

Sustaining Hope

*Looking back,
moving forward..*

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ADRA India's Quarterly Newsletter October-December 2021



ADRA

Message from the Editor

Dear Reader,

What an eventful year it has been - year 2 of living with the pandemic! Just when COVID-19 was taking a backseat in our lives, it re-occured, with much more intensity. A lot of us were impacted by the virus this year, many of us lost our loved ones. But we are, inherently, resilient. We fought back and rebuilt our lives. ADRA India as an institution also focused on rebuilding its programmes and strategies to adapt to what was required. We provided medical support to hospitals during the second wave of COVID-19, scaled up our mental health awareness efforts to support people coping with loss and effects of the pandemic, provided cash assistance to communities suffering from the economic downturn, explored ways to get children back to school and reached out to people with food and non-food items. And as the situation slowly started improving, we started refocusing on the other challenges facing the marginalized communities. Now as we step into another promising year, we hope to be a better version of ourselves and serve more communities in meaningful ways. We are grateful to you - our partners and supporters for your faith in us.

Editor
Trisha Mahajan

Contributors
ADRA India Team

COVER STORY

STRENGTHENING INSTITUTIONAL PREPAREDNESS FOR COVID-19



--> **ADRA India extended institutional support to COVID-19 Care Hospital in Tinsukia by providing crucial medical equipment including hospital beds**

--> **A launch event was organized, which was graced by Minister of State for Labour and Tea Tribe Welfare, Sri Sanjoy Kishan**

--> **ADRA India has been strengthening institutional preparedness of hospitals across India for COVID-19**

Tinsukia, Assam, October 29: As part of its COVID-19 Response, ADRA India extended support to a COVID-19 Care Centre in Tinsukia. ADRA, in collaboration with National Health Mission, Assam, upgraded the Mohkhooli Model Hospital. ADRA India upgraded the hospital and provided the required medical equipment along with hospital beds. An event was organized in the hospital on October 29 to hand over of the equipment to the state government. Minister of State for Labour and Tea Tribe Welfare, Sri Sanjoy Kishan, participated in the event along with other government officials. ADRA India's Country Director, Weston Davis, handed over the equipment document to Sri Sanjoy Kishan. Adolescent girls from ADRA India's ACCHE Schools performed at the event. Workers of the Sanitary Napkin Unit set-up by ADRA India showcased their products at the venue.

Strengthening of institutional preparedness has been a priority for ADRA India ever since the second wave of COVID-19 battered the country. With hospitals and medical institutes running out of space or capacity to tackle the inflow of COVID-19 patients, the country saw thousands of preventable deaths. ADRA started providing medical equipment, including Oxygen Generation Plants (OGP) to hospitals across the country. ADRA has so far strengthened the preparedness of hospitals in 12 states of India by providing OGPs, hospital beds, Oxygen Concentrators, Ventilators, Multi-para monitors, Oxygen Flow Meters, Infant Warmers, etc.

SPECIAL FEATURE

ADRA India Rallies to Advocate for Mental Health



--> **ADRA India organized bike rallies to spread awareness on mental health in New Delhi, Assam and Uttar Pradesh**

--> **The rallies were organized on the occasion of World Mental Health on October 10, 2021**

--> **In New Delhi, the rally was followed by an interactive session on mental health by Dr Rachana Johri, Psychologist & Professor.**

ADRA India hosted bike rallies across three states on October 10, 2021 to spread awareness on World Mental Health Day. A cyclothon was organized in the national capital, New Delhi in partnership with V4A Cycling & Running Club, to spread awareness on the importance of mental health. Dawning green coloured t-shirts, around 45 participants from all walks of life cycled from for the cause. ADRA India's Country Director, Weston Davis, flagged off the Cyclothon. The rally was followed by an interactive session on Mental Health by Dr Rachana Johri, Psychologist & Director, Center for Psychotherapy and Clinical Research, Professor, School of Human Studies, Dr. B.R. Ambedkar University. Dr Johri touched upon several issues pertaining to mental health such as suicide, depression and the stigma surrounding mental illness. "The idea that it is shameful; the idea that it has happened to me or someone I love and therefore it cannot be discussed; the fear that we will not be accepted is greater than what is going to happen. So, one first step towards dealing with mental health issues is communication," said Dr Johri.

