**ChildFund International**

**Humanitarian Situation Report 22**

**COVID - 19 - INDIA**

**Date Prepared: 10th December 2020 (1900 HRS)**

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**Period Covered: 11th November to 10th December 2020**

**FOR UPDATES, PLEASE HIGHLIGHT UPDATED SECTIONS IN RED**

Part 1: The Overall Situation

COUNTRY - INDIA

|  |  |  |
| --- | --- | --- |
| Total Number of COVID-19 Cases Reported | Number of Deaths | Number of Cases Recuperated |
| **9,767,371** | **141,772** | **9,253,306** |
| SOURCE: Ministry of Health and Family Welfare, Government of India [<https://www.mohfw.gov.in/>] |

ChildFund-supported areas (Provide only if you have reliable data on this. You can report on a consolidated basis or by program state/region/province/etc. if you have this detail.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl.** | **Name of State / UT** | **COVID 19 Cases Confirmed\*** | **Cured / Discharged / Migrated\*** | **Deaths\*\*** |
| 1 | Dadra Nagar Haveli, Daman & Diu | 3,354 | 3,331 | 2 |
| 2 | Mizoram | 3,994 | 3,784 | 6 |
| 3 | Andaman and Nicobar Islands | 4,783 | 4,647 | 61 |
| 4 | Sikkim | 5,239 | 4,754 | 117 |
| 5 | Ladakh | 9,045 | 8,104 | 122 |
| 6 | Nagaland | 11,508 | 10,849 | 67 |
| 7 | Meghalaya | 12,511 | 11,855 | 122 |
| 8 | Arunachal Pradesh | 16,461 | 15,697 | 55 |
| 9 | Chandigarh | 18,322 | 17,128 | 297 |
| 10 | Manipur | 26,534 | 23,301 | 318 |
| 11 | Tripura | 32,976 | 32,204 | 373 |
| 12 | Puducherry | 37,339 | 36,354 | 615 |
| 13 | Himachal Pradesh | 46,930 | 38,690 | 765 |
| 14 | Goa | 49,036 | 47,056 | 703 |
| 15 | Uttarakhand | 79,656 | 72,880 | 1,320 |
| 16 | Jharkhand | 1,10,830 | 1,08,100 | 991 |
| 17 | Jammu and Kashmir | 1,14,407 | 1,07,624 | 1,767 |
| 18 | Punjab | 1,57,928 | 1,45,623 | 4,980 |
| 19 | Assam | 2,14,165 | 2,09,625 | 998 |
| 20 | Madhya Pradesh | 2,18,574 | 2,01,987 | 3,366 |
| 21 | Gujarat | 2,22,811 | 2,04,661 | 4,123 |
| 22 | Bihar | 2,39,955 | 2,33,298 | 1,303 |
| 23 | Haryana | 2,48,079 | 2,33,696 | 2,650 |
| 24 | Chhattisgarh | 2,51,120 | 2,28,304 | 3,038 |
| 25 | Telangana | 2,75,904 | 2,66,925 | 1,482 |
| 26 | Rajasthan | 2,85,627 | 2,63,350 | 2,485 |
| 27 | Odisha | 3,22,299 | 3,17,412 | 1,789 |
| 28 | West Bengal | 5,10,951 | 4,78,434 | 8,867 |
| 29 | Uttar Pradesh | 5,59,499 | 5,30,854 | 7,987 |
| 30 | Delhi | 5,99,575 | 5,69,216 | 9,813 |
| 31 | Kerala | 6,49,571 | 5,86,998 | 2,507 |
| 32 | Tamil Nadu | 7,94,020 | 7,71,693 | 11,836 |
| 33 | Andhra Pradesh | 8,73,457 | 8,61,153 | 7,045 |
| 34 | Karnataka | 8,96,563 | 8,61,588 | 11,900 |
| 35 | Maharashtra | 18,64,348 | 17,42,131 | 47,902 |
| **TOTAL#** | **97,67,371** | **92,53,306** | **1,41,772** |
| \*(Including foreign Nationals) |
| \*\*(more than 70% cases due to comorbidities) |
| #Figures are being reconciled with ICMR |

