ACKNOWLEDGMENT

RAF Global has undertaken humanitarian response work in India, Mozambique and D.R.Congo during the years 2020 and 2021 when these countries experienced catastrophic effects of the Coronavirus disease as well as the pandemic. RAF Global thanks its benevolent donors both individual and institutional, for making this work possible. We express our deepest gratitude to Devimco SARL and Ste. Biso na Biso, Dhrolia Family Foundation, Zarina Foundation, STAR Group, WIPRO, Maputo Optometristas Lda, Ste Fourways SARL, Ste.Shayna, Mr. Kamlesh Shukla, Ste ACOKIN SARL, KINPLAST, Icon Media, Newlys, SOFIA, Afriglobal, Glacier, Galaxy, Unique Pharma and the Indian Community. Besides, we thank our partnering institutions in India, D.R.Congo and Mozambique for implementation support, hospitals, schools, orphanages, Provincial Governments, District Administration, Health, Agriculture, Education and other departments, Ministries and other agencies for collaboration that created greater impact.

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A patient avails RAF Global’s support in Porbandar district (Gujarat), India, 2021.
Humanity across the globe has lived under unprecedented times since beginning of the year 2020, when Coronavirus disease (Covid-19), a contagious viral infection caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) was first reported in human beings in Wuhan, Hubei province, China in late December 2019. Within a short span of time, Covid-19 disease spread across continents, and was subsequently declared by the World Health Organisation (WHO) as a ‘Public Health Emergency of International Concern’. National Governments world over responded soon after, with lockdowns and restrictions as a key preventive measure. Covid-19 disease still held almost all countries under siege. The official global death toll by the end of December 2020 stood at 1.8 million as per the World Health Organisation while, the agency accepts that at least 3 million global deaths in the year 2020 are attributable to Covid-19.

The first phase of surge in Covid-19 disease in 2020 exposed human frailties vis a vis emerging infectious diseases that have an animal origin and get transmitted into human species through an intermediary host. There is a growing understanding now that controlling zoonotic pathogens at their animal source is the most effective and economic way of protecting humanity. While the global scientific community and national governments in several countries supported acceleration of vaccine development by December 2020 followed by mass vaccination efforts everywhere, soon after, new variants of concern began to be reported from various parts of the world such as the Alpha and Beta variants in U.K and South Africa (December, 2020), Gamma in Brazil (January 2021), Delta in India (December, 2020) and the most recent, Omicron in South Africa (November, 2021). The total number of human death attributed to SARS-CoV-2 disease during these phases of pandemic is no less than 20 million (global excess deaths as estimated by The Economist).

Since 2020, the pandemic –the total effect of surge in the disease and risk mitigation and response – has exposed the low level of system preparedness to fight highly contagious, infectious disease such as Covid-19 that has caused tremendous stress on public healthcare system across countries. It has also raised questions on loss of livelihoods due to prolonged shutdown, and the need to improve

COO, RAF (Mozambique) in discussion with health centre staff, 2020
social protection coverage and delivery for the most marginalised and vulnerable sections of society. The experiences have already begun shaping the social policies of responsive Governments that give weighted consideration to the poor, marginalised and vulnerable groups in decision-making.

As of March 2022, the Covid-19 disease continues to infect large numbers in certain parts of Asia, Europe and USA while in other regions evidence suggests that it is on the ebb. Societies everywhere have prevailed over the disease, returning to a new normal, despite the disease's uncomfortable presence. Scientific projections inform us that the world will be free of this disease when most of the human race is vaccinated with the mandatory doses and boosters (for specific age groups).

Globally, besides the response of national and sub-national Governments, the battle against Covid-19 disease was fought on several fronts to protect humanity, significantly, by the scientific community, medical and allied professionals, front-line community outreach workers and the civil society institutions, influencers and leaders working on the ground. Global—a private, not-for-profit, international organisation that is functioning since 2015, with a reach of over 1 million beneficiaries across several countries of Africa and Asia including India, has responded to the humanitarian crisis and undertook several measures in alleviating the miseries of the poorest and vulnerable segments who were affected by the pandemic. This document provides insight into RAF Global's humanitarian response in three countries of Asia and Africa continents where RAF Global has regular programme interventions. In one way, the document is also a record of how RAF Global is evolving its programmes to be responsive to emergencies such as local and global public health crises, besides investing significantly in public health infrastructure in countries where it works.
A man receives his regular medicine for treatment of Leprosy from RAF Global supported hospital in Jharkhand, INDIA despite the pandemic
View of a PSA Medical Oxygen Generation Plant set up by RAF Global and Zarina Foundation at GMERS General Hospital, Junagadh (Gujarat) India, 2021
Humanitarian response is an emerging programme area at RAF Global which makes us an organisation open to learning, in terms of establishing and/or refining good practices pertaining to what is to be done (programme response and standards) and how it is to be done (processes and systems). RAF Global’s engagements in Asia and Africa during the spread of Coronavirus disease globally, give us a firm ground to respond ably to deal with future crises of the scale as witnessed in the years, 2020 and 2021.

RAF Global operates across countries such as India, Democratic Republic of Congo and Mozambique as registered foundations, working to improve the Quality of Life of specific regions, and disadvantaged communities and social groups. During any epidemic outbreak or health emergency, it is the state that has to set a framework for society and economy, steering them justly and harmoniously towards a safer future. As a civil society organisation, RAF Global reflects a relationship of complementarities with respect to the state efforts. RAF Global raises resources for such efforts mostly through individual donors and several times, through institutional donors. Therefore, we put in our frugal resources where they are most needed, as well as to create ripples of positive outcomes that save lives, enables them to eventually wean off relief support, and rebuild their lives.

RAF Global has responded to the Coronavirus disease epidemic in its intervention countries taking into consideration the status of existing public health systems, demography, remoteness of habitations as well as disease burden in rural areas and need of vulnerable groups such as children and elderly and patients of cataract, leprosy and other health conditions, apart from assessing its own capacities and making use of its project assets such as the vocational training centres and bakery that were the only hope of women and youth to earn a living during the pandemic.
In normal times, RAF Global has considered schools as entry points to introduce and reinforce awareness on a range of health and safety areas such as hand washing, malaria prevention, prevention of HIV transmission and care of affected people, menstrual hygiene management, reproductive health and road safety measures. The schools were shut for a long period in several locations during the aggravated Covid situation. Therefore only when the pandemic weakened, did we engage with school children on Covid prevention as well as other health areas, besides preparing the ground for children to return to a school environment that is engaging (through equipping classrooms with benches and chairs, renovating playgrounds and sports equipments, and initiating foundational learning initiatives to address the loss of learning among primary school children during the pandemic). These post pandemic efforts are beyond the scope of this report and deserve standalone attention, considering that it is established now that children have been the hidden victims of Covid-19 induced pandemic.

