

COVID-19

Response Plan Phase 3

11 March 2021



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Foreword

Every child we serve has, in some way, been affected by the devastating aftershocks of COVID-19 – often in ways we could never imagine. It is heart-breaking that 270 million more children now go to bed hungry as a result of the pandemic; up to 85 million more girls and boys may be at risk of violence; and the UN predicts a record 168 million people will need humanitarian assistance – an increase of 40% year on year.

Most concerning of all is the long-term impact on children's futures, with so many robbed of their God-given potential. Which is why we must do all we can, right now, to bring hope to an entire generation.

Our COVID-19 Response is achieving just that. It was launched on the same day the World Health Organization declared COVID-19 a pandemic. And it is World Vision's largest ever undertaking – a US\$350 million global emergency response, with a target of reaching 72 million people, half of them children.

As we enter this third phase of the response, we are on track to meet those goals. Blessed with our 37,000 staff spanning 100 countries, 400,000 faith leaders and 150,000 frontline community health volunteers, we have already reached almost 60 million people. And I express my heartfelt appreciation to all of our supporters, donors and

partners who have made this possible.

The road ahead is treacherous – yet we are called to bring hope to the most vulnerable children, empowering them to change the world around them.

We must continue working with our faith partners to fight for fair and equitable rollout of COVID-19 vaccines and to ensure community acceptance. And we must unite, working with all of our supporters, partners, donors, governments wherever they are. Only together can we achieve our goal of supporting the most vulnerable children through this crisis.

Let us be the hope that we want to see in this world. And let us be reminded that World Vision was created for a time such as this.

Andrew J. Morley
World Vision International
President and CEO

The global COVID-19 pandemic continues

On 11 March 2020, the World Health Organization (WHO) declared COVID-19 a pandemic. Within hours, World Vision launched its largest global emergency response ever in its 70-year history. Working closely with governments, partners, supporters, and communities, World Vision is responding to the impact of COVID-19 in more than 70 countries¹ to limit the spread of the disease and reduce its impact on the world's most vulnerable children and families.²

The pandemic has resulted in devastating consequences for vulnerable girls and boys and their communities. Millions of people have died around the world since the start of the crisis, and now devastating aftershocks are putting at least 85 million more children at risk of violence,³ and in a recent World Vision consultation, 81% of children and young people interviewed talked about violence in their homes, communities, and online since the start of the pandemic.⁴ Millions of parents and caregivers have lost incomes and jobs due to COVID-19, forcing 8 million children into child labour in Asia alone.⁵ There are growing concerns about sharp rises in acute food insecurity in many fragile and humanitarian contexts. Of greatest concern are the 30 million people considered to be facing 'emergency' (IPC 4)⁶ levels of food insecurity. An additional 139

million people are estimated to be in a 'crisis' (IPC 3) situation with World Food Programme warning these numbers will increase throughout 2021.⁷ Several effective vaccines have been, and are continuing to be developed. By 9 March 2021, more than 313 million doses had been administered in 118 countries.⁸ However, while some countries begin to achieve widespread coverage by the end of 2021, many others may not be able to provide the same level of coverage until the end of 2022 or beyond.⁹ There are various complex issues related to vaccine roll-out programmes that need to be addressed, such as the inequitable national and international vaccine distribution and people's hesitancy or unwillingness to take the vaccine.

World Vision's continuing response to the COVID-19 pandemic is more

essential than ever. This response plan is itself a response to listening to and learning from communities about the changing dynamics of COVID-19 and its indirect impacts. In phase three of World Vision's global COVID-19 Response, we will continue to address the immediate and long-term needs of the most vulnerable children and communities, across the rural-urban continuum, in health; water, sanitation, and hygiene (WASH); food security and livelihoods; education; and child protection. In addition, we will play a key role in supporting the community-driven and -based demand creation and acceptance for vaccinations.

¹ Response countries include field programming and/or fundraising. We are also implementing programmes to help affected people in countries where our support offices are located, including the United States, Korea, Taiwan, Australia, and Malaysia.

² World Vision International (WVI) (2021) *COVID-19 Response: Situation report #21* [Online]. Available from: <https://www.wvi.org/publications/report/coronavirus-health-crisis/covid-19-response-update-february-22-2021>

³ WVI (2020a) *A perfect storm: Millions more children at risk of violence under lockdown and into the 'new normal'* [Online]. Available from: <https://www.wvi.org/publications/report/coronavirus-health-crisis/covid-19-aftershocks-perfect-storm>

⁴ WVI (2020b) *Act Now: Experiences and recommendations of girls and boys on the impact of COVID-19* [Online]. Available from: https://www.wvi.org/sites/default/files/2020-11/WVI-GLOBAL-ActNowReport-Final_small.pdf pp11.

