LARGEST EMERGENCY RESPONSE IN FOUR DECADES

A DEFINING MOMENT

The coronavirus has infected 9.5 million people by late-June, and killed nearly half a million. Such suffering is layered with job losses, food insecurity, and unrest. The virus has reached all 61 countries where Humanity & Inclusion works—impacting each of our 2.8 million beneficiaries.

COVID-19 has prompted our largest-ever emergency response. And the end is nowhere in sight. The virus is picking up pace in South Asia and South America, where donor funds inform, feed, and help people with disabilities protect themselves from the virus.

In conflict zones, health structures are badly damaged. “Entire populations—especially displaced people—are extremely vulnerable and have the least access to the health, water, and sanitation services they need to protect themselves,” says Alison Bottomley, Advocacy Advisor for Humanity & Inclusion.

Of particular concern are 79.5 million displaced people, for whom social distancing is virtually impossible, and handwashing is a luxury. Local communities are quicker to reject refugees, especially when they have a disability. More than ever, it’s vital that people with disabilities and representative organizations play a key role in the response.

DONORS HELP INCLUSION EXPERTS MEET COVID-19 CHALLENGE

Humanity & Inclusion donors have fueled a huge COVID-19 emergency response. As of mid-June, they have launched or adapted more than 170 projects to protect people confronting the virus with too few resources, especially those with conflict at their doorsteps. Awareness and prevention activities are helping people in Algeria, Libya, India, Nepal, Sierra Leone, and other countries to learn the practices, and gather the materials, such as soaps, to keep their families safe.

Our priority is to make sure that the people we assist every day—people with disabilities or chronic health conditions, people with injuries, refugees, and older people—are not overlooked.

In Madagascar, our teams regularly come across villages where people know little or nothing about the virus. Local relief teams teach proper handwashing.

In Myanmar, masks and hand sanitizer are extremely hard to get, but our donors have ensured that the people who would otherwise be among the last to receive aid were instead among the first. We’re also providing cell phones to individuals who rely on rehabilitation care, so that our physical therapists can continue to check in, and provide exercises and support from afar.

In Bolivia, food, hygiene products, and cleaning kits are in the hands of some of the country’s most vulnerable people.

In Central African Republic, a country already beset by one of the world’s worst humanitarian crises, people with disabilities face incredible obstacles. Our good relations with the European Union have resulted in an “air bridge” to fly in at least three plane loads of critically needed supplies, from HI and other NGOs, at a moment when access to the country is otherwise cut off. Our teams of inclusion experts are working in overdrive, ensuring that the most vulnerable are not left on the sidelines during this pandemic.

LARGEST EMERGENCY RESPONSE IN FOUR DECADES

170+ COVID-19 projects in 45 countries
AFGHAN TAILOR MAKES MASKS FOR VILLAGE

“This will help protect people from COVID-19,” Akhter Mohammad says amid a growing pile of finished masks he has sewn. He and his wife care for their three children in a rural area of Afghanistan’s Dand district of Kandahar. Akhter is 28, the oldest of 15 brothers and sisters, and carries a responsibility to look after his extended family and parents. His village offers few opportunities for work aside from for harvesting, which doesn’t provide his family with enough income.

Akhter’s role was further challenged when he was injured from conflict, leaving him with a permanent disability. Without local access to rehabilitation, he endured years of pain, and his knee became misaligned. In 2019, Humanity & Inclusion heard of his condition, and paid for him to make daily, 1.5-hour journeys to Kandahar, where the team would help him find a more dependable livelihood. He chose sewing, learning stitches alongside students with and without disabilities. Humanity & Inclusion’s experience showed that a new skill, on its own, wouldn’t prove useful if Akhter was still in pain. So, the team arranged for him to receive physical therapy. They also explored accessibility accommodations to make his day-to-day living easier.

With a certificate of completion and a sewing tool kit from his course in March 2020, he was ready. But so was COVID-19.

Noting a dearth of personal protection equipment across Afghanistan, Humanity & Inclusion reached out to Akhter and his classmates to see if they wanted to learn to sew masks. Mask-making classes had to be remote, due to a lockdown, but students signed up. With a new pattern, Akhter got to work. “It’s a way to practice, as well as a source of income,” Akhter says. “This effort helps fulfill the shortage of PPE, especially here in the rural area, where people don’t have access to the city to purchase masks anymore, because of lockdown.”

His first customers are his neighbors. He also shows them how to use the masks properly, and shares the stay-healthy messages he learned from Humanity & Inclusion’s team. Hospitals and pharmacies also need masks, so his customer base is growing.

“It’s a good moment for me,” he says. “I am feeling happy with the response and appreciation of the people when they see masks are available in their village. For me, it is a time to fill the need and make new friends.”

Did you know?

Donors like you have placed masks in the hands of people and health professionals in places like Rwanda, Democratic Republic of the Congo, Senegal, and Togo.

COVID-19 STRIKES THE DISPLACED

Colombia

To help support Venezuelan refugees during COVID-19, Humanity & Inclusion’s teams organize remote psychosocial support and rehabilitation sessions via videos and the messaging service, WhatsApp. We’re also training 30 members from other organizations so their projects can include the needs of the most vulnerable individuals.

Bangladesh

This Rohingya refugee camp in Bangladesh has a population density of 40,000 people per sq km, making social distancing nearly impossible. Humanity & Inclusion’s teams are combatting rumors of herbal cures and death penalties for the sick with real information about preventative measures and reducing stress with psychosocial support for people in need.

Give Monthly

Become a First Responder today: hi-us.org/monthly

Invest in their future with REGULAR GIFTS

In packed camps, refugees have scant access to clean running water. Their tents and shelters offer the perfect breeding ground for COVID-19. That is, until donors like you offer stay-healthy lessons, share hygiene kits with families, or set up additional washing stations.

As a monthly donor, your generosity goes to work each month in support of people who need specific aid, like crutches or physical therapy, or simply clean water. Your regular gift provides sustainable and long-term support to vulnerable people in more than 50 countries.

Poverty. Exclusion. This is the norm for many of the 2.8 million people who look to Humanity & Inclusion donors for support.

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