

## Monthly Progress Report

### To Executive Director of Sasakawa Health Foundation

<b>Title of the Report</b>	Monthly Progress Report
<b>Name</b>	Narsappa Vagavathali
<b>Date of Submission</b>	10 <sup>th</sup> September 2020
<b>Reporting Period</b>	August 2020

### 1. Report on activities of APAL State-Level Bodies and APAL Leaders

- APAL associated with SILF and SAMUTHAN supported financially by given 5000 rupees to each family and distributed house protection plastic cover in Bihar.
- APAL conducted sample version rapid Assessment of Socio-economic Impact of Covid-19
- APAL associated with Local individuals distributed glasses and plates
- APAL associated with Youth with Mission distributed food grains
- APAL associated with The Leprosy Mission distributed food grains
- 20<sup>th</sup> August APAL associated with Youth with Mission distributed food grains
- The Government authorities Dr. Rajendra Prasad, State Leprosy Officer (SLO), and his medical team visited the leprosy colony
- The Government medical authorities Dr. YS Chakradhar, physiotherapist, DPMO, and medical team visited D Kesavaram leprosy colony
- The District Leprosy Officer (DLO) and his medical team visited Poolbghah Leprosy Colony
- The President of APAL Mr. Narsappa visited MB Nagar Leprosy Colony
- The Government authorities DPMO Mr. Y. Subramanyam and his medical team visited Aadarsh Nagar Leprosy Colony
- APAL participated in a online meeting conducted by NLR for the discussions about the partnership.
- 27<sup>th</sup> August APAL associated with SILF supported food grains
- APAL conducted Core Committee Meeting online for the discussions.
- Monitoring of regular work in the Hyderabad office for Administration of corresponding mails, finance, and social media.

**APAL associated with SILF and SAMUTHAN supported financially by given 5000 rupees to each family and distributed house protection plastic cover in Bihar.**

On the date of 1<sup>st</sup> August APAL associated with SILF and SAMUTHAN supported financially by given 5000 rupees to each family and distributed house protection plastic cover in Bihar.

**Introduction:** Persons affected Leprosy were facing difficulty obtaining basic goods, especially food due to the heavy flood in the Bihar. Flood water came into their middle of houses. Luckily no human loss in the colony but their normal life is disrupted. The communication links and infrastructure such as power connections roads are damaged and disrupted and earning activities come to a standstill.



In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with SILF and SAMUTHAN supported financially by given 5000 rupees to 247 families of people affected by leprosy from 7 leprosy colonies in Bihar and also distributed house protection plastic cover to 90 families of people affected by leprosy in Bihar. The financial support and house protection plastic cover sponsored by Sasakawa India Leprosy Foundation.

The beneficiaries are conveyed their gratitude to APAL, SILF, and SAMUTHAN for supported financially in the terrible COVID-19 crisis time.

**APAL conducted sample version rapid Assessment of Socio-economic Impact of Covid-19**

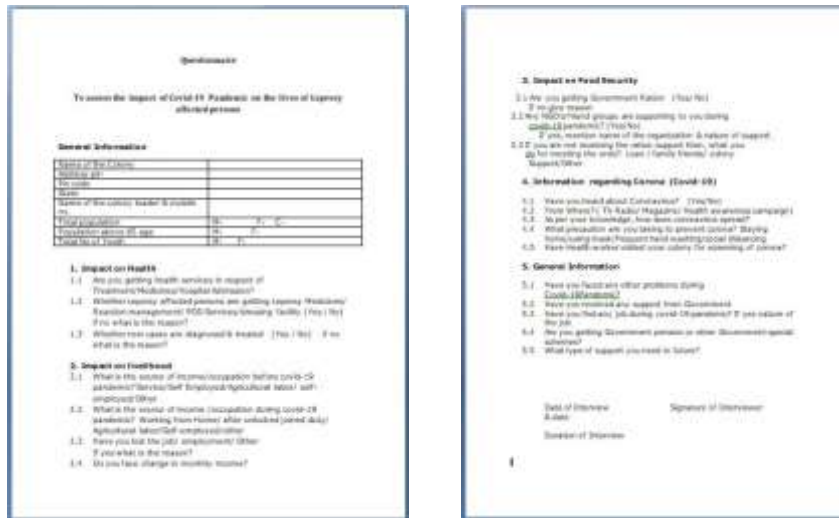
On the date of 2<sup>nd</sup>, August APAL conducted a sample version rapid assessment by phone call for analysis during time and system of questioning. APAL assessed to 43 people affected by leprosy from 6 leprosy colonies from Andhra Pradesh and Telangana.

