



Catholic Relief Services and our partners across the world are supporting high-risk communities on the front lines of the COVID-19 pandemic. Meanwhile, our critical humanitarian and development programs are ongoing. Read the latest highlights of emergency responses by CRS and our partners.



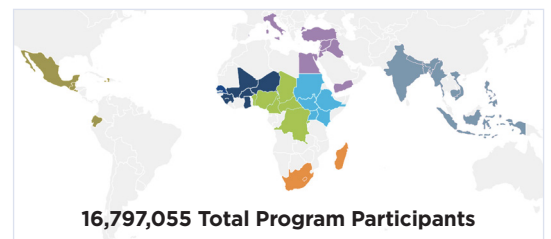
In New Delhi, India, mass cremations of those who have died from COVID-19 are taking place around the clock. Photo by Reuters/Adnan Abidi

COVID-19 SPOTLIGHT

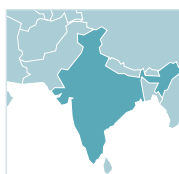
CRS and our partners have reached over 16 million people to date through on-the-ground efforts that help prevent the spread of COVID-19, bolster the capacity of local health responders, and assist extremely vulnerable families to manage the compounded impacts of the pandemic on their lives. A top priority for CRS is ensuring that national vaccine strategies include people in the hardest-to-reach communities. We are also using our networks and programs to educate local leaders and communities about the vaccines. CRS and our Catholic partners play a unique role as trusted sources of information—which, at a time of fear and misinformation, is truly lifesaving.

COVID-19 continues to impact the health, well-being, food security and livelihoods of people in all the countries where we work. The following section highlights the current response of CRS and our partners in India and Brazil.

Participants reached in CRS COVID-19 response (March 2020 to March 2021)



- 1.19 million Latin America and the Caribbean
- 645,659 Europe, the Middle East and Central Asia
- 4.55 million West Africa
- 4.19 million Central Africa
- 1.63 million East Africa
- 1.73 million Southern Africa
- 2.83 million Asia



INDIA

Hospitals and medical facilities across the country are beyond capacity, having run out of oxygen and intensive care beds.

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BRAZIL

The country accounts for 30% of new COVID-19 cases and has the second-highest number of deaths globally.

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At a crematorium in New Delhi, India, women mourn a person who died of COVID-19.

Photo by Vijay Pandey/
ZUMA Wire/Alamy



India

As India faces a second wave of COVID-19, thousands of people are dying daily. Hospitals and medical facilities across the country are beyond capacity, having run out of oxygen and intensive care beds. Every day, hundreds of patients await lifesaving care outside clinics and hospitals in crowded city centers. The government of India and health providers nationwide have identified an urgent need for access to lifesaving health care equipment, support for front-line health workers, and risk-prevention messaging.

With only about 12% of India's 1.3 billion people fully vaccinated as of early May,¹ the spread of COVID-19 is far outpacing the vaccination rate. India's vaccination drive is experiencing severe shortages and wide disparities in distribution between states. The pandemic has put a strain on primary health care services across the board. It has also laid bare the challenge and inequity of access to health care, especially in rural areas that may have no hospitals or health posts.

As the country enters the second wave of the virus, vulnerable and marginalized people will face barriers to getting sufficient food and other basic means for recovery. Amid long-term lockdowns and loss of livelihoods, thousands of migrant workers across the country are returning to their hometowns.

CRS and Caritas India are supporting families and communities affected by COVID-19 in the states of Kerala, Odisha, Uttar Pradesh and Bihar, and in the capital, Delhi, complementing government efforts.

A critical role for CRS and Caritas has been supporting migrant workers who have a heightened risk of COVID-19 exposure and are stigmatized because of their work. To date, CRS and Caritas India have provided 14,885 people with food assistance and hygiene kits. We have also provided psychological first aid for those dealing with distress, anxiety and loss. CRS and our partners are also assisting front-line health workers in Uttar Pradesh as they carry out health communication campaigns, including for risk prevention and vaccination readiness.