⁵ WVI (2020c) *Out of time: As families' incomes plummet, millions more children go hungry and are forced to work and beg* [Online]. Available from: https://www.wvi.org/sites/default/files/2020-07/Out%20of%20Time_Covid19%20Aftershocks%20-%20FINAL.pdf

⁶ Integrated [Food Security] Phase Classification (IPC) phases are ranked as follows: IPC 1 (minimal), IPC 2 (stressed), IPC 3 (crisis), IPC 4 (emergency), and IPC 5 (catastrophe/famine). See: World Food Programme (WFP) (2021) *WFP Global Operational Response Plan 2021 Update #1* [Online]. Available from: <https://reliefweb.int/sites/reliefweb.int/files/resources/WFP-0000123959.pdf>

⁷ *Ibid.*

⁸ Bloomberg (2021) *COVID-19 Tracker* 21 February [Online]. Available from: <https://www.bloomberg.com/graphics/covid-vaccine-tracker-global-distribution/> [Accessed 2/3/2021].

⁹ Belluz, J. (2021) "Rich countries are hoarding COVID-19 vaccines," *Vox*, 29 January [Online]. Available from: <https://www.vox.com/2021/1/29/22253908/rich-countries-hoarding-covid-19-vaccines> [Accessed 2/3/2021].