* On 24th March 2020, the Prime Minister Mr. Narendra Modi announced 21- day nationwide lockdown, effective from 12 AM on 25th March 2020 - it was **Lockdown 1.0**.
* Educational, social, political institutions to remain closed and not more than 20 people permitted during funerals.
* Indian Council for Medical Research (ICMR) prescribes Hydroxychloroquine for prophylaxis of COVID-19 in India and has also issued guidelines for testing to private labs.
* On 14th April’ 2020, the Prime Minister Mr. Narendra Modi announced extension of another 19 days nationwide lockdown (**Lockdown 2.0**) i.e., up to 3rd May’ 2020, since government decided as longer lockdown is essential to break the chain of infection. But less affected areas to get exemptions on 20th April 2020 onwards after careful evaluation of the situation.
* **The Government of India extended the nationwide COVID - 19 Lockdown 3.0 for two more weeks upto 17th May but introduced significant relaxations to allow more economic activities.**
* The Central Government of India extended fourth phase of **Lockdown 4.0** up to 31st May, while giving considerable flexibility to the States in deciding red, green and orange zones of COVID -19 intensity.
* The state of West Bengal especially five worst affected districts and the capital city of Kolkata are grappled with the impact of cyclone “AMPHAMN” on the 20th May 2020.
* As lockdown 4.0 ends, the **Unlock-1.0** started. the limiting of curbs to containment zones to be demarcated by the district authority based on health ministry guidelines, where only essential services will be allowed in the containment zones.
* On 30th June, Prime Minister of India addressed the Nation related to **Unlock 2.0** and announced the extension of Pradhan Mantri Garib Kalyan Anna Yojana till end of November to 80 Crore people providing 5 Kg free rice / wheat to each member of the family along with providing 1 kg pulses to each family per month.
* As per new guidelines of **Unlock - 3.0** Government lifted the night curfew, there shall be no restriction on inter-state and intra-state movement of persons and goods.
* As per Ministry of Home Affairs (MHA) circular **on Unlock 4.0** dated 29th August 2020: Schools, Colleges, Educational & Coaching Instiutions will continue to remain closed for students and regular class activity upto 30th September 2020, but online learing shall continue and shall be encouraged.
* As per Ministry of Home Affairs (MHA) circular on **Unlock 5.0** dated 30th September: Lockdown shall remain in force in the Containment Zones till 31st October 2020. Containment Zones shall be demarcated by the district authorities at micro level after taking into consideration MoHFW with the objective of effectively breaking the chain of transmission.
* **Unlock 6.0 Guidelines:** Even though the Centre issued no fresh directions [**in its unlock guidelines for November**](https://indianexpress.com/article/india/covid-unlock-guidelines-6-0-no-further-relaxation-says-mha-6898968/), a handful of states have allowed opening up of more activities outside containment zones and announced partial reopening of schools. Earlier this week, the Ministry of Home Affairs stated there would be no further relaxations and the Unlock 5.0 guidelines issued last month would remain in force till November 30.
* India crosses a significant milestone i.e. Active Caseload falls below 400,000 after 145 days. It has fallen to 3,72,293 on 10th Dec’ 20. This number translates to just 4.1% of total cases.
* While 32,981 new positive cases were found in the country, 39,109 new recoveries were registered during the last 24 hours. The difference of 6,128 between new recoveries and new cases has led to a net decline of 6,519 cases from the total Active Caseload in the last 24 hours.
* New cases per million population in India recorded in the past seven days are amongst the lowest in the world; the figure for the last seven days is 182.
* As per the Health Secretary, Govt. of India; “There are multiple vaccines in different stages of development and some of them may get licensed in the next few week,”.
* National Expert Group on Vaccine Administration for Covid-19 (NEGVAC) has recommended 3 priority groups adding up to almost 300 million people which includes healthcare and frontline workers, those above 50 years of age and those with co-morbidities would be inoculated in the first phase.

