

**Brief Report on  
Relief and Response to COVID-19 Pandemic  
March-July 2020**



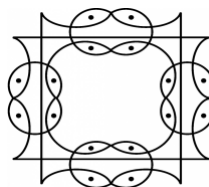
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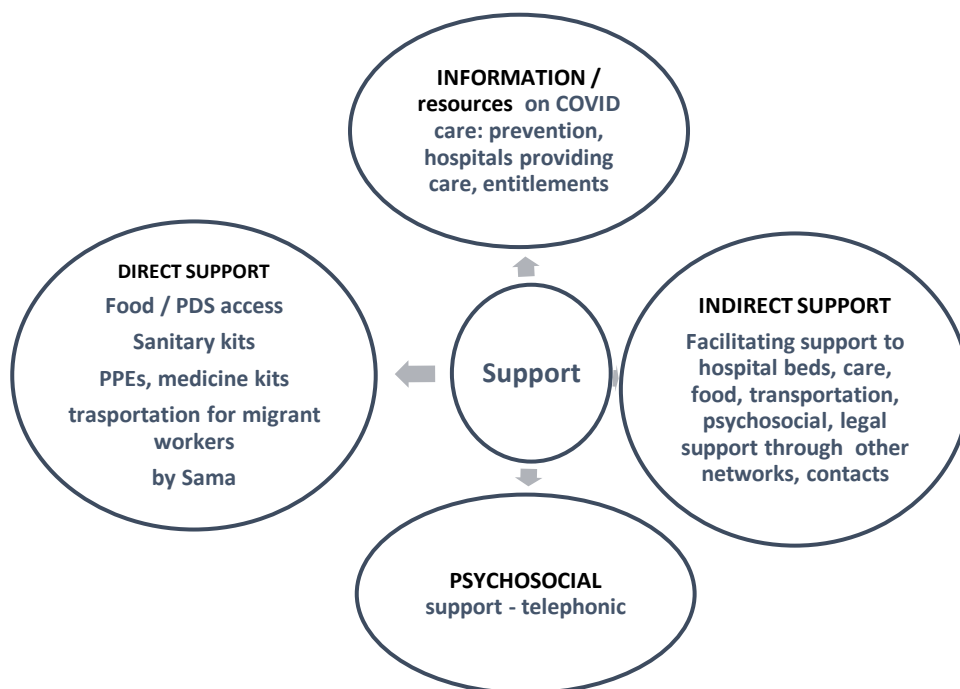
**Website: [www.samawomenshealth.in](http://www.samawomenshealth.in)**



The outbreak of the COVID-19 brought the entire country to a halt by implementing the restrictive guidelines of the lockdown. These measures implemented to contain the spread of the Corona Virus. However, the continuation of the lockdown amplified vulnerabilities in the lives of most marginalized people. It has adversely affected the vast majority of people from marginalized communities such as dalit, tribal, LGBQ and transgender persons; migrant labourers, informal workers, frontline health workers, daily wage earners, domestic workers, agricultural workers, street vendors, sex workers, people with disability, single women, pregnant women, women with psychosocial disability, elderly people to name a few. The loss of livelihood, increased gender-based violence, hunger and starvation, the gendered burden of the labour and care aggravated during this period. On the one hand, the struggle of survival increased who do not have surpluses to live life without obtaining daily wages and on the other hand, this crisis has made a devastating impact on women's and girls' access to health services and information, access to sanitary products, access to smart phones etc. In such a scenario, civil societies had stepped out in various ways in multiple spaces to respond to the vast number of issues.

In response to the situation, Sama got actively involved with its coalitions, network started strategizing and facilitating the process of relief work with the local organizations who have been working on the forefront for implementing relief work in communities since the onset of the COVID-19 despite lockdowns. Sama has initiated the process of providing relief materials and support to people from marginalized communities across Delhi, Uttar Pradesh (UP), Jharkhand and Bihar.

This five month report from March-July 2020 summarizes the efforts made by Sama through direct and indirect interventions.



Substantial part of Sama's support comprised facilitating support for communities through provide access to information on COVID-19 and preventive measures, information on testing, tracing for COVID-19 and isolation, entitlements, guidelines, counseling, legal aid, support for survivors of gender based violence, ration support, provision of sanitary and hygiene products -masks, soaps, sanitizers, face shields, gloves etc.

