

100 Days and Counting

UNICEF and the Private Sector Join
Forces to Combat India's Second
Wave of COVID-19

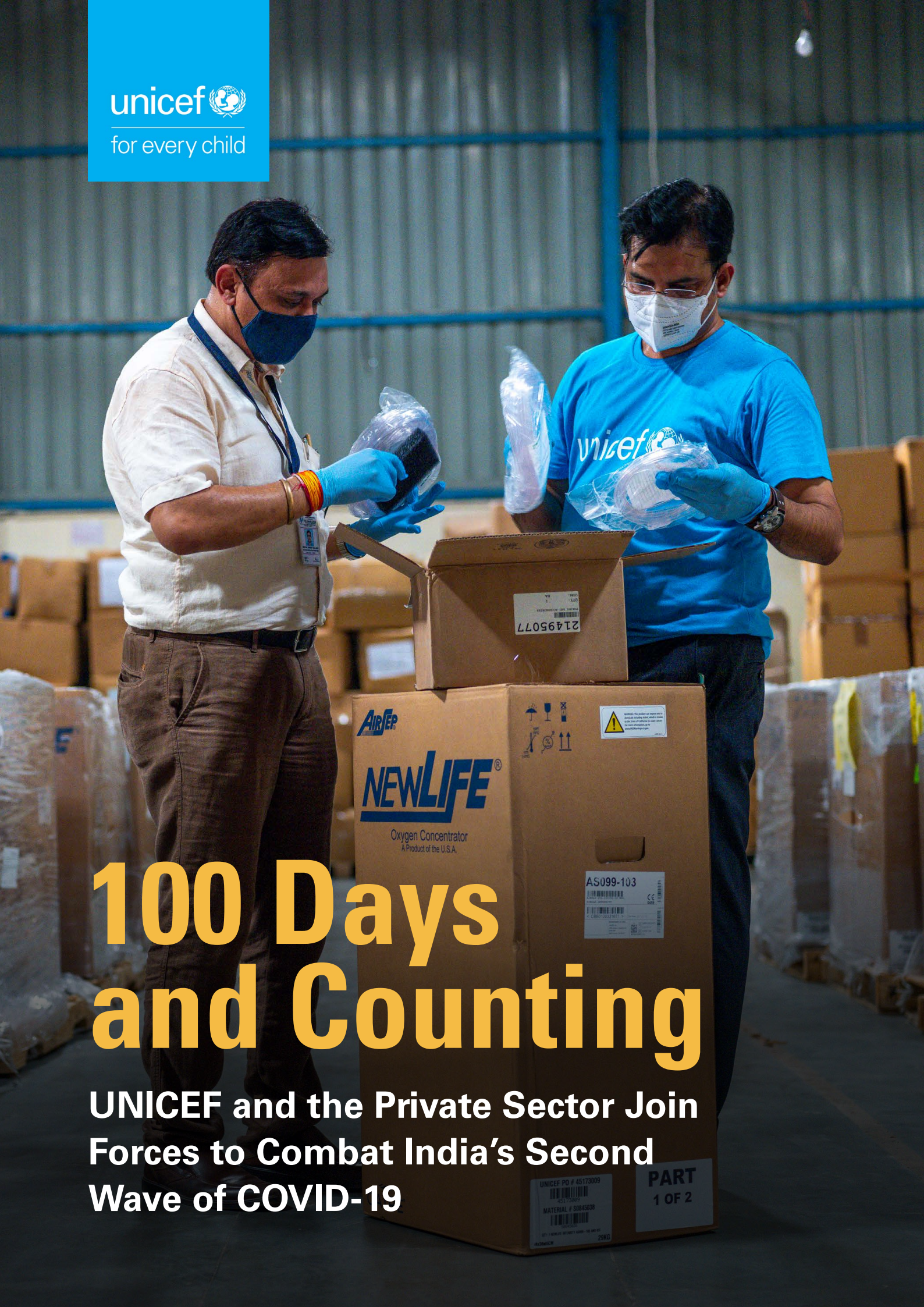




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Foreword

For some time after the first wave of COVID-19 pandemic abated last year, things in India began to regularize. Schools started to reopen for senior classes and many restrictions were released across the states. As 2021 progressed, however, India was confronted by a devastating second wave of the pandemic that put tens of millions of children at risk. With the sudden spike in cases, spiraling death rates and no signs of slowing down, the second wave posed a historic challenge to the country.

Rising to the challenge, UNICEF leveraged its extensive presence across 24 states, and its dual humanitarian and development mandate to play a key role in the COVID-19 pandemic response led by the Government of India. UNICEF teams utilized their technical and logistical expertise to deliver oxygen generation plants, oxygen concentrators, testing equipment, and other essential supplies across the country, in addition to providing comprehensive support to health care providers. As always, partnerships and voluntary funding were essential to UNICEF's work to support and improve the lives of children and young people. Private sector partners came forward to generously aid the nationwide COVID-19 pandemic response efforts.

