

ACT Alliance

Global Response to the COVID-19 Pandemic – ACT201

Sub-Appeal - ACT 201-UKR

Response to the COVID-19 Pandemic in Ukraine

Budget Requested: USD 355,000

actalliance

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Project Summary Sheet																													
Project Title	Response to the COVID-19 Pandemic in Ukraine																												
Project ID	ACT 201/UKR																												
Location	Zaporizhia, Kherson, Zakarpatska oblasts and Kyiv city, Ukraine																												
Project Period	Start Date 1 August 2020 End Date 31 May 2021 No. of months 10 months																												
Requesting Forum	ACT Europe Forum <input checked="" type="checkbox"/> The ACT Forum officially endorses the submission of this Sub-Appeal (tick box to confirm)																												
Requesting members	Hungarian Interchurch Aid - HIA																												
Contact	<table border="1"> <tr> <td>Name</td> <td>Gabor Balint</td> </tr> <tr> <td>Email</td> <td>balint.gabor@hia.hu</td> </tr> </table>	Name	Gabor Balint	Email	balint.gabor@hia.hu																								
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Project Outcome(s)	1. Reduced vulnerability of at-risk groups in three oblasts of Ukraine and in Kyiv 2. Better health, psycho-social state and nutritional status of vulnerable groups 3. Reduced morbidity and mortality of COVID-19 infected patients 4. Increased preparedness and resilience of affected communities/increased community engagement.																												
Project Objectives	1. To improve the capacities and resilience of health and social care sector and to increase the resilience of affected communities against COVID-19 (12,280 individuals)																												

	<p>2. To provide immediate and longer-term livelihood solutions for COVID-19 affected communities (11,670 individuals)</p> <p>3. To improve hygienic conditions and preparedness in COVID-19 affected areas in order to avoid further spread of the pandemic (14,399 individuals)</p>																																																				
Target Recipients	<p style="text-align: center;">Profile</p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Refugees</td> <td><input checked="" type="checkbox"/></td> <td>IDPs</td> <td><input type="checkbox"/></td> <td>host population</td> <td><input type="checkbox"/></td> <td>Returnees</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td colspan="7">Non-displaced affected population</td> </tr> </table> <p>Most vulnerable groups are targeted (7,044 HHs, total of 15,849 people) under current project live in three oblasts (Zaporizhia, Kherson, Zakarpatska oblasts) and in Kyiv according to the following:</p> <ul style="list-style-type: none"> • those who are living in the most affected hard-to-reach areas • IDPs, living in affected areas • elderly (over 65 years old), families with 3 or more children, single headed families • people with chronic illness • 'frontline' staff of health and social care sector • those who lost their income/job due to the COVID-19 pandemic <p>No. of households (based on average HH size): 7,044</p> <p>Sex and Age Disaggregated Data:</p> <table border="1"> <thead> <tr> <th colspan="9">Sex and Age</th> </tr> <tr> <th></th> <th>0-5</th> <th>6-12</th> <th>13-17</th> <th>18-49</th> <th>50-59</th> <th>60-69</th> <th>70-79</th> <th>80+</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td>770</td> <td>750</td> <td>913</td> <td>2712</td> <td>850</td> <td>569</td> <td>483</td> <td>302</td> </tr> <tr> <td>Female</td> <td>821</td> <td>786</td> <td>947</td> <td>3044</td> <td>987</td> <td>756</td> <td>656</td> <td>503</td> </tr> </tbody> </table>	<input type="checkbox"/>	Refugees	<input checked="" type="checkbox"/>	IDPs	<input type="checkbox"/>	host population	<input type="checkbox"/>	Returnees	<input checked="" type="checkbox"/>	Non-displaced affected population							Sex and Age										0-5	6-12	13-17	18-49	50-59	60-69	70-79	80+	Male	770	750	913	2712	850	569	483	302	Female	821	786	947	3044	987	756	656	503
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Project Budget (USD)	355,000 USD																																																				

Reporting Schedule

Type of Report	Due date
Situation report	1 September 2020 quarterly
Final narrative and financial report (60 days after the ending date)	30 July 2021
Audit report (90 days after the ending date)	30 August 2021

Please kindly send your contributions to either of the following ACT bank accounts:

US dollar

Account Number - 240-432629.60A
IBAN No: CH46 0024 0240 4326 2960A

Euro

Euro Bank Account Number - 240-432629.50Z
IBAN No: CH84 0024 0240 4326 2950Z

Account Name: ACT Alliance

UBS AG
8, rue du Rhône
P.O. Box 2600
1211 Geneva 4, SWITZERLAND
Swift address: UBSWCHZH80A

Please note that as part of the global approach for this Appeal, pledges/contributions are encouraged to be made towards the total budget of the Appeal ACT201, and subsequent allocations will be made based on the approved Sub-Appeals. For status of pledges/contributions, please refer to the spreadsheet accessible through this link <http://reports.actalliance.org/>, Appeal Code ACT201.

Please inform the Director of Operations, Line Hempel (Line.Hempel@actalliance.org) and Finance Officer, Marjorie Schmidt (Marjorie.Schmidt@actalliance.org) of all pledges/contributions and transfers. We would appreciate being informed of any intent to submit applications for back donor funding and the subsequent results. We thank you in advance for your kind cooperation.

