

Awareness Campaign in Local Languages on COVID-19, Social Protection and Livelihood for the Most Vulnerable Population In Khyber Pakhtunkhwa

Introduction:

Humanity needs leadership and solidarity to defeat the coronavirus. The COVID-19 pandemic has presented us with an unprecedented global challenge, touching every community in every nation of the world. The pandemic is causing systems of work, education, finance and domestic lives to grind to a halt, affecting nearly every aspect of people's lives especially the most impoverished and marginalised, especially women, children, elderly and the disabled/

Keeping in view the devastation it is causing around the world, we in Pakistan are facing the same issues, in fact more in scale and number. This project is designed to overcome challenges and barriers and reach out to all irrespective of any differences in Creed, Culture, Ethnicity, Religion, Colour or Geography. The project emphasis on Humanity First. The project provides a platform to strengthening multi-religious action and community mobilization, in countering the COVID-19 pandemic.

Khyber Pakhtunkhwa:

- Pakistan being a developing country, Khyber Pakhtunkhwa being one
 of its most impoverished province which now also includes the newly
 merged districts of previous FATA, have inadequate health facilities
 and lacks communication mechanism to create awareness among the
 most vulnerable populace especially, women, children, elderly and
 disabled to safeguard against the devastation of COVID-19
- Khyber Pakhtunkhwa official figures also validate the point as it records highest number of deaths 200 till date, the highest in the country.
- The latest figures from the Health Department Khyber Pakhtunkhwa shows that out of a total number 3600 confirmed cases, 1700 are identified from the mentioned districts in the project.



Objectives of the Project:

- To ensure that people have the life-saving information they need to protect themselves and others (from the virus and to reduce its impact on health, social life, and the economy)
- To ensure effective feedback mechanisms are in place and used to ensure two-way communication between health/response authorities and communities, the public and stakeholders.
- To ensure consistency in information and language from all partners and avoid misinformation/rumours.
- To inform the general public how the public health response is being conducted and health authorities are being pro-active in monitoring, detecting, and preventing the spread of COVID-19.
- To ensure participation of and engagement with relevant communities to work out barriers to the implementation and uptake of public health measures.
- Identify key audiences and influencers

Overcoming Language barriers and reaching out to the most vulnerable population especially women, children, elderly and the disabled with trusted information from those that they know being their elected representatives, religious leaders, local governments, religious groups, and civil society organizations creates an environment of trust and acceptance which is currently lacking in the outreach to those communities as per the WHO directions. Currently there are 165 million cellular subscribers in Pakistan.

This initiative taken on pilot basis can be scaled up to all the districts of Khyber Pakhtunkhwa.

Districts of Intervention in Khyber Pakhtunkhwa:

- 1. Peshawar
- 2. Kohat
- 3. Swat
- 4. Mardan



Planned activities:

Mutually with Pakistan Bait UI Mal Ministry and Provincial Assembly of Khyber Pakhtunkhwa and Religious Elders from all communities utlise the ICT methods for Effective community engagement and awareness raising in local languages.

- 1. Measures through IVR will be utilised for early detection of potential cases to contain current outbreak and control measures to prevent further spread.
- 2. The available data with PBM will be utilized to reach out to the most vulnerable population including women headed households and children.
- 3. Messages will be recorded in the voice of the public representatives, religious leaders so that the people develop a sense of trust on government arrangements against the virus spread.
- 4. Radio programmes will be arranged in local languages to create awareness among the most marginalized women.
- 5. Online poster competition among 7-13 years old with the theme to tackle corona virus through adaptation of hygienic methods.
- 6. Short animated videos through social media channels regarding information on prevention of COVID-19 in local languages to develop better understanding of the virus in far flung
- 7. 20000 ration bags will be distributed among identified most marginalised populations especially women, children, elderly and the disabled in each of the identified districts of intervention.
- 8. Political and Religious Leaders messages from the concerned districts will be forwarded utilizing media tools. (District Khateebs, Bishop of Peshawar, Sikh and Hindu community elders MPAs)
- 9. We will communicate with communities through identified social media handles on the importance of listening to the safety guidelines promoted by government and the World Health Organization (WHO) in local languages.
- 10. Three million people will be made aware of the available opportunities from the government at the districts level against the virus. (50% women and girls and 50% men)



- 11. As per verified data available with PBM will take immediate measures to provide relief to 20000 most vulnerable households, especially women headed households, elderly, and disabled.
- 12. The provincial government departments of health, PDMA, PARSSA and P&D will utilize the data and timely measures will be adopted to quarantine the concerned areas to avoid spillovers to other parts of the province.
- 13. Data will be available for the international donors' community who can work with the provincial and federal government to provide support to the effected populations.
- 14. The effort will provide a platform to avoid duplication of efforts.
- 15. Two million women will be reached out through 20 radio programmes.

Means of Verification:

- Number of Allocations to the most marginalized communities especially women and children will be available on the official website of Pakistan Bait UI Mal.
- The awareness campaign will be available on the website of the Provincial Assembly of Khyber Pakhtunkhwa in local languages.
- Number of calls to the concerned dedicated centers will provide a clear evidence of the success of interventions. (Recordings will be available for transparency and means of verification)
- Number of women provided awareness on personal hygiene through IVR calls
- Written receipts from the districts administration on the provision of the Food Items distributed among the number of families.



