

COVID-19 2.0



# SITREP-II

Report as  
31st October 2021



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# RESPONSE AT A GLANCE

## AS OF 31st OCTOBER 2021

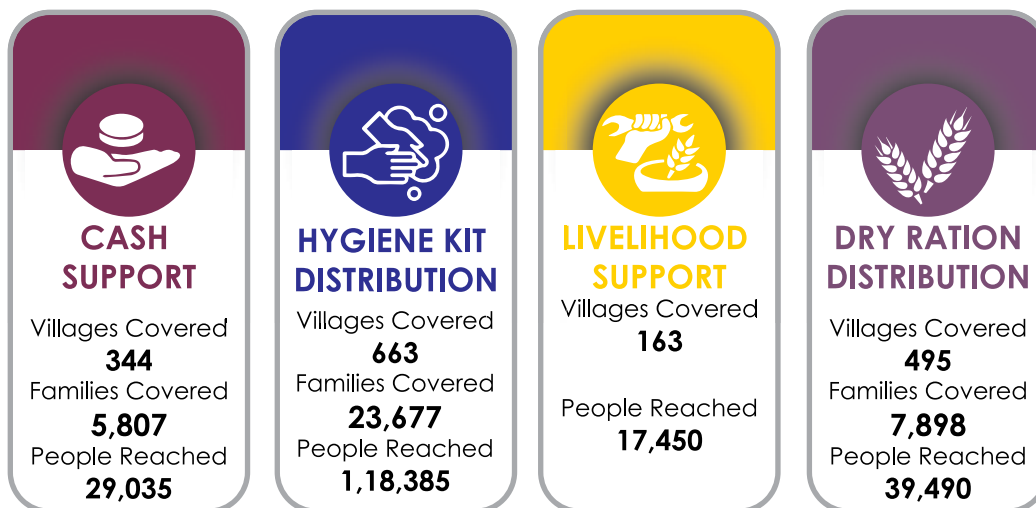
CASA's intervention was across 18 states in the country covering 100 districts and 1023 villages during these COVID times. Amidst lockdowns and a plethora of restrictions, our work was on progress in reaching out to the marginalised families and communities across the State.



### TOTAL MATERIAL DISTRIBUTION AND OTHER SUPPORT: 30,241 FAMILIES

People covered : 1,48,455

Villages covered : 1665



## Summary of Vaccination Camps as of October 31st 2022

**8 States, 26 Blocks, 240 Villages**

<b>304</b> No. of camps	<b>37,120</b> Number of people vaccinated	<b>23,713</b> No. of 1st Dose	<b>13,407</b> No. of 2nd Dose
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# Summary of responses from July to October 2021

Dry Ration Distribution				
States	No of Districts	No of Villages	No of Families Covered	No of People
Chhattisgarh, Jharkhand, Madhya Pradesh, Nagaland, Uttar Pradesh, Maharashtra, Karnataka, Tamil Nadu, Andhra Pradesh, Nagaland, Telangana, Manipur, Uttarakhand	60	495	6429	32,145

Hygiene Kit Distribution				
States	No of Districts	No of Villages	No of Families Covered	No of People
Andhra Pradesh, Telangana, Kerala, Chhattisgarh, Jharkhand, Madhya Pradesh, Nagaland, Tamil Nadu, Uttar Pradesh, Karnataka, Maharashtra, Manipur	72	663	13,392	66,960

Cash Support				
States	No of Districts	No of Villages	No of Families Covered	No of People
Telangana, Kerala, Odisha, Maharashtra, Uttar Pradesh, Andhra Pradesh	28	344	3898	19,490

Livelihood				
States	No of Districts	No of Villages	No of Families Covered	No of People
Maharashtra, Tamil Nadu, Telangana, Chhattisgarh, Himachal Pradesh, Uttarakhand, West Bengal	19	163	3490	17,450

