

PRECISE- DYAD

Health trajectories for
mums and their children



MENTAL HEALTH MANUAL

Kenya

Version 1

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Contents

1. Introduction	3
2. Tools	3
3. DYAD Visit 1 - 6 weeks to 6 months post-partum	3
3.1 WHODAS 2.0 (12-item version)	3
3.2 Mental Health GAD-7 and PHQ-9 forms	8
3.2.1 Generalised Anxiety Disorder questionnaire (GAD-7).....	8
3.2.2 Patient Health Questionnaire (PHQ-9).....	13
4. DYAD Visit 2 – 1 year post-partum	17
4.1 Mental Health GAD-7 and PHQ-9 forms	18
4.2 Mental Health PTSD CheckList form.....	18
5. General advice on how to administer the tools.....	24
6. What to do if you are worried about a woman?	25

1. Introduction

Mental illness is common and affects up to 1 in 3 women during pregnancy and after birth. It can lead to adverse effects on both mother and baby. Common mental health conditions are depression, anxiety and post-traumatic stress disorder (PTSD).

Mental health problems are often undiagnosed, with many of the symptoms of depression, anxiety and PTSD such as poor sleep and fatigue being associated with normal parts of pregnancy and new motherhood.

Some of the consequences of mental health conditions are:

- Increased risk of obstetric complications and preterm labour
- Mothers are more likely to have problems interacting and bonding with their baby
- Mothers are less likely to be able to care for their own and their baby's needs
- Increase in maternal mortality

2. Tools

We will use the following screening tools to identify mental health conditions in PRECISE-DYAD participants:

- The **WHODAS** questionnaire should be completed by all participants that attend PRECISE-DYAD visit 1.
- At visit 1 we will also ask women to answer the Generalised Anxiety Disorder (**GAD7**) questionnaire and the Patient Health Questionnaire (**PHQ-9**). Once 300 women have answered these two questionnaires, we will only ask the WHODAS questionnaire.
- At visit 2 only women who were asked PHQ-9 and GAD7 in visit 1 will be asked to answer these questionnaires once more, and also the PTSD Checklist – civilian version (**PCL**).

3. DYAD Visit 1 - 6 weeks to 6 months post-partum

3.1 WHODAS 2.0 (12-item version)

The WHODAS 12-item questionnaire asks women about their everyday activities and should be administered by Health Workers only. This part of the dataset is about difficulties people have because of health conditions. By health conditions we mean diseases or illness, or other health problems that

may be short or long lasting; injuries; mental or emotional problems; and problems with alcohol or drugs. When asking the woman about difficulties in doing an activity, ask her to think about things such as increased effort, discomfort or pain, slowness, changes in the way she does the activities. Use Flashcard #1 to remind her of what we mean by difficulty as she answers each question.

Ask the woman to think back over the past 30 days when answering, and to think of how much difficulty she has had, on average, while doing the activity as she usually does it. Flashcard #1 describes what we mean by “difficulty” while Flashcard #2 provides a scale of severity for the answer options: *None, mild, moderate, severe, extreme or cannot do*. For each of the questions, ask the woman to use both flashcards when responding.

Flashcard #1

Health conditions:

- diseases, illnesses or other health problems
- mental or emotional problems
- problems with alcohol
- problems with drugs

Having difficulty with an activity means:

- increased effort
- discomfort or pain
- slowness
- changes in the way you do the activity

Think about the past 30 days only.

Flashcard #2



5 Extreme or cannot do

4 Severe

3 Moderate

2 Mild

1 None

	WHODAS 2.0
1	In the past 30 days, how much difficulty did you have in standing for long periods such as 30 minutes?
2	In the past 30 days, how much difficulty did you have in taking care of household responsibilities?
3	In the past 30 days, how much difficulty did you have in learning a new task, for example, learning how to get to a new place?

4	In the past 30 days, how much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?
5	In the past 30 days, how much have you been emotionally affected by your health problems?
6	In the past 30 days, how much difficulty did you have in concentrating on doing something for ten minutes?
7	In the past 30 days, how much difficulty did you have in walking a long distance such as a kilometre [or equivalent]?
8	In the past 30 days, how much difficulty did you have in washing your whole body?
9	In the past 30 days, how much difficulty did you have in getting dressed?
10	In the past 30 days, how much difficulty did you have in dealing with people you do not know?
11	In the past 30 days, how much difficulty did you have in maintaining a friendship?
12	In the past 30 days, how much difficulty did you have in your day-to-day work/school?
13	Overall, in the past 30 days, how many days were these difficulties present?
14	In the past 30 days, for how many days were you totally unable to carry out your usual activities or work because of any health condition?
15	In the past 30 days, not counting the days that you were totally unable, for how many days did you cut back or reduce your usual activities or work because of any health condition?
16	In the past 30 days, how would you rate your overall health?

