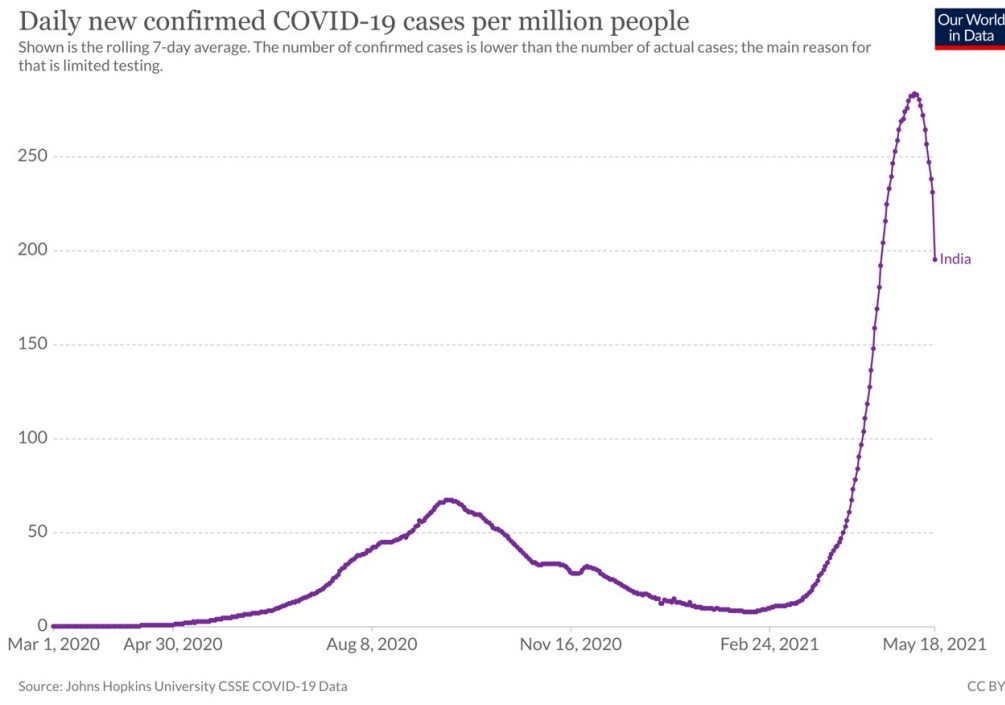


# Responding to the second wave of COVID-19 in India

May 2021

 **dharma life**  
RISING TOGETHER

***The second wave of COVID-19 has led to the double marginalisation of rural communities with the health issues exacerbating existing economic, social, education and infrastructure challenges.***



# COVID-19 in India: Status Quo

*Insights from Dharma Life Entrepreneurs – rural women from within the community who have been trained as change agents.*

## HEALTH

*Unavailability of hospital beds & general health care treatment.*

- No beds are available for patients with non-COVID health problems.
- People are scared to go to hospitals for treatment, instead, they prefer staying at home & taking medicines
- Mental health is declining

## PREVENTIVE MEASURES

*COVID-19 precautions are not being followed properly, vaccines are scarce*

- People are not wearing masks and not following protocols
- Vaccination centres are very far from village
- No testing available at village level, so people have to travel far to get tested

## ECONOMIC

*Financial situation is getting worse due to loss of jobs & limited opportunities*

- People's savings are getting exhausted and they are worried about survival.
- No financial support for COVID-19 treatment

## EDUCATION

*Children's education has slipped as a priority*

- Children are not focusing on studies
- Most of them don't have smartphones and limited/no access to online classes

**What is Dharma Life?** An organisation (founded in 2009) that is dedicated to poverty alleviation in rural India. Through its unique entrepreneurship model is addressing various SDGs. To date Dharma Life has created a network of 17,000+ rural entrepreneurs from within the rural communities more than 75% of which are women, who have reached more than 13 million beneficiaries in 50,000+ villages, across 14 states of India.