RAF Global’s overall approach towards Covid relief across regions is diagrammatically presented below. It reflects the diverse levels of our response and doing what was essential (based on needs assessment) and feasible (considering restriction on movement and maintaining safety protocols). We do not assess the requirements as hierarchies as we believe that sustaining lives require multiple interventions and responses simultaneously, not necessarily graded.
1. Improving the Capacity of Public Health Institutions (District hospitals, CHCs, Health centres) with supplies of Oxygen cylinders, concentrators, medical equipments & consumables for Covid patients, medical attendants & frontline health professionals

2. Establishing additional Covid care centre/quarantine or patient isolation facility at district level in coordination with the District Administration

3. Raise the critical lifesaving capacities of Public Health Institutions in the district headquarters and block level hospitals

4. Providing food and medical supplies to high risk people (urban informal sector workers, children in institutional care, the elderly, leprosy & cataract patients, cancer patients in RAF supported facilities & undergoing treatment and Afghan refugees

5. Protecting fragile livelihoods through restoring trainings imparted by vocational centres, providing large orders for mask making, and promoting other income generation activities through SHGs. Banks, Government missions & schemes

6. Promoting Community Awareness on Water, Sanitation, Respiratory Hygiene and other critical health programmes for continuation of access & uptake of services
An elderly lady receives dry ration from RAF Global team member during nation-wide lockdown (Gujarat) India, 2020.
RAF Global is present in India as a registered entity, Rizwan Adatia Foundation (India) under Section 8 of the Indian Companies Act, 2013. RAF (India) works with the most marginalised individuals, families and communities in the poorest regions of India to improve the Quality of Life, by bringing together resources, technology, systems and effective grassroots strategies, giving better choices and control to people for a lasting change.

Since 2015, RAF (India) has supported developmental work in at least 15 districts covering the states of Bihar, Jharkhand, Uttar Pradesh, Gujarat, Maharashtra, Goa and Union Territory of Delhi and reaching out to over 600,000 lives. Presently, the organisation has long-term interventions in the states of Rajasthan, Gujarat, Maharashtra and Jharkhand through thematic programmes namely, Economic Integration and Livelihood Support for Women & Youth, Health and Nutrition Initiatives, Education and Technology, Climate smart Agriculture, Good Governance and Humanitarian Response. When Indians stepped into the year 2020, little did they know that it was beginning of a journey into the unknown and a tearful battle against an invisible virus. Given the country's size, dense population habitations and complexities in its social and political systems, the toughness of the battle was imminent.
A. First phase of the pandemic

RAF (India) responded with relief support during the nation-wide lockdown imposed by the Government of India in response to the spread of Covid-19 disease. Food supplies in the form of ration kits were distributed in several villages of Junagadh district and both rural and urban poverty pockets in Porbandar town, in the state of Gujarat.

The support provided immediate relief to survive the hardships for 877 families of informal sector workers, most of whom earned their living by working as daily wage labour. Thereafter, RAF (India) re-prioritised sectoral interventions considering the pandemic situation which on one hand, made it challenging to undertake work involving social contact, on the other hand it indicated the urgency to protect livelihoods as a key strategy for building resilience in the communities.

The efforts of RAF (India) on financial inclusion in the state of Gujarat through bank linkages and loans to SHG women supported families at the critical hour. Operations of regular health interventions such as health camps and leprosy care in the state of Jharkhand though affected initially, were resumed since August 2020 considering their impact and reach to the poorest of the poor. In the financial year 2020-21, total of 17,445 people were reached through 113 health camps and 63 OPDs at the Leprosy hospital in Dabanki, Potka block which is set up with the support of RAF (India). 119 new cases of leprosy were detected and received appropriate counsel and treatment, apart from on-going treatment and advanced medical care of old patients.
B. Second phase of the pandemic

As life was limping back to normal after the first wave of surge in Covid-19 disease, India was struck hard by the Delta variant of the disease that began showing its catastrophic effect by April 2021, posing an unprecedented public health emergency situation in the country, with 400 districts reporting positivity rate of over 10 percent and 265 districts reporting positivity rate of more than 15 percent. On May 1, 2021 India hit the global record of over 400,000 cases, with the total tally crossing 19 million mark and families losing over 3,523 lives on the same date. This situation was unfolding in the backdrop of successful completion of two phases of vaccinations, covering 15,49,89,635 Indians. This time, the infection was lethal, giving little time to people with co-morbidities and to other vulnerable segments. The rising cases were seriously cramping the already overstretched medical infrastructure in India. There were frantic calls from hospitals all over India for arranging oxygen, ventilators, and critical life-saving drugs. The urban centres accounted for 66 percent of the country’s total cases and the national media successfully highlighted the critical gaps in medical infrastructure in the metros and Tier I and Tier II cities. The data recorded around this period however showed that more people were dying in rural areas. In terms of daily numbers, rural deaths accounted for 22.7 percent of total deaths. Rural areas also accounted for 20.3 percent of country’s daily caseload, and there was strong possibility that cases in rural India would rise at faster pace in the near future.
RAF Global has always endeavoured to contribute towards healthy communities by strengthening state health systems in remote districts and blocks in India and extending support to Government interventions for the most marginalised. During the interface with district and block level officials across states, it came to light that when cases of Covid-19 disease started multiplying in April 2021, the district level Civil hospitals were overcrowded as most of the critical cases were being referred from Block level Community Health Centres (CHCs) where availability of critical lifesaving medicines, oxygen cylinders and equipments like protective kits, humidifiers, oxygen concentrators and ventilators were in shortage. Further, we observed that the support on upgrading of medical facilities from corporate and large donors was focused mostly towards Metro cities or Tier 1 towns whereas; the cases were fast spreading across Tier II, Tier III towns as well as, in rural areas where preparedness was inadequate. Many of the cases in rural areas were not being detected timely due to lack of testing facilities and patients reached out to CHCs only when they developed complications and were immediately referred to the district level civil or private hospitals.

Addressing the plight of district hospitals in Tier III cities and supporting the block level Community Health Centres (CHCs) became essential as they are a key link and many a times, the only ray of hope for ensuring health and well-being of a large, rural population. A CHC is the nearest available healthcare facility that caters to the needs of community from across 60-70 villages of the entire block. Critical medical supplies at the CHCs and proper early treatment of Covid-19 disease at these centres could not only save lives by timely, appropriate intervention, but also avert the collapse of fragile medical infrastructure of district hospitals where large number of patients was being rushed to when disease cases became critical. These district hospitals suddenly found themselves at the centre of an epic fight against a highly advanced, transmissible virus and urgently required additional capacities, equipments and medical supplies to defeat the disease and save the patients.

