COVID-19 Response

Situation report #22 | 6 May 2021

World Vision is responding* to the devastating impact of COVID-19 in

more than 70 countries.

Our US\$350 million response aims to reach, 72 million people, including 36 million children, especially the most vulnerable.

*responding includes field programming and/or fundraising



COVID-19 CASES: 154,680,561 DEATHS: 3,233,845

(COVID-19 case and death figures. Source: WHO, 6 May 2021)

People reached



62,482,034

Men 16,640,084

** Children 27,472,982

Women 18,368,968 Boys 13,455,658 Girls 14,017,324

(Based on figures as of 5 May 2021)

3 million. Cases are surging. India has recorded **new daily highs for infections every day since 22** significant level of global immunity'. April, even crossing more than 400,000 cases in a day on several days.

On 30 April, India declared a category III national response within the global response. This devastating second wave has stretched India's long-underfunded public health-care system to the limit, the sudden avalanche of cases leading to acute shortages of oxygen, medicine, and beds as well as overflowing crematoriums.

now been administered to fully vaccinate about 8% of the needs them. population – but the distribution is lopsided. Countries

Deaths from COVID-19 have surpassed with the highest incomes are getting vaccinated 25 times faster than those with the lowest. At this pace, it will take years to achieve 'a

> As of 4 May, 21 countries (15 of which are island nations or microstates with small populations) were the only countries to have vaccinated more than 30% of their populations. With the exception of Chile and Hungary, the remaining countries (Israel, the United Arab Emirates, the United States, and the United Kingdom) are some of the wealthiest countries in the world. Additionally, 'the wealthiest 27 countries have 35.9% of the vaccinations but only 10.5% of the world's population'. (Bloomberg, 2021)

Yet, globally, hope is on the horizon for many countries. World Vision continues to advocate for vaccine equity around the More than 1 billion vaccine doses have been given. Yet the world. No one is safe until everyone is safe. We won't be able to start vaccines that are being distributed are mostly reaching the restoring economies and building back until there is guaranteed, global countries with the highest incomes. "Enough doses have access to COVID-19 vaccines, tests, and treatments for everyone who

World Vision



As the world commemorated one year since COVID-19 was declared a pandemic by the World Health Organization, World Vision announced Phase 3 of what has been our largest ever global emergency response.

We took the findings from the COVID-19 Response's (COVER) six month real-time learning exercise, which captured the input of more than 3,000 staff across 56 countries, 500 external partners, and 1,600 community members in six countries, to shape the next phase of the response.

In Phase 3 of COVER, we will:

- expand our scope in vaccination programming
- integrate but continue to respond with agility
- strive to target the most vulnerable
- increase our focus on evidence and impact

With this, we introduced 11 new indicators within our existing objectives to capture the expansion of our work:



People reached with vaccine acceptance messaging



Studies conducted to inform vaccine messaging



Faith leaders trained to support vaccine acceptance



Children with disabilities receiving extra support during emergencies



Loans disbursed by VisionFund to support recovery (value)



Field offices participating in vaccine coordinating body



CHWs trained for vaccine acceptance



Frontline workers trained on COVID-19 vaccination



People trained on Citizen Voice and Action related to vaccine acceptance



Loans disbursed by VisionFund to support recovery (number)



Savings group members supported with VisionFund savings group linkage loans

Field offices will begin reporting fully on their work in these areas starting in July 2021.





Regional overviews

(figures as of 5 May 2021)





People reached 31,946,922



Children reached 14,001,855

Situation overview

Increasing vulnerabilities and worsening humanitarian needs due to lockdowns have devastated livelihoods in sub-Saharan Africa.

School closures have negatively affected children's learning and led to higher teenage pregnancy rates. According to a recent <u>World Vision study</u>, as many as 1 million girls may drop out of school across sub-Saharan Africa.

Reduced funding commitments and COVID-19 lockdowns have increased vulnerabilities amongst forced migration populations (i.e. internally displaced persons and refugees) and migrant workers across east, west, and southern regions.

Countries across sub-Saharan Africa are facing a triple threat of issues from health, climate change, and loss of livelihoods with the COVID-19 pandemic; desert locust infestations in East Africa devestating vegetation; and flooding in parts of West and East Africa resulting in loss of life, displacement, infrastructure damage, inaccessibility to basic services, and crop disruptions.

Most governments throughout the region have begun to roll out COVID-19 vaccines to citizens, starting with frontline workers and medical staff.

