

GLOBAL EMERGENCY UPDATE

Catholic Relief Services is pleased to share the highlights of our key 2021 emergency response and recovery activities, as well as the most urgent humanitarian needs—and opportunities for global impact—for 2022. This work is possible thanks to the generous support of private and public donors, the dedication of our local partners, and the unwavering presence of Caritas and the Catholic Church.



In India, CRS and our partners have supported primary health care centers with lifesaving supplies such as oxygen and personal protective equipment. Photo by Ramita Rathod for CRS

HIGHLIGHTS AND OPPORTUNITIES FOR IMPACT

SPOTLIGHT 2021: COVID-19 RESPONSE

Since March 2020, CRS has reached 28,384,006 people with COVID-19 response activities. We continue to focus on vaccination and vaccine rollout support. Meanwhile, comprehensive CRS programming continues to help prevent the spread of COVID-19, strengthen the capacity of and support for local health responders, and assist extremely vulnerable families and communities as they manage the long-term impacts of the pandemic.

CRS has been working closely with partners and local government officials in several countries to adapt humanitarian and development projects to the COVID-19 context. As our country programs and partners implement critical humanitarian programming, we are especially mindful of high-risk populations, including elderly adults and vulnerable children, refugees and migrants, and people with compromised immune systems or disabilities, and their caregivers. Urgent support is essential to help CRS teams and our partners respond to the evolving needs of this pandemic in diverse contexts, for families and communities who are in greatest need. See Program Reach in Numbers on page 2.



PEOPLE HAVE BEEN REACHED THROUGH THE COVID-19 RESPONSE ACTIVITIES OF CRS AND OUR PARTNERS SINCE MARCH 2020



CRS AND PARTNER COVID-19 RESPONSE

PROGRAM REACH IN NUMBERS



28,384,006 people

reached with COVID-19 programming.



28,306,494 people

reached through risk communication activities with COVID-related information.



3,268,897 people

reached with water, sanitation and hygiene, as well as living supplies.



70,902 health care staff

trained in COVID-19 prevention or care.



3,970 health facilities

provided with COVID-specific support.



1,166,591 people

reached with food, cash, vouchers or in-kind assistance for essential needs.



165,901 people

supported with livelihoods assistance.



48,114 people

engaged in psychosocial support.



99,541 people

trained in protection and safeguarding.

HIGHLIGHTS OF 2021

Comprehensive programming took place across CRS country programs throughout the year. Here are highlights from each region:

ASIA

In **India**, CRS is working with the health ministry to reach 8,000 supervisors of 150,000 community health workers—called accredited social health activists, or ASHAs—who use mobile phone tools to provide links between the health system and rural communities, encouraging child immunization, offering first aid and providing advice to pregnant women. These efforts aim to improve the health outcomes for 174.6 million people. In the fall of 2021, CRS rolled out a COVID-19 communications campaign with Caritas India, including the regional Catholic Bishops' Conference of India and 200 diocesan partners. The

effort trained 211 staff and provided audio-visual tools in 10 regional languages. As of November 2021, 8,245 volunteers had reached 1.8 million families with critical prevention and vaccine messaging. CRS has supported 2,200 vulnerable children who lost one or both parents to COVID-19 with food and other critical assistance. We have also provided food, hygiene and living supplies to families affected by the pandemic.



CRS is supporting 22 health care facilities across the West Bank and Gaza with infection-prevention supplies, equipment and training. Photo by CRS staff

EUROPE, THE MIDDLE EAST AND CENTRAL ASIA

In Gaza, CRS reached 50,212 people, at risk of exposure to COVID-19, with in-home services, inclusive of medical screenings and hygiene kits. Also, CRS provided 35,715 people with vouchers to buy hygiene supplies. A two-day CRS training for 450 health care staff across the West Bank and Gaza equipped participants with infection prevention practices. Health care facilities also received personal protective equipment and supplies, including gloves, masks and gowns. In **Lebanon**, CRS partnered with nine faith-based organizations to reach 1.3 million people with messages about safe practices for prevention, care and vaccine access using social media campaigns, videos, emails, texts, brochures and bulletin boards.