*(\*Data Source- Ministry of Health & Family Welfare, MHA GoI & Media Updates)*

Part 2: The Situation in Areas Where ChildFund Works

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Partner Organization (Use Salesforce community identifying code/name.)** | **# of Enrolled and Sponsored Children** | **COVID19 Cases Reported in ChildFund Communities (Y / N / Unknown) Provide number if available.** | **Number of Enrolled Children Reported with COVID19 (If available.)** | **Number of enrolled children deceased as result of COVID19** |
| **Sponsored** | **Enrolled** |
| 1219 / Jaipur Child Development Program  | 675 | 680 | Yes (156) | 0 | 0 |
| 1222 / Manav Sewa Kendra  | 426 | 430 | Yes (12) | 0 | 0 |
| 1224 / Pratapgarh Child Development Program  | 290 | 291 | No | 0 | 0 |
| 2880 / People Action for National Integration  | 689 | 1464 | Yes (8) | 0 | 0 |
| 2883 /AKHIL BHARTIYA SAMAJ SEWA SANSTHAN | 1651 | 1823 | No | 0 | 0 |
| 4068 / Disha Children's Program | 1967 | 2003 | Yes (36) | 0 | 0 |
| 4117 / GSS Child Development Project | 638 | 645 | No | 0 | 0 |
| 4120 / Gogunda Child Development Program  | 1687 | 1986 | Yes (13) | 0 | 0 |
| 4268 / Jhabua Area II | 1312 | 1740 | Yes (2) | 0 | 0 |
| 4269 / Jhabua Area I | 904 | 931 | No | 0 | 0 |
| 4270 / Udaipur Area I | 426 | 429 | No | 0 | 0 |
| 4271 / Udaipur Area II | 449 | 452 | No | 0 | 0 |
| 4338 / Delhi Child Development Project  | 288 | 976 | Yes (5) | 0 | 0 |
| 2420 / Dindigul Child Development Program | 378 | 382 | Yes (33) | 0 | 0 |
| 2424 / Kurnool Child Development Program | 282 | 286 | Yes (56) | 0 | 0 |
| 2850 / PRAJA SEVA SAMAJ  | 1048 | 1755 | Yes (1563) | Yes (1) cured | 0 |
| 2852 / Kanyakumari Child Development Program  | 380 | 386 | Yes (13) | 0 | 0 |
| 2854 / Gangavathy Child Development Program  | 280 | 281 | Yes (19) | 0 | 0 |
| 2856/Karwar Rural Women & Children Dev SOC  | 798 | 812 | Yes (27) | 0 | 0 |
| 2857 / N K J Educational and Charitable Society | 234 | 236 | Yes (300) | Yes (1) cured | 0 |
| 3030 / National Institute for Sustainable Dev | 689 | 1486 | Yes (283) | Yes (1) cured | 0 |
| 3147 / NILGIRIS ADIVASI WELFARE ASSOC  | 228 | 230 | No | 0 | 0 |
| 3701 / Mysore Child Development Program  | 906 | 1176 | Yes (1700) | Yes (1) cured | 0 |
| 3702 / AMALAS KUTUMBA ABIVRUDDI YOJANE  | 245 | 248 | No | 0 | 0 |
| 3704 / ASHA KENDRA  | 329 | 331 | Yes (1) | 0 | 0 |
| 3895 / BALAJI BALA VIKAS  | 934 | 1157 | Yes (204) | 0 | 0 |
| 4080 / Child Development Project - Kakinada  | 616 | 1189 | Yes (660) | 0 | 0 |
| 4082 / Salur Child Development Program | 296 | 299 | Yes (17) | Yes (1) cured | 0 |
| 4125 / Nagapattinam Child Development Program  | 709 | 1370 | Yes (10) | 0 | 0 |
| 4290 / MYRADA CHILD DEVELOPMENT PROJECT  | 874 | 960 | Yes (1) | 0 | 0 |
| 4305 / Mumbai Child Development Project | 1076 | 1402 | Yes (2184) | Yes (1) cured | 0 |
| 4306 / Hyderabad Child Development Project | 736 | 921 | Yes (316) | 0 | 0 |
| 4322 / Vijayawada Child Development Project | 473 | 1113 | Yes (665) | 0 | 0 |
| 4347 / Chennai Child Development Program  | 275 | 281 | Yes (60) | Yes (1)  | 0 |
| 9402 / CAPUCHIN KRISHIK SEVA KENDRA  | 194 | 195 | Yes (666) | 0 | 0 |
| 9422 / Child Development Project - Puducherry  | 176 | 182 | Yes (482) | Yes (2)  | 0 |
| 0617 / West Singhbhum Child Development Project | 712 | 892 | No | 0 | 0 |
| 1213 / PARIVAR VIKAS CHANDRASHEKHARNAGAR | 270 | 275 | Yes (5) | 0 | 0 |
| 1217 / Daltonganj Area-1 | 279 | 280 | Yes (2) | 0 | 0 |
| 2849 / VARRAT | 1103 | 1801 | No | 0 | 0 |
| 2879 / CENTRE FOR TOTAL DEVELOPMENT | 267 | 270 | No | 0 | 0 |
| 2881 / Bastar Sevak Mandal | 1056 | 1076 | Yes (21) | 0 | 0 |
| 3900 / Rayagada Child Development Project | 263 | 267 | Yes (190) | 0 | 0 |
| 3993 / Jammui Child Development Program | 399 | 402 | Yes (9) | 0 | 0 |
| 4067 / South Orissa Voluntary Action (SOVA) | 577 | 1277 | Yes (518) | 0 | 0 |
| 4115 / ASHA | 1311 | 1793 | Yes (5) | 0 | 0 |
| 4258 / Malkangiri Area Program | 1071 | 1082 | Yes (123) | 0 | 0 |
| 4267 / Daltonganj Child Development Project  | 888 | 902 | Yes (21) | 0 | 0 |
| 4274 / Kalahandi Child Development Program | 970 | 1582 | Yes (30) | 0 | 0 |
| 4275 / Deoghar Child Development Program | 586 | 588 | No | 0 | 0 |
| 4297 / Giridih Child Development Program | 317 | 317 | Yes (6) | 0 | 0 |
| 4298 / Jamtara Child Development Program | 264 | 266 | No | 0 | 0 |
| 4299 /Naupada Child Development Program | 481 | 484 | Yes (45) | 0 | 0 |
| 4352/Bhubaneswar Child Development Program | 341 | 1016 | Yes (14) | 0 | 0 |
| 9502 / Balrampur Child Development Project  | 397 | 400 | No | 0 | 0 |
|  | **35,110** | **45,498** | **10,481** | **9** |  |

Note:

* The project/location wise numbers could not be updated in the table above because of changes in our operational model (LP disaffiliation and direct implementation preparation). We will update the numbers in next SitRep onwards.
* Till last SitRep, total 10,481 people from our program areas got infected by COVID19 including 9 enrolled children, Out of them 6 enrolled children got cured and discharged, whereas 3 children under the treatment. This status could not be updated due to disaffiliation process and unavailability of
* All the sponsorship activities are being undertaken with safety guidelines. Monitoring of child presence and their health status is done through telephonic conversation by field staff.