CRS and Caritas India are partnering with the large network of Diocesan Social Service Societies, as well as with the Catholic Health Association of India, or CHAI, one of the world's largest health care networks—ranging from small primary health care centers to large hospitals—that serves 21 million people a year. Support to CHAI will include the provision of personal protective equipment kits, medical supplies and disinfectants; staff surge and volunteer support; food for recovering patients; and psychosocial support for health care workers. We will ensure the most vulnerable families can buy food and hygiene supplies with cash or voucher assistance, based on market viability, and will work with families and small businesses to restart income-generating activities in the long term.

We are also monitoring the situation in Nepal due to an increase in cases and the large numbers of migrants that have returned home from India and other neighboring countries.

1. WHO COVID-19 Dashboard. Global: [India](#).

“Families are carrying patients from ambulances to the doors of the hospitals, only to be turned away with no hope. As migrants return home, rural areas are getting worse, with little capacity to respond because many resources are going to larger cities with the greatest needs.”

Jomey Joseph
Head of Office, CRS India

A gravedigger walks through Parque Taruma cemetery, amid the COVID-19 outbreak, in Manaus, Amazonas. Photo by Reuters/Bruno Kelly



360,000+

PEOPLE HAVE BEEN REACHED WITH INFORMATION ON PREVENTATIVE MEASURES VIA RADIO STATIONS AND ONLINE COMMUNITY ENGAGEMENT.

Brazil

Brazil accounts for 30% of new COVID-19 cases globally and is home to immune-resistant and highly contagious variants. On March 5, 2021, World Health Organization Director-General Tedros Adhanom Ghebreyesus said that the country's failure to arrest the spread of the virus should be a concern for its Latin American neighbors and a warning to the world. Brazil has the second-highest number of deaths globally after the United States. Rural and urban health systems are in total collapse, and intensive care units for treating COVID-19 have reached critical occupancy levels, at over 90% in 15 of 27 state capitals.

Mass vaccination has been slow, with the government announcing that it only has enough doses for half the population by the end of 2021. A recently approved law allowing states and private companies to buy vaccines will damage the vaccination campaign by driving up competition and prices. This, in turn, will exacerbate the country's deep social and regional inequalities. The Brazilian media reports a growing anti-vaccine sentiment, which had been rare in a country with an award-winning national immunization infrastructure.

Human rights organizations in the country have been reporting the devastating impact on indigenous communities in the Amazon. CRS partner Caritas Brasileira is working in some of the most vulnerable and isolated indigenous communities.

To date, they have:

- Reached 5,000 extremely vulnerable families belonging to riverside, indigenous and maroon settlements, or 58% of families in these areas.
- Reached 43% of families in peri-urban and rural communities in some of the farthest reaches of Amazonas state.
- Provided 5,000 families with four months of hygiene materials such as hand-washing stations, rainwater harvesting systems, soap and hand sanitizer.
- Provided four months of materials for home disinfection—bleach, gloves, towels and mops—to families with suspected or confirmed cases of COVID-19.
- Disseminated vital, accurate information on how the virus is transmitted, and what to do and where to go if people have symptoms.
- Communicated preventative measures in partnership with seven radio stations and online community engagements reaching over 360,000 people throughout the state.
- Mobilized the private sector to donate oxygen cylinders to rural health systems where the death rate has soared due to the lack of a reliable oxygen supply chain.



Caritas Brasileira transports hygiene kits by boat to remote communities in Brazil's northwestern state of Amazonas. Photo courtesy of Caritas Brasileira

EMERGENCY RELIEF AND RESPONSE AROUND THE WORLD

In the Central African Republic, families may be prevented from reaching their fields during the planting season due to the presence of armed groups. Photo by Sam Phelps/CRS



AFRICA

Central African Republic

The Central African Republic, or CAR, is experiencing a major humanitarian crisis: One in three Central Africans are displaced, as many as 1.5 million people, due to escalating violence. In March, the government and international forces regained the northern territories of the country from rebels. As a result, the country's main supply roads are more accessible.

In recent months, the CAR government held legislative elections and a presidential inauguration. Despite these improvements, the situation remains very volatile. Nearly half of the population suffers from food insecurity, and the situation is likely to deteriorate as the presence of armed groups prevents families from reaching their fields during the planting season, which began in April. It is anticipated that the next harvest will be well below average.² CRS is working with Caritas CAR to provide cash assistance to 2,000 vulnerable families in Bangui, Boali, Bouar and Damara. Emergency efforts may grow to include food, water, sanitation and hygiene, and market support based on further assessments.