**Title:** Rapid Assessment of Socio-economic Impact of Covid-19 on Vulnerable Populations in Leprosy Colonies

**Collaborative Team-** SILF, Association of Persons Affected by Leprosy (APAL), SHF/TNF, Institute of Economic Growth (IEG).....

**Rationale**

1. In terms of health and economic impact, the COVID-19 pandemic is particularly detrimental to those populations in the most vulnerable situations, including people living in poverty, older persons, persons with disabilities, and youth. If not properly addressed the social crisis created thus, may further increase inequality, exclusion, discrimination, and unemployment.
2. People residing in leprosy colonies are highly vulnerable considering the relatively older population, especially those with chronic health conditions like hypertension, diabetes, and cardiovascular disease; persons with disabilities who face challenges in accessing health-care services, due to lack of availability, accessibility, affordability, as well as stigma and discrimination prevalent in these self-settled colonies.
3. In sync with the COVID-19 Global Humanitarian Response Plan unveiled by the UN on 23 March 2020, underlining the importance of ‘coming to the aid of the ultra-vulnerable- who are least able to protect themselves. This is a matter of basic human solidarity. It is also crucial for combating the virus. This is the moment to step up for the vulnerable.’



**Objective**

1. To undertake a rapid assessment of the socio-economic impact of the pandemic at the household level for persons affected by leprosy residing in leprosy colonies
2. To evaluate the abilities of households to cope with the situation
3. To provide appropriate recommendations and undertake timely action through the change in programs and advocacy for timely resource mobilization to mitigate the effects

## Methodology

Sites- Multi-stage sampling involving states to be decided in consultation with APAL from below

Zone-wise Number of Colonies (Total- 741)			
East	South	North	West
Bihar- 63	Andhra- 71	Delhi- 22	Gujarat- 17
Jharkhand- 57	Telangana- 28	Haryana- 19	Maharashtra- 73
Chhattisgarh- 35	Karnataka- 36	Madhya Pradesh- 32	Rajasthan- 14
Odisha- 94	Tamil Nadu- 59	Punjab- 29	
West Bengal- 35		UP- 57	
<b>Total- 284</b>	<b>Total- 194</b>	<b>Total- 159</b>	<b>Total- 104</b>

Mobile phone survey by trained investigators; each investigator has given 2 states; less than 30 min for interviews; Interviews to be conducted in local language

Respondents- Colony leader and one female respondent from a separate household in the colony

Pilot testing- to ascertain time taken

Tool- Semi-structured questionnaire with open-ended questions

- Basic socio-demographic details of respondent & colony residents in general
- Impact on their livelihoods- loss of work opportunity/ wage loss/ decline in income for self-employed due to decreased economic activity/ resumption of begging/ borrowing
- Impact on health- deaths/ availability of services/ accessibility of health services
- Impact on food consumption- increased prices/ unavailability/ hunger
- Impact on education- suspension of classes/ drop-out
- Impact on social activities- SHG meetings/ colony meetings/ social distancing
- Social security- ration card/ pension/ Jan dhan services/ assistance received
- WASH status
- Awareness about COVID and preventive measures- masks
- Societal barriers & stigma- have they increased
- Mental health issues
- Any other issues/ problems

### **APAL associated with Local individuals distributed glasses and plates**

On the date of 12<sup>th</sup> August APAL associated with Local individuals distributed glasses and plates to the people affected by leprosy in the MOWA leprosy colony, Chhattisgarh.