Child deaths: List any sponsored child (with Partner organization and child ID from salesforce) diseased as a result of COVID19. (Note: These need to be reported immediately following the regular sponsorship protocols.), No cases of death reported from our enrolled / sponsored families.

|  |  |
| --- | --- |
| Partner Organization (Use Salesforce identifying code/name.) | What is the status of the program/sponsorship processes (operational/suspended)? |
| Program Implementation | CVS | M&ELevel 2 | Enrollment / Disaffiliation | Sponsorship Communication | DFC |
| ChildFund CO (all the communities in CO) | Resumed with safety guidelines | Suspended | Suspended | Enrolment was resumed with safety guidelines; but currently slowed due to disaffiliation process.Disaffiliation of 33 LPs took place due to FCRA amendments  | Resumed -Sending the softcopies of the communications and hardcopies as guided by IO | Resumed transferred of DFCs in all the locations |

Note: As a global measure, all sponsor visits have been suspended.

What issues are children in these areas facing (food shortages, safety concerns, schools closure, etc.)?

ChildFund has conducted a rapid assessment to understand impact of COVID19 on health and nutritional service delivery. The following are key findings of the survey

* The ongoing pandemic has completely disrupted immunization services and delivery of nutritional supplements within few months, making children more vulnerable to other preventable diseases and malnutrition.
* While working closely with children during the pandemic in the states of Uttar Pradesh, Madhya Pradesh and Rajasthan, where malnutrition is already a major challenge, we have realized that the reduced household income has forced poor families to compromise on essential health and food expenditures. The issue of food security that has arisen from the phenomenon of people losing their livelihoods has affected children the most. Lack of availability of food isn’t just causing hunger, it’s also leading to malnutrition and are adversely affecting a child’s over all development.
* As per rapid assessment by ChildFund, 63% of the surveyed households in reported the lack of access to immunization services. It seems the disruptions in maternal and child health facilities, immunization and supply of nutritional supplement would effectively reverse the last 2 to 3 years of progress in reducing infant mortality within a single year.

Part 3: ChildFund’s Response

**3.a. Overall**

* Who is or will be leading/managing the response?

The Specialist - DRM is the focal point for this response with the guidance of the Country Director and other SMT members.

* How is ChildFund linked with humanitarian coordination structures, i.e., in which clusters or working groups do we participate? The most recent/next meeting and who is representing ChildFund? Donor meetings we have attended, or missions that we are aware of related to the response?

In India, UNOCHA does not have a presence and Sphere - a coalition of humanitarian agencies in India coordinates humanitarian response activities at national level. Sphere has sectoral committee in line with clusters of UNOCHA and we are member of Protection, Health and Education Sector Committees. As a member of this coalition, we participate in all the coordination activities including participation in the Inter Agency Coordination calls and updating our response activities in the Unified Response Strategy (URS) matrix. The URS matrix captures response activities of all the agencies with their geographic and thematic presence. We are part of different We submit our response activities information on weekly basis to Sphere for updation in online google sheets. The following link will provide ChildFund response activities details in URS matrix.

<https://docs.google.com/spreadsheets/d/1aLrzi55mc5el6TXDFRLMekg5KyANuUOrCMseZqn__Uk/edit?ts=5e6a1d4b#gid=0>

**3.b. Program Response**

Please organize your program response report as per the 4 objectives included in our global response plan. You can add an additional category if you have response activities planned or executed that do not align with these objectives. For each objective use the questions below to guide your report.

* What kind of response activities or interventions have been executed? What support items are needed or have been collected/distributed?

ChildFund has reviewed and revised its COVID-19 response plan. The revised plan will focuses relief intervention targeting 300,000 population across 1,700 villages in 77 districts of 15 states while early recovery and rehabilitation has been reduced prioritising most vulnerable and high impact communities by COVID19. The response plan focuses Food, Livelihoods, WASH, Nutrition, Child Protection and Education. The revised estimated budget is $1.10 million over a period of 12 months. Following are more details on interventions and revised response plan:

* Food baskets targeting 30,000 families
* Intergenerational coping and learning (IGCL) kit targeting 25,000 families
* Hygiene kits for 30,000 families
* Frontline Workers Kit for 1,200 workers
* Agriculture based livelihoods support for 10,000 families

* What is the current progress of implementation vs. the established response plan?