## **I.INDIRECT SUPPORT**

### ***1.1.Provide access to information and dissemination of information***

Since the outbreak of the COVID-19 pandemic, there was a lack of availability and access to adequate information and knowledge regarding COVID-19 and its preventive measures. With the lockdown and the lack of availability to scientific, evidence based, adequate information regarding COVID-19 created a sense of panic. Further the measures taken to address the situation and the government orders were not accessed by those living in margins. The women and girls from marginalized communities live at the crossroads of various inequalities including the lack of access to technology and education as most of the information was available online.

Further, the lack of access to internet and smart phones further alienated the marginalized communities and the community-based organizations who struggled to disseminate information and continue their work. It became imperative that adequate information, in local languages, be made available to the people.

In this process, Sama reached out to community-based groups in Jharkhand, UP, Delhi, Odisha, Chhattisgarh and Bihar, and provided them with information kits with scientific and evidence-based information on COVID-19, prevention and control measures, relevant government guidelines, and with contacts of counsellors and institutions providing support for mental health concerns and gender-based violence.

Through these networks, organizations, frontline workers (FLWs) Sama was able to disseminate information widely and share updates on Covid care, as well as vetted information on a range of related issues to girls and women especially from rural areas. Information resources on PPE, masks, preventive measures, symptoms, testing facilities, community and home based isolation etc. as well as entitlements announced by the government were regularly disseminated via WhatsApp, emails, audio messages, calls, etc. Updated information on helplines – National as well as Delhi specific - was made available on Sama's website.

### ***1.2.Reaching out to Women and Girls from Jharkhand and Uttar Pradesh: Combating Fear and Panic through Orientations***

With the national lockdown in place, many women and girls from Jharkhand and UP reported that they found themselves constrained within their households with little contact with the outside world. With the migrant workers returning home, with no means of livelihood, the women and girls were overburdened with additional work and limited finances. With most of

the information being available through media, especially through smart phones the women, especially found themselves, completely alienated as they did not have access to smart phones or the knowledge to operate and access information. Further, girls who would be able to meet and share their doubts and fears with their peers in schools and outside, suddenly had little access and rather faced increased vigilance at home. While one member mostly the brother or father would have a smart phone, the girls would have little access to it and if they did their activities were heavily monitored.

Sama reached out to most of the women and girls, with whom they were working through phones and video calls. It was challenging to reach to the women, due to their limited access to phones, but regular contact was maintained with the girls in both the states. Information regarding the nature of the virus, the preventive measures-on the use of soaps, setting isolation centers for those coming from other states was shared with them.

While the medium of reaching out was quite new for the girls from these marginalized communities, they mentioned that after received adequate information they were able to speak and inform other members of the community and also help in reducing the panic which had initially engulfed them, as they had little access to information about the virus and the reasons for the sudden lockdown.

Online sessions were organized in both the states to inform women and girls on the preventive measures to contain the spread of COVID-19. Given the limitation in the number of smart phones available, sessions were held in small groups of eight to ten girls, while maintaining physical distancing norms.

They were also informed how the virus breaks down when it comes in contact with soap. After these discussions, it was reported by the girls that they informed their mothers and the other people in the community but also took initiative in making sure that the common areas such as hand pumps, buckets in the wells, and door handles in the common toilets which are used by everyone in the community are washed and cleaned with soap regularly.

Another session was held through video call with small groups of girls informing them about the nearest isolation centers, helplines numbers for ambulance and other health needs. The girls were also equipped with information about websites which they could access, were in Hindi, and would provide them with accurate data on spread



*Interactive session through Video Call with Girls from Karge Village, Jharkhand*

of the virus, had helpline numbers and contacts to institutions working on domestic violence and psychological support. They were also informed on how they could access their Jan Dhan Account online and keep a tab on the payment made under the Pradhan Mantri Garib Kalyan Yojna without having to actually go to the banks. As the virus spread and the metropolitan

cities went into complete lockdowns, more people started returning back to their villages and the fear and panic of contracting the virus rose.

