



COVID-19 PREVENTION RESPONSE

Catholic Relief Services and our network of trusted partners are ramping up global efforts to prevent the spread of COVID-19



In Afghanistan, CRS has provided 15,000 families with soap and hygiene supplies, and promoted community messaging with clear information about COVID-19 and safe practices to prevent its spread. *Photo by Rekha Shetty/CRS*

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CONTEXT

Catholic Relief Services teams across the world continue to expand their programming to prevent the spread and reduce the risk of COVID-19 in some of the world’s most vulnerable communities. The growing number of cases of this infectious illness in fragile states is extremely concerning, as health systems are already strained, and people’s access to clean water and hygiene supplies is limited. The level of vulnerability is especially high for uprooted and refugee communities, as well as extremely poor families and communities—people who have no safety net. As of March 20, 2020, 209,839 cases of COVID-19 had been confirmed across 169 countries, with 8,778 deaths.

“As always, a crisis like this falls most heavily on those families who are least able to cope with it. A lot of the communities we serve live life on a razor’s edge—just one misfortune away from destitution.”

Matt McGarry
CRS Philippines country representative

CRS AND PARTNER RESPONSE

CRS is adapting much of its programming to incorporate activities that help to prevent the spread of the virus. This includes targeted information campaigns and the provision of hygiene materials for communities, as well as investment in strengthening the capacity of local partners to respond. Across the world, CRS is closely coordinating with local government offices, national health ministries, the World Health Organization and existing humanitarian coordination forums. CRS recognizes the role of trust and credibility when supporting communities in a context of misinformation and fear. Our longstanding presence in these communities—and relationships with local health institutions, governments and organizations—has been critical to our ability to scale up quickly and efficiently.

Below are highlights of our work to date in some of the countries where our COVID-19 emergency response efforts are underway and rapidly evolving.

ASIA

Bangladesh: CRS is supporting its partner Caritas Bangladesh as it adjusts its programs in the Rohingya refugee camps and host communities. This includes postponing activities that require large gatherings—such as child-centered programming and community trainings—and promoting community awareness around prevention and hygiene practices.

Cambodia: CRS is coordinating closely with the health ministry and others to identify priority needs for support not currently managed by the government. CRS programming will focus on provincial and district-level trainings and community-level awareness raising.

EUROPE, MIDDLE EAST + CENTRAL ASIA

Bosnia and Herzegovina has declared a state of emergency, and CRS and our partners are working closely with refugees and migrants to raise their awareness of COVID-19 and prevention practices. Project staff are equipped with protective equipment and sanitation supplies for program centers, and leaflets are available in four languages for the diverse communities we serve.

Afghanistan: Prevention messaging has reached 15,000 families through community-level awareness raising, while 5,945 teachers and students received targeted hygiene messaging and kits. As family members return from Iran and are quarantined at home, CRS is considering focused messaging to reduce risk, including the need to avoid eating from the same plate during family meals, and expanding access and supplies for safe hand-washing.

Lebanon: CRS supported six partners to attend a COVID-19 training of frontline health workers organized by the United Nations Children's Fund and the Lebanese government. CRS is also supporting Caritas Lebanon's 10 health care centers with training of staff on prevention and control measures, and has provided disinfection, sanitation and hygiene supplies at Caritas Lebanon centers and shelters for the extremely vulnerable. Other activities include development and dissemination of materials for outreach campaigns with local communities.

Jordan: CRS partner Caritas Jordan has made COVID-19 information materials available in its clinics and community centers.

Iraq: CRS and Caritas Iraq are raising awareness in vulnerable communities in Baghdad and Kirkuk, where we have active shelter, water, sanitation and hygiene programming.

HOW TO HELP

- **Donate online:** support.crs.org/prevent
- **Donate by phone:** 1-877-HELP-CRS
- **Donate by check:** "Coronavirus Response"
Catholic Relief Services, P.O. Box 17090
Baltimore, Maryland 21297-0303



AFRICA

Ethiopia: In close partnership with the Missionaries of Charity and 13 local Catholic Church institutions, CRS can quickly reach Catholic hospitals, health centers, clinics, care centers and schools. Planned activities include:

- Trainings for Church-run health facilities and Missionaries of Charity staff.
- Capacity building, reinforcement, coordination, and oversight of prevention and mitigation activities with partner health facilities and Missionaries of Charity staff, including provision of gloves, aprons, masks, sanitizer and other hygienic materials.
- Regular communication on hand-washing and hygiene practices to CRS program participants.
- Awareness campaign support to Church-run health facilities, including posters and factsheets.

Mali: CRS is actively participating in coordination forums and planning to support the provision of hygiene and awareness-raising materials through existing health programming.

Kenya: CRS is supporting essential trainings on prevention and control measures to help the Nairobi health system contain COVID-19. CRS is focusing on five high-risk Nairobi sub-counties, and has initiated training for 600 health care personnel from 300 health care facilities, and 1,200 community health volunteers. CRS will also provide 100 hand-washing booths in high-volume health facilities. CRS has provided hand sanitizer for the health ministry's offices, as well as at the CRS Nairobi office. The health ministry has requested CRS support for further training of frontline staff. At potential hotspots identified by the government—including major bus stops in Nairobi and one-stop areas where government services are provided—CRS is helping to identify opportunities for this support. We are also distributing basic sanitation materials to a prioritized set of the most vulnerable families we serve.

Burkina Faso, the Democratic Republic of the Congo, Ghana and Madagascar: CRS is focused on improving water, sanitation and hygiene within health facilities, and identifying ways these critical programs can increase capacity to combat COVID-19.

Uganda: Following COVID-19 cases in neighboring countries, CRS and Caritas Tororo incorporated best practices into agricultural fairs in eastern Uganda. This included instituting a mandatory distance between participants, who also washed their hands on arrival. Hand sanitizer was provided during registration, voucher distribution and vendor shops. Since markets are still open, CRS and Caritas worked with district leaders and vendors to set up an open air fair, where health officials will ensure proper prevention measures are in place. Families can attend the three-day fair at a time that suits them, limiting the number attendees visiting at one time.



A participant washes his hands before attending a CRS market fair assisting flood-affected farmers in Uganda. Photo by Jonah Chesang/CRS

“ CRS is an international leader among NGOs, with experience fighting fast-moving disease outbreaks. Our partners are embedded in some of the most vulnerable and remote communities. They have exceptional reach. As we ramp up our response worldwide, we'll be leaning into that experience.

Sean Callahan, CRS president and CEO