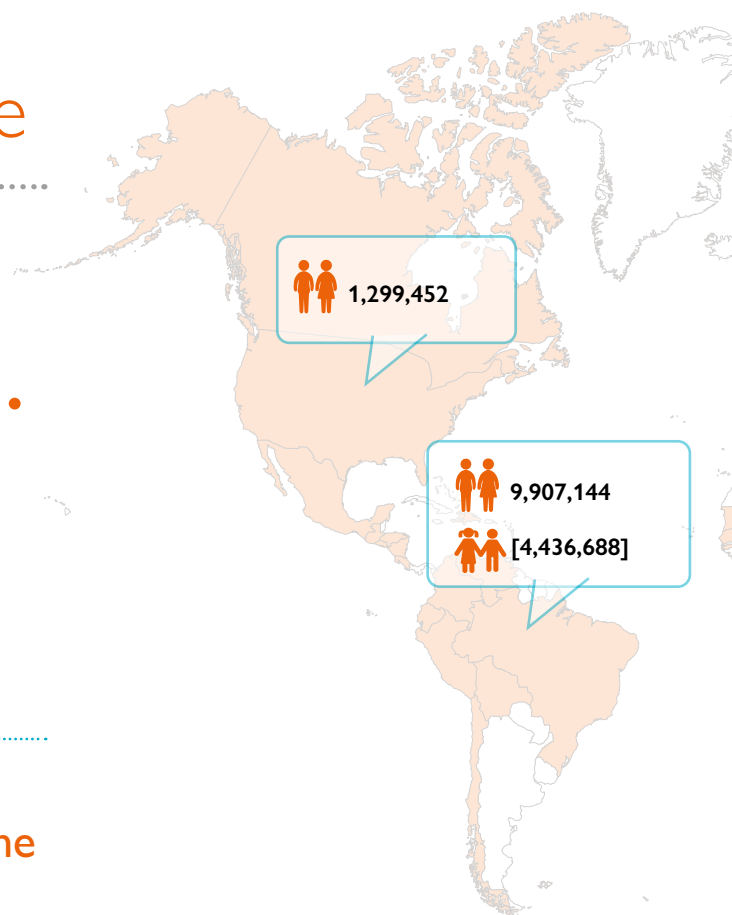
World Vision's response

World Vision is responding* to the devastating impact of COVID-19

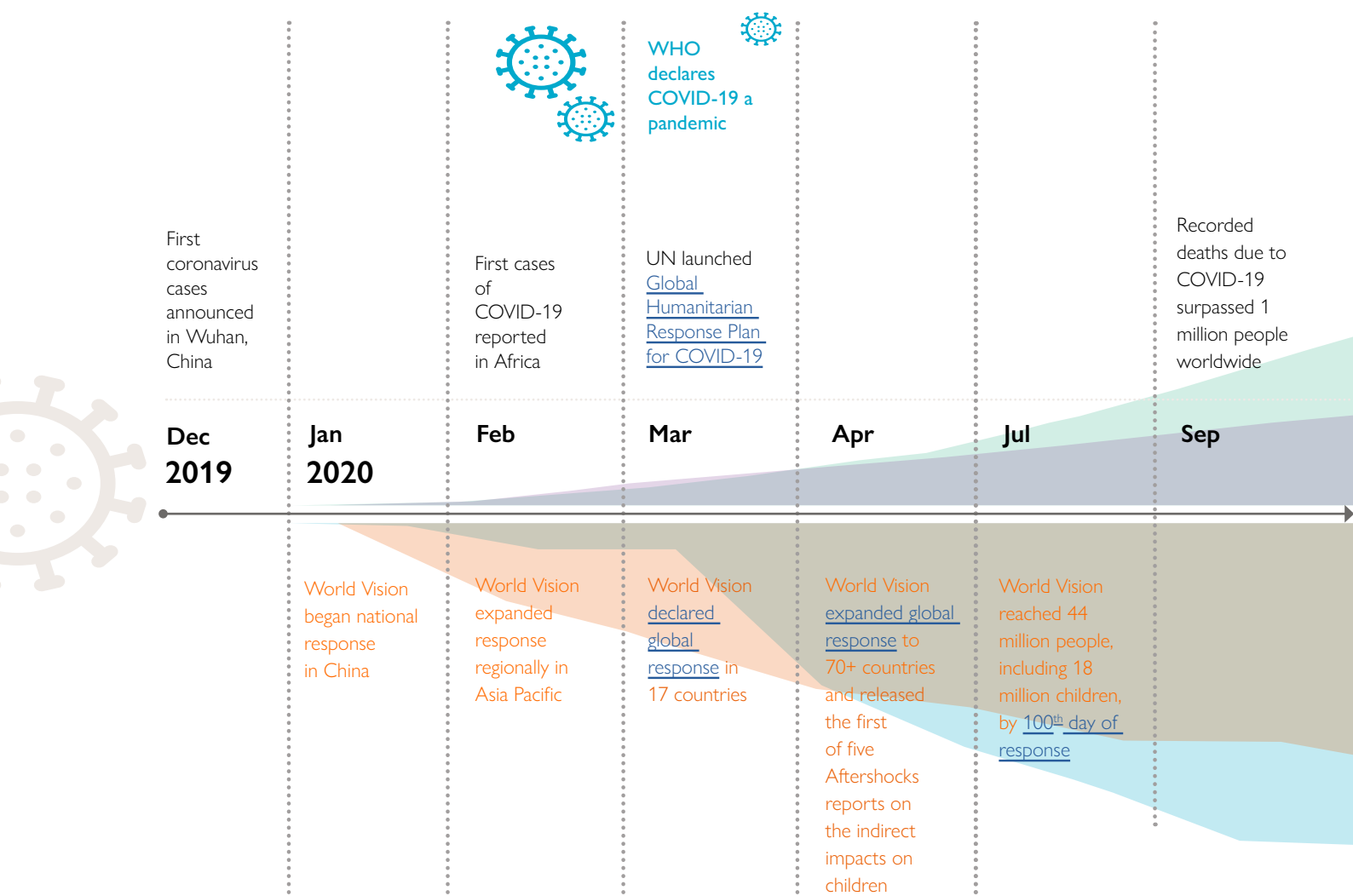
in **more than 70 countries.**