ADRA India also organized bike and bicycle rallies in Tinsukia, Assam and Baghpat, Uttar Pradesh in association with State National Health Mission. In Uttar Pradesh, members of the National Cadet Corps (NCC) took part in the rally. A street play was also organized in Assam to create awareness on mental health. Through the campaign, ADRA India aims to amplify the message, "you are not alone." The overall objective of World Mental Health Day is to raise awareness on mental health issues and to mobilize efforts in support of mental health. This year's theme for Mental Health Awareness Day on 10th October was "Mental health care for all: let's make it a reality", as set by World Health Organization (WHO).

CASH TRANSFERS

CASH TRANSFERS TO SCHOOL TEACHERS

Due to the long-term closure of schools in wake of the ongoing pandemic, several teachers around the world have lost their jobs. The need of the hour was to protect the poor and vulnerable schoolteachers in coping up with the loss of livelihood in the current situation, and to address the gap in food security & nutrition. ADRA India supported 211 teachers with one-time cash assistance in 3 Indian states of Karnataka, Tamil Nadu and Andhra Pradesh.

In Pictures: Unconditional Cash Transfers to Marginalized Communities in Tamil Nadu

ADRA India initiated the HAVAH Project with support from ADRA Canada and Canadian Foodgrains Bank (CFGFB) in 3 districts of Tamil Nadu. In Trichy, Chennai and Thiruvallur, ADRA India provided cash assistance to 1558 families reeling under the dual impact of various vulnerabilities like discrimination and poverty, and COVID-19.



Taking into consideration the social and contextual needs of the intervention area, the project also addressed the issue gender disparity by conducting sensitization sessions with the communities. To ensure sustainability of the programme's impact, ADRA India formed Advisory Committees, bringing on board people from the communities.

ANNOUNCEMENT

ADRA India Becomes Core Member of Tamil Nadu Govt Committee for Welfare of Sri Lankan Refugees

>> Tamil Nadu Government announces schemes for betterment of Sri Lankan refugees living in India, forms Advisory Committee to monitor implementation.

>> ADRA India made one of core members of the committee by the government. Committee will explore durable solutions to address challenges faced by the refugees such as lack of legal status, access to basic needs, etc.

>> ADRA India has been supporting Sri Lankan Refugees in Tamil Nadu to provide them with education, skills and opportunities.