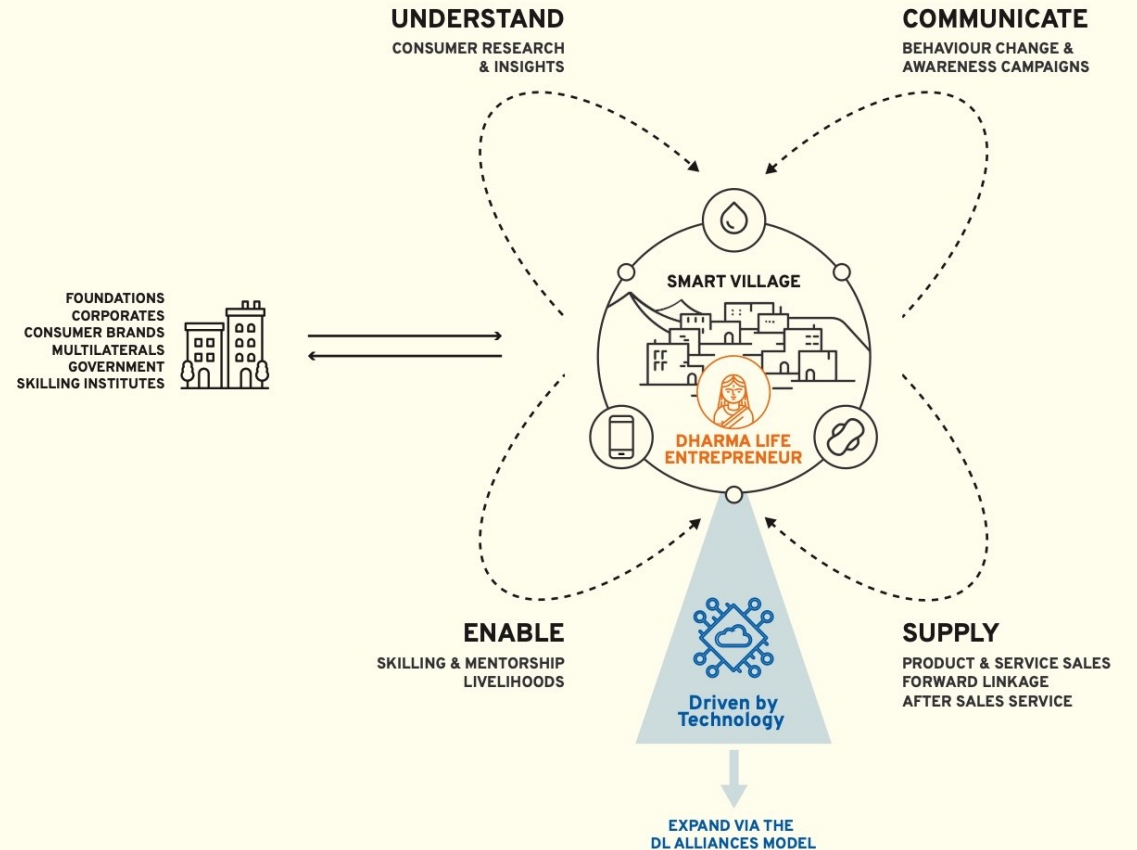
# Why Dharma Life?

*Dharma Life's model is based on a holistic approach enabling the DLEs to drive sustainable change from within their communities across four levers, informed by rich consumer insights and driven by tightly integrated technology.*

## Who is a Dharma Life Entrepreneur (DLE)?

- Women chosen from within the rural communities
- Trained to become digitally enabled behaviour change agents and market researchers
- Enable distribution of products that have social impact.
- Connected to Dharma Life technology ecosystem

*Over time, these women become key opinion leaders in their communities – respected as someone who is bringing progress.*