Target Population:

Province: Khyber Pakhtunkhwa

District: Peshawar, Mardan, Swat, Kohat,

Target Beneficiaries

Direct beneficiaries of the project: 3000000 (Three Million)

Total Number of Households: 600000 (Six Hundred Thousand)

Total Number of Men and Women: 50% men 50% women

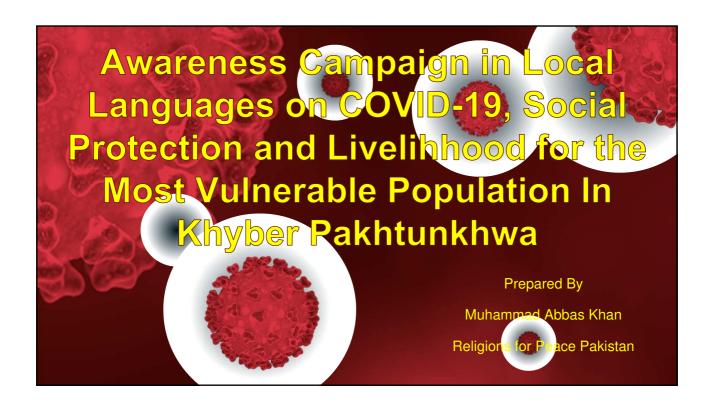
Vulnerable Populations (disaggregated by sex)

Elderly (i.e. 60 years or older) 20%

Disabled: 10%

Children: 20%

Transgender: 2%.



Introduction

- Pakistan being a developing country, Khyber Pakhtunkhwa being one of its most impoverished province which now also includes the newly merged districts of previous FATA, have inadequate health facilities and lacks communication mechanism to create awareness among the most vulnerable populace especially, women, children, elderly and disabled to safeguard against the devastation of COVID-19
- > Khyber Pakhtunkhwa official figures also validate the point as it records highest number of deaths 200, the highest in the country.
- > The latest figures from the Health Department Khyber Pakhtunkhwa shows that out of a total number 3600 confirmed cases, 1700 are identified from the mentioned districts in the project
- Women, Children, elderly, disables are at greater risk of being at the helm of disaster due to a lockdown and limited means of awareness on the available opportunities and safeguarding against the disease.
 The project will be join by implemented in mutual cooperation and coordination with Pakistan Bait UI Mal and Provincial Assembly of Khyber Fakhtunkhwa

Idea/Solution

- As more and more parts of the world declare lockdown measures in the face of the COVID-19 pandemic, the damage to economies and livelihoods is rapidly escalating and giving rise to additional forms of distress during this healthcare crisis. The outbreak is widely being considered two epidemics a health crisis and a livelihood loss epidemic.
- ➤ The areas of intervention identified in the proposal are Peshawar, Kohat, Swat, Mardan, and Charsadda where the COVID-19 cases are on the rise and people are not adhering by the government requests of stay at home resulting in rapid further spread of the devastation and fatalities.
- > Overcoming Language barriers and reaching out to the most vulnerable population especially women, children, elderly and the disabled with trusted information from those that they know being their elected representatives, religious leaders, local governments, religious groups, and civil society organizations creates an environment of trust and acceptance which is currently lacking in the outreach to those communities as per the WHO directions.
- > Currently there are 165 million cellular subscribers in Pakistan.
- > This initiative taken on pilot basis can be scaled up to all the districts of Khyber Pakhtunkhwa.

Humanitarian Coordination and Information Management

- > IVR Calls
- > SMS
- Facebook Ads
- Animated Videos
- > Radio Shows
- WhatsApp Business Ads
- > Twitter Ads
- > Political and Religious Leaders messages from the concerned districts will be forwarded utilizing media tools.

 (District Khateebs, Bishop of Peshawar, Sikh and Hindu community elders)
- ➤ The initiative provides a platform to strengthening multi-religious action and community mobilization, in countering the COVID-19 pandemic.
- We will communicate with communities through identified social media handles on the importance of listening to the safety guidelines promoted by government and the World Health Organization (WHO) in local languages.

Protection of the Most Marginalised

- Livelihood
- Ensuring that the specific needs, capacities and priorities of women, girls, men and boys are identified and that assistance targets the persons and groups most in need
- Informing women, glus, men and boys of their entitlements and available resources and engaging their participation.
- Facilitating the right to participation
- Increasing access to assistance
- Food Security (Providing Food items to the most vulnerable populations in each district 20000)
- Authentic Information
- Government and Donors Information
- Reaching out to the most marginalized in minority communities

Social Protection and COVID- 19 response in the Rural Areas

- > Implementing adequate social protection measures in response to COVID-19 is critical to saving both lives and livelihoods. Ensuring that these measures reach rural populations will be key to avoid further spread of poverty and hunger
- > Vulnerable rural populations, in particular women, children, elderly and the disabled will be significantly affected by the direct and indirect economic impact of COVID-19, leading to an increase in hunger and poverty
- > Social protection can ensure critical access to health care, provide incentives for compliance with confinement measures, and support income protection for those affected to bounce back from economic and health-related shocks.
- > Social protection's fundamental role is to support risk management. The impact of these measures will be severely hampered unless the barriers faced by the rural population, in particular women, children, informal workers, migrants and indigenous groups, to access social protection are explicitly addressed.
- > Gender-sensitive design and implementation of social protention interventions is crucial to ensure that rural women can participate in, and equally benefit from, these interventions.