RAF (India) thus had a clear vision of where to intervene. It accelerated its humanitarian responses in the states of Gujarat, Rajasthan, Jharkhand, Maharashtra and Goa to support the district hospitals and Community Health Centres with bulk of life-saving, medical consumables, kits and expensive equipments apart from setting up a Covid care centre in Jaisalmer, Rajasthan and engaging in a landmark initiative of setting up of a PSA Medical Oxygen Generation Plant at GMERS General Hospital in Junagadh district, in the state of Gujarat. To
identify the emerging needs, our team consulted the concerned Medical Officers at the Block & District level and also coordinated with the respective District Collectors so as to build synergies in response and complement the efforts to serve humanity.

The humanitarian response followed a strategic approach and worked on a fast track mode that involved the following:

**SITUATION ANALYSIS**

- Continuous contact with Government officials of Health Department and District Administration
- Field visit to the district hospitals, CHCs and local communities
- Interaction with local journalists, constant watch on national and international news for global trends, policy measures and updates

**STRATEGIC PLANNING**

- Liaison with Government departments
- Mapping of internal resources, re-allocation for procurement of essential medical equipments and consumables required by district hospitals and CHCs

**SERVICE DELIVERY**

- Organising volunteers, local community people and leaders
- Fund-raising led by RAF Global Founder-Chairman and Global COO
- Identification of vendors for
  - Essential medical equipments and consumables for 5 districts covering the states of Gujarat, Rajasthan, and Jharkhand apart from Mumbai & Goa
  - PSA Medical Oxygen Generation Plant of 960 LPM in Junagadh
  - Make-shift Covid care centre in Jaisalmer city, with 100 beds
- Finalisation of vendors by RAF (India) for procurement of essential medical equipments and consumables. For high costing PSA Medical Oxygen Generation plant, a committee was formed by RAF (India) involving district administration, district level health officers and others.
- Ensuring timely delivery of equipments & medical consumables to respective District & Block level Hospitals
- Team Building, Strengthening & Extending Support to field teams
- Awareness Campaign among RAF formed SHGs and wider community
- Reaching out the needy with food, water, medicines and other essentials
- Setting up of Covid care centre (facility with 100 beds) in Jaisalmer district town, in the state of Rajasthan
- Facilitating the process and logistics of setting up a Medical Oxygen Generation Plant in Junagadh district town, in the state of Gujarat
- Supporting CHCs and district hospitals with life-saving medical equipments such as oxygen cylinders, oxygen concentrators, stretchers etc
A truck with Oxygen Cylinders supplied by RAF Global reaches Barmer, Rajasthan from Mumbai, 2021
Humanitarian response during the second wave of Covid-19 in the state of Gujarat was concentrated in the districts of Porbandar and Junagadh, where RAF had programme presence for past 5 years.

1. PORBANDAR DISTRICT

Support to Covid care hospitals, CHCs and PHCs

Five dedicated Covid care hospitals were set up in the district by the Government, but besides the existing stock of medical equipments, they required equipments catering to the critically ill Covid patients such as Oxygen cylinders, Trolleys for carrying oxygen cylinders, Regulator cum Humidifier for Oxygen cylinders, Oxygen Concentrators and Stretchers to carry the patients. The needs were identified based on inputs received from District Health Officials and concerned Government officials at the district level. RAF (India) responded to the written
request from District Collector’s office for the required equipments and provided the following equipments to the Covid care hospitals, in Phase -1.

<table>
<thead>
<tr>
<th>S. N.</th>
<th>Donated items</th>
<th>Qty.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Oxygen Cylinder (jumbo sized)</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Oxygen Cylinder Trolley</td>
<td>15</td>
</tr>
<tr>
<td>3</td>
<td>Oxygen Humidifier kit</td>
<td>50</td>
</tr>
<tr>
<td>4</td>
<td>Bain Breathing Circuit</td>
<td>100</td>
</tr>
<tr>
<td>5</td>
<td>Stainless Steel Stretcher</td>
<td>24</td>
</tr>
</tbody>
</table>

Subsequently at the request of the Chief District Health Officer, Porbandar, the phase-2 donation involved handing over of the following equipments to the CHCs and PHCs through the Office of CDHO.

<table>
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<tr>
<th>S. N.</th>
<th>Donated items</th>
<th>Qty.</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Fogging Machine</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Oxygen concentrator</td>
<td>3</td>
</tr>
</tbody>
</table>

Relief measures during Tauktae cyclone

Amidst the peak of second wave of Covid-19, a strong cyclone was estimated to strike the coastal areas of Porbandar on May 18, 2021. The district administration evacuated around 3500 people from the vulnerable areas and relocated them to various places that were converted into temporary shelters. Based on the request from district administration, the RAF (India) extended its support in relief activities by providing food packets to 500 affected families who were relocated to two temporary shelters at M.D Science College and Khapat Primary School, Porbandar.
2. JUNAGADH DISTRICT

**Support to CHCs**

RAF (India) undertook needs assessments in the blocks of Keshod, Maliya Hatina and Chorwad through a process of visits and interactions with the Block Health Officers, President of the Block level Health Committee and formal coordination meeting with the District Collector and the Chief District Health Officer (CDHO). Thereafter, the CDHO requested the respective Superintendents of block level CHCs to provide their lists of requirements to RAF (India) so that the needs could be addressed on priority. Later, the CHC in Mangrol block requested for oxygen concentrators considering the shortage of oxygen due to the spike in number of patients requiring oxygen support.

<table>
<thead>
<tr>
<th>S. N.</th>
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<th>Qty.</th>
<th>CHCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PPE kits for medical staffs</td>
<td>60</td>
<td>Maliya Hatina, Chorwad, Keshod</td>
</tr>
<tr>
<td>2</td>
<td>Surgical Gloves</td>
<td>1000 pairs</td>
<td>Maliya Hatina, Chorwad, Keshod</td>
</tr>
<tr>
<td>3</td>
<td>NRBM Oxygen Masks</td>
<td>100</td>
<td>Maliya Hatina, Chorwad, Keshod</td>
</tr>
<tr>
<td>4</td>
<td>Brain Breathing Circuit</td>
<td>30</td>
<td>Maliya Hatina, Chorwad, Keshod</td>
</tr>
<tr>
<td>5</td>
<td>Essential prescribed drugs for treatment of Covid-19 patients</td>
<td>500</td>
<td>Maliya Hatina, Chorwad, Keshod</td>
</tr>
<tr>
<td>6</td>
<td>Oxygen cylinder for the CHCs</td>
<td>5</td>
<td>Maliya Hatina</td>
</tr>
<tr>
<td>7</td>
<td>Regulator cum Humidifier</td>
<td>5</td>
<td>Maliya Hatina</td>
</tr>
<tr>
<td>8</td>
<td>Oxygen concentrator</td>
<td>7</td>
<td>Maliya Hatina (3), Mangrol (3), Keshod (1)</td>
</tr>
</tbody>
</table>