1. In the past 30 days, how much difficulty did you have in standing for long periods such as 30 minutes?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in standing for long periods such as 30 minutes over the past 30 days. Record her response by selecting the appropriate option.

2. In the past 30 days, how much difficulty did you have in taking care of household responsibilities?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in taking care of household responsibilities over the past 30 days. Record her response by selecting the appropriate option.

3. In the past 30 days, how much difficulty did you have in learning a new task, for example, learning how to get to a new place?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in learning a new task over the past 30 days. Record her response by selecting the appropriate option.

4. How much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in joining in community activities over the past 30 days. Record her response by selecting the appropriate option.

5. How much have you been emotionally affected by your health problems?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much she has been emotionally affected by her health problem over the past 30 days. Record her response by selecting the appropriate option.

6. In the past 30 days, how much difficulty did you have in concentrating on doing something for ten minutes?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in concentrating on doing something for ten minutes. Record her response by selecting the appropriate option.

7. In the past 30 days, how much difficulty did you have in walking a long distance such as a kilometre [or equivalent]?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in walking a long distance, such as a kilometre or equivalent over the past 30 days. Record her response by selecting the appropriate option.

8. In the past 30 days, how much difficulty did you have in washing your whole body?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in washing her whole body over the past 30 days. Record her response by selecting the appropriate option.

9. In the past 30 days, how much difficulty did you have in getting dressed?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in getting dressed over the past 30 days. Record her response by selecting the appropriate option.

10. In the past 30 days, how much difficulty did you have in dealing with people you do not know?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in dealing with people she does not know over the past 30 days. Record her response by selecting the appropriate option.

11. In the past 30 days, how much difficulty did you have in maintaining a friendship?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in maintaining a friendship over the past 30 days. Record her response by selecting the appropriate option.

12. In the past 30 days, how much difficulty did you have in your day-to-day life at work/school?

Possible response options: None, mild, moderate, severe, extreme or cannot do

Ask the woman how much difficulty she has had in her day-to-day life at work/school over the past 30 days. Record her response by selecting the appropriate option.

13. Overall, in the past 30 days, how many days were these difficulties present?

Ask the woman how many days in the past 30 days she had these difficulties and record her response in the number box provided.

14. In the past 30 days, for how many days were you totally unable to carry out your usual activities or work because of any health condition?

Ask the woman how many days in the past 30 days she has been totally unable to carry out her usual activities or work because of any health condition. Record her response in the number box provided.

15. In the past 30 days, not counting the days that you were totally unable, for how many days did you cut back or reduce your usual activities or work because of any health condition?

Ask the woman how many days in the past 30 days she has cut back or reduced her usual activities or work because of any health condition. Record her response in the number box provided.

16. In the past 30 days, how would you rate your overall health?

Possible response options: very good, good, neither poor nor good, poor, very poor

Ask the woman how she would rate her overall health over the past 30 days and record her response by selecting the appropriate option.

Once you have completed all the fields in the form, select **“Mark Section as complete”** at the bottom of the form and click **“Next”** on the top right corner of the page. You will be directed to the landing page where the form you just completed will turn green. If you have not completed the full form and will require more information later, **do not tick “Mark as complete”** at the bottom of the form. The form on the landing page will remain red.

Click on the next form to continue collecting data.

3.2 Mental Health GAD-7 and PHQ-9 forms

The Generalised Anxiety Disorder questionnaire (GAD-7) and Patient Health Questionnaire (PHQ-9) are asked to the first 300 women to attend PRECISE-DYAD visit 1, and to these same women in visit 2.

3.2.1 Generalised Anxiety Disorder questionnaire (GAD-7)

The Generalised Anxiety Disorder questionnaire (GAD-7) is an efficient tool for screening for Generalised Anxiety Disorder (GAD) and assessing its severity.

Anxiety is a feeling of unease, such as worry or fear, that can be mild or severe. Everyone has feelings of anxiety at some point in their life. For example, you may feel worried and anxious about sitting an exam or having a medical test or job interview.

During times like these, feeling anxious can be perfectly normal.

But some people find it hard to control their worries. Their feelings of anxiety are more constant and can often affect their daily lives.