**Introduction:** Persons affected are facing difficulty obtaining basic goods, especially food, clean water, and soap, masks which are critical to fighting COVID-19 infection. Lost livelihoods and travel restrictions have made it difficult to obtain food for many persons affected, and many communities of persons affected have not had access to clean water. The Government and local NGOs are supported by some food grains, soaps, and masks to the people affected by leprosy those who are residing in the leprosy colonies.



In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with Local donor Mr. Nathani Ji distributed steel glasses and plates to 240 families of people affected by leprosy in the MOWA leprosy colony at the state of Chhattisgarh.

All beneficiaries are conveyed their gratitude to the APAL and the Local donor Mr. Nathani Ji and the state leader Mr. Ghasiram for their support even in this terrible COVID-19 crisis.

### **APAL associated with Youth with Mission distributed food grains**

On the date of 16<sup>th</sup> August APAL associated with Youth with Mission distributed food grains to the people affected by leprosy in the Indore Leprosy Colony at Madhya Pradesh

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In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with Youth Mission distributed food grains to 175 families of people affected by leprosy in Ujjain Leprosy Colony at Madhya Pradesh.

All beneficiaries are conveyed their gratitude to the APAL and the Youth Mission and the state leader Mr. Sarang for their support even in this terrible COVID-19 crisis.

### **APAL associated with The Leprosy Mission distributed food grains**

On the date of 18<sup>th</sup> August APAL associated with The Leprosy Mission distributed food grains to people affected by leprosy in the Raipur leprosy colony, Chhattisgarh

**Introduction:** Persons affected are facing difficulty obtaining basic goods, especially food, clean water, and soap, masks which are critical to fighting COVID-19 infection. Lost livelihoods and travel restrictions have made it difficult to obtain food for many persons affected, and many communities of persons affected have not had access to clean water. The Government and local NGOs are supported by some food grains, soaps, and masks to the people affected by leprosy those who are residing in the leprosy colonies.



In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with The Leprosy Mission distributed food grains to 235 people affected by leprosy in the Raipur leprosy colony at Chhattisgarh.

All beneficiaries are conveyed their gratitude to the APAL and the leprosy Mission and the state leader Mr. Ghasiram for their support even in this terrible COVID-19 crisis.

## **20<sup>th</sup> August APAL associated with Youth with Mission distributed food grains**

On the date of 20<sup>th</sup> August APAL associated with Youth with Mission distributed food grains to people affected by leprosy in the Indore leprosy colony, Madhya Pradesh.

**Introduction:** Persons affected are facing difficulty obtaining basic goods, especially food, clean water, and soap, masks which are critical to fighting COVID-19 infection. Lost livelihoods and travel restrictions have made it difficult to obtain food for many persons affected, and many communities of persons affected have not had access to clean water. The Government and local NGOs are supported by some food grains, soaps, and masks to the people affected by leprosy those who are residing in the leprosy colonies.



In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with Youth with Mission distributed food grains to 40 families of people affected by leprosy in the Indore leprosy colony, Madhya Pradesh.

All beneficiaries are conveyed their gratitude to the APAL, Youth with Mission, and the state leader Mr. Sarang for their support even in this terrible COVID-19 crisis.

## **The Government authorities Dr. Rajendra Prasad, State Leprosy Officer (SLO), and his medical team visited the leprosy colony**

On the date of 22<sup>nd</sup> August the Government authorities Dr. Rajendra Prasad, State Leprosy Officer (SLO), and his medical team visited the leprosy colony in Tirupathi and collected COVID-19 samples for the swab tests; two positive cases are found out and in CCC sofar 70 samples collected.

**Introduction:** the people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.

In this terrible COVID-19 crisis time the health promotion information is reaching some persons affected by leprosy but others are difficult to reach due to travel restrictions and illiteracy. Persons affected have specific and ongoing leprosy-related healthcare needs. If persons affected can reach health facilities, they face reductions in services, as facilities transition to exclusively treating COVID-19 patients.



In this response, APAL approached the Andhra Pradesh Government and Dr. Rajendra Prasad, State Leprosy Officer(SLO) by the memorandum and providing health care services to the people affected by leprosy.