In a major step, ADRA India was confirmed by the government of Tamil Nadu on October 25, 2021 as one of the core members of the Advisory Committee to be formed for the welfare of Sri Lankan refugees living in Tamil Nadu. Honorable Chief Minister (CM) of Tamil Nadu Mr. M.K. Stalin on August 27th 2021 had announced a slew of schemes to ensure safe and dignified lives for Sri Lankan refugees like increasing allocation of budget for clothes and vessels, scholarship for students, revolving funds for SHGs, cooking gas connections for families, waiver of cost for subsidized rice, construction of new houses and other schemes including infrastructure of refugee camps. CM announced formation of a committee to identify durable solutions for the Sri Lankan Refugees living in rehabilitation camps and outside the camps in Tamil Nadu. The advisory committee will primarily explore solutions to address the challenges being encountered by the refugees and to propose action plans the government. The committee will also monitor the implementation of the schemes/actions approved by the government. "We are very pleased that the government has recognized our work with the refugees in Tamil Nadu and has made us a part of the Advisory Committee. ADRA India has been striving to make the lives of the Sri Lankan refugees better for 15 years now. We will continue to do so with enhanced enthusiasm along with the government," said Weston Davis, Country Director at ADRA India. Through Local Economic and Social Strengthening (LESS) Project, ADRA in India and Sri Lanka works to provide education and livelihood opportunities, access to credible documentation and guidance & support on voluntary repatriation to Sri Lankan refugees (camp and non-camp) in Tamil Nadu. The LESS project is supporting 40,518 refugees in 35 camps across Tamil Nadu State. ADRA India is also supporting 4,195 refugees during the pandemic in Thiruvallur, Trichy and Chennai Districts of Tamil Nadu to create awareness on personal hygiene, providing dry rations to vulnerable households, providing hygiene kit support and cooked food to migrant workers. There are 58668 refugees (18937 families) living in camps run by government and 34123 refugees (13553 families) living outside the camps. These refugees are living in India without any legal status or identification, which is seen as a barrier for realizing durable solutions for them. The committee was formed on October 25 and consists of the Minister of Minorities Welfare and non-resident Tamils Welfare, a Member of Parliament, a Member of State Legislative Assembly, Secretary to Public Department, Director of Rehabilitation, Other Senior Officials of Government, representatives from non-government organizations, and a representative of camp and non-camp refugees. Sri Lankan refugee camps will now be addressed as Sri Lankan Rehabilitation Camps.

NEW INITIATIVE

PROVISION OF LEARNING KITS FOR SCHOOL CHILDREN

--> ADRA India reached out to children of Sri Lankan refugees facing the impact of COVID-19

--> Age-appropriate learning kits were provided to 12,902 children who missed out on their education due to school closure

--> Support was provided to both in camp refugees and those living outside camps over a period of four months from September to December

--> Refugee women, men, and children were also sensitized on COVID-19 protocols and child protection.

Nationwide lockdown due to the COVID-19 pandemic forced schools and colleges to shut down and forced the education system to adapt virtual teaching style. But, not every family, every child could afford smartphones to access online education. Many children lost out on valuable years of learning. It was harder for more marginalised sections of the society such as refugees and minority groups. With no means and no support, thousands were forced to drop out of school. Remote learning was not available to every family. Unemployed families couldn't afford fees or online education and had to stop their children's education due to debts, and no financial aid.

ADRA India as part of its COVID-19 response implemented the project "Enabling Sri Lankan refugee children both in Camps and outside to continue their learning during pandemic in Tamil Nadu" to help the Sri Lankan refugee children in getting back to their studies. In collaboration with UNHCR, ADRA India distributed age-appropriate learning kits to nearly 13,000 children in camps and outside camps in Tamil Nadu. The learning kit contained workbooks & activity books, sketch pens, crayons and few other stationery material as per the age and class. The project also undertook awareness on COVID-19 preparedness and Child protection for 9,896 children (4,894 boys and 5,002 girls) and for 2,620 refugee women and men across the state of Tamil Nadu.



IMPACT STORY

ADRA Reaches out to Refugee Children Struggling with Studies during COVID-19 Pandemic

Revathy is a 36-year-old Sri Lankan refugee living in the Bavanisagar camp in Tamil Nadu for the last 15 years. She lives with her husband, a daily wage painter, and her two daughters – an adolescent and a toddler.

It had become extremely challenging for Revathy and her husband to provide even one meal a day for their family during the pandemic. "Not being able to feed our children made us cry. To add to our misery, my daughter's education was suffering. As we waited for the government to help us, we lost hope for her education."

Revathy and some people from her community took matter in their own hands and gathered some funds to hire a tuition teacher for 4-5 children in the camp. However, gradually the funds ran out and the teacher stopped taking classes.

Having no one to guide them, the children began to waste away time and stopped studying. Virtual classes were of no use as they did not afford smartphones.

