



COVID-19 GLOBAL RESPONSE

Situation Report Week 2 - March 23-31

Emergency Preparedness

No cases reported at clinics, refugee camps, or communities served.

PEOPLE

- Virtual Covid-19 prevention training rolled out to all staff. 500 employees attend first two events. Translated briefings offered. Translated health messaging posted on WhatsApp
- 4 health consults hired. An additional 7 consultants being hired and onboarded to conduct micro-trainings (see Color Movement).
- Key focal points for Covid-19 reporting are in place
- Staff protection is key issue of global HR teams
- Guidelines and budgeting tool established for hazard pay

PROGRAM RESPONSE

The **Color Movement**, including the El Salvador and Mexico border programs, works with Catholic Sisters and has focused on prevention and preparedness training and support for Catholic Sisters and the communities they serve worldwide. Virtual trainings have been conducted in 19 countries: this week trainings will be conducted in Zambia, Pakistan, India, Uganda and Zimbabwe. Alight is now working with Sisters to respond to COVID-19 in 19 countries. Meetings have been held with UN Foundation, LCWR, Vatican, and GHR Foundation to scale initiative. Next week the work will be presented all major Catholic Foundations and the USAID Office of Faith Based Initiative.

Pakistan – Worldwide, government restrictions to prevent the spread of Covid-19 have impacted schools and education. Pakistan is observing partial lockdown and all academic activities have been suspended till May 31. Pakistan Program is now researching remote learning scenarios. The team is also rising to the challenge of fighting the spread of Covid-19. They've conducted health messaging and hygiene demos in Afghan refugees villages and are considering wider reaching mass communications approach in partnership with federal and provincial governments. The team is also talking to National Disaster Management and Association of Physicians of Pakistani Descent of North America (APPNA) about various partnership options including healthcare staff training, tele-medicine, and provision of protective equipment.

Alight in **Rwanda** is both the Health as well as Water, Sanitation & Hygiene lead in three refugee camps. Rwanda program also leads 100% all critical refugee Protection and Response, among other diverse programming. Should Covid-19 cases be suspected or reported in any of the Health camps, the teams role is to identify, isolate, and coordinate with Government's three district rapid response teams for safe transport and referral to government run isolation, management and treatment centers. The team is now focused on securing \$250,000 for surge capacity – [free standing equipped isolation units, standby medical doctors, nurses and support teams, hazard/risk payment for front line teams, personal protective equipment for front line staff as well as for use by suspect cases; and additional handwashing, sanitation, disinfection and community messaging for prevention measures].

COVID-19 Confirmed Cases in Alight countries:

Cambodia: 109
Colombia: 906
DRC: 109
El Salvador: 32
Germany: 72,914
Jordan: 274
Kenya: 59
Mexico: 1,215
Myanmar: 15
Pakistan: 2,042
Rwanda: 75
Somalia: 5
South Sudan: 0
Sudan: 7
Syria: 10
Thailand: 1,771
Uganda: 44
USA: 189,633
Vietnam: 212



PROGRAM RESPONSE (continued)

Somalia is rapidly rolling out their Covid-19 response. Key activities conducted to date include:

- Staff training on infection prevention and incident management
- Community sensitization campaign on handwashing and social distancing
- Provided PPE to all staff and stockpiled essential supplies in key locations
- Installed handwashing facilities in health posts
- Shared WHO case definition and other relevant resources with frontline staff
- Established emergency task force and actively participates national and regional coordination forums.

South Sudan works in Protection sector with WASH integrated. Till the time of reporting no confirmed case of COVID -19 has been identified. The team has recognized an acute need for health messaging – particularly in remote areas. The team mobilized quickly to begin sharing information at the household level. Partial lockdown is in place. Due to porous borders, there is anxiety and fear of infection seeping through because of migrant populations.

The Sudan team is responsible for health and water services to 1,500,000 people in south and east Darfur. The team is currently working with the health advisors on multiple scenarios to ensure appropriate staffing and supplies are available. At the request of OFDA, the team submitted a Covid-19 response proposal for \$500,000.

Thailand + Myanmar have community-based health programs. Team are trained to identify and report cases. There is growing concern about protecting internally displaced communities. The begins to explore a community isolation model.

Alight **Uganda** is the Protection lead in seven settlements. As the country seeks to contain the virus, critical services in the settlements continues including new arrival support, urgent protection case management and counseling and referral services. In partnership with TO Foundation, a community-driven response is being rolled out in Nakivale Settlement. Using Kuja Kuja data, the response focuses on engaging community members to help respond to community needs. This includes employing makers who are residents to meet community handwashing needs given the fact that there is a lock down situation.

New Initiative: The Alight and IDEO.org teams are co-creating high-impact, culturally resonant and relevant **Covid-19 prevention messaging** with refugee organizations in Kenya and Uganda. WHO guidelines are being used. Messaging will roll out on digitally on within the week.

FUNDING

- OFDA and UNHCR announce Covid-19 funding, teams declare readiness and begin proposal process.
- Sudan secures \$100,000 OCHA funding for health and wash preparedness. Concept submitted to OFDA for additional \$500K for Covid-19 support.
- TO Foundation signs MoU with Alight to support community-driven response in Nakivale Settlement in Uganda. Funds first \$50K. Agree to promote through influencer network.
- \$230K in private funds raised to date. Private fundraising and outreach continues: mail sent to 33,000 households, email sent to 334,450 households, 800 calls made, 7 million digital ad impressions, MN radio ads reach 700,000 people, two press releases sent with combined 250 media hits and 170M impressions, 20 corporate meetings held

CRITICAL ISSUES

- Surge planning for all health care settings – how to understand, plan and budget for case load scenarios.
- Surge staffing challenges [i.e. border and travel restrictions, shortage of qualified staff]
- Unrestricted funds urgently needed to keep pace with need to self-fund preparedness
- Emergency food insecurity concerns related to household financial challenges from isolation measures and global economic recession. Locust swarm in East Africa also being monitored.