Executive Summary

The COVID-19 pandemic has a profound impact on everyone, yet the most vulnerable in our society - including people with disabilities - are even more affected. In the countries where Light for the World works, we see this every day.

Globally the number of Coronavirus cases is still going up, although there are differences per country. In an attempt to stem the number of cases and deaths, governments are taking measures. Lock-downs, school closures as well as a drastic decline in economic activities have led to food insecurity, the loss of education for children up to a full year, and an uncertain future.

From March 2020 on, Light for the World has adapted its programmes to this "new normal" in 13 countries across the globe. Our COVID-19 response "Stronger Together" programme seeks to reduce and mitigate the heightened risk the pandemic poses for girls, boys, women and men with disabilities and their families, in terms of impact on health, food security, income and well-being. We use an approach that combines direct tailored support to people with disabilities, while at the same time promoting their access to essential services and goods provided by other organisations in the COVID-19 response.

Our implementation strategies:
1. Prevent the spread of COVID-19
2. Prepare people with disabilities to cope with the economic and social impact
3. Treat COVID-19 patients and increase health care capacity
4. Advocate for a disability-inclusive response
5. Protect our teams and remain operational

Since we started with our emergency response activities, we have allocated 3 million euros from the financial contributions we received from supporters and donors, already reaching more than 10,000 people with disabilities and 40,000 family members. In this interim report we share highlights and give an impression of the scope of this work. With our dedicated team, we continue our COVID-19 response in the months to come with unabated energy, knowing that we make a positive impact on people’s lives.
In total 3 million EUR has been allocated to our COVID-19 emergency response programme “Stronger Together” since April 2020. The funding supports 61 projects in 13 countries in Latin America, Africa and Asia.
In May 2020 Light for the World developed an Emergency Programme Output Monitoring Framework. The monitoring framework has been piloted in Uganda and Mozambique and data has so been collected in four countries. We are currently fine-tuning the monitoring system and will report all progress made by the end of the programme.

Based on our monitoring data till the end of August, so far Light for the World has reached over 10,000 women and men, girls and boys with disabilities directly. With activities such as distribution of food, hygiene products and protection kits, as well as business support, we estimate on average four additional family members have indirectly received support. This brings the total figure to 50,000 people.
In the first weeks of the COVID-19 response we adapted information and communication material to make these accessible to persons with disabilities as they were often overlooked. Guidelines to wash your hands and keep social distance were prepared in braille, Youtube videos were made in local sign languages and posters in easy language were distributed across our countries of intervention. We used our connections with organisations with disabilities, ministries of health and went on air through radio to reach out to urban and rural populations.

The collaboration with the radio stations also provided the opportunity to create more awareness among listeners on the impact of COVID-19 on persons with disabilities, reduce stigmatisation and increase solidarity. For example across Uganda we actively engaged over 50,000 people by responding to poll questions that were sent out as part of the radio programmes by 6 popular radio stations covering an audience of 15 million people.

Also in other countries like South Sudan and Cambodia radio stations were instrumental in contributing positively to the debate on COVID-19 and disability, both on air and online through internet radio and facebook.

Through our in-country COVID-19 impact assessments we know that people with disabilities are especially concerned about their livelihood / income making ability. This concern is more pronounced among people with disabilities than those without.

People with disabilities asked themselves how they should feed their families when little economic activity was possible during the lockdowns. Indeed we have since seen a higher dependency on others helping them to meet their basic needs in comparison to people without disabilities.

What’s more, the fear caused by the threat of contracting the virus, isolation caused by the lockdown, the breakdown of social support structures, the increase in violence and disruption of everyday life impacted and still impacts the mental health of everyone and especially people with disabilities.

In our response we made a deliberate effort to hand out food packages together with hygiene products and COVID-19 awareness materials. We coordinated the distributions together with organisations of persons with disabilities and our partners who have worked at the community level for a long time to ensure that the support would reach the people most in need. This support was very much welcomed by beneficiaries who reported it has helped them through some difficult months.

Where field workers used to do home visits, COVID-19 measures meant frequency had to be drastically reduced. To tackle this challenge, we bought phones to follow up and provide psycho-social support to women and men with disabilities but also family members or caregivers. This facilitated continuity and also helped address concerns in these uncertain times. For children with disabilities we distributed adapted and accessible learning materials for home based learning in Cambodia and Mozambique.

We are aware that the COVID-19 pandemic will not go away soon. Food distributions were necessary but it is not sustainable in the long run. Therefore we have started to support people with disabilities (especially women) to set up their business or learn new skills to produce products that are in high demand. This includes the production of face masks, e.g. in Kenya they had a transparent window to make people’s facial expressions visible for persons who are deaf and hard of hearing. Also liquid soap and sanitary pad production has now started in many places.
In Bolivia our partners in community based rehabilitation trained persons with disabilities and their family members in making face masks.