Many of the girls from the villages in UP who had been regularly attending capacity building trainings and workshops with Sama, contacted the team and expressed their fears especially concerning myths and rumors regarding COVID-19. As certain communities were labelled as “super spreader”. The team from Sama clearly explained to the girls how religion has nothing to do with the spread of the virus and

to reach out to the migrant with the support they may need. Through these conversations the girls were also informed that they should not believe everything they hear, to critically question information, and to reach out to credible sources when in

Given the limitation in the number of smart phones available, sessions were held in small groups of eight to ten girls, while maintaining physical distancing in the villages of Maria Toli,

Sasoi, Chund, and Murma villages in Jharkhand and with girls from Mehendiganj, Basant Patti, and Bheemchandi in UP. The girls were informed how they can use cotton dupattas folded thrice as makeshift masks as masks were not available, especially when they visit markets and other crowded spaces.



*Interactive session on precautionary measures against Covid-19 through Video Call with girls from Mehendiganj, Uttar Pradesh*

The girls also expressed fears and frustrations of being stuck at home, increased workload and surveillance, and feeling alienated from their peers as schools and colleges were shut. They talked about difficulty in attending their online classes and thereby complete their education. Many of them expressed the pressure they were facing at home to get married. As it had been difficult to reach out to women in the interior villages of Jharkhand, Sama was able to maintain contact with four women leaders from the local organizations, who were informed via phone about the preventive measures and the nature of the disease. These women further informed the other members their communities. They also reported back the challenges faced by the communities and Sama was able to plan further relief activities accordingly.

### ***1.3. Reaching out to Frontline Women Health Workers***

Women Health Workers are on the frontline in the fight against COVID-19. They are primarily unprotected, poorly paid or unpaid, working in inadequate & poor working conditions. Incidents of physical violence on health workers have increased in different work settings & communities in the last three months. The Sama team reached out to frontline health workers such ASHAs, AWWs and ANMs to understand what is happening on the ground, what kind of safety measures & types of equipment they received, and the kind of stigma & challenges they are experiencing.



In Mehendiganj Block, Varanasi District, UP, Sama contacted six ASHA workers who had been actively working during the lockdown to increase community awareness, conducting surveys for tracking suspected patients, and migrant workers. The ASHAs expressed their helplessness with their work, especially the ever-increasing workload which got worse due to COVID-19. They mentioned that they have been working nearly 12 hours a day without any personal protection equipment and haven't been provided with masks, sanitizers, or soap. They expressed their constant feeling of fear and the lack of protection for themselves and their families. Similarly, in Mandar Block, Ranchi District, Jharkhand, the team provided psychological support to eight women health workers (ANMs & ASHAs) over the phone. Many of these health workers were dealing with the fear of infecting their family members especially children. While providing support, the team discussed safety measures and precautions in detail with them. In addition to this, we shared information on the health insurance scheme announced by the government for health workers who are fighting against COVID-19 in the government hospitals and health care centers.

#### ***1.4. Interventions in Response to Increasing Gender Based Violence (GBV) including Psychosocial Support***

Within the first week of lockdown period, the crisis for many survivors of violence seeking support emerged through varied sources (organizations working on GBV) including a formal briefing of this crisis held by National Commission for Women (NCW). The lockdown