# Summary of Vaccination Camps and Awareness program from July to October 2021

State	No.of Blocks	Number of villages covered	Number of vaccination camps conducted	Number of people vaccinated	No. of people got awareness	No. of 1st dose	No. of 2nd dose
UP	4	31	15	2122	6366	1575	547
Chhattisgarh	9	21	13	20727	62181	11442	9285
Maharashtra	2	20	20	1430	4290	1146	284
Rajasthan	2	25	120	1230	3690	1230	
Odisha	1	7	2	615	1845	469	146
West Bengal	1	16	20	920	2760	675	245
Jharkhand	1	30	24	1131	3393	1087	44
Madhya Pradesh	6	90	90	8945	26835	6089	2856
<b>8</b>	<b>26</b>	<b>240</b>	<b>304</b>	<b>37120</b>	<b>111360</b>	<b>23713</b>	<b>13407</b>



# INTRODUCTION

CASA had covered many villages and population owing to aid dry ration kit, hygiene kit, unconditional cash transfer, livelihood materials, awareness programs on COVID Appropriate behaviour, Vaccination camp and so on. The organisation's highlight is to work for the marginalised and needy population who have suffered during this pandemic situation whose livelihood had declined. Hence by issuing the most needed materials and cash, people could manage their lives with the aid of CASA. This SITREP streamlines the work of CASA rendered during the period of July 2021 to October 2021.

COVID-19 update as of October 2021

- 6.14 crore vaccine doses have been administered so far under Nationwide Vaccination Drive
- 12,830 new cases in the last one day
- Recovery Rate was at 98.20%
- 14,667 recoveries in the last 24 hours increases Total Recoveries to 3,36,55,842
- Active cases account for less than 1% of total cases, currently at 0.46%; Lowest since March 2020
- India's Active caseload stands at 1,59,272; lowest in 247 days
- Daily positivity rate (1.13%) less than 2% for last 27 days
- Weekly Positivity Rate (1.18%) less than 2% for last 37 days
- 60.83 cr Total Tests conducted so far

As of 30th October 2021, India has recorded 34273300 confirmed cases, 458186 deaths, and 159272 active cases. Whereas, the count has drastically decreased by adhering the Centre and State government-imposed lockdowns with limited movement restrictions and it has turned out to have less minimal number of cases of COVID. People have given most importance to vaccination and the reach has gone even to the ground root level. CASA being the supportive organisation had made participate the people to get vaccinated.

## How does vaccination work?

Vaccines work by impersonating an infectious agent like viruses, bacteria or other microorganisms that can cause a disease or death. This anti agent makes our immune system work rapidly and effectively respond against the virus.

Habitually, vaccines are done by introducing a faded form of an infectious agent that allows our immune system to build a retention of it. Thus, our immune system can quickly recognize and fight it before it makes us sick. That's how some of the COVID-19 vaccines have been designed. India's cumulative vaccination coverage crosses 106 crore landmark milestone More than 61 lakh Vaccine doses administered till October 2021. India's COVID-19 vaccination coverage has crossed 106 Crore landmark milestone (1,06,07,39,866) as of October 30,2021. More than 61 lakh (61,99,429) Vaccine Doses have been administered. The cumulative coverage of vaccine doses, segregated based on population priority groups, is as follows:

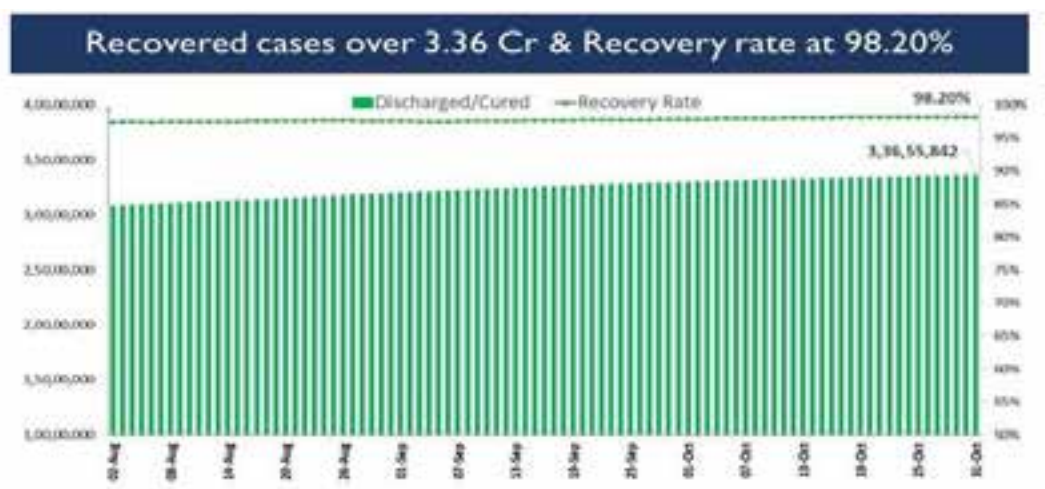
Cumulative Vaccine Dose Coverage		
HCWs	1 <sup>st</sup> Dose	10379006
	2 <sup>nd</sup> Dose	9219407
FLWs	1 <sup>st</sup> Dose	18371582
	2 <sup>nd</sup> Dose	15923115
Age Group 18-44 years	1 <sup>st</sup> Dose	418176752
	2 <sup>nd</sup> Dose	141559984
Age Group 45-59 years	1 <sup>st</sup> Dose	174720914
	2 <sup>nd</sup> Dose	96177556
Over 60 years	1 <sup>st</sup> Dose	109656519
	2 <sup>nd</sup> Dose	66555031
Cumulative 1 <sup>st</sup> dose administered		731304773
Cumulative 2 <sup>nd</sup> dose administered		329435093
Total		1060739866



Government's achievement in the vaccination exercise, segregated by population priority groups, on October 31st is as follows:

Date: 30 <sup>th</sup> October, 2021 (288 <sup>th</sup> Day)		
HCWs	1 <sup>st</sup> Dose	136
	2 <sup>nd</sup> Dose	12575
FLWs	1 <sup>st</sup> Dose	204
	2 <sup>nd</sup> Dose	32356
Age Group 18-44 years	1 <sup>st</sup> Dose	1580514
	2 <sup>nd</sup> Dose	2594491
Age Group 45-59 years	1 <sup>st</sup> Dose	433184
	2 <sup>nd</sup> Dose	848793
Over 60 years	1 <sup>st</sup> Dose	246870
	2 <sup>nd</sup> Dose	450306
1 <sup>st</sup> Dose Administered in Total		2260908
2 <sup>nd</sup> Dose Administered in Total		3938521
Total		6199429

The vaccination exercise as a tool to protect the most vulnerable population groups in the country from COVID-19 continues to be regularly reviewed and monitored at the highest level. This vaccination status helps to glow the



Source: <https://pib.gov.in/newsite/pmreleases.aspx?mincode=31>

# VACCINATION AWARENESS

With the ongoing COVID pandemic, vaccine non-acceptance is a threat to global health, hence the state and centre have taken tremendous efforts in creating awareness among the general public on vaccination and its importance. Through its strategic planning the country has vaccinated more than half of its population and this was possible through awareness creation. In the process of vaccination promotion, the following key drivers are considered

- The general public are sufficiently fed with COVID vaccine information
- Disseminate reports and information that the vaccine has gone through various trials and is safe
- Establish eligibility criteria and vaccination process
- Create aware on the where to access the vaccine and how to proceed with it, process of registration and pre-conditions for vaccination and post vaccination care, support and guidance etc.

## Communication Strategy used for Vaccination

CASA in its COVID interventions ensured that the following communication strategy is maintained and followed:

- Advocacy
- Capacity Building
- Social Mobilization and Community Engagement
- Social Media
- Crisis Communication

## Advocacy and CASA

Advocacy efforts aimed to engage the maximum number of people by promoting the benefits of COVID-19 vaccine and support in building an enabling environment. Various stakeholders and experts will lead the advocacy campaigns at the grassroots levels. These include local volunteer, local leaders, religious leaders, students, community organisers. Advocacy was made through awareness program.

## Capacity Building of CASA in the areas of Vaccination

CASA identified training mechanisms to reach the extensive network of frontline workers, health care providers, community-based volunteers, influencers and other stakeholders in remote areas to ensure outreach to the last mile, while also ensuring good hygiene and covid negative zone by giving vaccination. Core programs and other programs helped people in the targeted area to get vaccinated and protected.