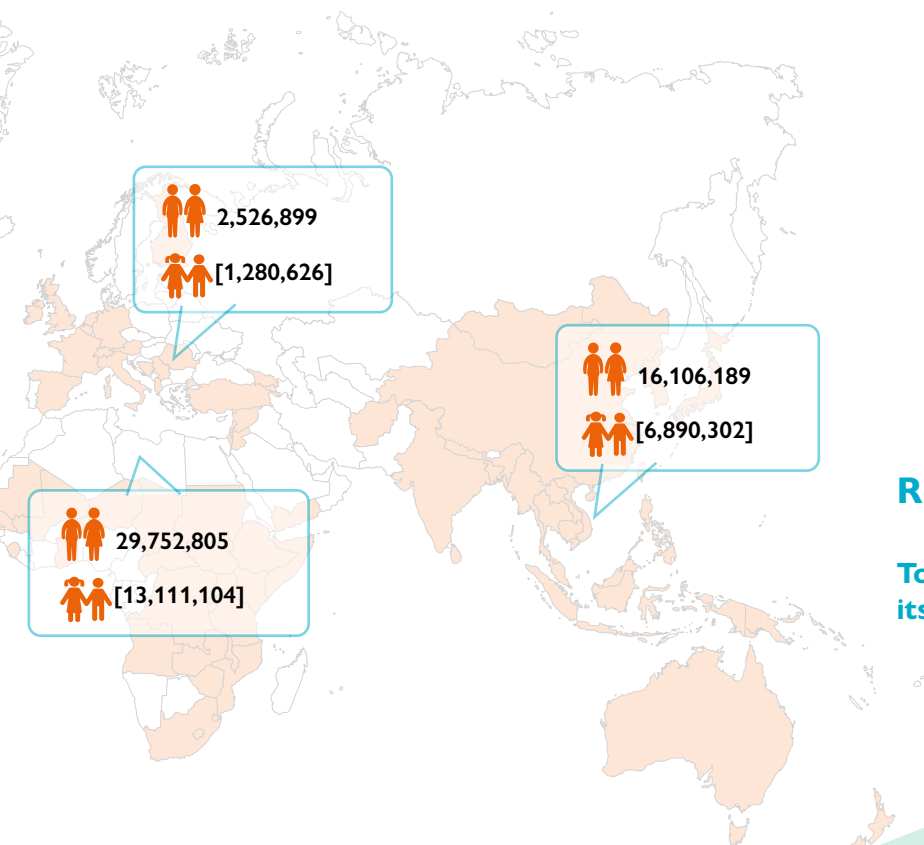
Our **US\$350 million response** aims to reach, **72 million people**, including **36 million children**, especially the most vulnerable.