After that, the SLO Dr. Rajendra Prasad instructed all DLOs and all medical team to visit all leprosy colonies and provide needed health care services and informed to APAL. In this process Dr. Rajendra Prasad, State Leprosy Officer(SLO) to accepts our (APAL) request by the memorandum and providing health care services to the people affected by leprosy in the Akkarampalli leprosy colony, Tirupathi. They collected COVID-19 samples for the swab tests; two positive cases are found out and in CCC sofar 70 samples were collected. The colony people have conveyed their gratitude to the Andhra Pradesh Government and APAL for the health care services even in this terrible COVID-19 crisis.

### **The Government medical authorities Dr. YS Chakradhar, physiotherapist, DPMO, and medical team visited D Kesavaram leprosy colony**

On the date of 24<sup>th</sup> August the Government medical authorities Dr. YS Chakradhar, physiotherapist, DPMO, and medical team visited D Kesavaram leprosy colony in Andhra Pradesh and discussed their health facilities and aware them on precaution of COVID-19

**Introduction:** The people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.





In this terrible COVID-19 crisis time the health promotion information is reaching some persons affected by leprosy but others are difficult to reach due to travel restrictions and illiteracy. Persons affected have specific and ongoing leprosy-related healthcare needs. If persons affected can reach health facilities, they face reductions in services, as facilities transition to exclusively treating COVID-19 patients.

In this response, APAL approached the Andhra Pradesh Government and Dr. Rajendra Prasad, State Leprosy Officer(SLO) by the memorandum and providing health care services to the people affected by leprosy.

After that, Government medical authorities Dr. YS Chakradhar, physiotherapist, DPMO, and medical team visited D Kesavaram leprosy colony in Andhra Pradesh and discussed their health facilities and aware them on precaution of COVID-19

### **The District Leprosy Officer (DLO) and his medical team visited Poolbhagh Leprosy Colony**

On the date of 24<sup>th</sup> August, the District Leprosy Officer (DLO) and his medical team visited Poolbhagh Leprosy Colony at Vizianagaram and aware all people affected by leprosy on precautions of COVID-19

**Introduction:** the people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.

In this terrible COVID-19 crisis time the health promotion information is reaching some persons affected by leprosy but others are difficult to reach due to travel restrictions and illiteracy. Persons affected have specific and ongoing leprosy-related healthcare needs. If persons affected can reach health facilities, they face reductions in services, as facilities transition to exclusively treating COVID-19 patients.



In this response, APAL approached the Andhra Pradesh Government and Dr. Rajendra Prasad, State Leprosy Officer (SLO) by the memorandum and providing health care services to the people affected by leprosy.

After that, the SLO Dr. Rajendra Prasad instructed all DLOs and all medical team to visit all leprosy colonies and provide needed health care services and informed to APAL. In this process, the District Leprosy Officer (DLO) and his medical team visited Poolbhagh Leprosy Colony at Vizianagaram and aware all people affected by leprosy on precautions of COVID-19

The colony people have conveyed their gratitude to the Andhra Pradesh Government and APAL for the health care services even in this terrible COVID-19 crisis.

### **The President of APAL Mr. Narsappa visited MB Nagar Leprosy Colony**

On the date of 24<sup>th</sup> August, the President of APAL Mr. Narsappa visited MB Nagar Leprosy Colony in Mahaboob Nagar district and aware all people affected by leprosy on precautions of COVID-19

**Introduction:** the people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.

In this terrible COVID-19 crisis time the health promotion information is reaching some persons affected by leprosy but others are difficult to reach due to travel restrictions and illiteracy. Persons affected have specific and ongoing leprosy-related healthcare needs. If persons affected can reach health facilities, they face reductions in services, as facilities transition to exclusively treating COVID-19 patients.



In this response, the President of APAL Mr. Narsappa visited MB Nagar Leprosy Colony in Mahaboob Nagar district and aware all people affected by leprosy on precautions of COVID-19

The colony people have conveyed their gratitude to APAL for the health promotion information even in this terrible COVID-19 crisis.