Expected Outcomes

- Three million people will be made aware of the available opportunities from the government at the districts level against the virus. (50% women and girls and 50% men)
- As per verified data available with PBM will take immediate measures to provide relief to 20000 most vulnerable households, especially women headed households, elderly, and disabled.
- The provincial government departments of health, PDMA, PARSSA and P&D will utilize the data and timely measures will be adopted to quarantine the concerned areas to avoid spillovers to other parts of the province.
- Data will be available for the international donors' community who can work with the provincial and federal government to provide support to the effected populations.
- The effort will provide a platform to avoid duplication of efforts.
- Two million women will be reached out through 20 radio programmes.

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Impact

- > 3 million people will be aware of the available opportunities from the government and donors at the districts level against the virus
- > Two million extremely impoverished women(including minorities community) will be reached out through 20 radio programmes
- > The project activities will save thousands of lives by creating awareness among the most vulnerable population utilizing the methods identified.
- Identification of women, men, elderly, and people with disabilities for utilization of interventions by the government and donors activities for sustainable social protection mechanisms.
- Promoting social partnership in managing crises and DRR, by building dialogue with the concerned stakeholders through political and religious leaders (it has not happened in Pakistan for COVID-19 response) including CSOs/NGOs and social associations to ensure effective implementation, sustainability, and ownership by the community concerned

Risk Identification and mitigation Strategy

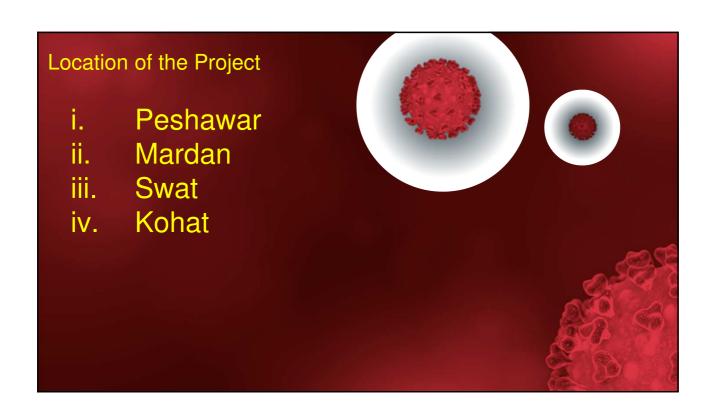
- > Political and religious scholars will be part of the interventions which will ensure that all those social, cultural or religious issues are addressed.
- These will create a sense of harmony among the local communities and gaps will be bridged through methodical responses.
- > Departments of Health can use this plan to prioritize and implement important emergency preparedness actions while strengthening inter-sectoral collaboration with other government sectors, private sector and civil society.
- The organisation already have MoU signed with the department of health Government of Khyber Pakhtunkhwa.

Beneficiaries of the Project

- The most vulnerable including the religious minorities, women, children, elderly, and disabled population of Khyber Pakhtunkhwa will be the direct beneficiaries while the entire system of government can take effective and efficient measures to support the local communities.
- The political, religious leaders, federal and provincial government will be jointly working on these measures which will also create a sense of harmony and collaboration for peace and joint efforts to respect FAITHs and work jointly for the purpose of HUMANITY in these extremely testing times.
- Further, the data available can be utilized by the donors to implement programmes with a clear understanding of the requirements at grassroots levels. The overall beneficiaries will be gender sensitive and will include 50% women and 50%males.

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Item	Cost per item	Number of Items	Total Cost
IVR Calls	0.1 per call	500000	50000
SMS	0.03 per sms	2000000	60000
Facebook Ads	300 per ad	60	18000
Animated Videos	1200 per video	20	24000
Radio Show	500 per show	30	15000
/hatsApp Business Ads	300 per ad	30	9000
Twitter Ads	250 per ad	19	4700
Project Manager	800 per month	6	4800
Designer	600 per month	6	3600
Assistant/Record Keeper	350 per month	6	1800
Meetings/Seminars	1500 per seminar	4	6000
Administration Cost	516 per month	6	3096
Total Amount in USD			199996

<u>Item</u>	Cost per item	Number of Items	Total Cost
Immediate Response – Health Kit distribution includes - 2-layered cotton cloth face mask (reusable, washable)	1 per household <mark>oer</mark> month	30000*2	60000
Ration Food Pack – 2 meals a day for 30 days per family of 5	100 per household per month	30000*3	90000
Logistical arrangements for Ration Bags to the concerned districts every month	800 per district per month	3200*3	9600
Distribution labour cost	10 per person per activity	150*3	450
Administrative Cost	500 per district	2000*3	6000
Total Amount in USD			166050