“And we had masks and income!”

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At the beginning of the pandemic it was impossible to get face masks in town. Thankfully, field workers brought us kits during home visits - COVID-19 had not yet reached our rural town of San Miguel de Velasco - and showed my sister how to produce face masks for my family. Later on we were also able to sell them to our neighbours.

Mercy Rodriguez is 28 years old and has a severe form of arthritis.

Treat COVID-19 patients and increase health care capacity

**AIM:**

Develop concrete support measures to strengthen the health systems in our focus and partner countries - giving special attention to people with disabilities and those with chronic diseases.

Light for the World has procured a massive number of personal protective equipment for its extensive network of hospitals and eye health units to ensure a continuity of eye health services across the countries where we work, such as Mozambique, Uganda, Burkina Faso and South Sudan. In Uganda we are currently purchasing indirect ophthalmoscopes to ensure that ophthalmologists keep the physical distance to the patient as recommended by WHO.

We raised awareness among health workers about requirements for treatment of people with disabilities, and shared information material to increase awareness on accessibility of information on COVID-19.

In Tanzania we provided recommendations for the government guidelines for health workers together with representatives from organisations of persons with disabilities. We also supported the translation of WHO guidelines on COVID and disability in local languages in Ethiopia (Amharic, Oromifa and Tigrigna), as well as in Luganda, Bangla, Nepali and Kiswahili.
Hospitals and eye health units in the face of the COVID-19 pandemic were especially challenged in providing services, as suddenly protective equipment was in high demand. In Uganda we were on time and the local medical-kit provider had still the necessary material in stock. While the Entebbe regional hospital was turned into the COVID-19 referral hospital for Uganda, we were able to deliver 100 protective suits, 1500 litres of disinfectant and 10 pedal driven hand wash stands. This supported the ongoing provision of services for persons with eye problems.

Advocate for a disability-inclusive response

Aim:
Call on governments, UN and humanitarian actors and support them to ensure disability-inclusive, accessible and rights-based disaster response

Joining hands with organisations of persons with disabilities, Light for the World has actively advocated to governments, donors, and development actors for the inclusion of women, men, girls and boys in COVID-19 interventions. People with disabilities should not be left behind, in any circumstances. Practical suggestions were given such as providing sign language interpretation on COVID-19 press releases for deaf persons. Stories from people with disabilities were also used in an important video on the impact of the pandemic by the International Disability Alliance to the Global Action on Disability network of international donors. ² We note that progress is being made and more organisations are interested to take inclusion seriously.

² https://www.youtube.com/watch?v=kHc-WfBDSS8&t=7s
In March 2020, our country director Zacarias Zicai was contacted by the national umbrella organization of persons with disabilities FAMOD, to support an open letter to the president of the country. UNICEF also approached him to provide input into a brief on the socio-economic impact of COVID-19 in Mozambique from a ‘disability perspective’. This advocacy work went hand-in-hand with food distributions, and hand out of hygiene kits with DICD partners. Our Mozambique team remained active in the humanitarian cluster system and is seen as a professional partner.

Our teams are vital to make an impact. By the end of March almost all our colleagues had switched their work to home office. Everybody did an amazing job to make it possible that work could continue, that local partners were contacted and received support, notwithstanding the challenges each of the colleagues faced on a personal and family level. In April and May staff slowly returned to the offices, while keeping at maximum 50% occupation capacity, implementing physical distancing measures, frequent hand sanitizing, and wearing masks. National travel has been at the minimum possible, and international travel only where absolutely necessary. Online meetings has become the standard, rather than gatherings in a meeting room. Staff were encouraged to follow workshops on online collaboration and leadership that Light for the World organised.

**AIM:**
Protect our teams and remain fully operational as an organisation
Since the first COVID-19 case was confirmed in South Sudan, Light for the World started taking different protective methods based on the guidance of the Ministry of Health and the NGO Forum. In a first meeting with the team we discussed how we can proceed with project activities while protecting ourselves.

The team decided to work half day and keep distance in the office, while wearing masks and having sanitizers at hand. Also a focal person for communication was assigned. The plan was reviewed in weekly meetings and other regulations are:

- Any person with flu-like symptoms will stay at home and will be supervised by a colleague from a distance. It is ensured that he/she has all basic materials and equipment at home.
- All staff to avoid public transport and use the Light for the World car.

Light for the World’s COVID-19 response is not possible without the generous support of our donors, international and national partners, and our committed team.

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