### **The Government authorities DPMO Mr. Y. Subramanyam and his medical team visited Aadarsh Nagar Leprosy Colony**

On the date of 26<sup>th</sup> August the Government authorities DPMO Mr. Y. Subramanyam and his medical team visited Aadarsh Nagar Leprosy Colony at Kurnool, and aware all of them on precautions of COVID-19, and conducted COVID-19 tests, screened all, find out 2 positive cases.

**Introduction:** the people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.

In this terrible COVID-19 crisis time the health promotion information is reaching some persons affected by leprosy but others are difficult to reach due to travel restrictions and illiteracy. Persons affected have specific and ongoing leprosy-related healthcare needs. If persons affected can reach health facilities, they face reductions in services, as facilities transition to exclusively treating COVID-19 patients.



In this response, APAL approached the Andhra Pradesh Government and Dr. Rajendra Prasad, State Leprosy Officer(SLO) by the memorandum and providing health care services to the people affected by leprosy.

After that, the SLO Dr. Rajendra Prasad instructed all DLOs and all medical team to visit all leprosy colonies and provide needed health care services and informed to APAL. In this process DPMO Mr. Y. Subramanyam and his medical team visited Aadarsh Nagar Leprosy Colony at Kurnool, and aware all of them on precautions of COVID-19, and conducted COVID-19 tests, screened all people who reside in the colony, find out 2 positive cases.

The colony people have conveyed their gratitude to the Andhra Pradesh Government and APAL for the health care services even in this terrible COVID-19 crisis.

### **APAL participated in a online meeting conducted by NLR for the discussions about the partnership.**

On the date of 27<sup>th</sup>, August APAL participated in a online meeting conducted by NLR for the discussions about the partnership. NLR request to APAL for the partnership by mail NLR India is working on a proposal for funding from the European Commission for the states of Bihar, Jharkhand, Uttar Pradesh, and West Bengal. NLR said hat happy to have APAL as our partner in this project for the mitigation of the COVID-19 related suffering of the Leprosy affected communities in the 4 states.

### **Objectives**

The objectives are aimed at addressing the key distress areas of the most vulnerable communities of the select eight intervention districts. They are based on participation and empowerment of local CSOs, structures, and resources; devising and providing local and low-cost solutions that are sustainable. We have selected four out of six source migrant states of India with a high surge of Covid-19 infections namely Bihar, Jharkhand, Uttar Pradesh, and West Bengal; the other two are Odisha and Assam. NLR India Foundation has an existing working presence in these states with programs on leprosy, filariasis, and persons with disabilities (PWD). The eight districts (Patna, Gaya, Bokaro, Godda, Ghaziabad, Khushinagar, North, and South 24 Paraganas) comprise of the two top districts in terms of PWD as a proportion of the total population. During the Covid-19 national lockdown from March 24 to May 31 2020 while well-off Indians isolated indoors, worked from home, and got groceries delivered at their doors the migrants were left on streets with the challenged basic needs of food, hygiene, shelter, and no money. Hungry and homeless souls, many with their families set out on impossible journeys of 1000s of Kms on foot, cycle and sometimes hidden in trucks exempt for essential services for their native places; many lost their lives; those who made it, soon started feeling the stress of no livelihood at home. With the country relaxing the lockdown from June 1, 2020, the economy has gradually started moving with the factories and other work opportunities



coming up; hence, many migrants after the miserable journey back to home are now moving back to the cities for work but this time leaving behind their families being unsure of the future and lack of resources for their travel and maintenance. Most of their children have discontinued schooling; having left the cities and now in native places with poor means of Covid-19 enforced remote learning. Many migrants have PWD as their parents, siblings, and children; some migrants themselves are also PWD. The PWD who are not migrants or who do not have migrants in their families; have also been impacted more than others by Covid-19. The PWDs being mostly dependent on their family members for their survival and already leading a neglected life in many families; Covid-19 has further added to their suffering; they do not come under priority for the meager resources of the families which they like to use for other members particularly the ones with a potential to earn and children. Leprosy and lymphatic filariasis are among the common causes of PWD; during Covid-19 their treatment has also come under stress with the public health services being mostly geared towards testing, isolating, treating, and tracking for the pandemic. For the PWDs and the population, we have got government published data but are dated as per the 2011 census. No official data is available in the public domain on the number of returnee migrants, their family members, the migrants returning to the destination, and the family e.g, wife, and children left behind.