** responding includes field programming and/or fundraising*



World Vision response timeline

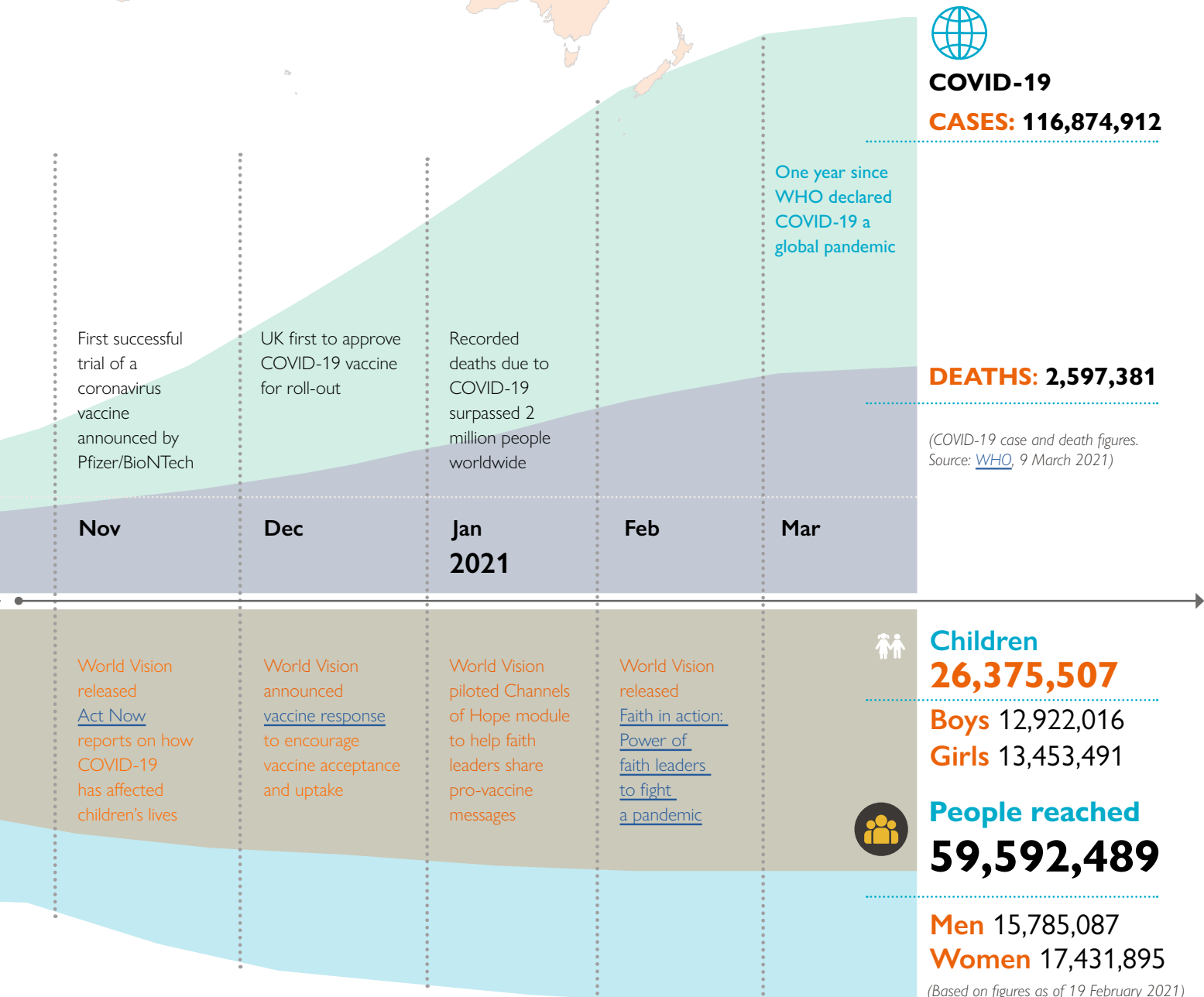




RESPONSE GOAL



To limit the spread of COVID-19 and reduce its impact on vulnerable children and families



Timeframe

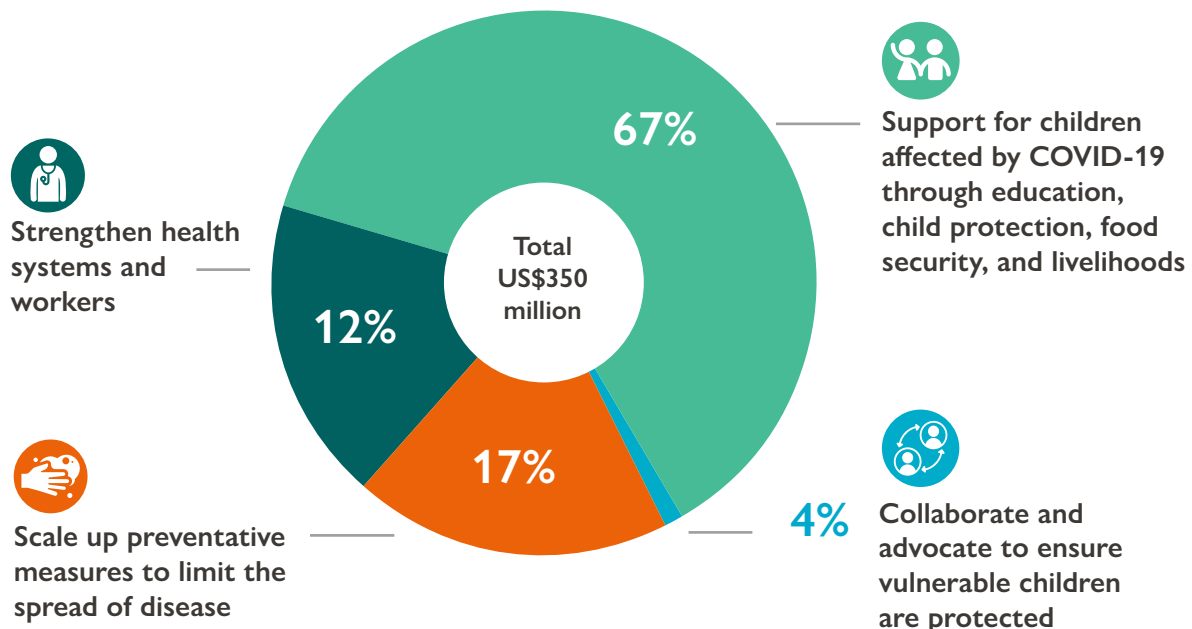
In light of the continued spread of the virus, the extreme indirect impacts, and the introduction of vaccines, World Vision will extend the duration of the response with a tentative end date of March 2022. This will mark two years since the declaration of the response and will allow ample time to continue meeting the needs of the most vulnerable and to prepare for a comprehensive evaluation.