Symptoms of anxiety disorders are excessive worrying, fatigue, difficulty concentrating, irritability, panic attacks and other physical symptoms (nausea and headaches), and behavioural symptoms such as avoiding social situations. Depression and anxiety often co-occur.

The GAD-7 can provide a tentative diagnosis of anxiety disorder based on the patient’s score. The score is automatically calculated by the app by assigning values of 0, 1, 2, and 3 to the response categories, respectively, of “not at all”, “several days”, “more than half the days”, and “nearly every day.”

GAD-7 Score	Anxiety Severity
0-4	None - Minimal
5-9	Mild
10-14	Moderate
15-21	Severe

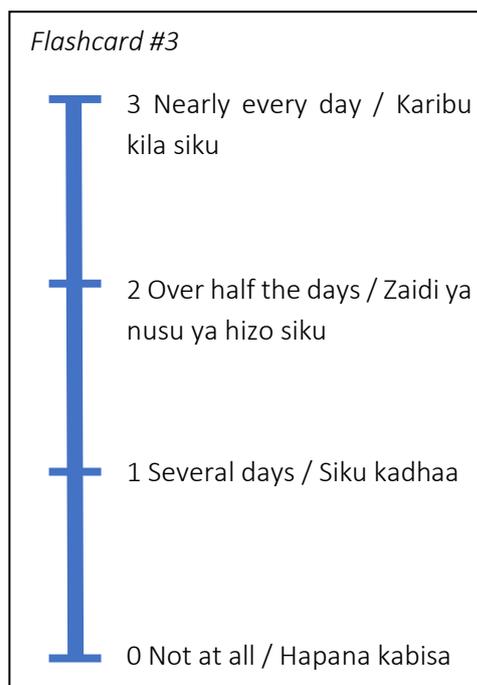
When a patient scores 10 or greater a referral message will appear on the app:

- Scores 10-14: “This woman has moderate symptoms of anxiety and requires referral, refer to SOP”
- Scores of 15 or greater: “This woman has severe symptoms of anxiety and requires referral, refer to SOP”

GAD-7	
	Over the last 2 weeks, how often have you been bothered by the following problems?
1	Feeling nervous, anxious, or on edge
2	Not being able to stop or control worrying
3	Worrying too much about different things
4	Trouble relaxing

5	Being so restless that it's hard to sit still
6	Becoming easily annoyed or irritable
7	Feeling afraid as if something awful might happen
8	If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?
9	Have you sought support from anyone for any of the issues mentioned in this section?

Ask the woman to think back over the past 2 weeks when answering, and to think of how she felt annoyed by the following problems. Hand flashcard #3 to the woman and ask her to use the scale of severity when responding.



The following questions describe different health state. For each question, please describe how often you have been bothered by the following in the last two weeks. Over the last 2 weeks, how often have...

Maswali yafuatayo yanaeleza hali tofauti za afya. Kwa kila swali, tafadhali nielezee ni kwa kiasi gani umetatizika au kusumbuliwa na hali hizo za afya katika wiki mbili zilizopita.

1. In the last 2 weeks, have you felt nervous, anxious or on edge?
Katika wiki mbili zilizopita, Je, Umejihisi kuwa na hofu, wasiwasi?
Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

Record the woman's response by selecting the appropriate option.

2. In the last 2 weeks, have you not been able to stop or control worrying?

Katika wiki mbili zilizopita, Je, Umejihisi kuwa na hofu, wasiwasi?

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You could probe the woman by asking if she has felt troubled or preoccupied more than usual about actual or potential problems, and she cannot control these feelings or thoughts. Record the woman's response by selecting the appropriate option.

3. In the last 2 weeks, have you worried too much about different things?

Katika wiki mbili zilizopita, Je, Umekuwa na wasiwasi mwingi kuhusu mambo tofauti?

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You could probe the woman by asking if she has felt too troubled about one specific thing, or if she feels preoccupied by many different problems, whether they are actual or potential. Record the woman's response by selecting the appropriate option.

4. In the last 2 weeks, have you had trouble relaxing?

Katika wiki mbili zilizopita, Je, Umekuwa na wakati mgumu kupumzika?

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You could probe the woman by asking if she has not been able to feel calm or at ease, even when she tries. Record the woman's response by selecting the appropriate option.

5. In the last 2 weeks, have you been so restless that it is hard to sit still?

Katika wiki mbili zilizopita, Je, Umekuwa na hali ya kutotulia kiasi kwamba ikawa ni vigumu kukaa kwa utulivu.?