The relief and recovery activities benefitted 394,719 populations and following is the plan vs actual:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Intervention Head** | **Unit** | **Plan** | **Progress** | **%** |
| **Unit** | **Population** |  |
| Food Basket | HH | 30,000 | 32,488 | 145,209 | 108% |
| Hygiene kit | HH | 30,000 | 38,620 | 172,266 | 129% |
| IGCL kit | HH | 25,000 | 25,428 | 115,971 | 102% |
| Frontline Worker kit including IEC | Kit | 1,200 | 2,499 | 342,745 | 208% |
| Agriculture based livelihoods  | HH | 10,000 | 6,605 | 29,786 | 66% |

Below graph indicates the progress against target for all the COVID-19 interventions:

* Who are we partnering or collaborating with to provide our response?

We are implementing the current response activities through our existing local implementation partners of subsidy program as well as direct implementation in grant locations.

* What kind of response activities are you still planning for the coming period?

ChildFund India is currently preparing an early recovery and rehabilitation focusing on livelihoods recovery, WASH, Psychosocial support, ECCD and Child Protection.

**3.b.1. Stop COVID-19 from infecting children and families**

**ChildFund’s Global Response Plan**

To help children and families protect themselves from COVID-19, we are installing community, handwashing stands; educating communities about symptoms, hygiene measures and where to get tested or treatment; and distributing soap, hand sanitizer, gloves and masks to families and frontline, health workers. For children who are being treated for COVID-19 or are subject to quarantine measures, we are creating child-friendly spaces with age-appropriate toys and reading matter. ChildFund India has distributed hygiene kits and IEC materials on COVID19 prevention and management. ChildFund India has distributed hygiene kits and IEC materials on COVID19 prevention and management. As on 10th December 2020, we have distributed 38,620 hygiene kits benefitting 172,266 population including 82,954 children. 34,072 IEC materials on WASH and COVID19 management were distributed.

**3.b.2. Ensure that children get food they need**

**ChildFund’s Global Response Plan**

To ensure that the most vulnerable families can keep food on the table, pay rent and cover other basic needs, we are providing cash for those families most needing this support, such as those who have lost their income because of COVID-19, child or elder-headed households, and/or households affected by disability or chronic illness. Where possible, we are distributing food and basic household items directly, carefully abiding by COVID-19 protection measures - 32,488 food baskets distributed to ensure food security for children and affected families in our program locations. A total of 145,209 population including 68,875 children benefitted from food basket support.

 **3.b.2. 1.** *Cash Transfers and vouchers*

-Is your CO planning or implementing cash transfers or vouchers as part of COVID19 response? NO

- If so, brief description of progress to date.

**3.b.2.2.** *Other responses in relation to objective 3. b.2.*

ChildFund India did not implement cash/voucher program. With the aim of “Restoring the livelihood of small and marginal farmers through the promotion of Khariff crops (June to October)” – a total number 6,605 families covering a population around 29,786 persons provided with Seed and organic manure for Khariff crops. The migrant families who have returned to villages due to the impact of COVID 19 as well the women headed and also the most vulnerable families who hold less than two acres of land were supported through this initiative.  This timely support was provided with the aim of mitigating the risk of indebtedness and also avoid vulnerable households entering the vicious cycle of poverty.  In addition, this would also ensure food security for the targeted families and revive their agriculture activity for the current agriculture season, which is considered to the main agriculture season in India. The farmers had made use of the Seed & manure support provided for the Khariff crop. There has been gradual improvement livelihood scenario in the region, which has also resulted in the return of small per cent of migrant workers to urban areas for employment or to continue their petty businesses.

**3.b.3. Keep children safe from Violence: physically and emotionally**

**ChildFund’s Global Response Plan**

We are supporting community-based child protection systems that identify, respond to and refer cases of abuse, neglect, violence or exploitation. We are also providing virtual, online psychological first aid and counseling, and supporting temporary shelters for children who live on the street, providing hygiene supplies, food and other basics. We are also arranging safe and appropriate care for children who are separated from their caregivers due to treatment or prevention measures. ChildFund India has conducted the following activities to mitigate any potential CP risks for children after completion of child protection rapid assessment at local partner level:

* Continued awareness building efforts to reinforce messaging on COVID appropriate behavior, CP issues and reporting pathways amongst children, parents & other community stakeholders. As a result, about 10 cases of child marriage and child labour were reported to VCPCs in last couple of months. All 10 cases were addressed through intervention of respective VCPCs and in some cases with the support of concerned government authorities.
* Conducted a series of capacity building sessions for LPs on key legislations protecting children in India, in an attempt to equip LPs with correct knowledge about important legal provisions related to major CP issues exacerbated by the COVID pandemic e.g. child marriage, child labour, child trafficking, child sexual abuse, juvenile justice system with a focus on main CP systems & services etc. so LPs could provide basic legal info to VCPCs & other relevant stakeholders while dealing with the stated CP issues
* Increased engagement and strengthening of VCPCs on CP issues triggered by the COVID pandemic and how to effectively respond to CP issues being reported to them
* To ensure ‘No Harm’ to children and strict adherence to safeguarding norms while carrying-out response/relief/recovery actions, detailed orientation on the child safeguarding policy & related procedures, was held for LPs across the board
* As a follow-up action, field staff were oriented by LPs on basic counselling skills, who are now providing psycho-social support to children as per need, in program communities
* LPs facilitated interface between children & concerned government authorities wherein children shared their protection concerns for appropriate action/resolution on part of the concerned authorities.
* The Joining Forces India entities jointly rolled-out the Social Media Campaign on ***Ending Violence against Children,*** on the occasion commemorating World Children’s Day, Nov 20, 2020.
* ChildFund India facilitated participation of a child representative from its target community, at the global event held on Universal Children’s Day on 20 November 2020, welcoming children and youth from around the world to exercise their right to speak up on matters affecting their lives.

**3.b.4. Help children continue to do their job: Learning**

**ChildFund’s Global Response Plan**

While schools remain closed, we are supporting children’s learning through activities and tutoring sessions online or by radio. For students without reliable internet access, we are distributing home learning kits with materials and guides for their use. During lockdown, parents and children are bound to spend time inside the premises of their home. Being in a closed premised for a longer duration can have deep psychosocial impact on the children. It is important that the they are kept engaged and time is utilised in getting the web of family relationship get stronger. For this, Intergenerational coping and learning kit is being implemented by ChildFund India. As on date, ChildFund has distributed 25,428 such kits in our target locations benefitting 115,971 children and caregivers.

**3.b.5. Other responses**

ChildFund India is distributing Frontline Workers Kits that will support the safety of the government frontline workers while undertaking emergency relief efforts. ChildFund also reaches out to frontline workers to raise awareness and promote healthy practices of key influencers, including community groups, women and youth groups, health workers, organizations of people with disabilities, and community volunteers. The kit has been standardized for our response and so far we have distributed 2,499 such kits to 2,299 beneficiaries.

**Snaps from the field:**

 

***Photo: Beneficiaries with food basket and hygiene kits distributed in Delhi slums***



***Photo: Beneficiaries receiving food baskets and IGCL kits in Chhattishgarh***

**Below Sections for Internal Use Only**

Part 4: Office and Staff Status

|  |  |
| --- | --- |
| Office Status (Open/Closed) | Number of Staff: |
| Diagnosed with COVID19 | Diseased from COVID19 | Working from Office | Working from Home | On Special Leave |
| Open - adhering government guidelines and Return to Office IO guidelines | Twelve (12) | None | Yes, we have made roster and accordingly staff are attending the office adhering to government guidelines.  | Yes, as per roster | None |

Notes:

* The government authorities have lifted most of the restrictions in the Country. Only containment zones with severe case load are kept under strict restrictions.
* Our Staff are working from Offices, on rotation, as needed, in consultation with their Supervisors, and adhering to the guidelines issued by local authorities.
* From the date COVID19 pandemic started, as on date of this report, 12 staff have diagnosed positive for COVID19 as per details below:
	+ 3 staff in Bangalore office, Karnataka.
	+ 6 staff in Bhubaneswar office, Odisha.
	+ 1 staff from EU supported project in Uttar Pradesh.
	+ 2 staff in field location of Madhya Pradesh.
* Except 2 staff, who have mild symptoms and undergoing quarantine period, all others have recovered fully and resumed work. No further complications have been reported by those who recovered and those undergoing quarantine. Their families are keeping well too.
* The incidents are regularly noted by SMT through Director, HR and also reported to IO/RO teams.
* SMT continues to keep a close watch on staff cases but also on overall hygiene, staff safety and health. Offices are being fumigated and deep-cleaned on a daily basis.
* ChildFund India has resumed only essential domestic travels due to changes in the program implementation model necessitated by amendments in the Foreign Contribution Regulation Act (FCRA2020). The travelling staff are taking all precautions, following the COVID19 protocol, as also prescribed by the local authorities in each state/district.
* Any cases of staff diseased need to be reported immediately to RD and GHR.
* Special leave as per [COVID19 Administrative Guidelines](https://childfundintl.sharepoint.com/%3Ab%3A/g/News/COVID-19/ETFAT1mC_8BHjamXXOqMs3gBRsmi2thcbUO4qLhyddl4kA?e=zYbNiC).

Number of staff/partner organization staff completed WHO COVID online training <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/training/online-training>.