2. FEWS Net. February 2021. [Central Africa Republic: Remote monitoring report](#).

1.5 million

CENTRAL
AFRICANS ARE
DISPLACED

A signpost to the capital cities of Sierra Leone and Guinea. Amid a fresh Ebola outbreak in Guinea, surveillance activities in border districts are being enhanced. Photo by Sally Hayden/SOPA Images/Sipa USA



Guinea

In February, the Guinean government announced an Ebola outbreak—the first in the region since the 2013-2016 epidemic that killed more than 2,500 people in Guinea and over 11,300 across Sierra Leone, Liberia and Guinea. As of April 7, 2021, the government had reported 23 Ebola cases, 14 of them fatal.

Experience from the earlier epidemic showed that front-line health workers in low-resource primary health care settings are among the most vulnerable, as they may come into contact with Ebola-infected people who are unaware of their status, and work in facilities with poor water and sanitation. In Gouécké Prefecture and the town of N'Zérékoré in the south, none of the 22 health facilities has a well-functioning infection prevention and control, or IPC, program, hand-washing facilities or personal protective equipment.

With ongoing contact tracing and an increased risk of the spread of Ebola, CRS and the Catholic Organization for Human Promotion, or OCPH, anticipate demand for emergency food may quickly outstrip available resources. CRS is partnering with OCPH and Caritas Guinea in N'Zérékoré to deliver food and hygiene supplies to 300 families within 48 hours of contact tracing. We are also training health agents in N'Zérékoré. With OCPH, we will conduct a food and market needs assessment that will contribute to our understanding of the community-wide impacts of the Ebola outbreak and subsequent market and movement restrictions, particularly as more communities are affected. CRS will also support rural health facilities with sustainable access to water, and technical support to use and maintain new water and sanitation infrastructure.

Manyok Dut, 19, works on a fishing net in Matok village, Jonglei State, South Sudan. He is part of a fishing group and livelihoods resilience program supported by CRS. Photo by Will Baxter/CRS



The CRS Pathways to Prosperity approach helps farmers build sustainable livelihoods and promotes systemic change.

South Sudan

CRS helps agricultural communities recover from natural disasters and conflict, rebuild productive assets and engage with markets on equitable terms. Our phased Pathways to Prosperity approach helps farmers build sustainable livelihoods and promotes systemic change. We support the transfer of new and improved agricultural practices by providing seeds, tools, trainings and extension services. Using a group-based approach that is gender responsive and conflict sensitive, CRS engages young women and men in commercial farming or their chosen alternative livelihood options. This outlet for unemployed youth helps direct their focus away from armed conflict and toward income-generating activities. Livestock producers access veterinary services through a network of trained, equipped and supervised animal health workers. And, through a job rotation program, field extension agents provide technical and extension services to farmers, herders and fisher people, while building their technical and management capacity. This helps vulnerable communities take a central role in their own recovery and prosperity.

Sudan

West Darfur state has suffered a further series of intercommunal conflicts between Masalit and Arab tribes, chiefly over water, grazing and land rights. Clashes in and around the state capital of El Geneina have flared up since January, resulting in 164,985 people fleeing their homes or villages under attack. In early April, Sudan's government declared a state of emergency and deployed Sudanese armed forces into El Geneina. Most of the displaced families are sheltering in schools or other public buildings across the city. About 1,770 families are living out in the open, in severely hot conditions. They urgently need food, water, shelter and protection. CRS is supporting 2,935 people, or 587 families, across five gathering points in El Geneina with hygiene promotion, hygiene and living supplies, and solid waste management—including the construction of 20 emergency latrines and 10 bathing spaces. CRS is working in close coordination with the Sudan Humanitarian Aid Commission and the Sudan health ministry.

Mozambique

The Cabo Delgado province of northern Mozambique is experiencing escalating and deadly conflict that has already displaced 669,256 people. On March 24, non-state armed groups carried out simultaneous attacks—the largest of which was in Palma, a strategic administrative center for the government. An estimated 2,689 people died—more than half of whom were civilians. People have been fleeing to the Tanzanian border but are prevented from entering the country. Most then travel by river or on foot to other towns in Mozambique where they feel safe.