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking if she feels like she needs to pace, fidget, or move around because she is so nervous. Record the woman's response by selecting the appropriate option.

6. In the last 2 weeks, have you been easily annoyed or irritable?

Katika wiki mbili zilizopita, Je, Umekasirika au kuudhika kwa haraka?

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You could probe the woman by asking if she has noticed she gets annoyed by things that normally would not annoy her. Record the woman's response by selecting the appropriate option.

7. In the last 2 weeks, have you felt afraid as if something awful might happen?

Katika wiki mbili zilizopita, Je, Umejihisi kuwa na hofu kana kwamba kitu

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You could probe the woman by asking if she has been feeling frightened or nervous about something terrible happening. You can explain that this could be about a specific event she is worried about, whether it is likely to happen or not (for example, her child falling seriously ill even when her child is currently healthy) or could be a general feeling of fear or dread but not connected to a specific awful event (for example, she may be afraid of something terrible happening, but she is not sure what). Record the woman's response by selecting the appropriate option.

8. If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?

Ikiwa umeweka alama ya shida yoyote, kwa ugumu kiasi gani shida hizi zimetatiza utendaji Kazi wako, Kushughulikia majukumu nyumbani au kutengamana na watu wengine?

Possible response options:

not difficult at all, somewhat difficult, very difficult, or extremely difficult

Chaguo:

si kwa ugumu kabisa, kwa ugumu kiasi, kwa ugumu, or kwa ugumu sana.

9. Have you sought support from anyone for any of the issues mentioned in this section?

Je! Umetafuta usaidizi kutoka kwa mtu yeyote kwa maswala yoyote yaliyotajwa katika sehemu hii?

Possible response options:

yes, no

Ndio, La

This question is not included in the score but is a good indicator of the patient's global impairment and can be used to track treatment response.

Record the woman's response by selecting the appropriate option. If the woman answers "yes" to this question, ask her the following question:

i) From whom did you seek support?

Ulitaafuta usaidizi kutoka kwa nani?

Possible response options:

family/friends, health provider (eg. nurse or doctor), religious leader, traditional healer, Traditional birth attendant, Community health volunteer, other “please specify”

Chaguo:

familia / marafiki, Mhudumu wa afya (k.m. Muuguzi / Nesi au daktari), kiongozi wa kidini, mganga wa kienyeji, Mkunga, Mhudumu wa afya wa nyanjani, wengine “Tafadhali taja”

Record the woman’s answer by selecting the appropriate response from the list. If her answer is “other” ask her to specify and record her answer in the text box.

3.2.2 Patient Health Questionnaire (PHQ-9)

The Patient Health Questionnaire (PHQ-9) is a tool used to diagnose depression and to grade severity of symptoms.

Depression is more than simply feeling unhappy for a few days. For a clinical diagnosis of depression symptoms must be present for at least 2 weeks, these include: low mood, low energy, inability to feel pleasure, irritability, guilt, worthlessness, poor concentration, changes in sleep.

In **severe** cases, patients may exhibit suicidal thoughts, self-harm and/or experience psychotic symptoms (e.g., false beliefs or false perceptions).

Postnatal depression: symptoms can appear up to a year after birth, but usually within 8-12 weeks after birth. This is different to the “baby blues” which occurs in the first week after childbirth when women may experience a low mood. It is believed that this is related to the hormonal and chemical changes to the body a woman experiences after childbirth. Postnatal depression affects 1 in 10 new mothers up to a year after delivery. This can cause bonding difficulties, resentment towards the baby, and thoughts of harming the baby.

The PHQ-9 is a screening tool to determine a patient’s general risk for depression based on their score. The score is calculated by automatically by the app by assigning values 0, 1, 2, and 3 to the response categories, respectively, of “not at all”, “several days”, “more than half the days”, and “nearly every day”.

PHQ-9 Score	Depression Severity
0-4	None - Minimal
5-9	Mild
10-14	Moderate
15-19	Moderately Severe
20-27	Severe