Part 5 Human Resources

* Which visitors are there in the country? Please include names, functions, contact information and arrival/departure dates for both IO and RO staff (note: due to the travel ban, this will apply only once the ban has been lifted) – Not Applicable
* Any gaps in staffing/need for deployment from other COs or Global Teams? Not Applicable
* Are there any other major HR issues? Not Applicable

Part 6 Safety & Security

* Are police and other services functioning in the normal manner? Yes
* Are the courts still operating? As per government order
* Are there reports of looting or increased criminality? No
* Have military personal being deployed to patrol towns or cities? Partially
* Confirm the safety of staff and their families in the affected area. Yes
* Have Safety and security risks/mitigation plans been updated to current environment? Yes, actions initiated
* Recommendations around any upcoming travel planned for staff or donors (note: Only once global travel ban has been lifted) Travel is strictly prohibited

Part 7 Grants

List all active grants:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grant Job Code** | **Grant Name** | **Donor** | **Status of Implementation** **(Normal/Reduced/Suspended)** | **Any specific guidance received from donor? (Yes/No)** |
| 12-0450D   | INDS-Enhancing CSOs-LA-Gender Equality-2019-EU. | European Union  | Project activity implementation is resumed to normal level. The field level activities are conducted using available technology platforms. The face to face activities are conducted with safety protocols issued by the local government authorities. | Yes |
| 10180PIN | Promoting Effective and Context based Initiation of Learning for Life (PENCIL)-My School | HCL F | The implementation of the activity in the filed level has been reduced at the same the team is regularly in touch with the beneficiaries and community leaders in the field assessing the situation also providing emotional support through the phone calls. Also preparing the quarterly reports and budget reallocation. | Yes  |
| 10180PKN | Vibrant Early Childhood Education Centers | HCL F | The implementation of the activity in the filed Level has been reduced at the same the team is regularly in touch with the beneficiaries and community leaders in the field assessing the situation also providing emotional support through the phone calls. Also preparing the quarterly reports and budget reallocation. | Yes  |
| 101P | E Saksham  | State Street  | The implementation of the activity in the filed level has been reduced at the same the team is regularly in touch with the beneficiaries and community leaders in the field assessing the situation also providing emotional support through the phone calls. Also preparing the quarterly reports. Providing online classes for the beneficiaries  | Yes  |
|  | PENCIL-Technicolor | Technicolor  | The project activities would have been starting from the month of April onwards as it is a new grant. Procurement process have been completed. Field activities are reduced due to COVID -19 | Yes  |
|  | ARYAKA | ARYAKA | The project activities would have been starting from the month of April onwards as it is a new grant. Procurement process have been completed. Field activities are reduced due to COVID -19 | NO |
| 1008F | Khilta Bachpan  | ChildFund Special Project  | The implementation of the activity in the filed level has been reduced at the same the team is regularly in touch with the beneficiaries and community leaders in the field assessing the situation also providing emotional support through the phone calls. Also initiated Khilta Bachpan - Fight against COVID - 19 campaign involving children and other stakeholders  |  |
| 99-0251 | Sustainable Nutrition Health and Education Project (SNEH) – Alirajpur  | Moody’s Analytics  | Regular project related interventions have resumed slowly. One to one contacts and community level awareness on accessing government schemes has been facilitated by the village animators.  | Project Completed |
| 99-0249 | Poultry for profit | BPCL | Outreach activities being slowly resumed. | Project Completed |
| 99-0255 | WHEEL 2019 | HSBC | Outreach activities being slowly resumed.  | No |
| 2-0331 | Link Workers Scheme (LWS) Project  | APSACS | Outreach activities being slowly resumed.  | Yes  |
| 2-0343 | Link Workers Scheme (LWS) Project | TSACS | Outreach activities being slowly resumed. | Yes |
| 2-0328 | Targeted Intervention Project - Jagitiyal | TSACS | Outreach activities being slowly resumed. | Yes  |
| 2-0330 | Targeted Intervention Project – Ramagundam | TPSACS | Outreach activities being slowly resumed. | Yes |
| 99-0232 | Swabalamban – Self-reliance redefined  | ACCIONA  | Project completed as per plan. | No |
| 12-0437 | PEACE Protective, Enabling, Accountable and Child Friendly Environment | FORUM SYD | Outreach activities being slowly resumed. | No |
| 25-060 | eSaksham II – Bangalore  | STATE STREET | Project implementation at the field level has been reduced | Yes  |
| 25-058 | eSaksham II – Hyderabad | STATE STREET | Project implementation at the field level has been reduced | Yes |
| 25-059 | eSaksham II – Mumbai  | STATE STREET | Project implementation at the field level has been reduced | Yes  |
| 99-0259D | SPLASH 2019- Bangalore  | Technicolor  | Project implementation at the field level has been reduced | No |
| 24-087D | IND-PENCIL  | HCL Foundation  | Project implementation at the field level has been reduced | Yes  |
| **NSPs**  |
| 20M006  | Nutrition and Health Project - Kotada  | NSP –IO  | Outreach activities being slowly resumed. | Project completed |
| G18-06 | Higher Education for 40 girls - Urban, Bengaluru | NSP- Germany  | Reduced | Project completed |
| F-20-02  | Lighting Lives through Solar Energy | NSP- France  | Reduced | No |

* Provide any additional narrative on how the COVID19 crisis affects implementation of your major grants.