For further information, please contact:

Europe Humanitarian Programme Officer, Dragana Levicanin (Dragana.Levicanin@actalliance.org)

Visit the ACT COVID-19 webpage: <https://actalliance.org/covid-19>

Alwynn JAVIER

Head of Humanitarian Affairs
ACT Alliance Secretariat, Geneva

BACKGROUND

Context and Needs

Ukraine announced its first SARS-CoV-2 case on March 3, 2020. The government of Ukraine imposed quarantine on March 17 to prevent the spread of the coronavirus. On March 25, extension of quarantine measures was ordered in the entire country until April 24. The Ukrainian government also declared state of emergency. The government imposed home-isolation measures affecting all persons over 60 (except for those involved in preventing the spread of COVID-19), as well as persons infected or suspected of being infected with COVID-19. All non-essential-services were closed except grocery stores, pharmacies, banks, and gas stations.

According to the CPH (Center for Public Health), as of 9:00 a.m. on May 24, there were 20,986 laboratory-confirmed cases of COVID-19 in Ukraine, of which 617 were fatal, and 7,108 patients had recovered. 406 new cases were recorded during that same day. The research was conducted by the virology reference laboratory of the CPH of Ukraine, as well as regional laboratories. As of the morning of May 24, 2020, the Center received 848 reports of suspected COVID-19 cases. In total, since the beginning of 2020, 52,534 reports of suspected COVID-19 cases have been received. Due to worsening of the situation quarantine measures have been extended until June 22, 2020. As a result of quarantine measures and external shocks, economic indicators will decrease by 11.2% in Ukraine.

The only European country facing an armed conflict, Ukraine's healthcare system was already under great strain, especially in the east where sporadic hostilities have left many struggling to access healthcare. The spread of COVID-19 threatens to further overwhelm the country's healthcare capacity. Ukraine is also facing a crippling shortage of medical personnel, with around 25 per cent of its doctors now at retirement age. Almost 20 per cent of Ukrainians with confirmed infections are healthcare workers; 19 of them died and around 2,000 remain ill or are convalescing. A hospital in Luhansk (NGCA) is facing a COVID-19 outbreak. Reportedly, several medical staff members, including the Chief Medical Officer, his secretary and driver, tested positive for COVID-19. Earlier, the hospital's outpatient department had been closed due to 'increased number of patients and contact persons.'

Inadequate integration of water, sanitation and hygiene (WASH) services into infection, prevention and control (IPC) measures of healthcare facilities puts the COVID-19 response at risk. A medical response to the COVID-19 pandemic, without adequate integration of WASH services, risks IPC measures not being implemented. A significant scaling up of WASH services at healthcare facilities is necessary to support prevention and control measures and to avoid the disruption in health services provision.

Protective clothing, gloves, masks and disinfectants are insufficient in the country. Many health care workers quit their jobs as they are afraid of getting infected. Fast tests are only available in Kyiv and in a few larger laboratories. Most vulnerable people are elderly living in remote areas, IDPs, large families, single headed families and those with chronic illnesses.

Major humanitarian concerns are the following:

- The Ukrainian healthcare system is one of the weakest among post-Soviet European states, characterized by organizational and financial inefficiency, insufficient capacity to meet the population's health needs and cope with current unprecedented pressure.
- The high proportion of elderly (23 per cent of the population) in Ukraine increases their vulnerability. They usually have pensions of around 50 euro/month and at least one chronic illness, making them highly susceptible to complications if infected with COVID-19.

- The humanitarian situation in Eastern Ukraine remains difficult due to the ongoing military conflict. There are still 1,446,920 IDPs in Ukraine including Donetsk, Luhansk, Kherson and Zaporizhzhia oblasts. These territories – ravaged by six years of armed conflict, a weakened healthcare system and an ageing population – may face a COVID-19 outbreak of considerable scale in the nearest future.

Capacity to respond

HIA has been present in Ukraine since 1993, implementing humanitarian and social development programmes across the country. Besides directly implementing aid projects (as a registered NGO in Ukraine), HIA has developed a countrywide network of NGOs. HIA started implementing an emergency program for IDPs in Ukraine within the ACT Alliance Appeal (Emergency Assistance to Refugees from Eastern Ukraine in Russia and Ukraine – UKR151) on January 01, 2015. The assistance has continued under the UKR152 appeal (Emergency Assistance to Refugees from Eastern Ukraine in Russia & Ukraine – UKR152), in 2016-2017, under the UKR161 Appeal and finally in the 2017-18 UKR171 Appeal. Outside the ACT Appeals HIA distributed food and hygienic parcels in Dnipropetrovsk, Kyiv, Zakarpattia regions with the support of the Ministry of Foreign Affairs and Trade of Hungary. Besides supporting IDPs under ACT Appeals, HIA is also supporting larger households (HHs), kindergartens and the elderly in Zakarpattia oblast from its own funds.