During this time, ADRA India came to the community's aid and supported them by providing age-appropriate learning kits to the children. The kit, which contains educational material as well as basic stationery, helped the children bridge the gap in their studies. Now with the study material provided by ADRA, Revathy's daughter has been able to cover up a lot of her missed syllabus and is ready to resume school. With the pandemic forcing governments to impose several lockdowns for the past 2 years, children have been suffering the most. The development of children has been impacted and the future is uncertain due to closure of educational institutes. For refugee children, the situation is tougher as they are often left out of the system.



Tamil Nadu Floods 2021

ADRA India provided dry ration to 864 poor and vulnerable households in Chennai, Chengalpattu, Pondicherry, Cuddalore, Chidambaram and Pandruti districts affected by heavy rains and flooding in Tamil Nadu in November 2021.

EDITORIAL

Accountability towards Affected Communities (Humanitarian Response)

By Imran Majid, Programme Officer, ADRA India

SDG Goal 16 of the Sustainable Development Agenda – 2030 calls for the promotion of peaceful and inclusive societies for sustainable development, the provision of access to justice for all and building effective, accountable, and inclusive institutions at all levels. Accountability and participation are a complex web between people and those who perform certain responsibilities.

The phrase 'accountability to affected people' (AAP) is widely used in the humanitarian community to refer to the commitments and mechanisms that humanitarian agencies have put in place to ensure that communities are meaningfully and continuously involved in decisions that directly impact their lives. United Nations has strong focus on accountability in its Sustainable Development Goals (SDGs). It is comprised of justifications, combined with distributions of empowerments in such a way that those affected can sanction its use. Accountability in humanitarian action has been a priority since the adoption of the code of conduct for humanitarian agencies in 1994. However, accountability and participation are a complex web between people and those who perform certain responsibilities.

Past two decades have seen an increase in the number of disasters worldwide, as well as the number of people affected. However, multiple reports questioned the intentions and contribution of humanitarian work and workers towards the affected community in the aftermath of 2010 Haiti earthquake. This brought a special focus of humanitarian community towards accountability for safeguarding the affected communities and "Do No Harm" while implementing its humanitarian intervention/relief operations.

Mostly, Humanitarian Actors (at the ground level) think accountability is not a priority, because for them what matters is to alleviate the suffering of people and saving lives. This is not because they don't care about accountability but because they see, feel and visualize the problems, suffering and impact people have been going through. This is also because the concept of accountability is defined and perceived differently by different people. The lack of a common understanding is contributed by the semantic and practical complexities of the term. The lack of emphasis on "enforcement/enforceability" is noteworthy.

The ethical case for accountability to affected populations is straightforward: affected populations are the primary stakeholders. The Core Humanitarian Standard on Quality and Accountability (CHS) sets out Nine Commitments that organizations and individuals involved in humanitarian response can use to improve the quality and effectiveness of the assistance they provide. The CHS places communities and people affected by crisis at the center of humanitarian action and promotes respect for their fundamental human rights. It is underpinned by the right to life with dignity, and the right to protection and security as set forth in international law.

In order to improve the quality and accountability of humanitarian action, humanitarian organizations are expected to work and improve their systems, structures, and practices in alignment with the Core Humanitarian Standards (CHS). Any discussion of accountability must begin and end with this question: as a result of our actions/policies/decisions, have we improved our ability to provide aid – quickly, competently, equitably, and in a dignified manner – to those who most need it? To be accountable to our beneficiaries, we must bridge the gap between what we practice and what we preach.. Accountability to have real meaning in humanitarian action doesn't just mean to hold people accountable but it also means to be responsible and accountable for your actions and ensure that the humanitarian assistance is based on the context and need of affected communities. Adhering to accountability in humanitarian action, this is what NGO's need to ensure:

- Approaches to accountability and participation will need to start from a clear understanding of the expectations, roles and responsibilities of different actors in humanitarian action.
- Humanitarian action occurs in different contexts with the different roles of actors. For example, accountability mechanisms will function differently in different states/countries depending on the capacity of the government; capacity of civil society, the state-society relations, and the relationship/balance of power between international NGOs and local or national ones.
- Identify different levels of responsibility and the different accountability relationships these require. For example, at the strategic programme level, are responsibilities, and thus accountability, from implementing agencies owed to the government, rather than individuals? Is it possible or even desirable to have affected individuals or community orgs participating in macro-level decision-making, and, if this instead involves some sort of representative structure, does it make sense to do this outside/ replace the government representation structure where that exists?
- Consider new responsibilities that humanitarian actors will need to meet in order to respond effectively to new types of crises, in a rapidly changing world. For example, how can humanitarian actors be held accountable for the responsibilities of being more adaptive, more innovative, more anticipatory of new crises, and more strategic in their preparedness and response?
- Consider new technologies and approaches from outside the humanitarian sector. What innovations and new approaches are being used to manage data, share information, and provide checks and balances to stakeholders/consumers in other sectors? How might private sector models of accountability, based around choice, be imported to the humanitarian sector.

Need clear criteria for applying participatory or accountability mechanisms based on evidence of how these approaches work in different contexts. At the System level, this means thinking about accountability and participation under the broader umbrella of system governance, asking: which areas of humanitarian action do we think need to be more participatory? And which areas do we think participation is not possible or not desirable, in which case we need accountability systems to address information and influence asymmetries? At the Organizational level, this means generating lessons on the comparative advantages and disadvantages between co-decision making processes and mechanisms for appraisal and approval.

NEWS & UPDATES

World Polio Day



ADRA India observed World Polio Day on October 24 in Assam and Uttar Pradesh. A programme was conducted in Assam to create awareness among pregnant women and lactating mothers on the importance of Polio vaccination. The team shared the successes of frontline workers in eradicating polio. In UP, the team sensitized groups including children, community members, ASHA workers on importance of Polio vaccine through e-rikshaw rally, Community Action Group meeting, and seminars.

Global Handwashing Day



More than 5,000 people, including women, men, and children were reached through various activities on Global Handwashing Day on October 15. Core Group Polio Project team in Uttar Pradesh conducted handwashing demonstration sessions at Brick kilns, nomadic sites, Madrasas (education Institutions of Muslims), and primary schools. The team also organized drawing competitions on handwashing in schools and other educational institutes.

World Immunization Day



World Immunization Day was celebrated by ADRA India in Assam and Uttar Pradesh on November 9, 10 and 11. A total of 39 immunization sessions were organized in Brick kilns and High-Risk Group (HRG) sites. A total of 602 children and 144 pregnant women received all due antigens on World Immunization Day. Over 1500 lactating mothers and pregnant women were reached through Audio Visual messages on COVID-19 vaccination and Routine Immunization.

Children's Day Celebration



ADRA India conducted special awareness sessions for school children in Uttar Pradesh and Assam on National Children's Day on November 14 and International Children's Day on November 19. Discussions were held on topics such as maintaining COVID-19 Appropriate Behaviour, proper way to wash hands, and importance of vaccination. Environmental concerns on climate change and the reasons for afforestation were discussed during these sessions and the role of youth in contributing to a greener future was stressed upon. Over 1700 children were reached in Assam through these sessions.

Water Pipe Connection Set-Up



Under the TMI Project, ADRA India initiated construction of Drinking Water Pipe Connection in Nagaland. The lack of drinking water is a serious problem that affects the quality of life of people in many parts of the country. Women have to travel long distances on a daily basis to get clean water for their households. ADRA identified the problem in various areas and came up with the solution of building borewells and setting-up water connections in rural areas. Under the TMI project, ADRA is working with local communities to reach out to the people reeling from the impact of COVID-19



Core Group team held a felicitation ceremony after achieving 100% coverage for 1st dose of COVID-19 vaccination at Madaiyan Shadi Village, UP



ADRA India provided ICU beds to hospitals in Shimla and Garo Hills between October-December, 20201



ADRA India, in collaboration with National Health Mission, Assam held a street play to spread awareness during Mental Health Week, 2021



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