## Social Mobilization by CASA

CASA had ensured social mobilization actions were focused on risk communications and community engagement for the vaccination process. It will respond to perceptions of communities and health service providers on the COVID-19 vaccines and ensure that all people perceive and understand the vaccination process correctly and act accordingly.

The social mobilization plan mainly focused on

- the vaccination plans with number of doses and its usage
- addressing vaccine eagerness on one end and vaccine hesitancy on the other.

The social mobilization plan was contextualized to local requirements, and address specific variations and vulnerabilities such as urban to rural, tribal to nontribal. While social mobilization actions reached public across from all categories, its main focus was on to specifically motivate the priority groups for COVID-19 vaccination and their family members through community consultations and inter-personal communication during house visits and awareness program

## Crisis communication by CASA

Any crisis resulting from vaccine eagerness issues, vaccine hesitancy barriers had been managed by rapid response and adequate preparation for managing a crisis by the team CASA.

The following are some of the possible critical circumstances:

**Vaccine Eagerness:** Given the context of the pandemic, people have been eagerly waiting for a vaccine. It is expected



that once the vaccine is available there will be a huge demand to access it, which may lead to unrest.

**Vaccine Hesitancy:** On the other hand, there could be vaccine hesitancy – a possible result of rumours, plain indifference or misinformation from anti-vaccination groups. Further, certain geographies or communities might continue to resist accepting the vaccine owing to their long-standing aversion to vaccination as follows:

- Protests/unrest as a result of rumours and misinformation about the vaccine.
- Sudden deaths or reactions.
- Logistics issues, delay in delivery and other local triggers.
- Myths on vaccination

CASA as a team broke those hesitancy and encouraged the eagerness using awareness programs, wall paintings, make using the children and giving case examples etc.

## CASA's Response

In comparison to wave 1 of COVID, CASA's work has been progressing well towards reaching out to many families. Indeed,

the work pace has increased in terms of programs, there were 13 programs in action covering a larger community across the nation through – HIA, Give India, PMC2, DKH2, DKH3, UMCOR 2, UMCOR 3, Core COVID, ACT, ERD, RTE, Dec-CAID and Packages CFC. Below are the program wise interventions across the state.



# RESPONSES UNDER HIA

HIA's response was immense during the pandemic time. Intervention was focussed on Cash support, hygiene kit distribution and livelihood support reaching out to 18,100 individuals across 20 districts, 241 villages in 10 states. The below table captures the coverage in respective states.

Interventions under HIA								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Jharkhand	1	29			500		500	2500
Maharashtra	3	41			500		500	2500
Andhra Pradesh	1	7			200		200	1000
Telangana	1	13			300		300	1500
Rajasthan	1	1			100		100	500
Karnataka	1	16			300		300	1500
Bihar	2	20			500		500	2500
Odisha	2	25			500		500	2500
Delhi	1	1			520		520	2600
Kerala	7	88			200		200	1000
<b>Total</b>	<b>20</b>	<b>241</b>	<b>0</b>	<b>0</b>	<b>3620</b>	<b>0</b>	<b>3620</b>	<b>18100</b>





# RESPONSES UNDER Give India

Give India' support covered 3 states namely Chhattisgarh, Jharkhand and Madhya Pradesh in 8 districts and 65 villages. Through dry ration and hygiene kit distribution we were able to reach 2915 individuals

Interventions under Give India								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Chhattisgarh	6	40		270	270		270	1350
Jharkhand	1	20		118	118		118	590
Madhya Pradesh	1	5		195	195		195	975
<b>Total</b>	<b>8</b>	<b>65</b>	<b>0</b>	<b>583</b>	<b>583</b>	<b>0</b>	<b>583</b>	<b>2915</b>



# RESPONSES UNDER PMC2

Coverage under PMC2 was quite larger in as many as 8 states reaching out to 16 districts and 96 villages. The interventions such as dry ration, hygiene kit and livelihood benefited 16090 individuals across the states.