Target populations

World Vision will be continuing to focus on countries that have significant pockets of fragility and poverty. These include urban slums, densely populated informal settlements, refugee and internally displaced person camps. These living conditions are where children, families, and communities are most at risk due to limited access to health and other support services, education, and the formal economy.

Funding by strategic objective: 2021–2022

World Vision's strategic objectives for the COVID-19 Response are fully aligned with the United Nations' COVID-19 [Global Humanitarian Response Plan](#) strategic priorities.



Response highlights to date (based on figures as of 19 February 2021)





COVID-19 outcome forecast

Collaborate and advocate to ensure vulnerable children are protected



OBJECTIVE 4



Advocate for children's safety and resource communities to protect **2 million children** at risk or violence and exploitation



Support children affected by COVID-19 with education, child protection, food security, and livelihoods



OBJECTIVE 3



Ensure food security for **10 million people** and empower them with economic tools to withstand future shocks



Ensure 2 million vulnerable children are **safe and engaged** in education despite disruptions



Strengthen health systems and workers



OBJECTIVE 2



Train and resource 150,000 grassroots community health workers and strengthen local services to withstand COVID-19 and future health threats



Scale up preventative measures to limit the spread of disease



OBJECTIVE 1



Partner with communities to build **sustainable water systems** and improve hygiene practices for **25 million children and families**





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World Vision's priorities

In October 2020, World Vision conducted its largest ever real-time learning exercise to review the first six months of World Vision's response to the COVID-19 pandemic from the perspectives of internal and external stakeholders. World Vision collected input from just over 3,000 staff across 56 countries, 500 external partners, and 1,600 community members in six countries. Findings were used to shape the current phase of the response, showing a real commitment by World Vision to listen, learn, and embed this learning in the ongoing response efforts.



We are expanding our scope in vaccination programming

We will use our global reach and grassroots connections to encourage vaccine acceptance and uptake by the world's most vulnerable communities to save lives, protect livelihoods, and safeguard families and children from impoverishment and violence. Our principal role in the COVID-19 vaccine roll-out and introduction is to ensure that communities are accurately informed on the nature and purpose of vaccines, leaders and champions are equipped to support their constituencies, and public health decision makers understand vaccine acceptance barriers and the science of reducing vaccine hesitancy. Faith leaders will play a vital role in engaging with communities on vaccination. We

are building on our evidence-based Channels of Hope methodology with a simple COVID-19 vaccine module for faith communities that provides information about the vaccine and addresses barriers to vaccine acceptance. Pilots using the material began in January 2021. We will also ensure planning processes include citizens and are accountable to them, allocation strategies are equitable, and front-line health workers are supported to provide vaccine services with quality. World Vision is now engaging with [COVAX](#) and will continue its bilateral engagements with [GAVI](#), [The Vaccine Alliance](#); the [WHO](#); [Coalition for Epidemic Preparedness Innovations \(CEPI\)](#); the [United Nations Children's](#)

[Fund \(UNICEF\)](#); and the [London School of Hygiene and Tropical Medicine](#) to share learning, bring communities' voices to the table, and influence key decision makers with regards to the equitable distribution of vaccines and development of appropriate tools to support vaccine introduction. As new vaccines, authorised by a [stringent regulatory authority](#), are brought to the market, World Vision's support to vaccination programming may adapt depending on the context, opportunities, and risks at the time. World Vision will continue to engage with COVAX and other global partners to refine its role in the roll out of vaccination programmes.



We will integrate but continue to respond with agility

Whilst much has been done to curve the progress of the pandemic, the crisis outlook remains worrying. The World Bank estimated that COVID-19 plunged 119 to 124 million people into poverty in 2020 and poverty induced by COVID-19 will rise between 143 and 163 million in 2021.¹⁰ Loss of income and disruption in domestic food supply chains are amongst the risks facing people globally. As the crisis continues to unfold, and in the absence of a clear plan for vaccine roll-out in low and middle income countries, the world is on the brink of a catastrophic food security and economic crisis, making this sector a primary host to some of the largest humanitarian needs moving forward.¹¹ Therefore, the response

to the COVID-19 crisis can no longer be viewed as a standalone response, but must also be considered a core element of our ongoing humanitarian and development programmes. By building on our local presence in communities, we will strive to meet the immediate and long-term needs of the most vulnerable people and children we serve. In this phase, we will see a growing livelihoods recovery, food and cash, and social safety net elements across our programmes, including supporting savings groups and recovery lending through our microfinance subsidiary, VisionFund International.¹²

Whilst we continue to address the indirect impacts of COVID-19 through a multi-sectoral approach,

we will remain responsive to contextual changes, agile, and adaptive to new developments of the pandemic, particularly in relation to the vaccine roll-out. We have seen extraordinary examples of adaptation and agility by our field offices. We have remained flexible to our daily changing contexts, embraced digital technology like never before, partnered with and empowered communities, and quickly pivoted existing work practices and funding to address COVID-19, while also influencing others externally to ensure children's needs were considered. This will continue in this third phase of the response.