CRS is working with Caritas Pemba to meet the rapidly increased needs of an estimated 28,000 people who have been newly displaced. CRS will scale up our emergency response for providing families with safe and dignified housing, food, living and hygiene supplies. These activities will be an extension of our current efforts that support 24,950 displaced people with food assistance, temporary shelters, temporary latrine structures, water, sanitation and hygiene kits and living supplies.

28,000
DISPLACED PEOPLE ARE RECEIVING SHELTER, FOOD, LIVING AND HYGIENE SUPPLIES THROUGH CRS AND OUR PARTNER

A fire sweeps through Balukhali Refugee Camp Complex. Photo courtesy of Communication with Communities working group/ISCG



ASIA

Bangladesh: Fire in displaces 45,000 in Rohingya settlements

In late March, a massive fire in the Rohingya refugee settlements destroyed 10,000 shelters and displaced 45,000 people. More than 700,000 Rohingya refugees from Myanmar live in cramped, difficult living conditions in Cox's Bazar, where they are dependent on humanitarian assistance to survive. As a result of the most recent fire, these families have now lost all their belongings and are living in temporary shelters each made with a single tarp. With cyclone season and monsoon rains only weeks away, the need for durable and dignified shelter is urgent. CRS is working alongside local partner Caritas Bangladesh

to provide immediate lifesaving assistance to families whose homes were destroyed. Support includes constructing durable shelters for 200 families as part of a larger, coordinated effort with the government and other humanitarian responders. Activities include providing shelter materials as well as orientation and technical assistance to rebuild shelters. Shelters for extremely vulnerable families are constructed for them by people in the same camp through cash-for-work efforts. CRS and Caritas take a community-focused approach, using engagement and constant communication to build trust within communities.

45,000
ALREADY
DISPLACED
PEOPLE HAVE
BEEN DISPLACED
AGAIN BY THE
FIRE IN THE
REFUGEE CAMP



Rosa Gama, with her daughter Evangelina, is a participant in a CRS agriculture and nutrition project in Timor Leste. Photo by Anny Djahova for CRS

Timor-Leste

Heavy rainfall from late March caused severe flooding that washed away homes, roads and other infrastructure in parts of the country. About 27 people died and 10,325 people have been evacuated.³ The capital, Dili, is the most severely affected, with essential COVID-19 prevention infrastructure damaged, including the National Laboratory and the Timorese central pharmacy. This comes at a time when COVID-19 cases have spiked, and the government has declared a lockdown. Given the evacuation of families and loss of hygiene supplies, the spread of the virus is a growing threat. Urgent needs include food; living supplies and hygiene materials; portable toilets; and masks and sanitizers. The National Directorate for Disaster Risk Management is leading the government's response and its coordination with humanitarian responders like CRS and our partners. CRS is providing staffing and transportation support to the government for critical emergency activities, and continues to work with local partners in Viqueque and Baucau districts, including on rapid needs assessments.

3. UN Resident Coordinator's Office. April 5, 2021. [Timor-Leste Floods: Flash Update No 1](#).

Myanmar

Myanmar is experiencing ongoing violence since a military coup on February 1, which has eroded the economy. This is compounding the effects of conflict in the Kachin and Shan states over the last decade that has uprooted an estimated 100,000 people, who have sought refuge in camps. Humanitarian aid and resources have diminished, resulting in poor conditions in the camps. Now, amid the COVID-19 pandemic, there are safety concerns in the crowded camps, and families are eager to return home or resettle. The Catholic Church has been a pillar of support and refuge for displaced families in Kachin and northern Shan. CRS has been working in Myanmar for more than 10 years, primarily on building the capacity of our local diocesan partner, Karuna Mission Social Solidarity, and its diocesan affiliates. CRS provides ongoing technical support in nutrition, agriculture, gender, monitoring and evaluation, cash programming, peacebuilding, trauma resilience and community-based shelter. Prior to the coup, CRS was working with Church partners to equip health centers, and continues to explore ways to help those in need amid operational challenges.

14,325

HOMES WERE DAMAGED BY CYCLONE SEROJA

Indonesia

On April 2, 2021, Cyclone Seroja hit most regions of the southernmost province of East Nusa Tenggara and led to flash flooding and landslides that damaged 14,325 homes and local infrastructure, displaced families and resulted in 71 deaths. Among the areas heavily affected was Adonara Island, about a 20-minute ferry ride from the mainland.

