OUR COVID-19 RESPONSE 2.0¹



The second wave of the Coronavirus was deadlier and left the entire healthcare system gasping for breath. The spread of the diseases to the rural areas meant that the impact was much more widespread. And it was worse since there were not enough medical facilities or testing facilities to cater to the population that was affected.

We have been on the ground since March 2020. Just when we were planning to expand our long term response the second wave swept the country. Strengthening our healthcare system became the priority and so Mission Sanjeevani- our COVID response 2.0 was born. The focus of the response was to reach out to public healthcare institutions (at different levels) and provide them with medical equipment —such as oxygen cylinder, BiPAP machines, testing kits and diagnostic equipment support— along with PPE kit & safety kit for the frontline health workers.

With increasing unemployment since the first lockdown it was also inevitable that we would continue to reach the most marginalised and vulnerable communities with food and safety kit. We have continued our work on spreading awareness through mobile van campaigns and Adhikar Vaani.

We set up a COVICALL Centre— SANJEEVANI—for all COVID and Non-COVID related medical gueries,

including information regarding oxygen cylinders, ICU beds, medicines. The centre will answer queries in English, Hindi, Bengali, Odiya, Marathi and Kannada. For now the Centre is open between 10 AM and 6 PM. The number to remember is **1800-102-6869**.

 $^{^{\}scriptscriptstyle 1}$ As on 13 July, 2021



MEDICAL EQUIPMENT DISTRIBUTION AT ASB HOSPITAL IN MOTI NAGAR, DELHI | PHOTO: INDRANIL

With Mission Sanjeevani—our COVID Response 2.0—we have reached 14 states. These states are UP, West Bengal, Karnataka, Delhi, Bihar, Odisha, Telangana, Maharashtra, Gujarat, Chhattisgarh, Andhra Pradesh, Rajasthan, Tamil Nadu and Assam. In some states we have provided medical equipment or masks or food or all three.

We delivered medical equipment to Primary Health Centres, Community Health Centres, Urban Community Health Centres, Civil Hospitals, and Block and District Hospitals. These **medical equipment** include oxygen concentrators and cylinders, oxygen nasal masks and flow meters, oxygen beds, BiPAP machines and ventilators. We also delivered **diagnostic equipment** such as thermometers, oximeters, BP machines, patient monitors.

Apart from equipment, we also gave **COVID kits**— VTM kit (9600) and Rapid Antigen Testing kit (9000)— to the Gorakhpur district health department. This was to increase testing facilities for more and more people. The second wave showed that not much testing happened during the peak simply because there weren't enough kits and facilities. With the third wave round the corner, we want to ensure that the healthcare system is equipped to cater to the most marginalised and vulnerable communities.



DELIVERY OF TESTING KITS TO CMO GORAKHPUR | PHOTO: IKBAL SINGH

Apart from the hospitals and medical department, safety kits were provided to frontline workers like the police stations in the S 24 Parganas in the Sunderbans in West Bengal. Masks are being provided at all our distribution sites as well as otherwise among communities, frontline workers who have to step out of the house to earn a living even during the pandemic.

Awareness continues to remain the key to fighting the pandemic. Like last year, this year too we will be running our **Mobile Van awareness campaign** in Maharashtra. The campaign in collaboration with the Pune Municipal Corporation and the Pimpri Chinchwad Municipal Corporation was inaugurated by the Maharashtra Dy CM Ajit Pawar. The van will travel 50 kms daily within the block and slums to spread the message of maintaining distance, masking up, and washing hands.



MOBILE VAN INAUGURATED IN MAHARASHTRA



SANJEEVANI-COVICALL Centre-1800-102-6869

In the second wave, the crumbling healthcare system left everyone scrambling for information. Those who had the access to internet and social media and WhatsApp could send out requests and appeals for oxygen cylinders, ventilators, hospital beds etc. But there were many who did not have access to social media.

In order to bridge this digital divide we decided to set up a covicall centre— SANJEEVANI. The call centre, in Lucknow, can be reached for all COVID and Non-COVID related queries. To begin with, the centre will be open between 10 am-6 pm and the information will be available in Hindi, English, Odia, Bangla, Marathi and Kannada.

The COVICALL Centre number is **1800-102-6869.** The centre has been established in collaboration with Indian Society for Healthcare Professionals (ISPH).