On behalf of the UNICEF India Country Office, I wish to express my sincere gratitude to the private sector's generous contribution to our emergency response in India in 2021. **UNICEF thanks and greatly appreciates corporates, major donors, foundations, individuals, and UNICEF National Committees who came together to meet the immediate needs of affected**

children and their families in India, while the country battled with this deadly wave of the pandemic. Now more than ever, children need global action to invest in and build resilient systems and services for health, nutrition, sanitation, child protection, and social protection. that reach everyone, and ensure that budget cuts and economic downturns do not harm them.

This 100-day digest, in addition to being a testimony to the generous contribution of donors and partners to help us cope with the second wave, is also a tribute to the private sector. They have played a central role in the procurement of life-saving and diagnostic equipment and poised UNICEF India to make sure that COVID-19 treatments urgently reached those who needed them the most.

We look forward to working even more closely with our public and private sector partners to help structure and implement UNICEF and Government of India's next Country Programme of Cooperation (2023-27) that will set out to address the major challenges that the pandemic and its aftermath poses for our communities, and most importantly, our children and young people.

Once again, a big thanks!



●
Dr. Yasmin Ali Haque
UNICEF India
Representative



UNICEF India and the Private Sector Rising to Action

The magnitude of this quickly unfolding crisis was so massive that the Indian healthcare system reached a breaking point.

By April 2021, the number of deaths and stories of irreparable loss had spiked to an unprecedented height. In response, UNICEF India stepped up its emergency efforts to avert further loss of life and reduce the burden of disease. By early May, the daily number of new reported COVID-19 cases had sky-rocketed to more than 400,000 and 4,000+ deaths.

During this time, a critical shortage of oxygen for treatment and the limited availability of testing machines to manage an overwhelming caseload further posed challenges. The nationwide COVID-19 response was battling on, but fatigue in all forms was beginning to get visible.

15 APRIL



Daily cases in India reached a new peak, leading the global count and declaring an emergency. UNICEF India stepped up its emergency response to addressing lifesaving needs

21 APRIL



An emergency appeal worth USD 21 million for oxygen and testing supplies went live

12 MAY



A wider Humanitarian Appeal for Children worth USD 126 million launched

15 MAY



Procurement, distribution of diagnostic equipment and installation of oxygen plants expanded in full swing

9 JUNE



First oxygen plant installed, and 1,234 (of the planned 4650) oxygen concentrators delivered

25 JULY



USD 50 million raised for the India's Humanitarian Appeal for Children to combat COVID-19 and its after-effects



The private sector came to the rescue and played a crucial role in turning the tide against COVID-19. Corporate houses, foundations, high net worth individuals, and National Committees, around the globe and within India, joined forces to invest in strengthening the health infrastructure of India, and support UNICEF in putting up a stronger fight against COVID-19.

This collaboration at a time of a dire situation became more important given that the number of people affected by the second wave continued to increase every day. The private sector, which is an integral part of the communities, was among the first to respond on the ground and therefore played an instrumental role in localized response to the second wave. The primary focus was to improve access to oxygen care, testing, and screening.

Even before the crisis hit the headlines, our teams were on the ground, building on the relationship of trust that had been fostered with the communities we work with.



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Hands at work to install oxygen plants across India. Hospitals and health centres across the country were severely overstrained to support families desperately looking for help for their sick relatives.



COVID-19 Pandemic's Aftershock

The nationwide crisis in India sparked by the COVID-19 pandemic, and particularly the second wave, has been unparalleled in its scope and the inequality of its impact. In just one year, it wiped out hard-earned development gains for children and pushed more families into poverty. It also revealed, and in many cases widened the gap between those who have access to critical services and support and those who don't.



At the same time, this enormous crisis also revealed the strength and character of UNICEF and the global family. As the world recovers and rebuilds itself, it underscores the critical importance of our organization's work.

The pandemic undoubtedly presents a massive challenge, but it is also an opportunity to work harder to reach the 2030 Agenda and the Sustainable Development Goals (SDGs). In the last two years, these goals have suffered a big setback. The pandemic and the lockdowns imposed by India in response have affected different sectors, ranging from healthcare to education, nutrition to sanitation. Since the SDGs provide a barometer for the progress of a nation—or the lack of it—they can also be used to measure the extent of this crisis and guide the economic reconstruction processes that countries have attempted to begin in the second year of the pandemic.



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Dr Anudiya Bhargav, Head of Microbiology Department, at the State Virology Lab, Department of Microbiology, AIIMS, Raipur, Chhattisgarh.



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UNICEF health and supply team members working closely on the procurement process of the WIC.

The following snapshot assesses the impact of the COVID-19 crisis in India from a holistic sustainable development-oriented perspective and shows how children are the worst affected.

The imperative to create new incentives to direct private investment to support the SDGs has never been clearer. The COVID-19 pandemic has threatened progress on the SDGs across all countries and added to existing financing gaps for the 2030 Agenda, especially in developing countries such as India. Achieving the SDGs requires steering private capital towards investments that can advance progress on the goals.



The shutdown of schools means many children miss out on their only hot meal provided as mid-day meal in public schools. India could be seeing an increase in child undernutrition, stunting, reversing decades of gains.



There is reduced access to reproductive, maternal, newborn and child health services (3.5 million fewer children were reported as fully immunized between April and June 2020, compared with the same period in 2019).