Response highlights

- More than 7 million people across six countries in East Africa are on the brink of starvation, in part due to the COVID-19 pandemic. World Vision has declared a multi-country category III East Africa Hunger Emergency Response (EAHER) for Ethiopia, Somalia, South Sudan, and Sudan, and category II response for Uganda and Kenya in an effort to reach approximately 2.4 million people, including 490,000 children.
- Southern Africa's recent rainy season (October 2020 to March 2021) was relatively good for most countries, which is likely to result in improved harvests. However, Angola suffered a severe drought during this time. An objective assessment of the food security situation is taking place within existing seasonal inter-agency vulnerability assessment structures. Analysis will be available by July 2021.
- As conflict, climate change, and COVID-19 impacts continue to drive high levels of humanitarian need and population displacement, particularly across the Central Sahel, World Vision has declared a category III response in Burkina Faso (the fifth category III response in West Africa) to assist 420,000 crisis-affected people in the northern part of the country.





People reached 16,444,666

Children reached 6,952,372

Situation overview

It has been more than a year since Asia Pacific began responding to the impacts and aftershocks of the pandemic's initial spread throughout the region. But a second wave surge of COVID-19 across the Indian subcontinent and the Pacific is a pressing concern.

With over 400,000 new cases a day in India alone, public health systems across India and neighbouring countries, like Nepal and Sri Lanka, are under immense pressure while the vulnerabilities of children and the poor are being further exacerbated. Nepal is now recording 57 times as many cases as a month ago, while Lanka reports its largest number of new infections since the start of the pandemic. Overflowing hospitals and crematoria are in direct contrast with the short supply of oxygen and life-saving drugs in many parts of these countries. The governments of India, Nepal, and Lanka have called for international support and to our local World Vision offices for assistance.

In the Pacific, the challenges of a lack of healthcare infrastructure, community awareness, and low vaccination acceptance are compounded by recent cyclones.

Key concerns

- The COVID-19 pandemic has exposed a sharp digital divide along gender lines in Asia, with girls facing more hurdles than boys in accessing the Internet while also suffering the brunt of rising online abuse. We call on governments and all stakeholders to update, reform, and enact legal frameworks on online harassment and violence against all girls and young women in consideration of specific intersectional characteristics, such as race, age, disability, ethnicity, sexual orientation, identity, and expression.
- In light of the COVID-19 vaccine roll-out, national vaccination plans need to have specific mapping of vulnerable populations apart from health workers, the elderly and people with underlying conditions. Plans need to be specific in including refugees and populations living in the urban hotspots.
- National vaccination plans need to ensure community engagement and representation in coordination structures created for vaccine roll-out and count with longterm and sufficient funding for community participation, including faith leaders.



World Vision

Regional overviews

(figures as of 5 May 2021)





People reached 10,145,672



Children reached 4,524,604

Situation overview

The Americas continue to accumulate the largest amount of COVID-19 cases with 43% of all cases worldwide as of 10 April. And with just 8.4% of the world's population, countries in the Latin America and the Caribbean region account for 26% of all COVID-19 deaths globally (2,908,152).

Mortality rates (per 100,000 inhabitants) are also particularly high throughout the Americas; the United States leads with 168.7. followed by Peru (162), Mexico (161) and Brazil (153). "Since 1 January 2021, there have been ... 475,000 [deaths] in the region, which is equivalent to 1,000 totally full type 7478 aircraft." said Dr Carissa Etienne. Director of the Pan American Health Organization (PAHO) on 3rd April.

The Latin America and Caribbean region is currently experiencing the beginning of a third wave propelled by an extremely slow vaccination process - with the exception of Chile, which has enough vaccines to cover 40% of its population. Mexico, which is 3rd globally in number of deaths, has only • vaccinated 0.9% of its 117 million inhabitants. This lethargic vaccination process, affected by poor logistics and a complex political landscape in many cases, threatens to bring a new wave that could be longer than the prior ones, warned PAHO.