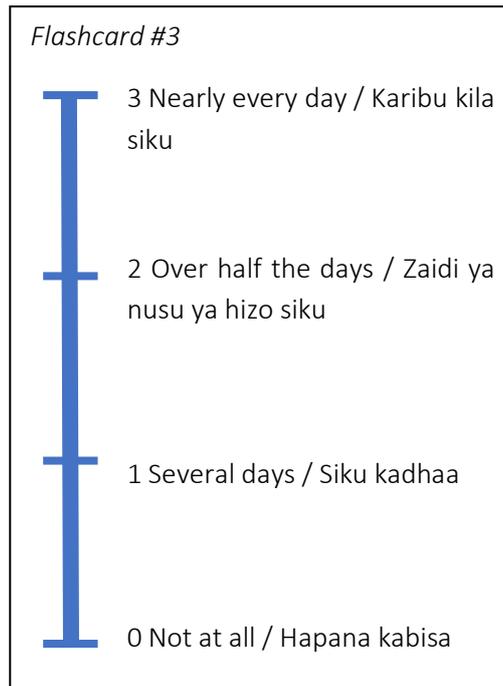
When a patient scores 10 or greater a referral message will appear on the app:

- Scores above 10-14: “This woman has moderate symptoms of depression and requires a referral, refer to SOP”
- Scores of 15 or greater: “This woman has severe symptoms of depression and requires a referral, refer to SOP”
-

IMPORTANT: Where a positive answer has been given for Question 9 on assessing suicidal symptoms, the following message will appear: “Please stop the interview and refer to SOP”. Go to “4: What to do if you are worried about a woman?” in this section.

Patient Health Questionnaire PHQ-9	
	Over the past 2 weeks, how often have you been bothered by any of the following problems?
1	Little interest or pleasure in doing things
2	Feeling down, depressed or hopeless things
3	Trouble falling asleep, staying asleep, or sleeping too much
4	Feeling tired or having little energy things
5	Poor appetite or overeating things
6	Feeling bad about yourself – or that you’re a failure of have let yourself or your family down
7	Trouble concentrating on things, such as following conversations or listening to stories?
8	Moving or speaking so slowly that other people could have noticed. Or, the opposite – being so fidgety or restless that you have been moving around a lot more than usual
9	Thoughts that you would be better off dead or of hurting yourself in some way
10	If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home, or get along with other people?

Ask the woman to think back over the past 2 weeks when answering, and to think of how she felt annoyed by the following problems. Ask the participant to use flashcard #3 to use the scale of severity when responding.



The following questions describe different health state. For each question, please describe to me how often you have been bothered by the following in the last two weeks.

Maswali yafuatayo yanaeleza hali tofauti za afya. Kwa kila swali, tafadhali nielezee ni kwa kiasi gani umetatizika au kusumbuliwa na hali hizo za afya katika wiki mbili zilizopita.

1. Little interest or pleasure in doing things

Kutokuwa na hamu au raha ya kufanya mambo

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking what are the things that she usually does that she enjoys, and then ask if she has felt little interest in doing these activities, or if she her enjoyment of these activities has reduced. Record the woman's response by selecting the appropriate option.

2. Feeling down, depressed or hopeless

Kuvunjika moyo, kuhuzunika au kukosa matumaini

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking if she had been feeling sad or like there is no hope. Record the woman's response by selecting the appropriate option.

3. Trouble falling asleep, staying asleep, or sleeping too much

Shida ya kupata usingizi au kuendelea kulala mfululizo au kulala sana

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking if she has experienced trouble with her sleep. You can ask her if she finds it difficult to fall asleep at night, or if she wakes up in the middle of the night and has trouble falling back to sleep. On the opposite side, she may find that she has been sleeping too much and struggles to get out of bed. Record the woman's response by selecting the appropriate option.

4. Feeling tired or having little energy

Kujisikia kuchoka au kutokuwa na nguvu

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking if she has felt tired or like she has no energy for no particular reason (not after exercise or intense activities). Record the woman's response by selecting the appropriate option.

5. Poor appetite or overeating

Kutokuwa na hamu ya kula au kula sana

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can probe the woman by asking if doesn't feel like eating, or if she has skipped meals because she was not hungry. You can also probe by asking if on the contrary, she has been feeling like she can't stop eating even after she's already eaten. Record the woman's response by selecting the appropriate option.

6. Feeling bad about yourself – or that you're a failure of have let yourself or your family down

Kujihisi vibaya, kujiona umeshindwa kutimiza malengo yako ya maisha au kuhisi umejidunisha au familia yako

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can explain further by asking if she has felt like she is a disappointment or not good enough, to her family or to herself. Record the woman's response by selecting the appropriate option.

7. Trouble concentrating on things, such as following conversations or listening to stories?

Shida ya kumakinika katika mambo fulani kwa mfano unaposoma gazeti au kuangalia runinga au kufanya kazi zingine

Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can explain further by asking the woman if she gets distracted by her own thoughts during conversations or while she is listening to stories, and often gets distracted. Record the woman's response by selecting the appropriate option.