Though COVID-19 cases are prevailing in our grant project locations, all our field team members are taking necessary precaution and implementing project activities adhering to the COVID-19 guidelines as laid down by the government.

Two grant project staff members in Dhar, Madhya Pradesh State have tested positive and they are under home quarantine and treatment. The Dhar Office premises has been disinfected with limited staff operating from the office. All our grant project team members across various locations are fine. These staff members are included in the overall staff diagnosed list reported under “Office & Staff Status” section.

All the field team who was reported positive in the former report have recovered and are safe.

Part 8 Funding

Provide information about potential sources of funding, including grant donors, subsidy, Emergency Action Fund, Alliance members, GIK, etc., for these emergency response efforts using the chart below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Donor** | **Program** | **Amount (USD)** | **Requested? (Y/N)** | **Confirmed? (Y/N)** |
| **Re-Allocation of Subsidy funds at LP level** | Relief phase | 392,113 | Y | Y |
| **Additional Funding from IO**  | Recovery phase | 64,412 | Y | Y |
| **Additional Funding from IO Philanthropy** | Recovery phase | 38,503 | Y | Y |
| **On-going Grant Projects** |  |  |  |  |
| HCL Foundation | Relief | 39,160 | Y | Y |
| State Street | Relief | 13,333 | Y | Y |
| ChildFund Sweden (Kavlifondet) | Relief | 17,561 | Y | Y |
| ChildFund Korea | Relief & Recovery  | 74,000 | Y  | Y |
| UNICEF | Recovery (WASH) | 30,000 | Y | Y |
| United Way | Relief |  16,630 | Y | Y |
| **New Proposals submitted to donors** |  |  |  |  |
| SBI Foundation | Recovery (Nutrition) | 122,000 | Y | N |
| HSBC | Recovery (Livelihoods) | 67,000 | Y | N |
| Scientific Games | Relief | 14,006 | Y | N |
| US Dept of State (US Embassy to India) | Relief | 100,000 | Y | N |
| EU-Building of resilience of CSOs to COVID19 | Rehabilitation | 1,178,810 | Y (CN sub.) | N |
| Aryaka | Relief | 13,333 | Y | N |
| Technicolour | Relief | 53,333 | Y | N |
| Goodyear India | Recovery (Education & Livelihoods) | 123,600 | Y | N |
| Oak North | Relief | 36,000 | Y | N |
| LG | Relief | 91,367 | Y | N |
| Goodera | Relief | 182,453 | y | N |
| HCLF | Relief & Recovery | 415,404 | y | N |
| AMCHAM | Relief | 91,367 | Y | N |
| FICCI | Relief | 91,367 | Y | N |
| HANS FOUNDATION | Relief | 53,334 | Y | N |
| ACCIONA | Relief | 15,540 | Y | N |
| Omidyar | Recovery | 82,522 | Y  |  N |
| USAID – Health  | Rehabilitation | 99,500 | Y |  N |
| Jakson – IGCL | Recovery | 40,000 | Y |  Pending |

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Part 9 Media/Communications –

* List of media who will be or have been contacted with press releases. ChildFund has been working with PR agencies to issue press releases/media briefs and engaged in several theme-based interventions.
* List of emergency CO spokespeople, including name, location, contact information, and languages spoken. Ms. Neelam Makhijani, Country Director of ChildFund India in Hindi and English.
* Plans for collecting photos/videos/stories, e.g., should an outside photographer be hired? Initiated collection of photographs through LPs and created one drive folder for uploading of distribution photographs. Not yet engaged external photographer.
* Key points for messaging and visibility, particularly any host-government sensibilities that must be considered. Currently ChildFund is adapting and utilizing the existing IEC materials from government and our own repository.
* Support needed or requested from IO, GSS or Global Teams – whether onsite or remote. Will be intimated as and when the support is required.
* Submitted our Covid-19 success stories to IO.
* Supported with designing of COVID-19 update newsletter for donors.
* Aekta Chanda, Education Specialist at ChildFund India participated in a Panel discussion on LEARNING AND BACK TO SCHOOL- THE NEW LENS , that’s was one of the five part series organized by Sphere India in partnership with CRY India under the theme**- Children’s issues - Change Strategies in COVID-19 times**. Social media post was done on this and the information was circulated internally and externally through other channels.
* Rama Rao Dammala, Specialist – DRM participated in a Facebook LIVE session organized by IO, which also included the ChildFund staff from Kenya, US and Bolivia who discussed about what kids are going through and how one can help. Social media post was done on this, Facebook Live was shared on India page and the information was circulated internally and externally through other channels.
* As part of Nutrition month celebrations, we submitted few articles focusing on Nutrition in which we mentioned about our interventions under COVID-19 response.

End of the Document