Response highlights

- 114 million children across the region remain out of school due to the pandemic, the highest worldwide. UNICEF has called it 'the worst educational crisis in modern history'. A year into the pandemic, only seven countries in the region have completely reopened schools. Keeping schools closed increases children's risk of abuse and induced poverty in the future.
- A surge of cases in Brazil, Peru, Uruguay, Chile, and Colombia indicates the ignition of a third wave of infections, leading to further lockdowns and border closures. In Brazil alone, 13.6 million people live in urban slums with limited access to clean water and hygiene.
- The region's economy has been the hardest hit, contracting 7.7% in 2020 with 3 million businesses closing due to the panedmic. The loss of income and livelihoods threaten millions of vulnerable families with hunger, forcing children into labour.
- Countries like El Salvador and Guatemala have reported an increase of child marriage and pregnancies in girls ages 10 to 14.
- Deteriorated livelihoods have increased migration, and more than 14.000 unaccompanied children from Central America were reportedly in custody of United States border patrol authorities as of 18 March 2021.



Middle East and **Eastern Europe** region

Situation overview

As of 14 April 2021, Bosnia and Herzegovina's per capita COVID-19 death rate was 5th in the world. World Vision is concerned that only 23,000 vaccines have been ordered thus far and medical facilities are overloaded. Although reliable statistics are not available for all contexts, spikes in disease, shortages of vaccines, and growing fears of health system overload are felt in many places across the region, including Lebanon, Syria (both northwest and government of Syria), Iraq, and Jerusalem, West Bank, and Gaza (JWG).

Lebanon, Jordan, Syria, and Iraq face escalating COVID-19 challenges. With the exception of Syria, all announced extensions to lockdowns or new restrictions. However, work is continuing across World Vision offices. Common concerns across the region are avoiding super-spreader events during Western Easter (April), Orthodox Easter (May), Ramadan, and Eid.

While vaccine access remains sporadic across the region, staff in most offices across the region have had access based on their country's eligibility requirements. Unfortunately, vaccine hesitancy is still an issue. Extensive activities to boost acceptance are underway in all offices.



People reached 2,645,323



Children reached 1,337,364

Response highlights

- World Vision worked with faith leaders and Afghanistan's government to forbid the use of the *flak* in corporal punishment, which is particularly important as COVID-19 stresses have increased domestic violence against children.
- WV Lebanon is using World Vision's Channels of Hope's new vaccine module in their UNICEF C4D grant activities plans. This project model has raised UNICEF's and WHO's interest around the potential to work with faith leaders across the region.
- COVID-19 has exacerbated vulnerabilities in child protection and education across Syria, Jordan, and Turkey. These concerns, raised by World Vision's Syria Response, were reflected in the co-chairs' (the European Union and United Nations) joint statement at the Syria V Brussels Conference in March.
- WV Albania and WV Kosovo supported a child to speak about the impact of COVID-19 on children and young people at the national forum, "Governance for Change: Civil Society Proposals," based on World Vision's Act NOW report.
- WV Romania started an immunisation awareness campaign urging people to get the COVID-19 vaccine and busting the most prevalent myths. They are also advocating for the inclusion of faith leaders in local authority campaigns.



COVID-19 Response global highlights





RESPONSE GOAL

To limit the spread of COVID-19 and reduce its impact on vulnerable children and families

Strategic objectives



1. Scale up preventative measures to limit the spread of disease



3. Support children affected by COVID-19 with education, child protection, food security, and livelihoods



2. Strengthen health systems and workers



4. Collaborate and advocate to ensure vulnerable children are protected



OBJECTIVE 1: Scale up preventative measures to limit the spread of disease



33,082,766

People reached through promotion of preventative behaviours



5,956,880

Information, education. and communication materials printed and distributed



15,362,808

Community members provided preventative materials



5,305,898

Handwashing supplies distributed



2,883,408

Comprehensive hygiene kits distributed



330,947

Cleaning kits distributed to vulnerable communities



108,993

Community-level public handwashing stations established or maintained



117,389

Water, sanitation, and hygiene facilities constructed or rehabilitated



146,468

Faith leaders disseminating preventative measures



4,023*

People reached with vaccine acceptance messaging



Faith leaders trained to support vaccine acceptance



OBJECTIVE 2: Strengthen health systems and workers



172,804

Community health workers trained and supported



456,712

Medical personnel provided with personal protective equipment (PPE)



9,897,039

Masks distributed. including to health facilities, health workers. and communities



4.911.866

Glove sets distributed, including to health facilities. health workers, and communities



18,885

Medical facilities assisted



509,012

Disinfectant kits distributed to healthcare facilities



444.632

People supported with the securing of safe quarantine and/ or isolation spaces



1,217

Ouarantine and isolation spaces supported, rehabilitated, or set up



8,666

People provided transportation support



CHWs trained for vaccine acceptance



Frontline workers trained on COVID-19 vaccination



262*

People trained on Citizen Voice and Action related to vaccine acceptance



OBJECTIVE 3: Support for children affected by COVID-19 through education, child protection, food security, and livelihoods