8. Moving or speaking so slowly that other people could have noticed. Or, the opposite – being so fidgety or restless that you have been moving around a lot more than usual
Kutembea au kuongea polepole sana mpaka watu wakawa wanaona tofauti (au kinyume chake) kwamba hutulii na unahangaika sana kuliko ilivyo kawaida
Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

You can further explain by asking if anyone has commented that she is moving or speaking very slow, or if she feels that she is moving or speaking so slow others could notice. You can also ask her if she has been moving around more than usual because she feels she can't stand or sit still. Record the woman's response by selecting the appropriate option.

9. Thoughts that you would be better off dead or of hurting yourself in some way
Kuwaza kuwa ni afadhali zaidi ungekuwa umekufa au ujidhuru kwa namna fulani
Possible response options: not at all (Hapana kabisa), several days (Siku kadhaa), over half the days (Zaidi ya nusu ya hizo), nearly every day (Karibu kila siku).

Record the woman's response by selecting the appropriate option.

If the woman answers yes to this question, the following message will appear: "Please stop the interview and refer to SOP". Go to "4: What to do if you are worried about a woman?" in this section.

10. If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home, or get along with other people?
Ikiwa umeweka alama ya shida yoyote, kwa ugumu kiasi qani shida hizi zimetatiza utendaji Kazi wako, Kushughulikia majukumu nyumbani au kutengamana na watu wengine?

Possible response options: not difficult at all (si kwa ugumu kabisa), somewhat difficult (kwa ugumu kiasi), very difficult (kwa ugumu), or extremely difficult (kwa ugumu sana)

Record the woman's response by selecting the appropriate option.

After completing this form, you can use the "Comments" section at the end of the questionnaire to add any notes that you or the participant would like to emphasise. For example, if the participant gives more details about her answers.

4. DYAD Visit 2 – 1 year post-partum

4.1 Mental Health GAD-7 and PHQ-9 forms

In DYAD visit 2, we will ask again the Generalised Anxiety Disorder questionnaire (**GAD-7**) and the Patient Health Questionnaire (**PHQ-9**) to all women who responded these questionnaires in visit 1.

4.2 Mental Health PTSD Checklist form

In DYAD visit 2, we will also ask the PTSD checklist (PCL) to all women who responded to the GAD-7 and PHQ-9 questionnaires in visit 1. The PCL tool is used for screening individuals for post-traumatic stress disorder (PTSD), an anxiety disorder caused by very stressful, frightening or distressing event. Someone with PTSD often relives the traumatic event through nightmare and flashbacks, and may experience feelings of isolation, irritability and guilt. They may also have problems sleeping and find concentrating difficult. They can have repetitive and distressing sensations e.g. sounds and smells or physical sensations, e.g. pain, sweating, feeling sick or trembling. These symptoms are often severe and persistent enough to have a significant impact on the person's day-to-day life.

A traumatic birth or traumatic experiences which occurred before pregnancy may trigger PTSD during the perinatal period.

The PCL can identify a potential case of PTSD based on the patient's score. The score is automatically calculated by the app by assigning values of 0, 1, 2, 3, and 4 to the response categories, respectively, of "Not at all", "A little bit", "Moderately", "Quite a bit" and "Extremely".

When a participant scores 3–5 ("Moderately" or above), she is considered symptomatic. A PTSD diagnosis can be made if the participant meets **all** the following criteria:

Questions 1–5	Symptomatic response to at least 1
Questions 6–12	Symptomatic response to at least 3
Questions 13–17	Symptomatic response to at least 2

If a possible PTSD diagnosis is made, the following referral message will appear on the app: **"This woman has moderate/severe symptoms of PTSD and requires a referral, refer to SOP."**

If this message appears, go to section 6 'What to do if you are worried about a woman?' and fill in the adverse event reporting form.

PTSD Checklist (PCL)	
	Here is a list of problems and complaints that women sometimes have in response to stressful life experiences. Indicate how much you have been bothered each problem in the last month.
1	Repeated, disturbing memories, thoughts, or images of a stressful experience from the past?