Equipment handed over to the Medical Superintendent at Maliya Hatina CHC
Support to GMERS General Hospital, Junagadh in setting up an Oxygen Generation Plant

RAF Global, with its commitment to strengthen district level public healthcare infrastructure in tier III towns, has taken a landmark step with the setting up of a Pressure Swing Adsorption (PSA) Medical Oxygen Generation Plant (OGP) of 960 LPM at GMERS General Hospital in Junagadh district in the state of Gujarat. Drawing on the experience during peak of second wave when medical oxygen requirement for critical patients was very high, RAF Global Founder Chairman, Rizwan Adatia and Global COO, Sujeet Sarkar engaged with high net worth NRIs to draw their support on the matter. As a result, Zarina Foundation came forward and donated benevolently towards the project. RAF (India) initiated the process of proposing the project to the District Administration (under the leadership of District Collector) and engaging with the Chief District Medical Officer, Junagadh and the Superintendent of GMERS Medical College and Hospital to take this forward on priority. The technicalities of setting up the OGP was finalised after several rounds of conference calls with the Superintendent of GMERS Medical College and Hospital. Subsequently, RAF (India) initiated the process to identify suitable vendors wherein 3 vendors with sound experience of 20-30 years were shortlisted and a comparative analysis was made considering the output capacity, technical specifications, prices and customer feedback. A committee was formed comprising of the Superintendent of Medical College, CDMO and Assistant District Collector and the RAF (India) team comprising of Regional Head, Western Region and the Manager of Procurement to collectively evaluate all the three vendors. In a meeting dated June 9, 2021 the name of Trident Hydro Pneumatics was finalised for setting up the OGP at the campus of GMERS General Hospital. Subsequently, a contract was signed with the vendor for procurement and delivery of the machine and maintenance related support (for the medium term), once the machine was installed.

On July 15, 2021 Rizwan Adatia Foundation (India) signed a formal MoU with GMERS General Hospital in Junagadh to set up the PSA Medical Oxygen Generation plant of 960 LPM that was estimated to create additional 270 oxygenated beds in the hospital and help the
district administration to fight the menace of COVID and a much anticipated third wave. Such an in-house captive oxygen generation facility is expected to not only address the day-to-day medical oxygen needs of the district hospital, but also cater to the critical life-saving support of the GMERS hospital for the next 10 years.

The on-ground installation of the machines by the finalised vendor, and construction of a durable and high wind resistant shed by GMERS General Hospital was undertaken thereafter. RAF (India) team monitored the entire process and safeguarded the machines while construction was underway. Upon completion of the work, the plant was inaugurated on March 17, 2022 by Mr. Rizwan Adatia (Founder & Chairman of RAF Global), Mr. Nadir Umedali Dhrolia (Chairman of Zarina Foundation) and a notable philanthropist from Gujarat, Mr. Umedali Hassam Dhrolia.

Global COO of RAF Global, Mr Sujeet Sarkar, and MS of the GMERS Hospital, Dr. Sushil Kumar were the other dignitaries present, along with journalists from more than twenty media channels and newspapers. Dr. Sushil Kumar highlighted that the plant would serve not only the patients from Junagadh district, but also patients from adjacent districts like Porbandar, Rajkot, Amreli, Gir-Somanth and Diu. He emphasized, with much praise and gratitude, that this has been the highest ever contribution by any organisation to the hospital.

Along with the installation, RAF Global is also bearing the expenses of maintenance of the plant for next two years. The plant would bolster critical life-saving services of GMERS hospital for next 10 years. It would also improve access to effective medical treatment at the district level, for a large segment of local community.
B. Humanitarian Response in the state of Rajasthan

1. BARMER DISTRICT

Barmer, the arid district of Western Rajasthan experienced a catastrophic situation during the second wave of Covid-19 when the daily cases being reported from across the district were in the range of 450 to 600 persons per day, and of these, about 250-300 cases were being referred to the District Civil Hospital from the Block level for Critical Care and Oxygen support. As a result, the Civil Hospital was running beyond its capacity and a requirement for oxygen supply was imminent. Based on a request from the District Collector, RAF (India) immediately arranged oxygen cylinders and oxygen concentrators. RAF India supplied 15 units of Jumbo sized Oxygen Cylinders, 15 units of Regulator cum Humidifiers and 5 units of Oxygen Concentrators for the District Civil Hospital, Barmer. These equipment were handed over directly to the District Administration who appreciated the responsiveness displayed by RAF (India).

<table>
<thead>
<tr>
<th>S. N.</th>
<th>Donated items</th>
<th>Qty.</th>
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<tbody>
<tr>
<td>1.</td>
<td>Oxygen Cylinder (Jumbo sized)</td>
<td>15</td>
</tr>
<tr>
<td>2.</td>
<td>Regulator cum Humidifier</td>
<td>15</td>
</tr>
<tr>
<td>3.</td>
<td>Oxygen concentrator</td>
<td>5</td>
</tr>
</tbody>
</table>

Inspection of Oxygen Cylinders at a district office, 2021
2. JAISALMER DISTRICT

RAF’s emergency response in Jaisalmer district was based on a direct request from the District Administration to firm up medical infrastructure at the block level Community Health Centres as well as ease the case load at the District level Civil Hospital during the second wave of Covid 19 when 300-400 cases were being reported on a daily basis, for a district of population size of 7.5 lakhs. As per the request, RAF (India) set up a makeshift Covid Care Centre with 100 beds in Jaisalmer town for a period of one month from May 7 to June 6, 2021, along with catering to critical needs for Oxygen Cylinders, NRBM masks and Oxygen Regulator cum Humidifiers.
After assessing other requirements of the Covid Care Centre, RAF (India) provided 20 units of Jumbo size Oxygen Cylinders, 9 units of Oxygen Concentrators, 50 units of NRBM masks, 20 units of Oxygen Regulator cum Humidifiers and 50 units of Oximeters to the office of the District Collector. The District Administration as well as two of the Cabinet Ministers in Rajasthan State Government who had visited the Covid Care Centre, appreciated the relief efforts of RAF (India) during the public health crisis.