DOMESTIC VIOLENCE DURING COVID-19 LOCKDOWN PAN-INDIA LIST OF ORGANISATIONS OFFERING PHONE/ TEXT/ONLINE SUPPORT TO DOMESTIC VIOLENCE VICTIMS		
Nazariya	Delhi	9818151707
Shakti Shalini	Delhi	24373737
Jagori	Delhi	26692700/ 880096640
Sama Resource Group for Women and Health	Delhi	9871642320/9650971363
Saheli	Delhi	24616485
Women's Manifesto	Delhi	8860454212
ARU Foundation	South Delhi	9911346882
Seher	Delhi-NCR/ Haryana	8826819805
No Tears Foundation Trust & Nitiyaalya	Delhi-NCR/ Lucknow	9911694947
Aali	Lucknow	9415343437
Humsafar	Lucknow	7007629220
Study Hall Educational Foundation	Uttar Pradesh	9839044559/6386193775
Nari Samta Munch	Pune	9987720696
Cehat	Mumbai	9029073154
Moonlight Foundation	Mumbai	8928585479
Majlis	Mumbai	7506732641
Ridhi Sidhi Bahuuddeshiya Sanstha	Maharashtra	7038816330
Women's Manifesto	Kerala	7560977795
Bembala Foundations	Bangalore	9980660548
Sawayam	Kolkata	9830747030/9830204393
Sakhi	Bhopal	1800233244/
Centre for Criminology and Public Policy	Rajasthan	8989585097/895952560
Special Cell for Women	Assam	8110835606/9724906119
Grameen Mahila Kendras	North-East Network	6000015191/8876127539
Invisible Scars	Hyderabad	Kamrup:9365648832/
Society for Cyberbad Security Council	Hyderabad	9435017824/9957029961,
Bhumika Women's Collective	Telangana	Darrang: 9577576677,
Aakansha Seva Sadan	Muzaffarpur	Golaghat: 8638747110
Adithi	Bihar and Jharkhand	8008933445
Aali	Jharkhand	900085241
Psychologists for India Helpline	National	18004252908
	National	9905443544
	National	9934029353
	National	9693853019
	National	9000070839
	National	04027605316

aggravated situations of violence that happen to people based on their gender, sex, or sexual orientation. Being restricted within homes/families, for many people, meant being in isolation with abusers. Sama, as part of its sustained engagement on the issue of GBV, decided to adopt the crisis response in this scenario offering helpline services along with coordinated efforts with other organizations. A compiled list of helplines and organizations<sup>1</sup> across different states/regions offering support to survivors of domestic violence during lockdown was available on social media channels of women's groups, including Sama's. The Sama team also received few distress calls and appropriate referrals to police, hospitals, legal support were coordinated as per the needs of the survivors/ support person assisting the survivor. It was also suggested that similar measures be taken in resource poor settings

<sup>1</sup> <http://www.samawomenshealth.in/helplines-for-domestic-and-gender-based-violence-amidst-covid-lockdown/>

or rural villages, especially for/ with the marginalized communities.

Sama team members volunteered time to respond to GBV survivors telephonically. The team received calls during the lockdown and thereafter. Sama also facilitated access to other support services during this time. Sama had adopted the crisis response in the lockdown scenario in 2020 and offering helpline services for survivors in situation of violence, along with varied other women's organizations through a coordinated effort.

**Assessment of GBV situation:** The Sama team got in touch with few representatives of grassroots NGOs in the states of Jharkhand, UP and Odisha. The telephonic conversation with them revealed that in Jharkhand, intervention in GBV cases (specifically domestic violence) is mainly dependent on the support of Mahila Samuh – women's local group, which works towards redressal of complaints regarding domestic violence and that counselling sessions were being conducted through phone calls. In Odisha, One Stop Centers (OSCs) and National Alliance of Women's Organizations (NAWO) support centers were supporting survivors of domestic violence through phone, connecting them to the police if required and counselling the couple till the lockdown ends. The OSCs remained open during the lockdown whereas as many NAWO counselors worked telephonically.

The Sama team also received the two distress calls from the grassroots organizations and individuals working in Jharkhand. The team facilitated the discussion and provided legal support and information. In the first case, the girl was sexually assaulted by her father. She had filed a FIR and was living in a safe space with the help of her mother. However, her FIR was not registered. The team played the role of intermediate and handover the case to AALI an organization, which provides legal support to women facing violence in UP and Jharkhand.