COVICALL CENTRE INAUGURATED IN LUCKNOW | PHOTO: PRIYANSH



FOOD DISTRIBUTION AT BUDGE BUDGE, WEST BENGAL | PHOTO: BRATISH

As part of Mission Sanjeevani we continued the **distribution of food and ration kit** to some of the most marginalised and vulnerable communities. These included migrant fisherfolk community (Gujarat), transpersons (Kolkata), homeless (Delhi), sugarcane workers (Maharashtra), tea garden workers (Assam), Cyclone-affected families (Sunderbans in West Bengal and Odisha), artisans such as weavers (Assam) and dholak makers (UP), household help (Delhi), Pak Hindu refugees (Delhi), PVTGs (Chhattisgarh), Cancer patients (Delhi), migrant workers (Bihar) and daily wage workers.

In Madanpur Khadar, we distributed ration to 280 families. Most of them had lost their livelihoods and many lost their loved ones in the second wave. Read their story <u>here</u>.

We also reached out to Pak-Hindu Refugee families living in camps at Signature Bridge and Majnu ka Tila. These families have lost their livelihoods and have no access to food, government schemes or even water facilities. We provided families with ration kits and safety kits, along with HAI. Read their story <u>here</u>.



DISTRIBUTION AT MADANPUR KHADAR, DELHI | PHOTO: VAIBHAV





In Kolkata we reached transpersons with food and safety kits. Due to the lockdown they have lost their livelihoods and many are driven to extreme poverty. We spoke to Kolkata Rista's Dr Santosh Giri who explained what the community was going through.

TRANSPERSONS AT THE DISTRIBUTION IN KOLKATA | PHOTO: BRATISH

Since, hand washing remains а k e v component in fighting the pandemic, we are trying to ensure that some of the most marginalised and vulnerable communities. We set up hand washing stations in Delhi's Pak-Hindu Refugee Camp in Delhi as well as started the work of chlorination and repair of hand pumps in Cyclone-affected areas i n t h e Sunderbans.



REPAIRING OF HANDWASHING STATION AT NAMKHANA, SOUTH 24 PARGANAS, WEST BENGAL

As part of the **livelihood intervention**, we delivered handloom units, cows, goats and food items to set up grocery store to 30 women in Morigaon district in Assam.



In 2020, we started our response soon after the lockdown was announced on 24 March last year. We are in 16 states with our **Project PSP (Protect. Secure. Preserve).** We have reached out with food and safety kits in 16 states — Delhi, UP, Bihar, Odisha, Tamil Nadu, Assam, Karnataka, Kerala, West Bengal, Gujarat, Jharkhand, Chhattisgarh, Telangana, Rajasthan and Maharashtra. We have also reached out to over 16 states through our virtual training to partner NGOs, volunteers, frontline health workers on COVID-19.

We extended our work on different national and state highways to reach out to migrant workers who were returning to their villages and towns on foot. This part of the PSP project was called **'Pathik'**.



When the second wave swept us, we were still reeling under the economic consequences of last year's lockdown. Migrant and informal sector workers who had lost their jobs and source of income during those two months are still unable to get back on their feet. Families are still struggling to make ends meet. Our programme moved from immediate relief to intermediate livelihood support. It was essential that the most marginalised and vulnerable families are made economically sustainable while also ensuring that we reach with food and safety kit wherever required.

Livelihood Training

The women SHGs who were trained have now, with input support, started their own small business enterprises. We worked with 81 women SHGs in Maharashtra (Nagpur & Mumbai), Gujarat (Ahmedabad), Bihar, Delhi and West Bengal. We have reached over 1000 women training them in papad making, tailoring, beautician course, catering, home-based shops, goat rearing, compost making, and vegetable vending. We provided sewing machines, ready made garments, and food material for women to start their tailoring, home-based shops, and catering businesses.

Our Outreach

Through our COVID-19 response we have reached out to the most marginalised and vulnerable communities; communities that are most discriminated against. We have been on the field for over two months and apart from the migrant workers returning home—on foot, on trucks and on cycles—we have reached out to weavers from the Padmashali community, tribal forest dwellers, dalit fisherfolk, tiger widows of Sunderbans, leprosy and cancer patients, home-based commercial sex workers, members of the transgender community, sanitation workers, members from the nomadic community, tea garden workers, the differently abled and people with disabilities, the elderly, community affected by riots, brick kiln workers, rag pickers, beggars and the homeless.