CRS led efforts with 14 local and international aid organizations and U.N. agencies to conduct a joint needs assessment, and is providing training on the use of technology platforms for data collectors. In hard-hit areas, CRS is providing emergency food assistance, living supplies, potable water and hygiene kits.

In Mexico's port city of Coatzacoalcos, a Honduran migrant family rests on their journey. Photo by Eyepix/Sipa USA



LATIN AMERICA AND THE CARIBBEAN

Central America: Migrant Crisis

In the Central American countries of El Salvador, Guatemala and Honduras, the homicide rate is nearly five times what the World Health Organization considers an epidemic. One in five young people aged 15 to 24 are unemployed and not in school. Meanwhile, recurring drought and outdated farming practices are depleting harvests and land, threatening the livelihoods of tens of thousands of rural families.

Struggling with mounting violence and a lack of economic opportunity—exacerbated by the COVID-19 pandemic and two recent back-to-back hurricanes—many families are making the difficult decision to migrate.

For over 65 years, CRS has worked with local and national actors to tackle the factors contributing to poverty and inequality so families can stay and thrive in their own communities. CRS continues to support 35 migrant shelters in the Guatemala–Mexico corridor, which have assisted 49,369 migrants in the last six months. CRS teams in Guatemala and Mexico strengthen the capacity of our partner shelters to respond to basic humanitarian needs. This includes support to provide food, shelter, water, hygiene and sanitation, legal assistance and counselling.

Venezuela

Amid economic collapse, conflict at its borders and a rise in severe food insecurity, Venezuela is in the grip of a second wave of the COVID-19 pandemic, which has strained its already underfunded health system. As of May 6, the country had reported 202,758 cases, including 2,226 deaths,⁴ although the true toll is likely higher due to a lack of testing. Meanwhile, Venezuela's vaccine campaign has stalled, partly due to a lack of facilities to keep the vaccine refrigerated. As of end April, only 230,000 of its 30 million population had been vaccinated.

From July 2020 to March 2021, CRS and our partner Caritas Venezuela provided e-vouchers and cash assistance to 5,642 people in need. The second phase of the project began in May and will assist 9,000 crisis-affected families for 18 months in 11 dioceses. In a project funded by Caritas Internationalis, Caritas Venezuela distributed deworming tablets to 4,591 people, 527 hygiene kits, 1,464 food kits, and 1,027 water filters. It also organized 738 community kitchens, serving 84,340 people. Caritas' medical team treated 22,620 people, and 262 people received psychosocial support.

4. WHO COVID-19 Dashboard. Global: [Venezuela](#).



A CRS-supported shelter for migrants in Tijuana, Mexico. Photo by CRS staff

A United Nations team visits a village covered in ash after a series of eruptions of La Soufrière volcano in Saint Vincent. The eruption displaced boulders from an unstable hillside. Photo by Reuters/Robertson S. Henry

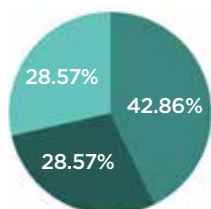


St Vincent and the Grenadines Volcanic eruption

The 4,049-foot La Soufrière volcano erupted on St. Vincent on April 9, 2021, sending up a two-mile high cloud of ash over the Caribbean island just hours after communities were ordered to evacuate. The neighboring islands of Barbados, St Lucia, Grenada and Dominica continue to experience low air quality and low visibility due to harmful gases and ash. Scientists warned that eruptions could continue for days or even weeks. An estimated 22,000 people are displaced—with 4,500 people

taking refuge in 85 government-run public shelters, and others staying with friends or family. CRS partner Caritas Antilles, in collaboration with the CRS EMPOWER program, has trained staff to carry out a needs assessments among affected families, and coordinated the shipment of food, water and hygiene kits, masks and living supplies from partner Secours Catholiques in neighboring Martinique. The supplies have been distributed to shelters and homes housing displaced people.