We will strive to target the most vulnerable

The pandemic changed the profile of people who are vulnerable to economic stress, poor educational outcomes, hunger, and abuse, based on geography, gender, and age. We have also seen large increases in the numbers of people who are now vulnerable. In particular, fragile and conflict-affected states, countries affected by multiple crises, and countries with significant

currency depreciation are considered food-security 'hotspots'. Urban dwellers, women, and children have had quantifiable drops in critical well-being indicators. We will use the findings from our real-time learning exercise to re-align our perspective of who is vulnerable to which kinds of crises. As the crisis continues to exacerbate and expose new vulnerabilities, we will

re-assess our beneficiary reach and re-evaluate what it means to be vulnerable in the contexts we work in. In addition, as we have gathered data and are able to better tell the story of our work on COVID-19, we are able to forecast and make some bold statements about the outcomes of our programming.



We will increase our focus on evidence and impact

This response is unique not only because of its beneficiary reach, budget, or pan-sectoral approach, but also because of the way it has affected our staff and business processes. Evaluating our contribution will require an equally

unique approach. In this new phase of the response, a large-scale, multi-country evaluation will be planned and executed. The goal of this evaluation is to ensure that we are accountable to our supporters and communities, that we can effectively

tell the story of our work, and we learn from our successes and challenges for future emergencies. In addition to the evaluation we will build on our largest ever real-time learning last year to strengthen accountability to communities.

¹⁰ Lakner, C. et al (2021) "Updated estimates of the impact of COVID-19 on global poverty: Looking back at 2020 and the outlook for 2021," *The World Bank*, 11 January [Online]. Available from: <https://www.worldbank.org/en/news/press-release/2020/10/07/covid-19-to-add-as-many-as-150-million-extreme-poor-by-2021> [Accessed: 8/3/2021].

¹¹ For more information and advocacy messages, see: WVI (2020d) *COVID-19 & Poverty and hunger*. [Online]. Available from: <https://www.wvi.org/publications/policy-briefing/coronavirus-health-crisis/covid-19-policy-brief-poverty-hunger>

¹² World Vision's financial services provider that offers small loans, savings and insurance for vulnerable populations to help them rebuild their livelihoods and support them on their journey out of poverty.

World Vision's programmes

Strategic objectives



1. SCALE UP PREVENTATIVE MEASURES TO LIMIT THE SPREAD OF DISEASE



31,451,096

People reached through promotion of preventative behaviours



5,573,530

Information, education, and communication materials printed and distributed



4,803,098

Handwashing supplies distributed

World Vision will continue to engage with communities to work on risk communication to reduce transmission and limit the spread of COVID-19 and will retain and reinforce strong public health and WASH components to sustain preventative measures where the pandemic is peaking and/or where spikes or second waves occur. World Vision will ensure communities are informed of the nature and purpose of the COVID-19 vaccines so they can participate in their roll-out through their respective ministries of health. This will be done through participatory and community-driven engagements and by harnessing our existing Channels of Hope network of faith leaders to use a new COVID-19 vaccine module that addresses barriers to vaccine acceptance. WASH programming will include establishing, rehabilitating, and maintaining community-level WASH infrastructure, and providing clean water, hygiene supplies, and equipment to ensure good hygiene and infection control.



2. STRENGTHEN HEALTH SYSTEMS AND WORKERS



158,661

Community health workers trained and supported



482,416

Disinfectant kits distributed to health-care facilities



437,198

People supported with the securing of safe quarantine and/or isolation spaces

Community health workers will continue to play a vital role in reducing disease transmission by promoting preventative behaviours and community case management of disease, through contact tracing, detecting, and referring individuals with COVID-19 symptoms. They will continue to be trained to safely provide life-saving community-based health and nutrition services and to understand and address vaccine hesitancy. World Vision will support the capacity building of formal and informal community structures to create demand for vaccine and enhance social accountability for equitable and informed decision-making for vaccine acceptance and uptake. It will continue to support the establishment and management of isolation centres and assist with transportation of vulnerable people to these centres. World Vision will continue to support medical facilities, including hospitals and primary care clinics by providing essential health, nutrition, and hygiene commodities where needed.