### ***1.5. Psychosocial support and counselling***

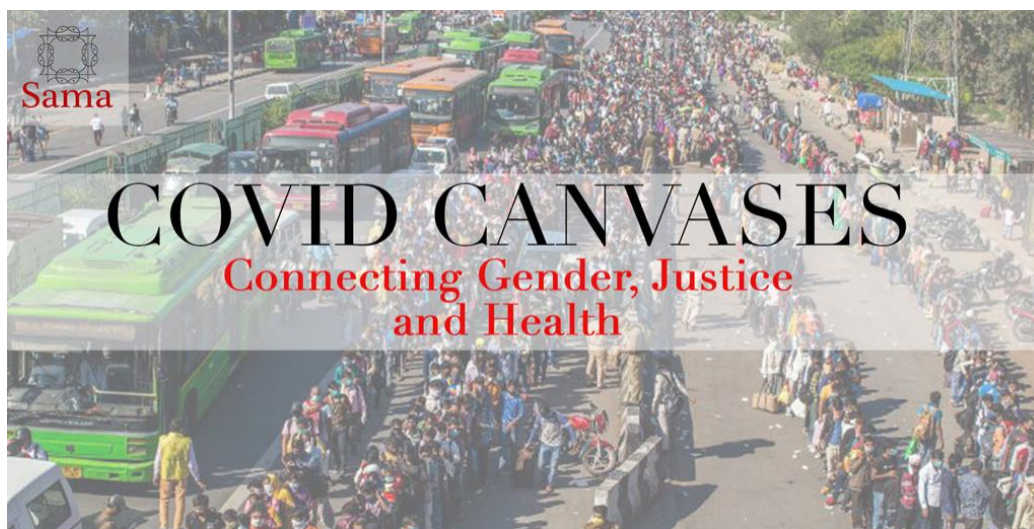
Anxieties and distress of day to day survival, depression, isolation, fear of illness, grief due to loss and many other psychological effects are increasingly evident. The abysmal reality of healthcare, compounded by a narrow COVID-19 health response has imposed serious barriers to healthcare for non-COVID health needs, including for mental healthcare.

Hunger, violence, loss of livelihoods / employment, gender violence, gendered burden of labour and care are only some of the many social and economic situations that have been aggravated during COVID-19 and responses such lockdowns, quarantines, isolation, and burden of work and care as in the case of women, girls and healthcare workers, etc. The stigma in the COVID-19 context that has also deeply affected psychosocial wellbeing and compounded the fears and consequences of inequalities and discrimination.

Sama realized that an action to foster psychosocial wellbeing in the COVID-19 context and its aftermath must resonate and integrate necessary support, healthcare as well as address the social and economic disruptions as a result of COVID-19 responses. Sama developed a series of messages and posters on mental wellbeing and provided psychosocial support and counselling to those affected to promote psychosocial wellbeing.

### ***1.6.COVID Canvases: Connecting Gender, Health and Justice***

Sama also initiated a dedicated webpage “COVID Canvases: Connecting Gender, Health and Justice”. The primary objective is to coordinate exchange of information, to build understanding, analysis of gendered and social inequities for COVID-19 and responses to it in community, country, and regional contexts. This webpage has dedicated reflections, article, commentaries, announcements vis-à-vis COVID.



*A page dedicated to COVID-19 support and discussion on the Sama website - <http://www.samawomenshealth.in/samas-engagement-with-covid-19/>*

## **II.DIRECT SUPPORT**

Sama provided ration kits, sanitary kits to girls, women and transwomen from Dalit, Adivasi, Muslim, transgender communities in UP, Bihar, Jharkhand, Delhi, etc. About 1883 sanitary kits and 400 ration kits were supported by Sama and distributed through local organizations in respective communities. PPE kits were also sent on the request of government health facilities and health care providers in some states.



### ***II.1.Access to Sanitary Napkins and Essential Hygiene Products***

Despite the MoHFW has also launched the ‘Menstrual Hygiene Scheme’ to promote menstrual hygiene among adolescent girls (10-19 years) in rural areas as a part of the Rashtriya Kishori Swasthya Karyakram (RKSK), many young girls could not access Sanitary napkins during this period with strict lockdown, and lack of access to school, and other essential services. Given the financial hardships during the lockdown, women and



young girls found it extremely difficult to purchase sanitary pads.

The Sama team provided inputs and coordinated for the access to sanitary napkins in UP, Jaunpur district with an NGO named Gramin Vikas Prashikshan Sanstha. Sama coordinated with the organization and shared collated information on menstrual health which was then developed as information briefs in the form of pamphlets and posters to be distributed across the community.

In Jharkhand, it was found that the Yuva Maitri Kendras under the RSKS programme was an essential link in catering to the needs of women and girls, especially in availing sanitary pads and menstrual health information during the lockdown. It was recognized that the scheme was not functioning and providing the support that the girls needed for which a letter of recommendation has been sent to the RSKS department of Jharkhand, and regular follow-ups have been made to ensure that the sanitary pads are provided by the government. Sama team along with other organizations initially provided the Sanitary napkins to the girls and women.