Interventions under PMC2								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
UTTARAKHAND	2	3		270	270	1350	1620	8100
Manipur	1	20		142	41		142	710
Mizoram	1	10		120	120		120	600
Madhya Pradesh	1	5		300	300		300	1500
Nagaland	1	4		56	50		56	280
Tamil Nadu	2	9		90	100	30	130	650
Telangana	1	9			100	400	500	2500
Uttar Pradesh	7	36		350	350		350	1750
<b>Total</b>	<b>16</b>	<b>96</b>	<b>0</b>	<b>1328</b>	<b>1331</b>	<b>1780</b>	<b>3218</b>	<b>16090</b>





# RESPONSES UNDER DKH2

DKH2 responses covered 5 states, 13 districts and 97 villages during the pandemic period. Cash support, dry ration and hygiene kit distribution benefited 4690 individuals across the state.

Interventions under DKH2								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Chhattisgarh	6	20		250	250		250	1250
Jharkhand	1	18		94	94		94	470
Odisha	1	12	100				100	500
Maharashtra	1	15	100				100	500
Uttar Pradesh	4	32	376	24	394		394	1970
<b>Total</b>	<b>13</b>	<b>97</b>	<b>576</b>	<b>368</b>	<b>738</b>	<b>0</b>	<b>938</b>	<b>4690</b>



# RESPONSES UNDER DKH3

DKH3 responses covered 5 states, 6 villages and 40 villages. The intervention such as dry rations, hygiene kit and livelihood support has supported 10825 individuals

Interventions under DKH3								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Chhattisgarh	1	12		350	350	350	700	3500
Himachal Pradesh	2	12				570	570	570
Uttarakhand	1	6		285		285	570	2380
Maharashtra	1	5		575	575		575	2875
Tamil Nadu	1	5			300		300	1500
<b>Total</b>	<b>6</b>	<b>40</b>	<b>0</b>	<b>1210</b>	<b>1225</b>	<b>1205</b>	<b>2715</b>	<b>10825</b>





# RESPONSES UNDER UMCOR2

UMCOR support was extended in 2 states namely Bihar and West Bengal covering 2 districts and 21 villages. Dry rations, hygiene kits and livelihood has assisted 8750 individuals across the states.

Interventions under UMCOR-2								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Bihar	1	15	710	165	875		875	4375
West Bengal	1	6	797		875		875	4375
<b>Total</b>	<b>2</b>	<b>21</b>	<b>1507</b>	<b>165</b>	<b>1750</b>	<b>0</b>	<b>1750</b>	<b>8750</b>



# RESPONSES UNDER UMCOR3

UMCORs support was extended in 4 states namely Bihar, Uttar Pradesh, Maharashtra and Karnataka covering 4 districts and 31 villages. Dry rations, hygiene kits and livelihood has assisted 3000 individuals across the states.

Interventions under UMCOR-3								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Bihar	1	8		150	150		150	750
Maharashtra	1	6		75		75	150	750
Uttar Pradesh	1	10		150			150	750
Karnataka	1	7		150	150		150	750
<b>Total</b>	<b>4</b>	<b>31</b>	<b>0</b>	<b>525</b>	<b>300</b>	<b>75</b>	<b>600</b>	<b>3000</b>





# RESPONSES UNDER CORE COVID

Programs under Core COVID covered 5 states, 8 districts and 118 villages. Dry ration, hygiene kits and livelihood support have been beneficial to 2235 individual across the states.

Interventions under CORE COVID								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Chhattisgarh	3	55		60	200		200	1000
Jharkhand	2	20			92		92	460
West Bengal	1	14				30	30	150
Madhya Pradesh	1	15		100			100	500
Andhra Pradesh	1	14		25			25	125
<b>Total</b>	<b>8</b>	<b>118</b>	<b>0</b>	<b>185</b>	<b>292</b>	<b>30</b>	<b>447</b>	<b>2235</b>



# RESPONSES UNDER ACT

ACT responses covered 5 states namely, Maharashtra, Andhra Pradesh, Karnataka, Telangana and Kerala. Cash support and Hygiene kit distribution have assisted 7475 individuals.

