



Women in Gujarat wear masks and observe social distancing. UNICEF is helping to raise awareness of these activities in support of COVID-19 mitigation measures.

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for every child

Humanitarian Action for Children

India

HIGHLIGHTS

- The coronavirus disease 2019 (COVID-19) pandemic has hit India particularly hard. Between April and June 2020, gross domestic product shrank by 23.9 per cent.¹ In addition, 24 million children² are impacted by floods, drought, cyclones and other hazards that are exacerbating underlying vulnerabilities.
- Leveraging its field presence in India, UNICEF's humanitarian strategy focuses on building resilient systems to support preparedness and response, including for vulnerable people in slums and migrant families. Key activities include supporting risk communication and community engagement; facilitating the continuity of essential health and nutrition services; strengthening infection prevention and control in health facilities; ensuring access to water, sanitation and hygiene (WASH) services; strengthening disaster risk management systems and civil society capacities; and supporting the continuity of education, child protection, gender-based violence and social protection services.
- UNICEF is requesting US\$53.9 million to assist 78 million people, including 44 million children, in India.

IN NEED

664 million
people³

286 million
children⁴

TO BE REACHED
79 million
people⁵

34 million
children⁶

KEY PLANNED TARGETS



33 million

children and women
accessing health care



3.5 million

people reached with critical
water, sanitation and
hygiene supplies and
services



450,000

children/caregivers
accessing mental health
and psychosocial support



45 million

people participating in
engagement actions

FUNDING REQUIREMENTS

US\$ 53.9
million

HUMANITARIAN SITUATION AND NEEDS

The number of COVID-19 infections in India is among the highest globally, and the country is also experiencing serious socio-economic impacts from the pandemic. By the second quarter of 2020, India's gross domestic product had shrunk by 23.9 per cent⁷ – the highest economic contraction since independence. An estimated 122 million workers – three quarters of them in the informal sector – have lost their jobs.⁸ COVID-19 has led to the highest mass economic migration in 70 years and has disrupted the delivery and quality of essential health, nutrition, education and child protection services. In the first weeks of the pandemic, reports of violence against children increased by 50 per cent.⁹ Access to child protection services remains limited across the country.

India is also prone to multiple hazards, including climate-related disasters. Over the past decade, the number of droughts has nearly doubled and there has been a sharp rise in the number of floods.¹⁰ Between 2010 and 2020, 30 million people were impacted by floods and 4.5 million people were impacted by cyclones, on average every year.¹¹ In addition, the country is affected by a wide range of geophysical hazards such as earthquakes, tsunamis and landslides.

The socio-economic impacts of these and other crises – including the COVID-19 pandemic, natural disasters and civil strife – can push vulnerable families into extreme poverty, giving rise to distress, mental health challenges and violence, abuse and exploitation of girls and boys. Disasters can lead to food and water shortages and polluted air, with related impacts on children's health, and flooding can destroy schools and impede learning.

School closures related to COVID-19 containment measures have affected 286 million children who were enrolled in schools before the crisis.¹² The digital divide in India is significant: Only 24 per cent of households have access to the Internet for remote learning.¹³

Restrictive gender norms may prevent girls, including adolescents, from engaging in and benefiting from crisis preparedness and response. Children and adolescents with disabilities are also at higher risk of exposure to COVID-19 due to underlying health conditions and difficulties maintaining social distancing. While the Government has a strong capacity for evacuations and immediate response, humanitarian assistance remains essential to strengthening systems for mitigating, preparing for and responding to emergencies.

SECTOR NEEDS



Health

1.6 million children need immunization services¹⁵



Water, sanitation and hygiene

20 million people need WASH services and supplies¹⁴



Child protection, GBViE and PSEA

12.5 million at-risk children need protection services^{16,17}



Education

286 million children are affected by school closures¹⁸

STORY FROM THE FIELD



Two months into the nationwide lockdown to prevent the spread of COVID-19, 1.2 million migrant workers without daily wage jobs were unable to pay their rents in Mumbai. Without anywhere safe to stay, they headed home by train, bus, truck and often just on foot. Approximately 30,000 to 40,000 migrants were leaving Mumbai every day.

UNICEF worked closely with the non-governmental organization networks, the private sector and the Jeevan Rath initiative to reach the most vulnerable populations and arranged for the provision of transport, food, soaps, masks and sanitary pads to help travelers return home safely.