School closures affected 286 million children last year and with the ongoing wave, schools are currently closed nation-wide. The digital divide is significant making access to remote learning challenging, with only 24 per cent of households having internet access. The glaring 'digital divide' between rural and urban areas further aggravates the problem.



Protection risks have also increased due to the pandemic. Last year, reports of violence against children increased by 50 per cent with access to child protection services remaining limited. Women and girls are at greater risk of gender-based violence and increased burden of household chores and unpaid care. Restrictive gender norms may prevent girls, including adolescents, from engaging in and benefiting from crisis preparedness and response.



COVID-19 pandemic has yet again highlighted the requirement of ensuring access to safe water as well as sanitation for all communities alike. As per the World Health Organization (WHO), access to clean water for performing basic hygiene functions and washing hands has been termed as a 'challenge'. The growing demand for water comes at a time when there is little room for rising availability, water levels are dropping, and water quality problems are increasingly coming to the fore.



Supplying Lifesaving Equipment for Immediate Response

India's healthcare system has undergone tremendous pressure as a result of the COVID-19 pandemic, particularly in the first semester of 2021 when the number of cases had seen a rapid surge. As the numbers rose across the country, so did the demand for essential lifesaving services.

Since the onset of the 'second wave' crisis, UNICEF has stepped up its support to the COVID-19 response along two major pillars of action:

▶ **Immediate emergency support to prevent, contain, and manage COVID-19.**

▶ **Policy and programmatic actions aimed at sustaining essential preventive and curative health services for women and children.**



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Oxygen concentrator being used for a child with complaints of stomach and breathing distress at Sonarpur Rural Hospital, West Bengal.



© UNICEF/UN0463116/Altaf Ahmad

Workers unload cartons containing face masks and face shields supplied by UNICEF to state health department, from Government Medical College, Srinagar, Jammu & Kashmir.

UNICEF India's COVID-19 response focussed on procurement of emergency supplies and equipment and in supporting health care providers.

✓ Boosting oxygen care:

During the reported period, UNICEF procured and installed nine oxygen generation plants in various states across India (Northeast India, Gujarat, Maharashtra) and 6,728 oxygen concentrators and 512 high-flow nasal cannulas to treatment facilities.

✓ Enhancing testing and screening capacity:

To augment the testing capacity of the country, UNICEF supplied and installed 173 RT-PCR machines, 53 thermal scanners, and 19 RNA extraction machines across multiple states and union territories. To protect healthcare workers, some 10.5 million personal protective equipment (PPE) were procured and distributed.

✓ Digital aid for capacity building:

Videos on the use of oxygen concentrators were produced by NHRSC with the support of UNICEF to enhance the capacity of frontline workers (<https://nhrscindia.org/training-material-0>).

✓ Strengthening cold chain systems:

Thanks to Global Act-A HAC appeal and other donors' support, cold chain never became a bottleneck in India's ambitious target to vaccinate 944 million. Around 3,694 pieces of electrical cold chain equipment (cold-rooms, refrigerators, deep freezers) and 234,578 non-electrical cold chain

equipment (cold box, vaccine carriers) have been delivered across India benefiting more than 310 million people. In addition, it has benefited 26 million children and 30 million pregnant women receiving routine immunization services.



26 Oxygen generation plants procured during the 100-day reporting period*.

** 31 OGP's have been procured as on 1 September 2021*

6,728 Oxygen concentrators

512 High-flow nasal cannulas

distributed to treatment facilities



10.5 million

Personal protection equipment (PPE) procured and distributed

173 RT-PCR machines

53 Thermal scanners

19 RNA extraction machines

supplied and installed across multiple states and union territories

3,694 electrical cold chain equipment

234,578 non-electrical cold chain equipment

delivered across India



310 m
People



26 m
Children



30 m
Pregnant women

Benefitted from cold chain strengthening



Oxygen for the Future

Amongst the lasting images left on our collective consciousness during the peak of the COVID-19 second wave was that of people gasping for breath. In India, the pandemic had almost slowed down before gaining pace dramatically towards the end of March 2021, and then spreading rapidly across the country. As hospitals and healthcare workers stretched themselves thin under the surmounting pressure, cases of critical shortage of oxygen—essential for treatment—emerged from different parts of the nation.

UNICEF was ready for this challenge.

Much before the crisis hit in the form of the 'second wave', UNICEF had the groundwork for oxygen response well in place. So when medical oxygen supply took a hit, UNICEF could amplify its response quickly and effectively. To begin with, UNICEF's field offices, along with the state governments, mapped the oxygen needs of hospitals

across the country. Each healthcare facility differed in infrastructure capacity and preparedness. The identified hospitals were equipped with the necessary infrastructure to install oxygen plants, and assessments were carried out to ascertain site readiness; vetted suppliers were roped in who could provide and ship plants.

UNICEF and the Ministry of Health and Family Welfare (MoHFW) and the Indian Council of Medical Research (ICMR) worked together to develop an equitable distribution plan for life saving supplies. After procurement and installation of the equipment, they were monitored on the basis of standard performance review mechanism as established by the government.