2	Repeated, disturbing dreams of a stressful experience from the past?
3	Suddenly acting or feeling as if a stressful experience were happening again (as if you were reliving it)?
4	Feeling very upset when something reminded you of a stressful experience from the past?
5	Having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?
6	Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?
7	Avoid activities or situations because they remind you of a stressful experience from the past?
8	Trouble remembering important parts of a stressful experience from the past?
9	Loss of interest in things that you used to enjoy?
10	Feeling distant or cut off from other people?
11	Feeling emotionally numb or being unable to have loving feelings for those close to you?
12	Feeling as if your future will somehow be cut short?
13	Trouble falling or staying asleep?
14	Feeling irritable or having angry outbursts?
15	Having difficulty concentrating?
16	Being "super alert" or watchful on guard?
17	Feeling <i>jumpy</i> or easily startled?
18	Have you sought support from anyone for any of the issues mentioned in this section?

Give the woman Flashcard #4 translated in her mother language. Ask the woman to think back over the past month when answering, and to think of how she felt regarding the life experiences described in Flashcard #4. Ask the woman to use the scale of severity in Flashcard #5 when responding.

'Here is a list of problems and complaints that women sometimes have in response to stressful life experiences. Indicate how much you have been bothered by each problem in the last month.'

'Maagizo: Hapa chini kuna orodha ya matatizo na malalamishi ambayo mara nyingine watu huwa nayo kwa sababu ya kupitia hali nyingi za dhiki maishani. Katika mwezi mmoja uliopita, ni kwa kiwango gani ulisumbuliwa na:'

Flashcard #4

Examples of stressful life experiences before or during pregnancy, and during childbirth:

- difficult labour with a long and painful delivery
- unplanned caesarean section
- emergency medical treatment
- miscarriage
- physical, sexual, or emotional abuse
- road accident

Flashcard #5



1. Repeated, disturbing memories, thoughts, or images of a stressful experience from the past?

Kumbukumbu, mawazo au picha za kusumbua zinazojirudia rudia za hali ya dhiki uliyopitia

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option

2. Repeated, disturbing dreams of a stressful experience from the past?

Ndoto za kusumbua zinazojirudia rudia za hali ya dhiki uliyopitia

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking her if she often has unpleasant or frightening dreams or nightmares about a stressful experience. Record the woman's response by selecting the appropriate option

3. Suddenly acting or feeling as if a stressful experience were happening again (as if you were reliving it)?

Ghafla unajipata ukitenda ama ukihisi kama ambaye hali ya dhiki inafanyika tena (kama ambaye umerudi kwa hali ya dhiki na unaipitia tena)

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option.

4. Feeling very upset when something reminded you of a stressful experience from the past?
Kuhisi vibaya sana, kasirika wakati kitu kinakukumbusha hali ya dhiki uliyopitia?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she has unpleasant feelings when something reminds her of the stressful experience. Record the woman's response by selecting the appropriate option.

5. Having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?
Kuwa na hisia za kimwili (kwa mfano, moyo kudunda au kuenda mbio, kushindwa kupumua, au kutokwa jasho) wakati kitu kinakukumbusha hali ya dhiki uliyopitia

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking her if she experiences any sensations in her body when something reminds her of the stressful experience from the past. Record the woman's response by selecting the appropriate option

6. Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?
Kuepuka kufikiria au kuongea kuhusu hali ya dhiki uliyopitia au kuepuka kuwa na hisia inayohusiana na hali hiyo?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option.

7. Avoid activities or situations because they remind you of a stressful experience from the past?
Kuepuka shughuli au hali (fulani) kwa sababu zinakukumbusha hali ya dhiki uliyopitia?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option.

8. Trouble remembering important parts of a stressful experience from the past?
Ugumu wa kukumbuka sehemu muhimu za hali ya dhiki uliyopitia.

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking her if there are parts of the stressful experience from the past that she can't remember well or that are blurry in her mind. Record the woman's response by selecting the appropriate option

9. Loss of interest in things that you used to enjoy?
Kupoteza hamu katika shughuli ulizokuwa ukifurahia?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking her to think about things or activities she used to enjoy (for example, meeting with a friend or family), and ask her if she feels the same enthusiasm as before. Record the woman's response by selecting the appropriate option

10. Feeling distant or cut off from other people?
Kujihisi uko mbali au kutengwa na watu?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she feels disconnected or isolated from others. Record the woman's response by selecting the appropriate option

11. Feeling emotionally numb or being unable to have loving feelings for those close to you?
Kujihisi hauna hisia au kutoweza kuwa na hisia za upendo kwa wale waliokaribu nawe?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she has felt like she can't 'feel her feelings' or indifferent towards those that are close to her. Record the woman's response by selecting the appropriate option

12. Feeling as if your future will somehow be cut short?
Kuhisi kana kwamba siku zako za usoni huenda zikakatizwa

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she feels like her future only holds bad things or events. Record the woman's response by selecting the appropriate option.