NLR India Foundation has been involved in the Covid-19 emergency response in seven states of India; the core needs of mental health, livelihood, and education have been identified in discussion with the field team engaged in reaching to the communities in the districts and blocks. The target groups have been selected to reach out to the most vulnerable distressed by Covid-19.

### **Stakeholders**

The key stakeholders for the proposed project are our partners and civil society organizations (CSOs). NLR India Foundation (NLRIF) held several consultations. The consultation with the President of the Association of People Affected by Leprosy (APAL) and the Coordinators of the Disability Peoples Organizations (DPOs); gave us insights into the distress being experienced particularly by the PWDs and Leprosy affected. The consultation with the President, Deva International Society for Child Care (DISCC); gave us insights into the magnitude of the mental health suffering during these exceptionally difficult challenges brought by the pandemic on the lives of migrants, the female members, and the children; without timely and appropriate intervention may lead to long-term mental health suffering. **Write about the livelihood and education partners after selection**

### **Intervention Logic**

- Logical selection of the geographical location: it is based on a large number of Covid-19 infections in six migrant states, demonstrating the fastest doubling rate compared to other Indian states. We selected four based on our existing presence in the states.
- Logical selection of the target groups: PWDs are bearing the double whammy of Covid-19 and being dependent on others for their survival; their family members may or may

not have a migrant but are stretched on resources compared to others due to one /more members with special needs; other migrant families have lost their means of livelihood have been put in greater difficulties compared to non-migrant families in the district, with the migrant male member having now returned to the city the female spouse and children are more prone to social exploitation by their extended family members and neighbors.

- Logical selection of key intervention components mental health, livelihood, and educations: in consultation with NLRIF field emergency team and stakeholders.
- Logical selection of partners: NLRIF has experience of working with communities, empowering community structures addressing PWDs and migrants, and established relationship with government departments primarily health and social welfare; APAL has experience of networking and empowering marginalized communities like the Leprosy and PWDs; DISCC has expertise on the mental health of vulnerable populations particularly of children; **write about other partners later**
- Logical selection of intervention channel, the local CSOs: they know their communities best, their needs and resources; the empowered CSOs will bring a sustainable change.
- Logical selection of activities: with an appropriate mix of tools and technology.

### **27<sup>th</sup> August APAL associated with SILF supported food grains**

On the date of 27<sup>th</sup> August APAL associated with SILF supported food grains to the people affected by leprosy in Sant Gyaneswar Leprosy Colony at Madhya Pradesh.

**Introduction:** Persons affected Leprosy are facing difficulty obtaining basic goods, especially food due to the heavy flood in Madhya Pradesh. Flood water came into their middle of houses. Luckily no human loss in the colony but their normal life is disrupted. The communication links and infrastructure such as power connections roads are damaged and disrupted and earning activities come to a standstill.



In response to this upheaval, the Association of People Affected by Leprosy (APAL) associated with SILF supported food grains to the 25 families of people affected by leprosy in Sant Gyaneswar Leprosy Colony at Madhya Pradesh.



The beneficiaries are conveyed their gratitude to APAL, SILF, and SAMUTHAN for supported financially in the terrible COVID-19 crisis time.

### **APAL conducted Core Committee Meeting online for the discussions.**

On the date of 30<sup>th</sup>, August APAL conducted Core Committee Meeting online for the discussions.