Unconditional Cash Transfers

UCTs of Rs 5000 & Rs 1000 have been made to 9481 households in Bihar, Assam, Odisha and Tamil Nadu; Rs 296.05 Lakh have been distributed. The criteria for the UCT is that they are the most marginalised, single women or women led households, and persons with disabilities.

In Tamil Nadu, unconditional cash transfers were made to families of 62 sanitation workers in Chennai. In Bihar, the focus is on single, widowed women and women-led households.

Food: Dry Ration

In PSP— our first COVID Response— 443575 people have been supported with dry food ration in Maharashtra, Delhi, UP, Bihar, Odisha, Tamil Nadu, West

Bengal, Chhattisgarh, Jharkhand, Assam, Telangana, Karnataka, Rajasthan and Kerala.

Dry ration is distributed among the poorest households — those who rely on daily wages and do not have any money or food since the lockdown. These include brick kiln workers in Patna and Puri, tea garden workers in West Bengal, homeless in Chennai, survivors of domestic violence in Rajasthan, and migrant workers in Raipur. Focus is on those workers who do not have access to PDS ration, especially in Bihar.

The dry ration includes rice, flour, pulses, salt, some spices such as *haldi* & chilli powder, edible oil, sugar, tea, soybean. These kits vary according to the cultural context of the different states. For instance, the kit in Delhi includes Rajma instead of Soybean. Similarly, the dry ration kits in Karnataka's Tumkur district contain Ragi, a staple millet in Karnataka. The idea is to also ensure that the nutritional requirements — carbohydrate, fat, protein — of the families are met. The kit serves a family of five for two meals a day for a period of 30 days.

700 kits were distributed by an all-women's volunteer team among the most marginalised women in Ahmedabad. 467 dry food ration kits distributed among cancer patients in Delhi and 255 among leprosy patients in the West Bengal's Bankura district & parts of Delhi. Kits were also distributed among 1000 belonging to the transgender community & sex workers in Kolkata, Raipur, Durg & Bangalore.

Dry ration was provided to run 'dignity kitchens' in Ahmedabad. These kitchens run by the migrant workers themselves will take care of the food requirements of 1500 stranded labourers.

Food: Cooked Meals

60080 packets of ready to eat cooked meals have been distributed in Kerala, Tamil Nadu, Delhi, Gujarat and Maharashtra.

This includes the 7725 meals distributed under the new project Pathik - which caters to the needs of the migrant workers returning home on cycles, foot, in trucks, trailers and buses. This was distributed on National Highways in Delhi, UP, Maharashtra, Karnataka, Bihar, and Odisha-AP border

The hot cooked meals were served to the stranded migrant workers, informal sector workers who lost their jobs, beggars, and the homeless.

Virat Kohli's one8 Commune (restaurant) collaborated with Oxfam India to provide hot cooked meal in parts of Delhi; 6500 packets were distributed in a fortnight.

Project Pathik

Food and hygiene kits were distributed among 4665 migrant workers returning home. This was distributed on National Highways in Delhi, UP, Maharashtra, Karnataka, Bihar, and Odisha-AP border

These kits include chiwda, sattu, biscuits, Horlicks, water, jaggery, soap, salt, Glucon-D and sanitary napkins. In Karnataka, the kit also included ragi biscuits and chikki. *Gamcha* was added to the Bihar kits.

The Pathik Vans distributing the food and hygiene kits are equipped with first aid kits in case of a medical emergency.

Kits for Women

300 hygiene kits were distributed among women from riparian communities in Gorakhpur (UP). The kit consisted of six bathing soap, six washing soap, nail cutter, comb, towel, three face masks & two sanitary pad packets.

Menstrual Health

Under the Pathik Project in UP, 76 sanitary napkins were given away to migrant women workers returning to their homes. This was not included in the food & hygiene kit but given on a requirement basis.

We have ensured to integrate Menstrual Hygiene Management in our COVID-19 response. In collaboration with Niine (one of the co-sponsors of the Rajasthan Royal team in the IPL) as part of their Every Run Counts initiative, we distributed 3600 sanitary pads to young girls. 905 winter kits were distributed among the rag pickers and waste pickers community in Delhi. The kits included fleece blankets, shawls, masks and sanitary napkins.

Safety Kits & PPE kits*

• 67560 safety kits have been distributed in states like Kerala, Maharashtra, Bihar, Odisha, Assam, West Bengal, Uttar Pradesh, Karnataka, Telangana, for frontline workers including doctors, nurses, hospital staff, police stations and other support staff.