Interventions under ACT								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Maharashtra	3	46	500				500	2500
Andhra Pradesh	1	7	200				200	1000
Karnataka	1	10	300		300		300	1500
Telangana	1	13	300		300		300	1500
Kerala	7	88	195		195		195	975
<b>Total</b>	<b>13</b>	<b>164</b>	<b>1495</b>	<b>0</b>	<b>795</b>	<b>0</b>	<b>1495</b>	<b>7475</b>



# RESPONSES UNDER ERD

ERDs intervention in Maharashtra has assisted 1600 individuals through its Cash and hygiene support.

Interventions under ERD								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Maharashtra	1	28	320		320		320	1600
<b>Total</b>	<b>1</b>	<b>28</b>	<b>320</b>	<b>0</b>	<b>320</b>	<b>0</b>	<b>320</b>	<b>1600</b>



# RESPONSES UNDER RTE

RTEs intervention in Maharashtra has assisted 275 individuals through its Cash and hygiene support.

Interventions under RTE								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Maharashtra	1	2		55	35		55	275
<b>Total</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>55</b>	<b>35</b>	<b>0</b>	<b>55</b>	<b>275</b>





# RESPONSES UNDER DEC CAID

DEC CAIDs intervention in Madhya Pradesh has assisted 10015 individuals through its dry ration and hygiene support.

Interventions under DEC-CAID								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Madhya Pradesh	5	90		1610	2003		2003	10015
<b>Total</b>	<b>5</b>	<b>90</b>		<b>1610</b>	<b>2003</b>		<b>2003</b>	<b>10015</b>



# RESPONSES UNDER PACKAGE CFC

CFC intervention in Chhattisgarh has assisted 4000 individuals through its dry ration, livelihood and hygiene support.

Interventions under Package CFC								
States	No of Districts	No of Villages	Cash Support	Dry ration	Hygiene kit	Livelihood	No.of HHs	No of People reached
Chhattisgarh	7	30		400	400	400	800	4000
<b>Total</b>	<b>7</b>	<b>30</b>		<b>400</b>	<b>400</b>	<b>400</b>	<b>800</b>	<b>4000</b>



# SUMMARY OF SITREP 2

Program Name	No. of States	No. of Districts	No. of Villages	Dry ration	Hygiene Kit	Cash Support	Livelihood	Total HHs supported	People Reached
HIA	5	20	241	0	3620	0	0	3620	18100
Give India	3	8	65	583	583	0	0	583	2915
PMC2	8	16	96	1328	1331	0	1780	3218	16090
DKH2	5	13	97	368	738	576	0	938	4690
DKH3	5	6	40	1210	1225	0	1205	2715	10825
UMCOR2	2	2	21		1750	1507		1750	8750
UMCOR3	4	4	31	525	300		75	600	3000
CORE COVID	5	8	118	185	292	0	30	447	2235
ACT	5	13	164	0	795	1495	0	1495	7475
ERD	1	1	28	0	320	320	0	320	1600
RTE	1	1	2	55	35	0	0	55	275
DEC-CAID	1	5	90	1610	2003	0	0	2003	10015
Package CFC	1	7	30	400	400	0	400	800	4000
<b>Total</b>	<b>46</b>	<b>104</b>	<b>1023</b>	<b>6264</b>	<b>13392</b>	<b>3898</b>	<b>3490</b>	<b>18544</b>	<b>89970</b>

## Summary of the Programs of SITREP 1 & 2

SITREP 1-2 Consolidated										
Program Name	No. of States	No. of District	No. of Villages	Support Provided					Total HHs Supported	Total Individuals
				Cooked Food	Dry Ration	Hygiene Kit	Cash Support	Livelihood		
RTE	17	32	367	0	55	8189	0	0	8209	41045
DHK 1	1	5	40	5669	300	300	0	0	300	1500
DKH 2	13	38	287	0	970	1744	2040	0	3004	15020
DKH3	5	6	40	0	1210	1225	0	1205	2715	10825
UMCOR 1 (SOLIDARITY GRANT)	1	1	2	0	82	0	93	0	352	1760
UMCOR 2	3	3	27	0	0	1925	1859	0	1925	9625
UMCOR 3	4	4	31	0	525	300	0	75	600	3000
DKH-HAF	1	2	4	0	650	650	0	0	650	3250
HIA	5	20	241	0	0	3620	0	0	3620	18100
Give India	3	8	65	0	583	583	0	0	583	2915
PMC2	8	16	96	0	1328	1331	0	1780	3218	16090
CORE COVID	5	8	118	0	185	292	0	30	447	2235
ACT	5	13	164	0	0	795	1495	0	1495	7475
ERD	1	1	28	0	0	320	320	0	320	1600
DEC-CAID	1	5	90	0	1610	2003	0	0	2003	10015
Package CFC	1	7	30	0	400	400	0	400	800	4000
<b>Total</b>	<b>19</b>	<b>188</b>	<b>1630</b>	<b>5669</b>	<b>7898</b>	<b>23677</b>	<b>5807</b>	<b>3490</b>	<b>30241</b>	<b>148455</b>