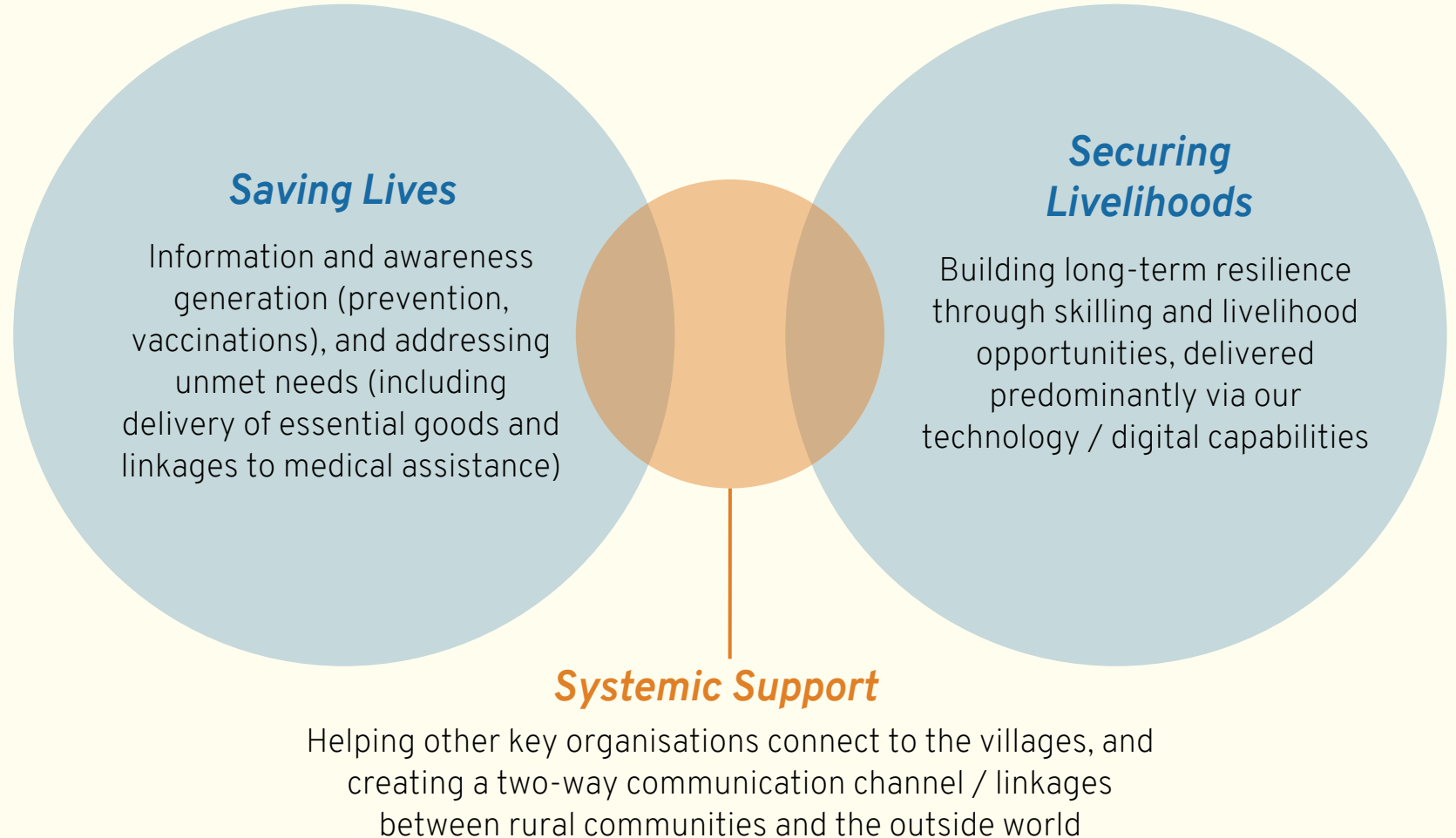


# Program Framework during the Second Wave of COVID-19 in India

Over the past year, Dharma Life, through its 'We for Village' Alliance, has been activating its existing rural network of over 17,000 DLEs to tackle the effects of the pandemic in a holistic way.

1. Creating awareness
2. Addressing basic needs
3. Improving economic conditions on ground.

***Please visit [www.dharmalife.in/we-for-village.php](http://www.dharmalife.in/we-for-village.php) for more information, regular updates and ways in which you can support the We for Village Alliance***



SAVING LIVES

# Jeevan Sangram

*Translating to ‘the fight for lives’, this program is Dharma Life’s immediate response to take on health and awareness challenges.*

*Leveraging the DLE’s circles of influence to reach the community through Whatsapp and Digital Home Visits as well as using them as an aggregator of inbound requests.*

Create a **two-way communication channel** via our DLEs through digital platforms to disseminate important information and preventive communication as well as aggregating requests from the community

Health check **digital home visits** by our DLEs to assess each household’s situation and needs (COVID and non-COVID)

**Delivery of essential items** like masks, sanitisers, sanitary napkins & daily sanitation products

**Vaccination awareness & registration** assistance

*Responding to requests from the community related to COVID-19 treatment through the extended Dharma Life network*

- Facilitating online doctor consultation & medicines
- Adequate Covid testing & ambulance coverage
- Providing oxygen concentrators
- Sourcing ICU beds for severe cases
- Plasma therapy for covid patients
- Guidelines on Home isolation/ home quarantine

*Augmenting the effort of the DLE by*

*1. Aligning with local administration for COVID support & assistance in rural communities*

*2. Creating volunteer groups - 'Sangram Saathis' in villages – to help the DLEs*