[Read more about this story here](#)

UNICEF, in collaboration with local initiative Jeevan Rath, supports migrant families, daily wage earners and people stranded on the streets to reach their families and children.

HUMANITARIAN STRATEGY

In India, UNICEF will address the direct and indirect impacts of COVID-19, natural disasters and civil strife. Drawing on its strong field presence, UNICEF's humanitarian strategy will target the most vulnerable and prioritize: (1) risk communication and community engagement, focusing on the adoption, maintenance and normalization of behaviours to reduce the spread of COVID-19; and (2) infection prevention and control in health facilities and the provision of WASH services and supplies to affected communities.

UNICEF will support the continuity of and sustained access to essential services for children, women and vulnerable communities affected by COVID-19 and natural disaster by: (1) monitoring, mentoring and supervising health facilities confronting COVID-19 and providing psychosocial support to health care providers; (2) strengthening the delivery of community outreach for COVID-19 and reproductive, maternal, newborn, child and adolescent health and nutrition services; and (3) supporting the continuity of and access to health and nutrition services in disaster-affected areas.

In India, UNICEF will also: (1) support the continuity of learning, the safe reopening of schools and access to inclusive, gender-responsive formal and alternate education, including life-skills education; (2) support the continuity of early childhood development services; (3) strengthen child protection systems and build the capacities of front-line workers and partners on COVID-19 prevention and protection measures; (4) strengthen the protective role of families and provide quality rehabilitation and reintegration services for child victims of forced labour, trafficking and unsafe migration, children without parental care and children and adolescents with disabilities; (5) facilitate the participation of children, adolescents and youth in addressing violence against children and child marriage; (6) engage constructively with high-level government actors to allocate sufficient resources for robust and agile child protection systems; (7) provide life-saving and life-sustaining assistance during disasters;¹⁹ (8) facilitate new social protection delivery methods to reach the most vulnerable emergency-affected populations through community structures such as women's groups and village councils, and strengthen cash transfer mechanisms in line with the Grand Bargain commitments;²⁰ (9) support gender-sensitive and child-centred COVID-19 response actions in village council development plans; and (10) support fiscal analysis of the impacts of COVID-19 and the adoption of innovative financing mechanisms to best respond to evolving acute vulnerabilities.

UNICEF will also strengthen resilience to predictable hazards by enhancing child-centred disaster risk management systems and risk-informed programming. Gender-responsive training will be integrated to mitigate risks of gender-based violence and build the capacities of women, girls and adolescents for effective participation.

2021 PROGRAMME TARGETS



Nutrition

- **640,000** children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- **29,500,000** pregnant women receiving iron and folic acid supplementation



Health

- **33,000,000** children and women accessing primary health care in UNICEF-supported facilities
- **1,500,000** health care facility staff and community health workers trained on infection prevention and control



Water, sanitation and hygiene

- **35,000,000** people reached with handwashing behaviour change programmes
- **3,500,000** people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services



Child protection, GBViE and PSEA

- **450,000** children and caregivers accessing mental health and psychosocial support
- **250,000** women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions
- **6,500** unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services



Education

- **11,000,000** children accessing formal or non-formal education, including early learning
- **65,000** schools implementing safe school protocols (infection prevention and control)



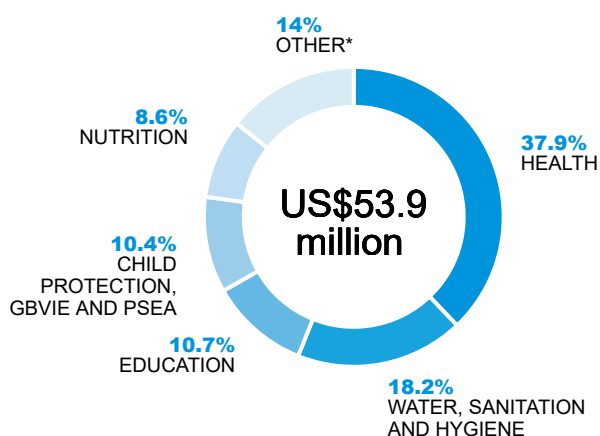
C4D, community engagement and AAP

- **45,000,000** people participating in engagement actions for social and behavioural change
- **2,500,000** people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms

FUNDING REQUIREMENTS IN 2021

UNICEF requires US\$53.9 million to sustain and scale up the responses to COVID-19 and other acute emergencies in India in 2021. This includes US\$43.3 million to respond to the COVID-19 crisis and US\$10.6 million to respond to other humanitarian crises, including natural disasters such as cyclones, floods, etc. These totals consider any adaptations needed to mitigate risks in the context of COVID-19.

