn more to Be **READY** for #COVID19:
www.who.int/COVID-19



Wash your hands

Wash your hands with soap and running water when **hands are visibly dirty**



If your **hands are not visibly dirty**, frequently clean them by using alcohol-based hand rub or soap and water



Be **SAFE** from #coronavirus

if you are 60+ or if you have an underlying condition like:



Cardiovascular disease



Respiratory condition



Diabetes

by avoiding crowded areas or places where you might interact with people who are sick.

Learn more to Be **READY** for #COVID19:
www.who.int/COVID-19



Be **KIND** to address fear during #coronavirus



Show empathy with those affected



Learn about the disease to assess the risks



Adopt practical measures to stay safe

Learn more to Be **READY** for #COVID19:
www.who.int/COVID-19



Annex 3. Prevention measures to protect yourself and others from getting sick

Protect yourself and others from getting sick

Wash your hands



- after coughing or sneezing
- when caring for the sick
- before, during and after you prepare food
- before eating
- after toilet use
- when hands are visibly dirty
- after handling animals or animal waste



Protect others from getting sick



Avoid close contact when you are experiencing cough and fever

Avoid spitting in public



If you have fever, cough and difficulty breathing seek medical care early and share previous travel history with your health care provider



Protect others from getting sick

When coughing and sneezing cover mouth and nose with flexed elbow or tissue



Throw tissue into closed bin immediately after use

Clean hands with alcohol-based hand rub or soap and water after coughing or sneezing and when caring for the sick



Annex 4. Further information from the World Health Organization (WHO)

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

Visit this website for more information on:

- Basic protective measures against the new coronavirus
- Be Ready for coronavirus
- Protect yourself and others from getting sick
- COVID-19 Home care
- COVID-19: Pregnancy & breastfeeding
- How to cope with stress during 2019-nCoV outbreak

V – E-RESOURCES FOR CORONAVIRUS DISEASE PREVENTION AND MANAGEMENT

WHO official advice

- WHO rolling updates on coronavirus disease (COVID-19)
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>
- Q&A on coronaviruses (COVID-19)
<https://www.who.int/news-room/q-a-detail/q-a-coronaviruses>
- How is the new coronavirus affecting people who get it?
<https://www.youtube.com/watch?v=qF42gZVm1Bo>
- When and how to wear medical masks to protect against the new coronavirus?
https://www.youtube.com/watch?v=M4olt47pr_o
- Coronavirus disease (COVID-19) advice for the public: When and how to use masks
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
- Can masks protect against the new coronavirus infection?
https://www.youtube.com/watch?v=Ded_AxFfJoQ
- A view to preventing social stigma linked to coronavirus disease
<https://www.who.int/docs/default-source/coronaviruse/covid19-stigma-guide.pdf>
- Coronavirus disease (COVID-19) advice for the public: Myth busters
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>

- A view to how and when to use masks
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
- COVID-19 and food safety: guidance for food businesses
https://apps.who.int/iris/bitstream/handle/10665/331705/WHO-2019-nCoV-Food_Safety-2020.1-eng.pdf
- Q&A: Malaria and COVID-19
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/malaria-and-the-covid-19-pandemic>

FAO website on COVID-19

- FAO Resources, policy briefs, Multimedia and social media on COVID-19:
<http://www.fao.org/2019-ncov/resources/>
- Crop calendars and harvesting tasks during the COVID-19: <http://www.fao.org/2019-ncov/covid-19-crop-calendars/en/>
- Food prices index during COVID-19: <http://www.fao.org/giews/food-prices/home/en/>

Other useful guidelines

- How to make a non-medical face mask – no sewing required:
https://www.theguardian.com/us-news/2020/apr/06/how-to-make-no-sew-face-mask-coronavirus?CMP=Share_AndroidApp_Outlook
- Focus group discussion guide for communities on coronavirus:
<https://www.unicef.org/media/65966/file/COVID-19%20focus%20group%20discussion%20guide%20for%20communities.pdf>
- 4 Tips for Spotting a Fake News Story: <https://www.summer.harvard.edu/inside-summer/4-tips-spotting-fake-news-story>
- Posters on Gender-Based Violence and health impacts:
https://www.who.int/reproductivehealth/publications/violence/VAW_infographics/en/
- Different types of face masks:
<https://www.novahealth.com/different-types-of-face-masks-covid-19/>
- Access Agriculture video production tips: www.accessagriculture.org/video-production-tips

Useful videos

- How to build a tippy-tap: <https://www.youtube.com/watch?v=Qdpd3roZjYw>
- Washing hands with a tippy-tap https://www.youtube.com/watch?v=HNkl1Zqs_40
- Proper handwashing technique: <https://www.youtube.com/watch?v=cbX0xwKORjk>
- Washing hands songs from Vietnam: <https://youtu.be/BtulL3oArQw>
- Washing hands songs from Singapore: <https://youtu.be/wYIm-k8XaJ0>

Resources

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https://www.researchgate.net/publication/340603522_Face_Masks_Against_COVID-19_An_Evidence_Review
- Hong Kong University. 2020. *Hamster research shows masks effective in preventing Covid-19 transmission.* <https://fightcovid19.hku.hk/hku-hamster-research-shows-masks-effective-in-preventing-covid-19-transmission/>
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<https://thespinoff.co.nz/media/19-05-2020/the-great-toby-morris-siouxsie-wiles-covid-19-omnibus/>
- Centers for Disease Control and Prevention. 2020. *Use of Cloth Face Coverings to Help Slow the Spread of COVID-19*
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>
- Access Agriculture. 2020. *Video production tips*
www.accessagriculture.org/video-production-tips
- Masks4all. 2020. *How To Make (And Clean!) A Homemade COVID-19 Mask.*
<https://masks4all.co/how-to-make-a-homemade-mask/>



Plant Production and Protection Division (AGP)
Food and Agriculture Organization of the United Nations (FAO)

Viale delle Terme di Caracalla
00153 Rome, Italy

The Global Farmer Field School Platform
Farmer-Field-Schools@fao.org
fieldschools@dgroups.org
www.fao.org/farmer-field-schools

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