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<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Oxygen Concentrator</td>
<td>9</td>
</tr>
<tr>
<td>3</td>
<td>NRBM Masks</td>
<td>50</td>
</tr>
<tr>
<td>4</td>
<td>Oxygen Regulator cum Humidifier</td>
<td>20</td>
</tr>
<tr>
<td>5</td>
<td>Oximeter for CHCs across the district</td>
<td>50</td>
</tr>
</tbody>
</table>

Oxygen Concentrators and Oximeters handed over to the District Collector of Jaisalmer

Oxygen Concentrators handed over to the makeshift COVID Care Center, Jaisalmer in presence of Shri Saleh Mohammed, Cabinet Minister, Government of Rajasthan
C. Humanitarian Response in the state of Jharkhand

1. EAST SINGHBHUM DISTRICT

Under the Health portfolio of RAF (India), Prevention and Care of Critical Diseases finds a special place. Coverage of critical diseases includes NCDs (Novel Infectious, Chronic and Non-Communicable Diseases) as well as NTDs (Neglected Tropical Diseases). RAF (India) has strengthened community access to specialised leprosy care in the tribal belt of East Singhbhum district, Jharkhand for the past 6 years, covering a population of 4.5 lakhs, across 4 blocks. Besides supporting detection of early cases of leprosy, providing specialised treatment to the patients at RAF (India) funded hospital in Dabanki and continuous engagement and follow up of the patients, the project has promoted community linkages with 3 Community Health Centres and Government systems for timely intervention through referrals and also contributed to improvement in uptake of services aimed for at-risk and infected population.

The first two phases of Covid-19 were tough on the inhabitants of the tribal belt as livelihood avenues, and access to regular medical support were severely affected apart from the spread of a deadly, newly identified infection. RAF (India) concentrated its humanitarian response during the second wave of Covid-19 in Potka block which has a population of over 200,000 and was reporting a sudden rise in the caseload. Potka block is also one of the leprosy related intervention areas of Bharat Sevashram Sangha (BSS), an implementing partner of RAF (India). Based on the request of the implementing partner and in consultation with the District Administration, RAF (India) provided Oxygen Concentrators and Pulse Oximeters to the Community Health Centre (CHC) in Potka block and few Oxygen Concentrators to Bharat Sevashram Sangha for meeting the oxygen requirements of critical patients.

<table>
<thead>
<tr>
<th>S. N.</th>
<th>Required items</th>
<th>CHC</th>
<th>BSS</th>
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<tbody>
<tr>
<td>1</td>
<td>Oxygen Concentrator</td>
<td>5</td>
<td>2</td>
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<tr>
<td>2</td>
<td>Pulse Oximeter</td>
<td>50</td>
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Handing over of Oxygen Concentrators to CHCs

Close up of an oximeter donated by RAF Global
During the pandemic, around 768 people were reported to be positive, 10 people succumbed to Covid-19 while 748 patients were reported to fully recover from the disease as a result of the coordinated efforts of medical teams, frontline health workers, volunteers and other stakeholders.

From the beginning of January to April 30, 2021—the phase when Omicron variant persisted in India and Delta variant had been identified and gaining ground, the leprosy project was implemented with full energy, with 51 outreach camps, testing 3081 people, 29 Hospital OPDs treating 1,176 patients, identification of 40 new patients who started receiving treatment and would be referred to Government CHCs (for getting registered under the National Leprosy Eradication Programme to access timely and regular MDT and other medicines free of cost at their doorstep) and 81 In Released from treatment (RFT) patients.

While the operations were shut during May and June 2021 during the peak of second wave of Covid-19, in July services were resumed, screening 465 people during outreach camps, attending to 285 patients during OPDs, identifying 15 new leprosy cases and admitting 14 patients at the leprosy hospital.

While Covid-19 was devastating lives in 2021, RAF’s support to the Leprosy project in Jharkhand ensured continuation of health support to vulnerable communities. Over 91,000 rural residents of the leprosy infested belt in Jharkhand had access to screening and detection services, 108 new patients were detected and began receiving regular prescribed treatment while 251 patients were In Released from treatment (RFT) during the year.
D. Humanitarian Response in Delhi (UT)

Early in the year 2021, RAF Global was in dialogue with the Afghanistan embassy in India for establishing development cooperation in Afghanistan. These conversations preceded the political developments in Afghanistan that unfolded in July/August 2021 onwards. With its rich human resource of professionals who have worked in Afghanistan with the Government and international development community, RAF Global had ambitious plan to work on ground, on issues of health and nutrition, education, livelihoods and good governance.

In line with this thinking, it was agreed that RAF (India) will initiate relief support for Afghan community in Delhi during the second wave of Covid-19. Through collaboration and dialogue, needs assessment was undertaken that highlighted the issue of food scarcity and hunger among the Afghan community. Thereafter, on 18th June, 2021, as an endeavour to reach out to the affected Afghan refugee community living in Delhi, the foundation, in collaboration with the Afghan embassy and local school for Afghan children, distributed 300 food kits (comprising of essential food supplies) to the Afghan children. RAF Programme Manager for South Asia addressed the children on the occasion and encouraged them to practice safety norms with respect to Covid-19, as well as, study well. RAF Global’s humanitarian response was well appreciated by Afghanistan’s Ambassador to India through a letter of appreciation.
E. Humanitarian Response in the state of Maharashtra and Goa (UT)

In Mumbai, which was a hotbed of the infection, RAF (India) supported its local partner, Bharat Sevashram Sangha (BSS) with medical kits for home isolation and other preventive care support items for the residential hostel for poor cancer patients undergoing treatment in the city. During this time, RAF (India) also committed financial resources to BSS, Navi Mumbai for constructing a new building in the ashram complex that would expand the lodging facility for outstation cancer patients and their families to 162 beds. These centres run by BSS have provided free accommodation, free transportation to the cancer hospitals, subsidised canteen facilities and counselling related services for past several years to poor patients and their families, thus easing their financial burden and mental stress.

Support of medical consumables was also extended in Goa through BSS during relief efforts.
A view of RAF Global supported Cancer Facility for poor outstation patients in Navi Mumbai, Maharashtra, 2021
Oxygen Cylinders for critical patients of Covid in Porbandar district, arrives at the concerned office for handing over (2021)
The scale of RAF Global’s humanitarian response efforts in India, involving coordinated efforts of various regional and national level teams, has resulted in remarkable learning at personal and professional levels that has been assimilated into the institution. While humanitarian response remains an evolving programme of RAF Global in India, there is better preparedness, systems, insights and established networks with the District Administration, public health specialists, hospitals, donors, civil society organisations, credible vendors, media and other stakeholders for better synergies resulting in effective outcome. A key challenge identified by the Western region team was managing collaboration with district administration, as well as following up on movement of procured equipments through the vendors so as to ensure timely delivery at the block and district level hospitals. Implementation was particularly challenging in Western Rajasthan districts that were new to RAF (India) unlike the intervention districts of Gujarat. At the same time, the support extended by RAF (India) in Western Rajasthan and the rapport established with the District Administration has resulted in initiation of developmental work now, in the areas of rainwater harvesting and school readiness programme among rural children from marginalised communities.