That being said, this challenge was no ordinary battle. It created situations which required all hands on deck. The unwavering support of the private sector at this point,



Oxygen Generation plant at Jamnagar, Gujarat.

particularly in procuring essential oxygen therapy equipments, helped UNICEF take the bull by its horns and reach those who needed urgent help in coping with COVID-19 in all corners of the country.

The pandemic, however, is not yet over. And so, continued support to keep the momentum going until the battle is won is critical, to say the least.

But there's more.



Investment in oxygen plants goes beyond the realm of COVID-19. If maintained well, these can last for more than 10 years and be used in different health emergencies, other than COVID-19. This life-saving medical gas helps patients breathe when they cannot do so on their own –be it children with severe pneumonia or hypoxemia, newborns and mothers with birth complications, or patients with severe COVID-19. Oxygen therapy can improve the clinical outcome for children—and adults— suffering from severe asthma, lung diseases, and respiratory diseases. It is also a health system need during surgery and anaesthesia.

Access to medical oxygen supply is particularly crucial when looked from the perspective that India, in 2018, had the second-highest number of pneumonia-related deaths in children under five years of age. Unfortunately, oxygen therapy is a 'luxury' many children don't have access to because of various limitations. To add to this, WHO has said that the pandemic has further exacerbated this problem, particularly in 'double-burden' countries which are contending with high levels of

pneumonia and COVID-19. A continued support towards medical oxygen supply therefore is an investment towards health and life in itself in the long-term.

In most cases, portable devices such as concentrators proved to be best option for remote and low-resource areas where oxygen generation plants and cylinder delivery networks do not exist. For several states, this provided massive boost to health care facilities that were ill-equipped with this life-saving resource.

Ironic as it may seem, the COVID-19 pandemic has brought us at the helm of a unique opportunity: to save hundreds of thousands of young lives that are lost to preventable causes. The private sector has helped UNICEF in creating a strong momentum that can only lead towards enabling a better future for children; the challenge now is to keep it alive and kicking.



Daughter attending to her mother at the Baruipur Super Specialty Hospital and sub-divisional Hospital, West Bengal.



Contribution in Kind

The second wave of COVID-19 proved to be an unprecedented storm, creating an extraordinary demand for supplies and challenges in logistics, operations and credible information dissemination. From the onset of the outbreak, these challenges continuously escalated as the pandemic worsened.

However, the contributions in-kind from the private sector provided important support to UNICEF programmes and helped us address identified needs for specific goods and services for children. Many private sector organizations joined hands to provide in-kind contribution of products and services via UNICEF to frontline workers and vulnerable communities in helping fight against COVID-19. Businesses provided much-needed resources, channelized credible COVID-19 appropriate behaviour messages through their communication

networks, and their expertise for the supply of essential goods across the country. Through these timely and critical contributions, UNICEF reached COVID-19 patients, frontline workers, health workers, and other vulnerable groups across India.

In-kind contributions of products, services and technical expertise help UNICEF meet development and humanitarian challenges as well as to build its own institutional capacity for more effective management and delivery of programme and services. These contributions help UNICEF meet its core commitments for children by providing rapid response to emergency supply and logistics needs by leveraging the power of business and markets.



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Specialists interacts with the health workers while oxygen concentrators donated in kind are installed in a public health facility in Uttar Pradesh.



© UNICEF/UN0479959/Mitra

Oxygen Concentrators being unloaded at Baruiapur store.



Advocacy and Communication

The pandemic is a race against time. As new variants show resistance to COVID-19 vaccines, we don't have a moment to lose. Nobody is safe until we are all safe, which is why we are appealing to everyone, everywhere to "Join the Race to End COVID-19".



Our advocacy goal is to build a nationwide movement for vaccine equity as a contribution to an overall strengthening of health systems and improved health outcomes for all children.

COVID-19 is exacerbating existing inequities and threatening to reverse decades of progress on child survival. Overburdened health centers and health workers are

struggling to deliver essential services like immunization, which is compounded by vaccination misinformation. This has flourished under the pandemic, with false information on social media creating a parallel 'infodemic'.

Combined with the factors above, this increases hesitancy and reduces public demand for routine immunization – and potentially for a COVID-19 vaccine.

UNICEF continued to support the MoHFW and government departments to ensure that information and messaging on the evolving nature of COVID-19 reaches all communities. The spread of the infection to rural and vulnerable tribal communities has led to strong apprehensions amongst many, resulting in a renewed effort on social and behaviour change communication activities.



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Muhammad Yunus, coordinator for COVID-19 awareness programme wearing a PPE & spreading awareness to take precaution during COVID-19 as community members listen to him at the slum area in M-East ward-Chembur, Mumbai, India.

New user-friendly communication material and guidelines on vaccination for pregnant and lactating women, children with COVID-19, black fungus, and a standardized training package have been developed to train frontline health workers, Panchayat representatives, women self-help groups, and NGOs on the new dimensions of COVID-19 (this includes behaviours such as self-isolation, use of oximeters, psychosocial care, etc). UNICEF supported the mapping and training of 1,000 NGOs that are actively engaged in community engagement on COVID-19 Appropriate Behaviour (CAB) and vaccine demand generation.