3,722,272

People reached with information, education, and communication psychosocial support materials



1,269,471

Education materials provided to enable or support remote learning



2,003,821

People provided with education support or training



1,592,544

Children reached with targeted, age-specific health education



62,361

Teachers provided with education training and support



US\$25,826,509

Cash and voucher assistance distributed



2,206,121

People reached with cash and voucher assistance



7,101,535

People reached with food security assistance



1,522,643

Children supported with child protection programming



168,389

Frontline actors reached or trained on child protection programming



182,180

Individuals supported with livelihoods training



154,157

Households provided livelihoods assets

VisionFund's Response highlights

Mexico

- Since January 2021, VisionFund has worked with clients struggling to repay their recovery loans due to the pandemic to restructure loan repayment plans.
- A survey conducted in March 2021 of recovery loan recipients found that:
 - o 92% felt like the recovery loan they had received (US\$491 on average) was enough to help them meet their plans and goals
 - o 98% considered the recovery loan to have been helpful during the pandemic
 - 43% said the loan met their needs but 15% wished the amounts were higher or that the repayment frequency was different

Guatemala

 Many families are dealing with reduced incomes due to cuts in pay or jobloss and business recovery has been sluggish as reductions in restrictions have been slow. VisionFund is working to support clients' recovery in this economic environment through recovery loans.

Honduras

- In November 2020, VisionFund deferred all loan repayments until April 2021 due to compounded emergencies when, on top of strict closures and restrictions due to the pandemic, two hurricanes devastated many parts of the country affecting thousands of people. As part of relief efforts, VisionFund has helped 22 clients refinance their loans so they can continue to focus on reactivating their businesses.
- VisionFund has worked to adapt their products to support clients, and to date 17,020 participants have taken their 'empowered worldview' training.



6,039

Savings groups organised



1

Children with disabilities receiving extra support during emergencies



182.822**

Loans disbursed VisionFund to support recovery (number)



US\$112,091,618**

Loans disbursed by VisionFund to support recovery (value)



34,249**

Savings group members supported with VisionFund savings group linkage loans

^{*}This is a new indicator added in March 2021 with the release of Response Plan Phase 3. Not all offices have begun these new activities.

^{**}This is a new indicator added in April 2021. Only countries with VisionFund activities are reporting on this.



OBJECTIVE 4: Collaborate and advocate to ensure vulnerable children are protected



296

Global, regional and national policy changes achieved through advocacy and external engagement to improve the international responses to COVID-19



1,103

External engagements where World Vision is advocating on priorities, including ending violence against children in the context of COVID-19



251,597,000

Vulnerable children impacted by new or amended policies achieved through advocacy and external engagement



7*

Field offices participating in vaccine coordinating body

- In commemoration of the one year anniversary of COVID-19 being declared a pandemic and reflect on lessons learnt, World Vision released four reports, <u>One year on: COVID-19 Response</u>, <u>COVID-19 Response Plan 3.0</u>, <u>Agile in adversity: How COVID-19 changed the way World Vision works</u>, and <u>Faith in action: Power of faith leaders to fight a pandemic</u> to reflect on the lessons learnt from COVER's real-time learning exercise and set the way forward with solutions to tackle vaccine hesitancy.
- World Vision continues to co-lead COVAX's demand working group and was elected as a civil society representative to the Act-A Alliance Coordinating Body for Health System Connector.
- World Vision co-organised the Global Week of Prayer for COVID-19 (22-27 March 2021) with the World Council of Churches, The Salvation Army, Mennonite World Council, and World Evangelical Alliance. World Vision's CEO, Andrew Morley, and the World Health Organisation's Director-General jointly launched the event.
- Ahead of the Syria V Brussels conference in March 2021, WV Syria provided input to the co-hosts, the European Union and United Nations, data on the exacerbated vulnerabilities of child protection and education following COVID-19 pandemic, which resulted in the final pledging conference report prioritising access to remote education and issues of child labour and early marriage.
- WV Albania and WV Kosovo supported a child activist to speak at a national forum, "Governance for Change: Civil Society Proposals," about the impact of COVID-19 on children and young people, including findings from World Vision's Act NOW report, <u>COVID-19 and children: How a global pandemic is changing the lives of children in Albania and Kosovo</u>.