## Uplifting the sufferers amidst the Pandemic

Dilharan, a 37-year-old CASA beneficiary comes from Bilaspur, Chattishgarh, his wife expired 4 years ago at the time when his youngest son was born. He has three children, Ravitree 14 years old, Savitree 6 years old and Raj Kamal 4 years old. The loss of his wife led to many problems in taking care of his children, managing homes, doing household chores activities and at the same time managing agriculture activities increased his work pressure.

Dilharan is a daily wage worker, he works daily in his village and nearby village for earning. He doesn't have any bad habits of drinking alcohol or spending money on tobacco etc. He has 1.5 Acre of land where he does paddy cultivation farming but productivity is low. Therefore, he has to depend on PDS for getting rations from the government.

Being a single father is not easy for him in taking care as well as earning livelihood for his family. Covid-19 Second wave has hit many farmers and daily wage workers in earning their livelihood.

Due to lockdown and government prevention measures, many people had to face difficulties earning livelihood even in cities, but the situation is worse in tribal areas.

Dilharan could not find any work in the lockdown period. During that time, he survived eating rice with pickles. He was unable to find the means to feed his children.

CASA helped him by providing work. He was tasked to fence farmland of fruit saplings that were regularly being grazed by animals. After ten days of work, he received his wage and Dry ration kit.

He is thankful to CASA for helping him in difficult times. CASA staff in daily field visits found that the Dry ration lasts for 2.5 months. Dilharan saved Rs. 5850 for future expenses during this period because he didn't have to buy any necessities from the shop.

CASA dry ration support helped many villagers in saving their daily wages for the future.





## Aiding the deprived

Dujiya Bai, 60 years old daily wage labour, living in Bhajiya village of Niwash block, Mandla district, MP. She has one daughter and three granddaughters in her family. Her son and husband had died 3 years ago in a road accident. She is the lone earning member of her family. She earns 3 to 4 thousand per month. Her daughter-in-law has applied for a widow pension scheme but she never received a pension yet.

The farming land that the family owns is very small, therefore, the agricultural production is not high enough that they can earn by selling the crops. Bai says, "the production is so low that it's not enough to feed her family."

The lockdown mostly affected the small farmers and daily wage labourers from the marginalised communities. During the 2nd wave of COVID-19, Bai

didn't get work for 2 months, and she had no money to buy rations and other necessities, which forced her to borrow rations from a nearby shop. The debt accumulated because she wasn't able to repay.

CASA distributed dry ration and hygiene kits to 400 families of Niwash block of Mandla district with the support of Christian Aid. Bai was one of the beneficiaries, the small help can't be enough to solve all her problems but it was a relief for her for a few months. She is thankful to CASA for providing timely help.

CASA also organised an awareness campaign in her village on covid safety behaviour and encouraged villagers to get vaccinated so that they can safeguard themselves from any further waves of coronavirus.

# COVID-19 VACCINATION CAMP

## Awareness for the right cause

Dilip is a 36-year-old migrant labourer who worked in Hyderabad and Nagpur. He worked through his hardships and was able to educate himself with B.Ed and M.Ed degrees, and has supported his family single-handedly.

Due to the Covid-19 pandemic and the subsequent lockdowns, Dilip lost his job – his only source of income.