For greater outreach on COVID-19 prevention, media partnerships were established with several major media houses. UNICEF media mentions were 2,215 with an overall reach of 900 million. While there was an increased attention in media on the disease itself, there was relatively less focus on its impact on the most vulnerable group. To deal with this shrinking space, there were continuous engagements with media professionals from across the country through online outreach, in addition to regular print and TV media outreach, on COVID-19. In addition, partnership with 195 Community Radio Stations in 26 states helped reach over 1.9 million people through 36 languages and dialects on COVID-19 appropriate behaviours. UNICEF helped MOHFW establish the National Media Rapid Response Room (or Media War Room) at MoHFW in December 2020 and since then continues to fully support real time media monitoring to guide an agile response to misinformation by providing accurate information, analyses and cases studies. To date, the Media War Room has published over 500 op-eds and articles, supported 450 radio programmes, facilitated discussions on 100 TV programmes engaging top experts in creating awareness around the vaccine, CAB, dispelling rumours and misinformation, addressing vaccine

hesitancy, mental health, and other COVID-19 related issues. We also supported the COVID-19 vaccine campaign roll-out across digital platforms, initially in a phased approach balancing hesitancy, eagerness and CAB proactively across various audiences and then switched to a more reactive emergency response mode as the second wave hit. Content co-created with children brought child rights issues (including violence against children and nutrition) to digital audiences, while our content around supplies and donor support to the second wave showed UNICEF in action on the ground as part of the pandemic response. Each message on COVID-19 from UNICEF India appeared 1.5 million times on average on Facebook in India between January and June 2021.



UNICEF Media mentions

2,215

900 million

overall reach



Partnership with

196

*Community Radio Stations
in 26 states*

1.9 million

reach through 36 languages



Message on COVID-19 from
UNICEF India appeared on
Facebook

1.5 million

*on average in India between
January - June ' 21*



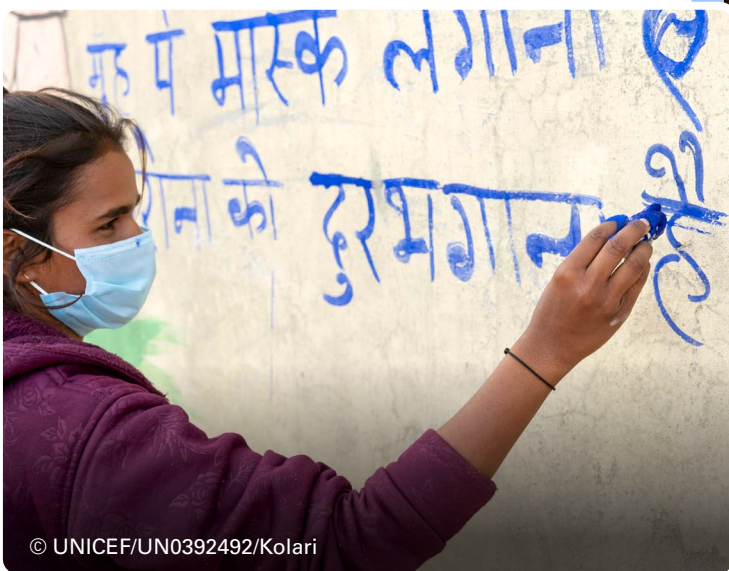
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MuhammadYunus (right) & Salaam Shaikh, coordinators for COVID-19 awareness programme wearing a PPE (Personal protective equipment) pose for photograph at a lane between houses in slum area in M-East ward-Chembur, Mumbai, India.



© UNICEF/UNI347241/Singh

A volunteer demonstrates of washing of hands to children outside a community toilet under Flush The Virus (FTV) programme during COVID-19 in M-East ward-Chembur, Mumbai, India.



© UNICEF/UN0392492/Kolari

Jashana Kumari ,18 , a tribal community member and her friends took up the responsibility of spreading the message of wearing mask, importance of hand washing and social distancing in Tunka Village, Abu Road Block, Sirohi district, Rajasthan, India.



© UNICEF/UN0459595/Koyande

Spreading awareness messages for promoting the registration of eligible populations for COVID-19 vaccination.



Programmatic Interventions

The second wave of the COVID-19 pandemic impacted and continues to disrupt children's lives and compromise their most fundamental rights in many ways. But it also provides a critical window of opportunity to create and re-imagine a healthier, safer, fairer, more equitable, and inclusive environment for today's children and future generations. The India Country Office had a unique role to play in leading unprecedented and transformative action to deliver in the following programme areas:

Child Protection:

UNICEF India and its partners found new and flexible ways by training 94,478 functionaries to respond to child protection and gender-based violence, thereby promoting the best interests of 981,428 women and children. Efforts to prevent, mitigate, and respond to mental health risks caused by the pandemic and lockdowns were intensified by expanding helpline services for 171,479 children while leveraging opportunities to strengthen the protective environment for 5,049 children who had lost their parents/caregivers to COVID-19 and also for those children (14,857) who were on the move or engaged as labour.