*This is a new indicator added in March 2021 with the release of Response Plan Phase 3. Not all offices have begun these new activities.

(Based on figures as of 5 May 2021)

OBJECTIVE 4.1: Engage communities to ensure programme relevance as context changes, in the overall global results framework



90%

of respondents reported satisfaction with World Vision interventions



81%

of respondents reported they received information about World Vision, expected staff behaviour, World Vision programmes, and how to provide feedback



79%

of complaints/feedback from community resolved based on agreed timeline

(indicator data based on 25 field offices reporting against these indicators as of 30 March 2021)

Humanitarian accountability

A key focus for World Vision's COVID-19 Response is to provide information, consult people on their needs and how they want to participate in their own self-recovery, and take action based on the feedback and complaints we hear from people so that we remain accountable to the children and communities that we serve. Here are the top trends of what communities are telling us this reporting period:

25%

of field offices reported that communities gave feedback requesting more support to enact the COVID-19 preventive behaviour messaging, that they needed more PPE, more WASH facilities, or were not able to follow social distancing advice due to work or family commitments

32%

of field offices reported community feedback about education/school support/home schooling, including requests for home schooling support and school reopening

45%

of field offices reported that community members submitted feedback requesting more information about World Vision programmes and distributions, for information to be shared through different channels or in different languages, or to clarify confusion and rumours

35%

of field offices reported community feedback requesting food security and livelihoods support

(qualitative data is based on narrative reporting from 32 field offices as of 30 March 2021)

We listen to communities and respond

In many countries there is still hesitancy within communities to accepting a COVID-19 vaccine, which has led to some communities in Malawi alleging that World Vision is promoting a vaccine which is meant to kill people in rural areas. World Vision Malawi is working with community leaders to provide accurate, fact-based information about the COVID-19 vaccines. Staff who have already taken the vaccine are also sharing testimonials with communities to combat misinformation.

In Burundi, community representatives and leaders requested World Vision's support to help schools and health facilities access clean water. In response, World Vision Burundi helped the community build rainwater harvesting mechanisms and pipeline water supply systems.

Due to a huge increase in COVID-19 cases in Jerusalem/West Bank/Gaza (JWG), World Vision received requests from community leaders and the health ministry to support quarantine and treatment spaces, schools, and other community centres. World Vision JWG provided disinfectant materials, thermometers, and medical gloves to emergency committees, health clinics, and schools; delivered face masks to education and health directorates' staff; and distributed essential tools and equipment to health centres, including an oxygen concentrator, glucometer, refrigerator, and pulse oximeter.



Resources and publications

Reports

COVID-19 Response Plan 3.0

One year on: COVID-19 Response

Agile in adversity: How COVID-19 changed the way World Vision works

Faith in action: Power of faith leaders to fight a pandemic

World Vision COVID-19 emergency response:

<u>100 days on</u>

COVID-19 Aftershocks: Secondary impacts threaten more children's lives than disease itself

COVID-19 Aftershocks: A perfect storm

COVID-19 Aftershocks: Out of time

COVID-19 Aftershocks: Access denied

COVID-19 Aftershocks: Deadly waves

Children's voices in times of COVID-19

ACT NOW: Experiences and recommendations of girls and boys on the impact of COVID-19

ACT NOW: regional reports

Policy briefs

COVID-19 & the child protection crisis in Afghanistan

COVID-19 & the fragile cities in the Northern Triangle of Central America (English and Spanish)

COVID-19 & child protection in fragile and humanitarian contexts

COVID-19 & risks to children's health and nutrition

COVID-19 & disruptions to education

COVID-19 & urgent needs of child-sensitive social protection

COVID-19 & the risks to children in urban contexts

COVID-19 & poverty and hunger

COVID-19 & faith actors

Learn more about World Vision's response to COVID-19, please visit: www.wvi.org.

We would like to thank the hundreds of thousands of generous child sponsors, donors, partners, and supporters whose contributions make this work possible, including:





















Global Affairs Canada Affaires mondiales Canada







FOR FURTHER INFORMATION, PLEASE CONTACT:

Justin Byworth
Global Lead
Disaster Management
E: justin byworth@wvi.org

Jennifer Neelsen Response Director Global COVID-19 Response E: jennifer_neelsen@wvi.org

Micah Branaman
Communications Technical Director
Global COVID-19 Response
E: micah_branaman@wvi.org