## महिलाएं किसी से कम नहीं : पूजा



जौनपुर। विकास खंड करंजाकला क्षेत्र के अंतर्गत कोटवार व सिद्धीकपुर गांव में किशोरी स्वास्थ्य जन जागरूकता कार्यक्रम का आयोजन शमा फाउंडेशन नई दिल्ली के निर्देशन में ग्रामीण विकास प्रशिक्षण संस्थान द्वारा किया गया। जन जागरूकता कार्यक्रम में परियोजना समन्वयक पूजा यादव ने बताया कि किशोर-किशोरियों के शरीर में 10 से 19 आयु वर्ग में बदलाव आता है उनमें कभी-कभी खून की कमी भी होती है बाद में यह एनीमिया के रूप में सामने आती है पीड़ित किशोर, किशोरी कुपोषण के भी शिकार होने की संभावना बढ़ जाती है। स्वच्छता, पोषण, स्वास्थ्य, किशोरियों में मासिक चक्र, एनीमिया के लक्षण व बचाव, खानपान संतुलित आहार के बारे में परस्पर चर्चा किया। किशोरी समूह की सदस्य रिकल भारती ने कन्या भ्रूण हत्या, बाल विवाह, धूम्रपान पर विस्तार पूर्वक चर्चा करते हुए कहा कि आज महिलाएं किसी से कम नहीं हैं केवल उन्हें अवसर देने की जरूरत है यदि उन्हें अवसर मिला तो निश्चित में ही समाज में स्थान बनाएंगी। कार्यक्रम की संयोजिका ममता ने कहा कि कोरोना वायरस वैश्विक बीमारी है इससे बचने के लिए सभी को जागरूक होने की जरूरत है दो गज की दूरी जरूर बनाए रखें, बार-बार हाथ धुले और मास्क का प्रयोग अवश्य करें।

Sama through their network has been reached out to different organizations for their support, in order to provide essential hygiene products in the communities. With the help of our networks, Sama provided prevention kits -sanitizers, soaps, face shields and masks to Covid volunteers, front line workers, health workers in Delhi, Bihar, Jharkhand and UP. We are in the process to provide our entire on-ground team and the community members with protective masks and gloves. In some of the field areas, our network members have made local masks and distributed them in their communities.

Along with the distribution, Sama has conducted online orientations on Covid care including the use of masks.

## II.2. Access to Food and Entitlement

While working on the relief work, we focused more on Dalit, Muslims and Tribal communities who are living at the margins. Sama team had reached out to communities in Bihar, UP, and Delhi via local NGOs/groups working with women, young girls and transgender communities.

With restricted access to ration and lack of livelihood options, Sama in collaboration with Akanksha Sewa Sadan (ASS) -Muzaffarpur, Bihar provided relief support in the form of ration kits which included rice, pulses, salt, cooking oil, along with washing soap, detergent, and other items as per the requirement of the communities. Through this initiative, Sama with ASS reached out to a total of 300 women from households of marginalized groups-dalits, other backward classes (OBC), Muslims, transgender communities-across ten panchayats.



The members of the local organizations facilitated and led the relief activities at the frontlines with the communities.

For the relief measures, women lead households, single women, widowed, older women living alone were prioritized to receive support due to their additional vulnerabilities. Further, concentrated efforts were also made to reach out to the transgender community and those living with disabilities to provide support. Local women leaders from the marginalized communities helped in the organization and facilitation of relief efforts. The relief activities are still ongoing and a network of 250 girls have been recognized to continue the outreach activities in the area.