Partner feedback on EMPOWER technical assistance



- Met expectations
- Exceeded expectations
- Exceptional

CRS EMPOWER project builds partner capacity across the region

Launched in July 2018, the CRS EMPOWER project aims to strengthen the humanitarian response capacity of local partners by providing accompaniment and support in areas such as business development; program management; monitoring, evaluation, accountability and learning; finance; supply chain; and protection and safeguarding. With a focus on countries where CRS does not have a country program, with the exception of Haiti, CRS is supporting 13 partners in Brazil, Colombia, Ecuador, Peru, Venezuela, Antilles, Cuba, Dominican Republic, Grenada, Haiti, Jamaica, and Trinidad and Tobago.

From 2018 to 2020, EMPOWER accompanied partner-led emergency responses with a wide variety of remote

technical assistance, and more than 1,200 days of in-country in-person support.

Partner feedback on the technical assistance provided in the first phase of the project met partner expectations and, in 71% of cases, exceeded expectations or was considered exceptional. The EMPOWER team has supported responses to the Venezuelan migrant crisis in multiple countries, and the Hurricane Dorian aftermath in the Bahamas.

In its first phase, EMPOWER helped partner teams raise over \$26 million for active emergency responses. Cash assistance was the sector most frequently funded, followed by water, sanitation and hygiene; shelter; and disaster risk reduction.

CRS is working with Habitat for Humanity to support the repair of more than 200 homes and shops in blast-affected neighborhoods after the Port of Beirut was rocked by a massive explosion.

Photo courtesy of CRS and HfH



EUROPE, MIDDLE EAST AND CENTRAL ASIA

Lebanon

On August 4, 2020, an explosion at the Port of Beirut killed an estimated 200 people and injured 6,000 others, causing destruction across the city. This came on top of a surge in COVID-19 cases, and significant political and economic instability. The value of the local currency fell by 80%, making essential items unaffordable to vulnerable families. About 1 million people live below the poverty line and the country also hosts an estimated 1.5 million Syrian refugees.

The Beirut governor estimated that 300,000 people were displaced by the port explosion, and at least 170,000 people needed support to repair or reconstruct their homes. To support the recovery of vulnerable families and communities, CRS is working with Habitat for Humanity, or HfH, to provide essential support to households and neighborhoods using a settlement approach. To maximize and sustain impact, CRS and HfH provide advice and technical assistance

to local and international agencies supporting vulnerable people in targeted communities. Specifically, we are supporting the repair of more than 200 homes and shops in blast-affected neighborhoods, and providing training and technical support to four local partners in shelter repair and neighborhood recovery programs. CRS and HfH are also working on a comprehensive referral map so that we can refer families to help them meet other needs.

Our integrated approach ensures dignity, efficiency and lasting impact in three spheres:



170,000
PEOPLE NEEDED
SUPPORT TO
REPAIR OR
RECONSTRUCT
THEIR HOMES



5,800
OVERNIGHT
STAYS HAVE BEEN
PROVIDED TO
REFUGEES BY CRS
PARTNER PUZ IN
THE PAST
18 MONTHS

Bosnia and Herzegovina

In the last three years, Bosnia and Herzegovina, or BiH, has become a key transit country for refugees and migrants on the way to the European Union. Yet, the country lacks the infrastructure to accommodate all refugees, and many are forced to live on the street or in informal settlements with very limited assistance. The situation deteriorated in 2020 when the government dismantled informal settlements and forbade the provision of assistance to unaccommodated refugees, in order to control the COVID-19 pandemic.

Since December 2019, CRS and its four local partners—Merhamet, PUZ, Caritas BiH and Znaga Zene—have been providing hot meals, laundry services, safe accommodation and psychosocial support to 9,400 unsheltered

refugees and migrants in the cities of Tuzla and Bihac. CRS is now expanding services to Sarajevo. CRS' assistance has proved critical during the pandemic, as it enabled refugees to maintain hygiene, eat healthy meals and get the information they needed to be better protected against the virus.

CRS and PUZ have opened their first safe house, which provides dignified accommodation to vulnerable refugees and families. In addition to shelter, guests benefit from three hot meals a day, individual laundry services, hygiene items, occupational therapy, medical care and legal aid. Safe houses also benefit from better support from local authorities. PUZ has provided almost 5,800 overnight stays in the past 18 months.

In Iraq, CRS has been helping displaced families repair and rebuild so they can return home. Photo by Hawre Khalid for CRS



The CRS Shared Future program brings together religious leaders, youth and diverse groups for training courses on conflict resolution and social cohesion.