Education:

When educational facilities across India closed in 2020 to help contain COVID-19, many families found themselves struggling to keep their children's education on track. Since the school closures (extended in 2021, as well), UNICEF India has been extending support to the central and state governments with distance learning options for 15.5 million children (out of which 51 per cent are girls) to ensure continuity and roll out remote learning packages (through volunteers and worksheets)

to support children during quarantine. Technical assistance has been extended to the Ministry of Education and several state departments to develop guidelines for school reopening, responsive parenting at home, and remedial learning programmes. The government and UNICEF are fully prepared to facilitate the various reopening and transitions, including implementation of Safe School Protocols.

Water, Sanitation, and Hygiene (WASH):

The COVID-19 pandemic has once again brought into focus the importance of awareness and access to hygiene and sanitation. To prevent further outbreak of COVID-19, UNICEF India accelerated the supply of critical WASH essentials and services such as soaps and minimal-touch to 2.4 million at-risk people. UNICEF worked closely with state governments to advocate for the hygiene agenda by training a cadre of 461,561 service providers (such as tea garden workers, teachers, health/nutrition workers, sanitation foot soldiers, NGO representatives, and community mobilizers) on infection prevention and control interventions as critical elements of pandemic prevention, preparedness, and response. Over 13 million people were reached with handwashing messaging

and efforts are in place to the roll out of a national hand hygiene roadmap together with WHO with the participation of key line ministries.

Nutrition:

Programmes to protect, promote and support essential nutrition services for children with malnutrition, pregnant women, and adolescents were intensified. Around 67,825 children with severe and acute malnutrition have been treated through the facility and community-based programs between January and March, 87 per cent of pregnant women and 13 per cent of adolescents received iron and folic acid suppleness in all states till June 2021. Also, to prevent maternal, adolescent, and childhood obesity, a national consultation was convened by UNICEF India and NITI Aayog (India's premier policy think tank).



Children study while they follow social distancing in the open area at a primary Government school in Muttuck, Assam.

Adolescent Development and Participation:

As a devastating second wave of COVID-19 swept across India, young people took on an urgent call to action in the fight against it. YuWaah, as a multi-stakeholder coalition with government, civil society, and the private sector, was positioned to activate a pan-India movement to young people (called young warriors) across the country to address the ongoing COVID-19 crisis. Innovative initiatives to train young warriors in myth-busting tools to detect falsehood/misinformation, encouraging registration for vaccination, and enabling peer-to-peer mental health support were pioneered by young people. Around 1,167,900 adolescents and young people were mobilized as child protection advocates including around promoting COVID-19 appropriate behaviour and around issues of child marriage through various platforms in 17 states.



Savita Devi, an Accredited Social Health Activist (ASHA) provides IFA syrup to Chahat during Home based newborn care (HBNC) in Ahran Purwa Barkat, Chittrakoot.



I remember an incident when a young girl urgently required oxygen at 2 AM. While it was an extremely challenging time for the family, our network of volunteers arranged it promptly. It was a touching moment when the doctor said that this timely support played a big part in saving the patient's life. Such experiences boost our morale and keep us going to help more people.

- Dipen Ghadiya, Young Warrior from Gujarat



Through constant efforts like taking elders to vaccination camps, I have ensured that people of my village have got vaccinated. I have also helped organize COVID-19 tests in the village and coordinated home isolation for those who show any symptoms, while promoting COVID-19 appropriate behaviour.

- Raavi Gulzar, YuWaah Volunteer, Punjab

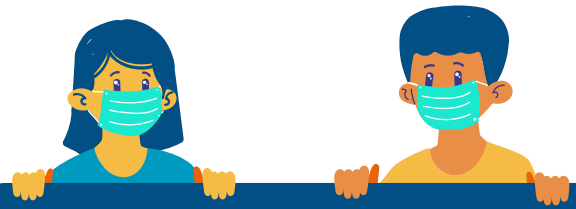


We must empower young warriors with the skills needed for active citizenship. They have to face so many unprecedented challenges such as climate change. They need more safe spaces and enabling platforms to solve at scale through collaboration and co-creation.

- Rohini Nikelani Philanthropies



Actions as above are, of course, just the tip of the iceberg when it comes to everything we do and advocate for every single day.



Young Warrior Movement - Progress 10th May - 12th Aug' 21

Actions taken by Young People

directly on U-Report, IVR, Community Radio & capacity building sessions, knowledge hub or through partner channels



6.6 million

7,681+

Capacity Building sessions

2.1 m

engaged participations by young people

140,000

Teachers & other stakeholders engaged

Communication Reach

450 m+

Social media impressions

500 m+

Media impressions

Knowledge Hub

with verified information across

13 languages

<http://prachicp.com/youngwarriors>



1,350+

Partners Engagement

581

Govt.

541

CSOs

28

Private sectors

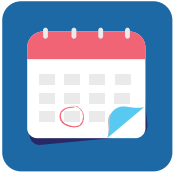
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UN Agencies

pledging support to engage young people

Key Partners

MoYAS, MoHFW, CBSE, MoE, AICTE, UGC, BSG, NCC, Rotaract, Internshala, AIM, TCS, Capgemini, Tech Mahindra, Vartaleap, Rohini Nilekani Philanthropies, Facebook, ATE Chandra, Purpose, Mckinsey, Hitachi, UNICEF, YuWaah, UN Agencies



Together, We Recover Better

For most of us around the world, COVID-19 is the first-of-its-kind global crisis to have hit in our lifetime. Barely anything or anyone has been left untouched. The pandemic created a sort of ripple effect that did not just impact health and the economy, but also education and nutrition. Children have been the worst affected. The pandemic has reversed gains made across various indicators of children's rights, such as education, nutrition, and child protection. It has widened the inequity gap, and an unmitigated third wave could result in even more devastating consequences.