3. SUPPORT FOR CHILDREN AFFECTED BY COVID-19 THROUGH EDUCATION, CHILD PROTECTION, FOOD SECURITY, AND LIVELIHOODS



3,424,202

People reached with information, education, and communication psychosocial support materials



57,271

Teachers provided with education training and support



1,461,446

Children supported with child protection programming

World Vision is adapting its education and child protection programming to address the interruption to education and heightened protection risks such as violence and child labour, using context- appropriate solutions. World Vision will make all possible efforts to ensure the most vulnerable children return and remain in school. World Vision will explore alternative options for children who are out of school while working to enable their entry/re-entry into formal education so that no one is left behind. World Vision will continue to support children, families, teachers, and relevant institutions to mitigate the impact of restrictive measures for virus transmission containment at physical, social, emotional, cognitive, and spiritual levels. World Vision will address the root causes of violence by empowering local partners, including faith actors, to work together to strengthen a protective environment that cares for and supports all children, especially the most vulnerable. World Vision will empower girls and boys (including children with disabilities) with life skills, resilience, and psychosocial support to be influential protection actors in their environment, including during lockdown. World Vision will also ensure that reporting and referral mechanisms are functioning and standard procedures are in place for alternative forms of care for situations where children lose caregivers as a result of COVID-19.



2,017,056

People reached with cash and voucher assistance



145,818

Households provided livelihoods assets



164,080

Individuals supported with livelihoods training

World Vision will continue to support the most vulnerable children and their families using market-based approaches that sustain local economies. This includes cash and vouchers assistance and locally purchased food and care pack distributions for people in quarantine. In countries where the pandemic has been effectively contained, World Vision will enhance recovery pathways through market system development, including more equitable financial inclusion, strengthening access to social protection mechanisms, institutionalising more inclusive roles of women and men, and green economic recovery. World Vision and VisionFund International will ensure access to financial and non-financial services to recover lost livelihoods through programmes such as savings for transformation platforms and additional credit for micro, small, and medium enterprises, to help households become more resilient to the effects of future shocks.



4. COLLABORATE AND ADVOCATE TO ENSURE VULNERABLE CHILDREN ARE PROTECTED



281

Global, regional and national policy changes achieved through advocacy and external engagement to improve the international responses to COVID-19



1,062

External engagements where World Vision is advocating on priorities, including ending violence against children in the context of COVID-19

Through its strong commitment to accountability, social mobilisation, child participation, and a bottom-up approach, World Vision, together with global non-governmental organisation consortia and United Nations partners, will advocate to ensure equitable access to care, including vaccine distribution to the most vulnerable groups, such as refugees, internally displaced persons, and people living in urban slums. World Vision will use its grassroots connections to encourage vaccine acceptance and uptake by the world's most vulnerable communities and will continue to participate in COVAX and advocate for equitable distribution of vaccines towards the low- and middle-income countries. World Vision will also advocate so that policies, plans, and operational decisions effectively avert or mitigate a crisis of indirect impacts for the most vulnerable children, families. In addition, World Vision has integrated a strong commitment to accountability through application of the [programme accountability framework](#), which ensures World Vision is accountable to affected populations by providing information, consulting with communities, promoting participation, and collecting and acting on feedback. Particularly with regards to harmful rumours and misinformation trends that may arise as a result of vaccine roll-out.



We would like to thank the hundreds of thousands of generous child sponsors, donors, partners, and supporters whose contributions make this work possible, including:

Government of Australia
 Government of Canada
 Government of Germany
 Government of Ireland
 Government of the United Kingdom
 Government of the United States
 European Union
 Dutch Relief Alliance
 Aktion Deutschland Hilft
 World Bank
 The Global Fund to Fight AIDS, Tuberculosis and Malaria
 International Organization for Migration
 United Nations Children's Fund (UNICEF)
 The UN Refugee Agency (UNHCR)
 United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
 World Food Programme
 World Health Organization
 United Nations Development Programme (UNDP)
 Gavi, the Vaccine Alliance
 African Union

World Vision is a Christian relief, development and advocacy organisation dedicated to working with children, families, and their communities to reach their full potential by tackling the root causes of poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.



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