#### **Agenda**

1. Welcome and Introduction – Mr. V. Narsappa
2. Modification in Budget – Mr. Uday Thakar
3. Covid-19 pilot project- Mr. Venu Gopal
4. Inputs by – Dr. P. K. Gopal
5. Open discussion
6. Decisions
7. Any other issues with the permission of the Chair
8. Vote of Thanks

The following members were present

1. Mr. V. Narsappa, President of APAL
2. Mr. Venu Gopal, Vice President of APAL
3. Dr. P. K. Gopal, Senior Consultant, APAL
4. Mr. Uday Thakar, Advisor, APAL

Mr. V. Narsappa, President, APAL presided the meeting. He welcomed all the members and explained the situation during the Covid-19 pandemic in different states.

Mr. Uday Thakar briefly explained the modifications made in the budget for the year 2020-2021, to accommodate the pilot project on awareness of COVID-19. With this modification 12, 000, 00/- are made available for this pilot project which was approved by SHF.

Mr. Venu Gopal explained the background of the pilot project, its object, and methodology, etc.

Dr. P.K. Gopal expressed his satisfaction to know that, APAL is undertaking an awareness program on COVID-19.

After the overall discussion following decisions were taken.

1. Pilot projects should be organized in 6 states, Andhra-Pradesh, Jharkhand, Telangana, Gujarat, Maharashtra, and Madhya Pradesh.
  2. A maximum of 5 colonies from each state has to be selected. (As far as possible the maximum population should not exceed 250 per colony)
  3. One youth from each colony has to be selected for training. Training will be organized online by 15<sup>th</sup> September or 1<sup>st</sup> October 2020.
  4. Oximeter and a temperature gun will be purchased from the Wow hood company, Guru gram, Haryana and Hyderabad office will place the order of 25 oximeters and 25 temperature guns.
  5. The volunteer who will take the responsibility to undertake the activity in the colony will be paid rs.20 per patient per month.
  6. The duration of the project will be 4 months, starting from 15<sup>th</sup> September 2020.
  7. The format of the report will be prepared and will be discussed with the youth during the training.
  8. If require posters disseminating information on Covid-19 and precautions to be taken during the COVID-19 pandemic, will be developed and circulated.
  9. The volunteer's responsibility, reporting system, and other details will be discussed during training.
  10. APAL has taken a unanimous decision that COVID-19 positive patients from colonies will be provided financial assistance. The amount of assistance will be discussed and finalized before initiating the project.
  11. It was suggested that the Executive Committee Meeting should be organized on Zoom as early as possible.
  12. It was suggested and agreed that APAL will request all state leaders to prepare a budget, for the activities they would like to undertake during the COVID-19 pandemic.
  13. APAL will write a letter requesting, concerned SLO to extend the cooperation to selected volunteers for undertaking the COVID-19 project in the colonies.
- Mr. Narsappa proposed the vote of thanks and the meeting was concluded

**a. Report on activities of the Indian Central Government and States/UTs related to leprosy control that you have learned about while conducting duties as APAL President Mr. Narsappa.**

In June 2020 there is no activity in Central/ State Government programs.

**b. Key findings which are important for SHF work**

- a. To be Concentrated Advocacy on RPWD Act and Supreme Court should be expanded to some more states.
- b. APAL to organizing more coordinated activities with other disabled sectors like DPI & NCPEDP.
- c. The regular meeting of youth leader & women empowerment programs should be budgeted and organized.
- d. To form women empowerment among colony women

**c. Difficulties/Challenges you faced during the period**



**Difficulties:** The people affected by leprosy are also recently afflicted from sickness by COVID-19 positive. The affected people are already facing problems with less immunity and poverty. Recently in the district of Nalgonda, 11 people are affected by COVID-19 rest of the people who need to screen, and the village of Bhimavaram 19 people are affected.

**Challenges:**

- APAL's accountant Mr. Rao infected by COVID-19, we stayed 2 weeks home quarantine
- We started office work slowly because of India Ministry of Home Affairs released new guidelines called "Unlock 1.0" that allow the opening of Private Offices, malls, restaurants, and religious places in all areas except the containment zones
- We are started to conducting Awareness Program on Precautions of COVID-19 in 3 leprosy colonies
- Mostly using social media platforms and updating activities in the APAL India website

**V. Narsappa.**