It is a challenging situation; a crisis of massive and unprecedented proportion. COVID-19 has set the clock back by almost 30 years on milestones achieved in children's health and well-being, on their rights and protection. In 2020, when the pandemic first hit and India went on a lockdown, reports of violence against children increased by

50 per cent with access to child protection services remaining limited. It particularly increased the vulnerability of women and girls who are at a greater risk of gender-based violence and increased burden of household chores. The virus also left a staggering number of children orphaned and facing an uncertain future ahead.

Nearly 170 million children in India are vulnerable and/ or experiencing difficult circumstances; millions are 'on the move', away from safe shelter, education, and healthcare. The numbers are mindboggling. But this is no time to be discouraged. Extraordinary times call for extraordinary efforts. Hence, we need to work harder, and take action towards a better future. For many children, 'normal' as we know it, was not good enough to begin with. Therefore the aim should not be to just go back to the pre-COVID world, but to build a more robust and resilient one.



© UNICEF/UN0378341/Panjwani

UNICEF India coordinators Shipla ben and Kanubhai conduct meetings with children under Alternative care and mental health psycho social support engagement at Village Kantivaas, Banaskantha, Gujarat, India.

Sample this. Only 24 per cent households in India have internet access. So when the pandemic forced schools to go online, an enormous amount of children could not access it. In other words, the digital divide left hundreds of children bereft of their basic right. In most cases, these are the very children who do not have access to quality education. The COVID-19 crisis has therefore presented us with an opportunity to connect every child and every school to the internet and provide digitally driven tools that can improve the overall quality of education, much beyond the pandemic.

The world has seen that the virus, unlike our society, does not discriminate. It took into its grip both the rich and the poor, individuals of all race and religion. Even then, the marginalised and those on the fringes have been pushed further by its impact. Children from impoverished background were not just less likely to access remote learning during this time but also to hand-washing tools and services and proper nutrition. Almost 56 per cent of the population in rural India do not have access to toilets, and only 12 per cent schools have hand-washing stations with soap and water. Less than 50 per cent of the rural population uses safely managed drinking water. One the main mantras during this pandemic is to ensure safe hygiene practices. How is practice (of safe hygiene practices) possible without access?

Similarly, it's a stark contrast of two realities when on the one hand there are discussions about immunity-boosting supplements to fight the COVID-19 infection, and on the other, India bears the burden of one-third of under-5 deaths in the world, caused by malnutrition. A healthy diet, essential to growth and development, still remains beyond the reach of a large number of children in India. Malnutrition can cause frequent infections and stunting, and India is home to one-third of the world's stunted children.

With every problem there are two options: to look at the glass as half-empty, or half-full. The pandemic has unlocked a unique potential of closing some of the glaring gaps of inequity in education, nutrition, WASH, and child protection. Here is an opportunity to set up climate resilient water supply and security programmes as India's vulnerability to climate-related disasters like droughts and floods, earthquakes and tsunamis, increases. This is a chance to strengthen essential health services for all, and in particular for children and pregnant women; to strength protection and response services that work to address violence against children, including online safety and psycho-social support.

As UNICEF and its partners—both big and small, private and public—continue to amplify its efforts to help end the pandemic and build a stronger, healthier, safer world, it is time to remain steadfast in support and become a part in creating history. Our children need real-heroes and are counting on us—we owe it to them, one generation to the next.



As COVID-19 disrupts societies, development agendas must adjust accordingly. There is a need for inclusive multilateralism, drawing on the critical contributions of businesses, foundations, philanthropies, etc. By unlocking public-private and private-private cooperation for a sustainable response to COVID-19 challenges, it is possible to recover better and build more resilient communities



Partner's Corner



At this critical time where many places such as Brazil and India are continuing to live with the harsh reality of COVID-19, we are committed to accelerating medical assistance and equitable access to the vaccine. We encourage private companies to join UNICEF's efforts with us in this unprecedented global fight.

- Aiman Ezzat, CEO of the Capgemini Group



On @UNICEF day, I applaud #UNICEF and its partners for working tirelessly over last 74 years towards protecting children rights & furthering their interests.

- Dr. Harsh Vardhan, Former Minister of Health and Family Welfare of India



Private philanthropists are uniquely placed to respond to this global emergency and help UNICEF close the funding gaps. Thanks to the agility and speed of private grant-making, our funds can help accelerate the vaccine roll-out, respond quickly to changing circumstances, and enable UNICEF to work with countries to invest in sustainable improvements in healthcare systems, tackle misinformation, and engage communities – all things that UNICEF does best.

- UNICEF's International Council (comprising of various philanthropists globally)

Why Partner with UNICEF



Our global and countrywide scope in expertise in procurement, distribution, and logistics make us the only organization in the world who can now help deliver COVID-19 response services at an even bigger scale.