• 8426 PPE kits to government hospitals and state health departments in Bihar, UP, Maharashtra, Haryana, Delhi, Kerala and Karnataka

 \cdot Of these 700 PPE kits handed over to the Indian Army deployed in the Northeast. 200 PPE kits distributed were given to the Rajiv Gandhi Institute of Chest Diseases, Bangalore.

*{Safety kits of Staff/Volunteers in the field: 3-ply mask (2 unit) & Liquid Hand washing Lifebuoy 200 ml (1 unit);

PPE kits/Safety kits for Doctors/Nurse Medical staff and other hospital staffs directly dealing with Covid-19 patient: N95 EQUIVALENT Mask (2 unit), Nitrile Gloves (2 pair), PPE Kit (Full Body cover) (1 unit), Disposable goggles (1 unit) & Hand sanitiser 200 ml (1 unit)}

Hand-washing Station

Two portable, hands-free, washing station was set up at a quarantine centre in Pune district. The hand washing unit was set up in a 100-bed quarantine facility.

Mass Awareness

Over 5 million people have been reached through awareness generation messages on COVID-19 by using various innovative communication mediums such as mobile vans, miking from public places such as temples and mosques. These have been well appreciated by respective state governments.

26647 volunteers and 36 CSOs have been added to the WG-CAN platform for the dissemination of COVID-19 related information; 197623 messages across the country using the WG-CAN platform (software/website).

Mobile van awareness campaign in UP and Bihar carried out through miking and announcements. In UP, this was done in Gorakhpur, Bahraich and Lucknow. And there is request by the state government to go to other districts in UP. A seven-day Video Van Campaign was organised in Nagpur to spread awareness about maintaining cleanliness and hygiene.

Alternative messaging systems such as Microware software has been pilottested in Uttar Pradesh and Assam for mass messaging of preventive efforts. In UP, the use of a tele texting software for awareness generation is being actioned in collaboration with the UPSDMA. Lucknow University has been brought onboard as a strategic partner for awareness generation through tele texting. At present, the messages are directly shared with over 600 volunteers across Uttar Pradesh.

IEC material designed by Oxfam and partners for dissemination of information via multiple available platforms—online and offline, in Kerala, Maharashtra, UP, Assam and West Bengal.

Training and Orientation

Oxfam India and partners have deployed 260 volunteers and 65 staff across several states.

More than 300 Oxfam staff, partner staff and volunteers from Assam, Bihar, Odisha, Uttar Pradesh, Delhi, Chhattisgarh, Kerala, Tamil Nadu, Maharashtra have been provided orientation on COVID-19 focusing on self-protection and protection of others.

Trainings have been given to Oxfam staff and partners on COVID-19 and Water, Sanitation and Hygiene (WASH) response, on Gender, Social Protection and EFSVL (Emergency Food Security and Vulnerable Livelihoods), and on community engagement and risk communication.

Overall, State-wise online training has been delivered to 2500 staff, volunteers, partners staff in Delhi, Kerala, Maharashtra, Manipur, Odisha, West Bengal, Bihar, Karnataka, Jammu and Kashmir, and Tamil Nadu.

Working with Government and other NGOs

Letters of appreciation received from the Delhi, Chhattisgarh, Uttar Pradesh and Bihar government.

Oxfam India signed an MOU with the Jharkhand State government to work together to track migrants and link them up with support systems and aids. OIN is also working with the state to create a dashboard to track migrant workers.

Uttar Pradesh's Health department is in talks with Oxfam India to develop IEC material for mass awareness. Bihar too worked closely with the State Health Society for the distribution of the PPE kits.

Uttar Pradesh State Disaster Management Authority (UPSDMA) has formed a Task Force on COVID-19. Oxfam India has been nominated to this Task Force, and we are providing advice and support to UPSDMA and seeking necessary support for effective actions by CSOs as necessary.

Sphere India, the apex network of humanitarian agencies, has formed a working group to coordinate with inter-agency groups in the states. Oxfam India is co-chairing this group for stronger coordination with all leaders in the Inter-agency groups.

Recognition

Oxfam India won the Gold Award at the 4th CSR Health Impact Award in Covid Relief Project (NGO) category on 22 August. In an online event, the award was received by Pankaj Anand (Director, Programmes & Advocacy) on behalf of Oxfam India. The CSR Health Impact Awards is a flagship event of the Integrated Health and Wellbeing (IHW) Council, a premier think tank promoting health for all. The 4th edition is hosted in association with Jagran Pehel.