Broadly, the Covid-19 emergency response experience in India has made us believe even more that public health institutions at local levels (for e.g the districts and block level hospitals in India) have to be firmed up and transformed into responsive, self-sufficient, world-class medical facilities where large numbers of patients could be admitted, attended to and get cured locally for a range of medical diagnosis, care and treatment. RAF Global is working towards this with greater resolve and rigour.
A child in Nsele commune fills up a bucket of water from fresh water spring. To prevent contamination, RAF Global built a water tank at the site, in 2021.
RAF Global is present in Democratic Republic of Congo as a registered entity, under the Ministry of Social Affairs in the category of ASBL/NGO/EUP of a social nature, under Law No.004-2001. RAF (D.R.Congo) is an integral part of RAF Global which is a private, non-denominational, not-for-profit international organisation that is committed to improving the quality of life in selected countries across Africa and Asia.

Since 2017, RAF (D.R.Congo) has implemented as well as supported a range of projects in healthcare, nutrition, education, skill development and entrepreneurship (for women and youth) and humanitarian response during emergencies across 13 communes in the province of Kinshasa, reaching out to over 64,000 inhabitants (until end of the year 2021). RAF (D.R.C) shares a healthy dependence on local community, individual and institutional donors, public hospitals, Government schools, orphanages and local NGOs to implement its programmes.

Despite being a country generously endowed with natural resources, economic and social development benefitting the local Congolese people has lagged behind compared to several other African countries. One of the poorest countries of the world, D.R.Congo had over 15.5 million people living in acute food insecurity in the pre-pandemic period between July and December 2019. The number of people with high acute food insecurity peaked in September 2020, coinciding with Covid-19 situation and the pandemic. The contagion resulted in disruptions in daily routine, mobility and employment. Besides, the risks of contracting infection and not being able to survive were very high in large segments of the population.

In the year 2020, D.R.Congo experienced its first recession in 18 years due to the Covid-19 induced measures such as lockdown and restrictions on transport, non extractive activities, manufacturing, public works etc. A little prior to it, in 2019 the country was already undergoing ‘difficult balance of payment situation triggered by fall in commodity prices, new spending initiatives and lose spending oversight during the political transition period’. With the Government’s initiative towards financial transparency and improvement in governance along with international finance, the economic situation has somewhat eased in the year 2021.

Even before the pre-pandemic period, D.R.Congo struggled with issues such as decades of unregulated extraction by private agencies, severe poor governance legacies and misappropriation that at one point resulted in no deliverance of any public services to the population, devastating civil war and continuation of violence in the north eastern part by rebel groups to control the goldmines. The humanitarian crisis in the country has continued, as a result of violence in mining rich areas, causing significant displacement, hunger and threat to life for the affected communities. Further, the country experiences a fragile health status with history of Ebola outbreaks,
malaria, cholera and malnutrition among the local population. The Coronavirus disease (Covid-19) of 2020 and its new variants such as prevalence of Delta and Omicron across most provinces have further intensified the struggle of Congolese citizens for appropriate and timely healthcare, food security and dignity in their lives. During the period between March 2020 and October 2021, the average value of reported Covid cases in D.R.Congo was 2,876 with a minimum of 145 new Covid cases in March 2020 and a maximum of 9,185 new cases in June, 2021. As on December 3, 2021, total of 58,319 confirmed cases and 1,107 deaths have been reported.

In this challenging setting, RAF Global in D.R.Congo responded to the health, water and sanitation and livelihoods needs of underprivileged communities in the province of Kinshasa, besides undertaking community outreach and distribution of protective masks in large numbers at community hubs and institutions. Maintaining Covid-19 protocols and working around the restrictions that were in place, affected RAF (D.R.Congo) programme implementation for few months in the year 2020, but were revived soon after. Recognising the significance of regular programmes in the areas of health, livelihood and education in the lives of impoverished communities, RAF (D.R.C) restored these programmes in 2020 and 2021 as was possible and these programme found a new momentum. A total of 287,543 beneficiaries were supported by RAF (D.R.Congo) through critical programmes spread across sectors, as well as humanitarian response during the pandemic years, 2020 and 2021.
Humanitarian Response In The Province Of Kinshasa

The key interventions during the first phase of Covid-19 induced pandemic in D.R.Congo in the year 2020 were focused mainly on the communes of Nsele, Kimbanseke, Selembao and Mont Ngafula while critical health services such as cataract surgeries benefitted all the communes within the province.
Covid-19 Awareness and Mask Distribution

RAF (D.R.Congo) undertook mass production of 76,000 cloth masks of which 16,000 were distributed free of cost at schools, orphanages and at the community hubs in Kimbanseke, Nsele and Mont Ngafula. The outreach also involved sharing of information pertaining to Covid-19 related safeguards, following safe distancing norms and hand washing hygiene practices.

Nutrition Support as Safety Net

RAF (D.R.Congo) has been supporting two Nutrition Aid Projects in Kinshasa. The first one is in Mpasa (Nsele commune), running since 2017, where children have been supported with food groceries and the second one is Bakery Project at Pediatrics De Mama Koko orphanage, Kimbondo (Mont Ngafula commune) running since 2018 and providing fresh bread throughout the year for resident children. In the year 2020, a total of 1127 children received nutrition aid support in Nsele while the RAF supported bakery provided fresh bread throughout the year for 822 children, assuring healthy food to them despite the disruptions caused by public health crisis and the pandemic. Food security was thus assured for some of the most vulnerable children in project intervention areas and better prepared them to build immunity against infections.

Skilling for Entrepreneurship and Offering Avenues for Employment

RAF (D.R.Congo) supports women and youth in the areas of gaining technical skills through vocational training courses so that they become
employable or start their own businesses. When most developing countries are struggling with employment and job creation for citizens, self-employment is being considered as another mechanism to strengthen livelihoods and financial independence. In the year 2020, 742 trainees at the RAF managed training centres graduated in various trades such as tailoring, beautician, carpentry and art covering the communes of Mont Ngafula, Nsele and Kimbanseke with the support of kind donors. RAF (D.R.Congo) encourages the graduating students to take retail orders for tailoring and use the centre asset like the sewing machine and centre space to craft the work and earn an income.

Apart from vocational training, RAF (D.R.Congo) provided employment to 95 tailoring students during the first wave of Covid-19 infection spread, and provided orders for mass production of cloth masks (76,000 in total) for distribution at community hubs and institutions like schools and orphanages. Thus, the women trained in tailoring secured a livelihood source during the pandemic while the foundation could promote awareness of Covid-19 related respiratory hygiene practices through distribution of masks.