Without adequate funding, UNICEF will be unable to reach millions of crisis-affected and vulnerable children in India with life-saving services. These funds are critical to UNICEF's ability to strengthen essential systems in the context of COVID-19 and facilitate the intensive efforts needed to promote handwashing and water and sanitation in urban slums. This funding will also allow UNICEF to reach vulnerable populations in remote areas that are currently beyond the reach of the Government with continuous learning.



*This includes costs from other sectors/interventions : Social protection and cash transfers (6.2%), C4D, community engagement and AAP (4.5%), Preparedness and disaster reduction (3.6%).

Sector	2021 requirements (US\$)
Nutrition	4,623,000
Health	20,414,000
Water, sanitation and hygiene	9,783,000
Child protection, GBVIE and PSEA	5,576,000 ²¹
Education	5,783,000
Social protection and cash transfers	3,325,000 ²²
C4D, community engagement and AAP	2,444,000
Preparedness and disaster reduction	1,922,000
Total	53,870,000

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ENDNOTES

1. India Ministry of Statistics and Programme Implementation, April 2020.
2. Central Water Commission and National Disaster Management Institute, 2018.
3. This was calculated based on the number of people who lack access to safe water according to India Ministry of Jal Shakti Department of Drinking Water and Sanitation, Jal Jeevan Mission, Integrated Management Information System, 2017.
4. This was calculated based on the total number of children impacted by school closures, according to the United Nations Educational Scientific and Cultural Organization (UNESCO), 2020.
5. This was calculated using 45 million adults to be reached through COVID-19 risk communication and community engagement actions; and 34 million children to be reached with education interventions and continued access to health and nutrition services. Forty-eight per cent of the population to be reached are women and girls, based on the 2001 census. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
6. This was calculated using 11 million children to be reached with education interventions and 23 million children under 5 years to be reached with continued access to health and nutrition services. Forty-eight per cent of children to be reached are girls, based on the 2001 census.
7. India Ministry of Statistics and Programme Implementation, 2020.
8. Centre for Monitoring the Indian Economy, 2020.
9. National Commission for Women, 2020.
10. Central Water Commission and National Disaster Management Institute, 2018
11. Ibid.
12. United Nations Educational Scientific and Cultural Organization, 'Education: From disruption to recovery', UNESCO, <<https://en.unesco.org/covid19/educationresponse>>, accessed 15 October 2020.
13. Ministry of Statistics and Programme Implementation, 2018.
14. This is a UNICEF estimate based on the total population affected by disasters (65 million) and the share of this population with reduced access to WASH services (26 million). United Nations Disaster Management Team, 2010.
15. This is a UNICEF estimate based on reduced access to reproductive, maternal, newborn and child health services (1.6 million children fewer children were reported as fully immunized between April and June 2020, compared with the same period in 2019). Ministry of Health and Family Welfare, Health Management Information System, June 2020.
16. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).
17. This is a UNICEF estimate based on the total number of children affected by disasters (24 million). Central Water Commission and National Disaster Management Institute, 2018.
18. 'Education: From disruption to recovery'.
19. Life-saving action is the classic humanitarian response which includes transitional services for children and women; life-sustaining actions refer to early- to medium-term recovery action plans, particularly in partnership with the Government.
20. The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.
21. This includes: US\$500,000 for gender-based violence in emergencies interventions; US\$4 million for routine emergency and COVID-19 child protection interventions; US\$300,000 for prevention of sexual exploitation and abuse interventions; and US\$127,000 for cross-cutting (gender/communication, advocacy and partnership) interventions; plus additional operational costs.
22. This budget is for various interventions to enhance cash transfer coverage through assessment, monitoring, awareness-raising and assistance by local governments and women's self help groups and women's empowerment groups. There is no budget for cash transfers themselves as these are cash transfers provided by the Government.