In India, CRS supports health workers who use mobile phone tools to provide links between the health system and rural communities.

Photo by Elin Murless/ CRS





In Nigeria, CRS is training health workers to ramp up COVID-19 vaccination activities.

CENTRAL AFRICA

In **Nigeria**, in partnership with the Core Group Polio Project, CRS participated in a virtual national training of health workers to ramp up COVID-19 vaccination in Yobe State. The training was organized by the National Primary Health Care Development Agency and covered surveillance, vaccine handling, storage, distribution, administration and waste management. In Borno State, CRS supported community-based nutrition workers to conduct home visits to more than 5,500 people to provide information on prevention and hygiene practices. Female caregivers of children enrolled in CRS programs received nutritional support and prevention information.

EAST AFRICA

In **Kenya**, CRS is a key partner contributing to the government's vaccination efforts and participated in the launch of the national campaign in Nairobi and Kisumu. With

the government's goal of vaccinating 10 million people by December 2021, CRS support included training health care workers on vaccine rollout and risk communication, contact tracing, mobilizing health volunteers and supporting outreach teams. CRS efforts build on the longstanding partnership between CRS





A lab technician at St. Joseph's Catholic Hospital in Monrovia, Liberia, wears personal protective equipment supplied by CRS. Photo by Carielle Doe for CRS

In **Uganda**, CRS supported local government officials with health system strengthening, risk communication and community engagement. Efforts included 123 mobile van trips, 35 radio talk shows and 1,800 radio messages in the local dialect. CRS and district health officials also trained 630 village health team members on good practices in home-based care, as well as data quality and reporting, to support communities at the village level. CRS transformed Namboole Stadium in Kampala into a treatment center, and it is now being expanded into a central operations center for patient care. In Somalia, CRS recruited COVID-19 health workers in the Gedo region to support vaccination, testing, treatment and engagement activities, benefiting 6,835 people. CRS also supported the operationalization of the Garbaharey isolation center.

WEST AFRICA

In **Liberia**, CRS is combating vaccine hesitancy and misinformation. In **Mali**, CRS is participating in behavior change communication efforts targeting Malian men aged 25 to 35 using Facebook-sponsored posts. In **Sierra Leone**, the Global Fund Malaria Program has incorporated COVID-19 behavior change messages developed with COVAX, the Gavi-funded COVID-19 Vaccines Global Access program, at the community level and in the media to promote prevention.

SOUTHERN AFRICA

In Madagascar, CRS conducted a study on perceptions of COVID-19, and will support vaccination campaigns and outreach, including the establishment of mobile vaccination sites among vulnerable populations in the south. In Lesotho, CRS is supporting cash-for-work activities to mitigate the impact of the pandemic on people's livelihoods. The activities focus on soil and water conservation, rehabilitation of wetlands and reseeding of grasslands. And, in Zimbabwe, CRS continues to provide personal protective equipment and supports Catholic health facilities with health education, food and training.

LATIN AMERICA AND THE CARRIBEAN

The CRS EMPOWER project—for Empowering Partner Organizations Working on Emergency Responses—supports 20 partners in 44 countries across the region to strengthen their humanitarian response capacity. This support helps partners lead responses to the impacts of the COVID-19 pandemic, as well as to other crises. In **Colombia**, for example, EMPOWER partner Caritas Colombia is working in border areas and, since the COVID-19 outbreak, has supported 22,636 extremely vulnerable Venezuelan migrant and host community members. Support has included assisting 14,964 people

with access to health care; engaging 7,446 people in hygiene-promotion workshops; and distributing 37,349 hygiene kits. In **Brazil**, EMPOWER partner Caritas Brasileira reached 43% of families in the vast state of Amazonas with prevention and vaccine information, and hygiene supplies. Caritas also supported



Caritas Venezuela provides daily meals to vulnerable people, such as the elderly and prisoners. Photo courtesy of Caritas

Photo courtesy of Carita Venezuela

radio programming on safe practices that reached 1.8 million people. In Brazil's state of Roraima, Caritas provided water and sanitation infrastructure and hygiene supplies to 11,000 Venezuelan migrants living on the streets and in informal settlements.