RAF (D.R.Congo) has been training and employing the youth at Pediatrics De Mama Koko orphanage, Kimbondo (Mont Ngafula commune) in bakery skills and production and helped establish a bread making factory in the campus in the year, 2018. The trainings aim to skill the youth in bakery and help them find work or start their business and thereafter, wean them off the institutional care that is primarily for minors. Group of youth have successfully moved out of the orphanage and stay at rented accommodation while new batches of bakery students receive training that prepares them to earn a living and eventually move out of institutional care. In the year 2020, 4 youth from the orphanage had an assured monthly income throughout the year while working at the in-campus bakery that provides nutritious meal to the resident children.

**Safeguarding Health**

In the year 2020, RAF (D.R.Congo) continued its key health programmes for the poor and marginalised target groups in the communes of Kinshasa region. Without the continuation of regular programmes and little information to access support, it is likely that certain segments would fall further deep down into penury, poor health and even in life threatening situations. To promote free and safe access to clean water for domestic purposes, in the RAF (Global) constructed two water tanks, benefitting 6000 people in the commune of Mont Ngafula. Water tanks are a low cost option in D.R.Congo that preserves freshwater springs and prevents their contamination by humans or animals. The
freshwater springs, in and around rural areas are critical water sources for local communities, serving approximately 90 percent of the rural population.

Besides the above, by facilitating free of cost cataract surgeries for underprivileged patients from across the 13 communes of Kinshasa, RAF (D.R.Congo) ensured that the risk of permanent blindness was averted for 197 very poor cataract patients. Out of the 197 beneficiaries, 134 were women who benefitted and could resume their normal lives and pursue their livelihoods. Through a coordinated effort, people from 13 communes accessed the surgery facility and care services through the medical hospitals at Masina, Bandal and Lemba regions of Kinshasa.
Living amidst the Covid-19 disease

Considering the persistence of Covid-19 disease in 2021, emergence of the Delta variant and Kinshasa appearing to be the disease epicentre in the country, RAF (D.R.Congo) focused its attention on building defences against infectious diseases targeting children in schools and institutional care, on handwashing practices as well as restoring the regular health programmes on cataract surgeries, nutrition support to vulnerable minors and elders, construction of water tanks for access to safe potable water and malaria prevention. Total of 205,560 beneficiaries were reached through these interventions in the year 2021.

As it became obvious with the rise, receding, surge and persistence of the disease that life has to be rebuilt, conscious of the disease's presence, RAF (D.R.Congo) has focused also, on bringing children back to schools, on training women and youth in various trades for income earning prospects, on helping emergence of small local businesses, on promoting kitchen garden initiatives for improving nutrition outcomes of poor communities, and on building social resilience in tough times through opportunities to celebrate life.
COO, RAF (Mozambique) interacts with medical professionals during distribution of medical consumables, 2020
RAF Global is present in Mozambique since 2015, as a legal entity registered under the private law with social, philanthropic, cultural, educational and scientific areas of intervention under Clause 2 of Article 158 of the Civil Code of Mozambique. RAF (Mozambique) is an integral part of RAF Global which is a private, non-denominational, not-for-profit international organisation that is committed to improving the quality of life in selected countries across Africa and Asia. RAF (Mozambique) has implemented as well as supported projects in the provinces of Maputo, Gaza, Nampula, Sofala, Zambezia, Cabo Delgado, Manica, Inhambane and Maputo city reaching out to over 300,000 beneficiaries.

Mozambique is home to 30 million people of various ethnicities and has been one of the fastest growing economies in the African continent before the Covid-19 situation. Past few years however, have been challenging for the country because of several natural calamities and conflicts and violence by rebellious groups that have caused displacement to many, risking them to more vulnerable situation of food insecurity, unavailability of basic living facilities and health services. The outbreak of Covid-19 pandemic has further escalated the risk to vulnerable population and displaced people.
Since March 22, 2020 when the first case of Covid-19 was detected, cases have been on the rise. The average value of new Covid cases per month for Mozambique during the period from March 2020 to October 2021 was 7568 with a minimum of 25 new Covid cases in March 2020 and a maximum of 45624 new Covid cases in July 2021. The month of July, 2021 was marked by the third wave of COVID-19 which led to drastic increase of cases, hospitalizations, and deaths. The positivity rate in July doubled, and the hospitalizations increased five times while the death toll increased 13 times when compared with June. As of December 3, 2021, 1941 deaths and 151,652 confirmed Covid-19 cases were reported.

Covid-19 outbreak in 2020 was the most significant disruptor of economic growth in Mozambique, causing slowdown across sectors and negatively impacting employment, livelihoods and household income. It was projected that in the year 2020, as a result of economic contraction, atleast 850,000 Mozambicans (that is, 63.7% of the population in total) would slide below the international poverty line. For the first time in 28 years, the country’s GDP declined by 1.2 percent in 2020. Sectors such as mining and hospitality were disrupted and demand for exports fell. Additionally, economic activities were also hurt due to the conflict in the gas rich province of Cabo Delgado that displaced over 250,000 people.

RAF (Mozambique) worked throughout the years, 2020 and 2021 under these challenging situations. There were also phases of restrictions on mobility when the cases surged. RAF’s efforts and commitment towards improving the Quality of Life of target communities despite the emerging challenges, has to be seen in this backdrop. During the year 2020, RAF had project interventions across the 9 provinces of Maputo (rural), Maputo city (urban), Sofala (Beira), Nampula, Cabo Delgado, Gaza, Inhambane, Manica (Chimoio) and Zambezia (Quelimane) covering both, critical regular programmes especially cataract operations, borehole rehabilitation and construction, Bhojan project to address malnutrition among vulnerable population such as orphaned children and elderly people, Health and Safety interventions with school children as well as humanitarian response to Covid-19 situation. In the year 2021, the critical programmes were concentrated in the provinces of Maputo, Gaza and Maputo city. A total of 90,366 beneficiaries were reached during the pandemic years, 2020 and 2021.
Humanitarian Response In Various Provinces Of Mozambique

The key interventions by RAF (Mozambique) during the various phases of Covid-19 pandemic could be listed as follows:

**Food Kits**

It is estimated that at present, 25 percent of the population in Mozambique suffers from hunger or malnourishment. The requirement for food aid also increased significantly in the recent years (2017 and 2018). The World Food Programme provided assistance to over 815,000 people in need in 2017 and 2018 (during the drought that affected the country). In 2017 (pre Covid-19 period), 46.1% of Mozambicans were living below the poverty line. During the pandemic as life temporarily came to a standstill and household income was severely impacted, the percentage of people living below the poverty line is likely to have increased further. Under such circumstances, RAF (Mozambique) started an initiative of distributing Food Kits to protect families from falling into starvation. On July 22, 2020, RAF (Mozambique) donated 250 food kits to the elderly population of Association Cenhomeruv in the presence of the First Lady, Isaura Nuysi, wife of the Governor of provincia de Maputo -Naidy parruque, Administrator of Matola district -Anastacia Quitane and other dignitaries. The distribution of food kits is a common intervention of RAF Global during/after natural calamities, epidemic and unforeseen emergencies. The intervention provides relief to the beneficiaries from the stress of finding food during difficult times.