CASA's Salekasa team began identifying beneficiaries in Girola, Dilip's village, after sensitizing the community on Covid-19 appropriate behaviour, vaccination, immunity and other precautions, with the help of local ASHA workers.

The team introduced the vaccination drive to ensure the families of the village were being convinced to take the vaccine. The team spread awareness on Covid-19 vaccination through public announcements via loudspeakers, wall paintings, hand-washing demos, pamphlet distribution, etc.

Dilip and his family members believe that CASA's awareness and guidance surrounding the COVID-19 vaccination assured them that taking the vaccination was the right thing to do to avoid the unfortunate effects of the pandemic.

Dilip was grateful to CASA staff and volunteers for guiding him and his family to fully understand the Covid-19 pandemic, ways to prevent contracting the virus and the importance of vaccination. They look forward to contributing to the fight against the ongoing pandemic.





# Disability is not an obstacle to survival



Lalsiamtluangi is a 41-year-old widow and a burn survivor. She resides with her children (a boy and a girl) in Champhai district, Mizoram. They have been facing a financial crisis, especially after the burn incident, she is unable to perform daily chores or earn a living as she used to before the burning incident. Their main source of income is through MGNREGA and donations received from the local council. Being a burn victim she usually avoids taking part in social activities as she considers herself a burden for others. Therefore, she and her children isolate themselves from local society.

When CASA volunteers approached her to support her family by providing dry ration support such as Rice, Dal, Potatoes and Soyachunks, etc. she was overwhelmed and grateful. With the pandemic situation and the lockdown imposed in many areas, Lalsiamtluangi's family situation worsened so much that they survived only through donations and could barely have two meals in a day. She continuously thanked CASA by stating; "You people (CASA) are God sent"

Also, through the awareness conducted it appeared that Lalsiamthari didn't have any knowledge about the Disability Pension Scheme (DPS) which could be availed every month if she applied for it under the District Social Welfare office, Champhai. Post-meeting and interacting with her, she was apprised on how to avail disability certificate. With help from the volunteer, she immediately applied for the Disability pension Scheme under the Social Welfare Department.

## The burden of the Pandemic



Nangdotingi is a 70 years old widow, She has five children (2 boys & 3 girls). She is from Vapar Village in Champhai district of Mizoram and currently lives alone as all her children are married and residing in different villages. MGNREGA scheme is one of her main sources of income as she doesn't receive money from the Old Age Pension Scheme.

Before the pandemic, her children worked as daily wage labourers and were able to send her money so she could purchase necessities. However, Post-pandemic with the State-wise lockdown being imposed and all sorts of construction and business shutting down, her children were unable to send money as they became jobless. The Village Council taking note of her situation had decided to help her by donating dry rations as per need however, it never seemed enough.

When the CBOs and VCs heard of the CASA team distributing dry ration in their village they immediately asked us to extend support to Nangdotingi. CASA volunteers were able to personally meet her and support her with dry rations such as Rice, Dal, Soya chunks, and potatoes. She also shared that she struggled a lot during the pandemic, as she is old and cannot earn a living by herself. She was filled with joy after CASA was able to extend support during these trying times. She also mentions that "CASA has come as the answer to my prayers".

# CONCLUSION

As per information collected from the CBOs and VCs of the 9 (Nine) targeted village, CASA is the only organization that has been extending support not only in terms of providing Dry ration but also providing hygienic kits. Also, at Zokhawthar, the VCs, Young Mizo Association (YMA) applauded the CASA team for reaching out to the village by personally visiting the village and distributing dry ration. The YMA president of Zokhawthar Mr. ThankungaPachuau stated that "Other NGOs only send dry ration via cargo and leave the responsibilities of distribution to the village leaders however, As for CASA, you take the effort to come visit our village, try to understand the situation, generate awareness on COVID and also sit with the VCs, CBOs and YMA members to select the beneficiaries for Dry Ration so that the most marginalized are not left out". He further praised CASA's commitment and dedication.



CASA is registered under the Societies Registration Act XXI of 1860, and with the Ministry of Home Affairs of the Government of India under the Foreign Contributions Regulation act. Donations to church's auxiliary for social action are exempted from Income Tax under Section 80-G.

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