13. Trouble falling or staying asleep?
Kuwa na ugumu kupata usingizi au kuendelea kulala?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she finds it difficult to fall asleep at night, or if she wakes up in the middle of the night and has trouble falling back to sleep. Record the woman's response by selecting the appropriate option.

14. Feeling irritable or having angry outbursts?

Kukasirika kwa haraka au kuwa na milipuko ya hasira

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking if she gets easily annoyed or get angry by things that normally would not annoy her. Record the woman's response by selecting the appropriate option

15. Having difficulty concentrating?

Kuwa na uqumu wa kumakinika?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

You can explain further by asking the woman if she gets distracted or can't focus on her daily activities. Record the woman's response by selecting the appropriate option.

16. Being "super alert" or watchful on guard?

Kuwa na tahadhari zaidi au muangalifu sana?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option

17. Feeling jumpy or easily startled?

Kuhisi kutotulia au kushtuka kwa urahisi?

Possible response options: Not at all (Hapana kabisa), A little bit (Kidogo), Moderately (Kiasi), Quite a bit (Kiasi kikubwa), and Extremely (Kiasi kikubwa Zaidi).

Record the woman's response by selecting the appropriate option.

18. Have you sought support from anyone for any of the issues mentioned in this section?

Je! Umetafuta usaidizi kutoka kwa mtu yeyote kwa maswala yoyote yaliyotajwa katika sehemu hii?

Possible response options:

yes, no

Ndio,La

This question is not included in the score but is a good indicator of the patient's global impairment and can be used to track treatment response.

Record the woman's response by selecting the appropriate option. If the woman answers "yes" to this question, ask her the following question:

ii) From whom did you seek support?

Ulita futa usaidizi kutoka kwa nani?

Possible response options:

family/friends, health provider (eg. nurse or doctor), religious leader, traditional healer, Traditional birth attendant, Community health volunteer, other "please specify"

Chaguo:

familia / marafiki, Mhudumu wa afya (k.m. Muuguzi / Nesi au daktari), kiongozi wa kidini, mganga wa kienyeji, Mkunga, Mhudumu wa afya wa nyanjani, wengine "Tafadhali taja"

Record the woman's answer by selecting the appropriate response from the list. If her answer is "other" ask her to specify and record her answer in the text box.

5. General advice on how to administer the tools

Create an environment that facilitates open communication

- Maintain eye contact and use body language and facial expressions that facilitate trust.
- Explain that information discussed during the visit will be kept confidential and will not be shared without prior permission.

Be friendly, respectful and non-judgemental at all times

- Stay calm and patient.
- Do not judge the women by their behaviours and appearance.

Respond with sensitivity when people disclose difficult experiences (e.g., sexual assault, violence or self-harm)

- Listen without being distracted.
- Allow the person to speak without interruption, don't rush, allow for silences.
- Acknowledge the woman's feelings and situation.

Use good verbal communication skills

- Use simple language.
- Be clear and concise.
- Allow the women to ask questions.
- Be mindful of the way you communicate, avoid phrasing things in a way that stigmatises the patient (i.e. don't use terms as "crazy, psychotic or mad", say "X has a mental health condition" instead of "X is mentally ill").

Pay attention to:

- Verbal messages (what is being said).
- Non-verbal messages (what is being said with body language, pauses, facial expressions etc.).

6. What to do if you are worried about a woman?

If a participant becomes distressed during the interview or you are concerned about a participant's wellbeing, stop the interview and ensure she is alright.

Stay calm and patient and give her a few minutes to recover and then ask her if she would like to proceed with the interview. You can say something like "I can see that you are feeling very upset, I understand it can be very challenging to talk about this. Would you like to take a few minutes?"

IMPORTANT: If the participant gave a positive answer for PHQ-9 Question 9 (on assessing suicidal symptoms), stop the interview and follow the steps outlined below.

At the end of the interview (whether it was completed after a short pause or stopped altogether), assess whether the participant is able to take care of herself. If you determine she is unable, ensure a family member or other supportive person is available to assist.

Complete the Adverse Event Reporting Form to refer the woman to clinical care in the following cases:

- A **referral message appeared** on the app after administering the GAD-7, PHQ-9 or PCL. because the woman showed moderate or severe symptoms of anxiety, depression or PTSD.
- The participant **gave a positive answer for PHQ-9 Question 9** (on assessing suicidal symptoms).
- The participant was **too distressed or upset to complete the mental health assessment**.

Follow up with participant to ensure she has been seen within one week of referral date.