**Production and Distribution of Masks**

RAF (Mozambique) initiated mask production activity at CAYM (Centre of Aspiration for Youth of Mozambique) at the beginning of the pandemic in the year 2020. A total of
5936 masks were made by the students and distributed at community hubs such as bus stops, street vending areas etc. The beneficiaries were also made aware of the correct way of wearing masks to appropriately cover the mouth and nose.

**Awareness generation activities**

On March 17, 2020 the foundation conducted an awareness session on safety measures with respect to Covid-19 virus, early detection and understanding how it spreads. 460 students at the Escola Primaria Completa do Alto Mae in Maputo attended the training. On October 13, 2020 the foundation organised a painting competition at Kanimambo and Ntwananu schools on the theme of 'Methods of Prevention of Covid-19'.

RAF (Mozambique) had developed a range of health and safety trainings to sensitise school age children and adolescents of the primary and secondary schools of the province and City of Maputo. The key emphasis in these trainings has been on hand washing practices and its significance in daily life, hygiene and menstrual health for adolescent girls, and finally on road safety (understanding the traffic signals in order to know how to cross the road safely). These activities are carried out in partnership with the Provincial Directorate of Health and the National Institute of Land Transport (INATTER). In the year 2020, a total of 846 students gained awareness during these trainings, components of which were found particularly relevant during the pandemic (for e.g proper hand-washing in order to reduce infections and understanding the need to use sanitary pad during menstruation as well as, learning to know how to make affordable cloth pads).

**Distribution of Covid-19 related items at Government Medical facilities**
RAF (Mozambique) supported several medical facilities in Maputo city and the provinces of Maputo, Gaza, Nampula, Zambezia, Manica & Sofala and Inhambane with donated items including Infrared thermometers, disposable protection gears and goggles for doctors as well as N95 and 3 ply masks and face shields. The donation kit was personally handed over to the Secretary General, Mr. Roque Silva at the Ruling Party's headquarters. Centro de Saúde 1 de Maio, Kamaxaqueni, Maputo and Hospital Provincial de Matola also received support from RAF (Mozambique) and all the required essential kits were donated to them.

As an expression of solidarity as well as because of its belief in making strategic interventions, RAF (Mozambique) considered it utmost important to work with public health systems during the pandemic.

As the year 2021 unfolded and the catastrophic effect of the new variant of Covid-19 became known, RAF (Mozambique) donated a bulk of medical equipments at the Hospital Geral de Matola to address the acute need of these items for the doctors and paramedic staff. These items (infrared thermometers, play masks, disposable suits, eyes protectors and plastic helmets) benefited no less than 5000 people both, reducing the risk of disease spread to doctors, hospital staff and patients as well as, provided a sense of security to frontline workers so that the hospital attendance is maintained and patients are treated well.

**Borehole Rehabilitation and Construction**

The borehole project of RAF (Mozambique) is focused on making clean, potable water available for local communities for drinking, domestic consumption and agriculture related work. Through this intervention, RAF (Mozambique) has been addressing issues of hand-washing, sanitation and hygiene, control of water borne diseases and also reducing drudgery of women and reducing the time children spend on fetching water for the household so that they can attend school. In the year 2020, total of 10 new boreholes were rehabilitated benefiting 17,600 people. In the following year, RAF (Mozambique) repaired and rehabilitated 16 boreholes in Gaza province that has improved access to safe water for 8,000 rural residents in poverty stricken areas both for drinking as well as domestic use. Water and Sanitation issues have gained more traction during the pandemic years as good practices in WATSAN areas remain the simplest solution to curtail the risk of Covid related infections.
A girl fills up the bucket at a water tank in Mont Ngafula commune, Kinshasa province, D.R.Congo, 2021
Key Learning From Humanitarian Responses In Africa

During an epidemic of global scale that held the public health system under severe stress, and when prevention of further spread of the disease demanded social distancing and only essential mobility, RAF Global’s experience has been that fortifying the public health system through donation of relevant medical equipments for protection of doctors, medical attendants and patients is significant contribution in saving lives, along with information sharing and free distribution of masks at community hubs. Teaching respiratory hygiene to poor communities that are likely to have compromised immunity can save lives. Similarly, consistent supplies of nutrition support to vulnerable children and the elderly has prevented death due to food scarcity during the years of pandemic.

The working poor did not have the luxury of working from home during the pandemic. RAF Global’s experience has been that restoring the functioning of vocational training centres helped women and youth to gain employable skill and not lose hope. What worked was that the foundation supported training centres were transformed into spaces where the trainees or previous graduates could bring work orders for stitching and tailoring, use the facilities and earn a living. RAF Global also provided high volume of work order to these candidates.

While addressing an emergency public health crisis, it is essential to safeguard the general health of the communities living in the project intervention areas. Restoration of regular health programmes is therefore important in such situations so as to avert casualties to Ebola, Malaria, Cholera, Blindness and other complications inhibiting healthy living. Restoring projects related to water tank construction and borehole rehabilitation clearly benefitted communities, assuring not only access to safe drinking water but making possible safe sanitation practices (including hand washing, and safe disposal of human waste). A related learning is that regular programme funds must be carefully re-allocated during pressing humanitarian crises while funds for regular programmes with high uptake and large impact should remain dedicated for those programmes.

RAF Global started promotion of backyard farming or kitchen garden initiative during the pandemic years. At time when supply chains are severely affected and cause scarcity of food items, promoting kitchen garden among smallholder farmers and vulnerable population particularly women, enables them to improve intake of vegetables in their diet as well as improve nutrition outcome for their households. These initiatives also fit into the broader context of Climate Change experiences in Africa and building resilience towards it for the poorest and most marginalised communities (including small farmers and farm dependent workers).

Care and support for staff across various levels and positions during humanitarian response is also important particularly those in implementation of initiatives who experience higher risks to their physical and mental health. These frontline workers are also closest to suffering communities, counselling them and guiding them to safety. It is therefore important that these pillars of support have best of work conditions for efficient and effective programme outcome.
Senior Manager, RAF (D.R.Congo) hands over school kits to children at a primary school, 2021
Women trainees at a RAF Global supported vocational training centre proudly show their certificates on the occasion of Graduation Day, Kinshasa province, D.R.Congo, 2021