UNICEF is the world's leading institution on immunization. We immunize more than 2 billion (nearly half of the world's) children, reaching the most remote places on earth, saving tens of millions of children's lives in the recent decades.



UNICEF has been called upon by ACT-A to lead global COVID-19 vaccine advocacy efforts because it is the only organization with the immunization infrastructure, experience, scale, and access capabilities already in place to make it possible.



As an organization, we make the impossible possible. UNICEF is the go-to organization to take on the toughest challenges and accomplish feats that can change the world.



UNICEF is active in 24 states across India. Our vast network of skilled and committed staff means we can take successful approaches from one place in the world and adapt them to meet challenges elsewhere, helping drive results for children and young people at a nationwide scale.



UNICEF, given its extensive footprint across the length and breadth of India, and with its history and legacy of work at the grassroots levels, makes for a comprehensive and complete partner for this very critical and time-sensitive communication and community engagement effort, to help India address the COVID-19 pandemic. The UNICEF teams create local partnerships, enable regional voices, and leverage relevant and impactful messaging means and channels to disseminate context-specific and public-facing information, thus ably supporting the national and state government efforts.

- Bill and Melinda Gates Foundation in India



Pema Khandu པེམ་ཁ་ཕ་ནུ་ ✓
@PemaKhanduBJP

We hugely appreciate the support of @UNICEF with the oxygen plants for #Arunachal to fight #covid.

Thanks #UNICEF for delivery of these critical machineries for #Bordumsa, #Namsai #Chongkham #Ruksin & #Daporijo much ahead of the scheduled date.



- Mr Pema Khandu, Chief Minister of Arunachal Pradesh

Why Partner with UNICEF



UNICEF and partners have also supported the Government of India in the acceleration of its national COVID-19 vaccine roll out to equitably reach all population groups and implement a communication strategy across the country to intensify community engagement and social mobilization.



UNICEF is funded entirely by public and private voluntary contributions – and we are committed to making every dollar go further to save and improve children and young people’s lives. Buying big and being transparent enables us to shape markets, cut costs and increase efficiency – and, most importantly, save more lives.



Our field office teams are on the ground before, during and after emergencies. Our supply chain and local presence mean we can get help to where it’s needed fast.



Just as important, UNICEF stays and delivers. How we respond in crises lays the foundation for long-term development, just as how we work in non-crisis situations helps communities to weather future shocks.



IKEA has had a long standing partnership with UNICEF in India driven by the purpose to improve lives of tens of thousands of vulnerable children. The need for coming together became more

important than ever during the Covid-19 pandemic. Together with UNICEF India, we have supported frontline workers and our communities with IKEA products and Personal Protective Equipment across several states.

- Peter Betzel, CEO and Chief Sustainability Officer, IKEA India



Since the start of COVID-19, Google.org's top priority has always been to help communities and organizations in need during these challenging times. We're proud to support UNICEF's work as they have the experience and expertise to effectively get urgent medical supplies to those who need it the most in India. Together, we hope to help India recover and get through this tough time.

- Annie Lewin, Senior Director, Google.org

If we don't get this job done it is children who will pay the highest price. Even if children will not initially be vaccinated against COVID-19, vaccinating adults will benefit children and enable the organization to improve their situation in the mid to long term. Progress on children's rights has been set back by 30 years across multiple indicators such as education, nutrition, child protection, with millions of children out of school, and vulnerable to exploitation. UNICEF must help end the pandemic and redouble its urgent efforts to avoid a lost generation.

Our ongoing work protects children from common preventable diseases with childhood vaccinations and this is under critical threat due to COVID-19 disrupting health, nutrition, social protection, WASH services, and related infrastructure. Ending this pandemic will ensure we can continue protecting children.



Taking action today with UNICEF and our partners – big and small, private and public – means you're joining the race to end COVID-19 and making history with UNICEF.

UNICEF India is proud to have private sector donors from around the globe participate in this extraordinary period of global recovery, standing with children and our partners with hope and optimism, undaunted by the challenges before us.

A big thanks to their generous contribution!



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Make Everyday Brighter

Ambika Paul Foundation

Amdocs

Ansell Limited

Brenda and Stéphane Bancel

Bumble

CIBC

DBS Bank India Limited

Deutsche Bank

Elara Technologies

Elara Technologies through its subsidiaries (Proptiger.com, Makaan.com & Housing.com)

Elizabeth and Michael Keeley

Employees of American Family Insurance

Employees of Hewlett-Packard

Employees of Liberty Mutual

Employees of SAP in India

Employees of the World Bank

Ericsson

FamPay Solutions

Grofers



G-Pay

HDFC

IKEA India Private Limited

IMC Foundation

International Council of
Community Churches

International Development
and Relief Foundation (IDRF)

Islamic Relief Canada

Kearney

LVMH

Maisons Du Monde

McKinsey Knowledge Centre

MicroGo

PricewaterhouseCoopers
(PwC) India Foundation
(PwCIF)

PricewaterhouseCoopers
Foundation, Hongkong

PVR

ReNew Power

South Asian Bar Association
of North America Foundation

Teck Resources

The Giving Back Fund

WSP

Yes Bank

*UNICEF does not endorse any company, brand, product or service

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for every child