**COVID CHALLENGES, THE WORK CONTINUES...**



*Ration and Safety Kits being prepared for Marginalised communities in Arajiline Block, Varanasi, Uttar Pradesh*



*Ration and Safety Kits being distributed in the communities with the help of Mahila Swarozgar Samiti in Uttar Pradesh*

**COVID CHALLENGES, THE WORK CONTINUES...**



*Distribution of Safety and Sanitary Kits in Maria-Sasoi Toli, Mandar Block Ranchi, Jharkhand*

In UP, Sama collaborated with Mahila Swarozgar Samiti (MSS) - Varanasi, UP who has been working with the women and girls from the Musahar community (the most marginalized), dalit, and muslim communities in UP to elevate poverty by supporting them with income generation and organizing self-help groups. COVID-19 amplified the vulnerabilities of the Musahar community. Sama provided ration kits which includes wheat flour, rice, pulses, salt, mustard oil and Hygiene and Sanitary kits which included sanitary napkins, soap, and masks. In coming



*Distribution of Sanitary Pads and other essential items for girls at Karge Village, Mandar Block, Ranchi, Jharkhand*

weeks, these kits distributed to these communities. This was provided for one month to each family.

During the lockdown, women community leaders from the tribal communities of the Mandar block, Jharkhand contacted Sama and shared concerns regarding a group of 36 single women who had no family support or means of livelihood to support and sustain themselves. Along with lack of access to food there was also lack of access to sanitary napkins and hygiene products. Through these efforts Sama was able to provide safety kits and ration.

### III. Support to the Vulnerable Groups during Lockdown in Delhi

There have been significant gaps among most marginalized communities in accessing the ration or cooked food due to lack of information and restricted mobility during lockdown from the *bustees* and resettlement colonies of Delhi. Sama started with identification of people who required food and monetary aid on an urgent basis. They included single woman, persons with disability, pregnant women, children, elderly. Sama has collaborated with other NGOs working on relief and ration support in this initiative. Further, a list of families from Delhi, with their names, contact details and number of family members, was handed over to local authorities towards ration and relief supply. Sama regularly shared information regarding food distribution and contact details of all the concerned officials in the Delhi Government to ensure that these families were able to get food. Sama has provided ration support to 100 families in South Delhi. After initial few days of struggle with the administration and other local organizations, we were able to provide dry ration to almost 300 families.

### IV. Support to the Migrant Workers

The lockdown severely impacted migrant workers in various ways. The migrant workers who found themselves stranded found themselves without food, shelter, and financial support to return to their native villages. Further, with restrictions on transport, many found themselves stranded in cities, without work and wages. Most of these families did not have ration cards or Aadhaar cards and found it even more difficult to survive. Many representatives from various NGOs came forward and facilitated and supported the transportation services for migrant workers and their families.

Covid challenges, the work continues...



*A migrant worker with her 10 day old child*



*Pregnant migrant worker travelling on trucks to reach their villages*

Sama facilitated food and water, masks, for migrant workers who were walking through Delhi and transportation (bus, permissions, etc.) for migrant workers wanting to return home from Delhi. Sama also provided food for migrant workers particularly for women and children and their families on the National Highways near Delhi. Pregnant and lactating women were given food, nutrition supplements, masks, soaps and sanitizers and travel support.

Sama also supported transport for a few families from Chhattisgarh, Jharkhand, Bihar and Uttar Pradesh. Sama hired a bus was to collect the workers from South Delhi hailing from Bihar, Jharkhand. All the COVID- 19 protocols were followed during this process.

## **V.Challenges in the Process**

The COVID-19 pandemic has pervaded our thoughts, words, work, and has posed new and old challenges.

- One of the challenges faced by the Sama team was adjusting to working from home and providing relief. With mutual support, the team has been able to effectively coordinate and conduct relief activities in Delhi and the states of Jharkhand, Chhattisgarh and Bihar.
- COVID-19 protocols themselves presented a significant challenge as a large number of girls and women cannot sit together. Hence, the meetings had to be planned in such a way that only five to six girls or women could come together for discussions or trainings.
- It has been challenging to get women to attend meetings over smart phone. Most of the women do not have the digital literacy to use a smart phone confidently and they also mentioned being overburdened with work at home.
- Most of the relief related information and details of the schemes are available online. Majority of the most vulnerable people have no access to internet or skills to fill the online forms. Thus, many people are still not able to avail the government services. In many cases, even when we try to link people to local service providers, the helpline numbers for providing the due services are not reachable or appear busy.
- Even when people received financial support under different schemes, they were not able to withdraw it as people were not allowed to move out of their colony or neighborhoods. Additionally, long lines at the bank and not having ATM cards increased barriers for many.