*3. Coordinating with local NGOs to streamline efforts*

DIGITAL HOME VISITS

**>1500**

Digital Home Visits conducted

**11**

Indian states

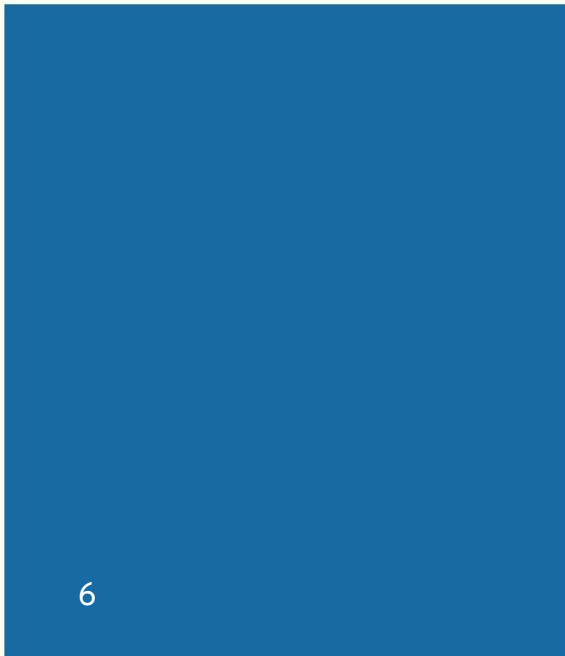
COMMUNICATION

**2805**

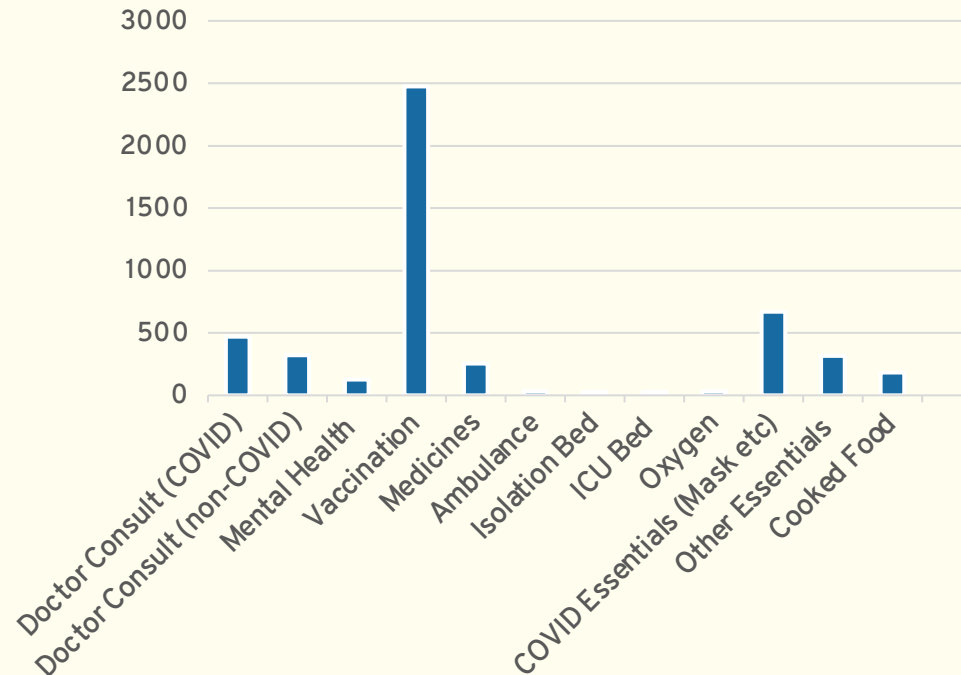
Whatsapp groups created with 50-100 members each

AS ON 4 JUN 2021

# On-Ground Impact



REQUESTS FROM HOME VISITS



VACCINATION

**2477**

Beneficiaries identified for vaccination

**728**

Vaccination appointments facilitated for rural beneficiaries via the CoWin app

# Targeted Outcomes & Needs

**Target impact:** 10,000 Dharma Life Entrepreneurs (DLEs) to create connectivity with over 640K households across 30,000 villages in rural India (with a focus on the 6 most affected states in the first phase) and conduct 500K-1M digital home visits\*


**Current impact (as on 17th May 2021):** 2,800 Dharma Life Entrepreneurs impacting over 168K households across 5,500 villages in rural India

\* Final target will depend on fundraise amount

**Fundraising Target: USD 600,000 (USD 115,000 raised so far)**

**Will go towards funding Expertise, Program Delivery & Critical organisational support**

- Partnerships and **access to relevant expertise** (e.g. supply chain assistance, technology expertise, access to field doctors, mental health experts for consultations)
- **Support for critical response activities** (e.g. campaigns on vaccinations, medical assistance and other key messages in local languages, two-way communication channels)
- **Support to acquire essential products** (pulse oximeters, oxygen cylinders, ration packages, sanitizer, soap, masks, menstrual hygiene pads)
- **Support to equip our team** with protective gear, vaccines, insurance, physical and mental health care access
- **Support for critical organisational costs** including manpower and logistics



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