Iraq

Three years after formal military operations against Islamic State ended, the humanitarian context in the country remains fragile. The 2014-2017 conflict eroded community relations and national cohesion, and unexploded ordnance is still a danger. More than 1 million Iraqis remain internally displaced, and families who have returned face significant needs to rebuild their homes, basic services and livelihoods. Many children have missed critical years of schooling, and have experienced the trauma of living through conflict. Also, schools in former ISIS territory were severely damaged or destroyed and have little furniture or supplies.

Against this backdrop, the COVID-19 pandemic and a fall in oil prices in early 2020 led to rising food prices, and loss of jobs and income. CRS and Caritas Iraq are working in Anbar, Ninewa, Dohuk, Kirkuk and Erbil governorates, supporting the following:

Education

- Rehabilitating school buildings, including the construction and repair of classrooms, water infrastructure and administrative offices, as well as the supply of furniture, outdoor lights and fences for safety, and ramps and handrails for children with disabilities.
- Training teachers in student-centered, active learning that emphasizes the emotional needs of conflict-affected students.
- Distributing interactive learning materials to help teachers apply improved teaching techniques.
- Supporting remedial classes to help students catch up on critical subjects.

Shelter and water, sanitation and hygiene

- Upgrading critical shelters and made repairs to war-damaged buildings.
- Repairing household sanitation infrastructure in war-damaged shelters and carried out hygiene promotion activities, including messages on COVID-19 preventative behaviors.

Livelihoods

- Supporting 1,000 families who lost their businesses in the conflict to resume their livelihoods through cash grants and business trainings.
- Supporting female entrepreneurs to start businesses for the first time.
- Supporting returnee youth with trainings in life and job skills.

Social cohesion

- Bringing together religious leaders, young people and diverse groups in the Ninewa Plains through the CRS Shared Future program for discussions and training courses on conflict resolution and social cohesion.



HOMES AND COMMUNITIES SPOTLIGHT PARTNER WINS INTERACTION HUMANITARIAN AWARD 2021

“ We are honored to serve people displaced by natural disasters and crises. I remember [working with] people who were suffering and distressed, then seeing their smiling faces after solving their problems together.

Ratan Podder
Homes and Communities
Advisor, Caritas
Bangladesh

The InterAction Annual Awards recognize outstanding leaders in the global development and humanitarian sectors. These are leaders who have made significant contributions to defending and advancing the rights of people living in the most vulnerable communities around the world.

Ratan Podder was one of four humanitarian workers who received the Humanitarian Award in 2020. Normally, the award is given to one individual or organization, but because of the unique context of 2020 and the unprecedented number of nominations, four recipients from around the world were selected.

Ratan Kumar Podder was born in a remote village in Bangladesh and studied civil engineering. He has worked with CRS partner Caritas Bangladesh in disaster management since 1984. Ratan’s childhood dream was to be a teacher but, early in his career, he realized he wanted to dedicate his skills, time and talent to social work. This commitment came as Ratan witnessed people suffering in the aftermath of cyclones. He wanted to be engaged in work that would support affected families with emergency relief and shelter repair and recovery, as well as the establishment of cyclone shelters so disaster-prone communities would have a refuge in times of need.

In his career with Caritas Bangladesh, Ratan has led the reconstruction of 142,000 homes, and the provision of 144 multipurpose cyclone and flood shelters that have sheltered thousands of families during emergencies.



Caritas Bangladesh Homes and Communities Advisor Ratan Podder won an InterAction Humanitarian Award. Photo courtesy of Caritas

From November 2017 to December 2020, Ratan served as co-coordinator of the Inter Sector Coordination Group for the Rohingya crisis response in Cox’s Bazar, the world’s largest refugee settlement, hosting more than 800,000 people. By working in different locations and communities, Ratan recognized that home is not only a living space with walls and a roof, but a foundation of family life and the entry point for addressing the needs of individuals and families. He believes that all shelter programs must consider both safe techniques and socio-cultural aspects.

142,000
HOMES
HAVE BEEN
CONSTRUCTED
IN COX’S
BAZAR
UNDER RATAN
PODDER’S
LEADERSHIP

Shelters in the world’s largest refugee settlement in Cox’s Bazar, where Ratan Podder has overseen construction of homes and cyclone shelters. Photo courtesy of Caritas Bangladesh