In response to the COVID-19 pandemic in March 2020 HIA provided disinfectants to healthcare institutions in Berehove city, and delivered 5,000 medical masks and 1,000 bottles of “Béres” drops to health and social institutions of Berehove city and Berehove district in April. HIA also delivered food and hygiene items to 3,241 residents of Berehove city in a total amount of HUF 10 million. Besides, it also rendered emergency assistance from Hungarian support through the provision of disinfectants, non-perishable foodstuffs, hygiene tools and medical gloves mainly to healthcare and social institutions working in Berehove, and to single elderly people and families in need.

The PPEs for protection from COVID-19, donated by the government of Hungary, were also delivered by HIA from Hungary to the Berehove District Hospital, to hospitals of Uzhhorod, Mukachevo, Vynohradiv, Tiachiv, Khust, Irshava district hospitals, to the regional hospital, the hospital of infectious diseases, children’s hospital, cardiology hospital, the regional ambulance service, family doctors and the elderly home of the Reformed Church in Transcarpathia. The shipment included 75,000 medical masks, 25,000 masks type FFP2, 1,000 safety glasses, 5,000 protective clothing, 30,000 protective gloves, 1,500 surgical caps, 1,000 face shields, 3,000 shoe covers, and 5,000 liters of disinfectant fluid.

Upcoming/ongoing programs: in the frame of the TeleMed Care Program, HIA, in cooperation with Doktor24 private healthcare services, makes medical consultations available through telecommunication tools (internet, mobile) in Hungarian, and also operates a COVID-19 telephone service and a TeleMed Presence Point for 1,5 months to people living in Zakarpattia. In addition to this, HIA provides food packages and hygiene kits for 4 months in Berehove city and in 30 settlements of Berehove district for the elderly, large families, disadvantaged individuals, single-parent families and those living with disabilities. A total of 4,000 individuals receive assistance within the program. Apart from the population, 973 healthcare workers receive food packages and hygiene kits in Berehove city and Berehove district. In order to provide effective and smooth operation and aid delivery, HIA signed a MOU with the State Administrative Office of Zakarpattia Oblast. Further planned support for healthcare and social institutions: face shield 40,000 pieces; alcohol disinfectant 200 ml 15,000 pieces; hand sanitizer (80% alc., 500ml) 8,000 pieces; hand sanitizer (70% alc., 1 litre) 5,000 pieces; protective gloves 500,000 pairs; protective clothing 4,000 sets.

HIA’s office in Berehove, Ukraine, and its headquarters (HQ) in Budapest, Hungary, will be responsible for implementation of the response. Activities will also be coordinated on Kyiv level:

during last 5 years, HIA has been actively involved in the international humanitarian response coordination led by UN OCHA, at relevant cluster meetings, with embassies and NGOs. HIA also coordinates and cooperates during the implementation of its programs with the Ukrainian Orthodox Church, Ukrainian Lutheran Church, Greek Catholic Church, Reformed Church and Roman Catholic Church.

Local partners involved in the implementation: ADVANCE Transcarpathian Advocacy and Development Center (Zakarpatska Oblast), Santis Foundation (Zaporizhia Oblast) and League of Socially Responsible Women (Kherson Oblast).

RESPONSE STRATEGY

This project is a part of ACT Response in Europe under COVID-19 Global ACT Appeal and coordinated by the regional ACT Forum. Planned activities respond to the health and nutritional needs of vulnerable individuals related to the spread of COVID-19 pandemic in Ukraine.

The crisis in Ukraine caused by the armed conflict has already put a lot of pressure on disadvantaged families, IDPs and elderly living on low pensions (50 EUR/month on average). The situation caused by the rapid spread of COVID-19 and the subsequent government measures make lives of these vulnerable groups even more difficult. In addition to this, hundreds of thousands of Ukrainians (out of the 3 million working abroad), arrived home prior to closing of borders. They do not have incomes now and cannot support their families as before. According to the estimates, up to 700,000 Ukrainians have already lost their jobs during the first weeks of the quarantine - those working in the internal 'grey' economy, whose workforce totals around 3.5 million. Elderly people living in remote areas are now cut off from their families, even social workers, who used to take care of them, cannot visit them now due to the quarantine measures.

Similarly to other projects implemented by HIA in Ukraine, beneficiary selection under current appeal is also carried out in close coordination with the responsible departments of the local authorities and with the oblast level State Emergency Service of Ukraine (Державна служба України з надзвичайних ситуацій).

According to preliminary survey the following needs were identified by HIA local staff:

Target beneficiaries	Needs
Single elderlies 60+, including people with disabilities and cancer patients	<ul style="list-style-type: none"> - Help of volunteers (to do shopping, to clean the house, to prepare food) - Remote psychological and medical consultations - Food assistance, hygienic assistance, PPE
Pensioners with low incomes	<ul style="list-style-type: none"> - Help of volunteers (to do shopping, to clean the house, to prepare food)
Single parents with low income with small kids and new-borns (0-4 y/o);	<ul style="list-style-type: none"> - Mastering new professions remotely - Ability to work at home to have a source of income - Psychological and medical consultations in remote areas - Legal and pedagogical consultations
Large families, foster families, family-type children's homes	<ul style="list-style-type: none"> - High-quality educational materials (in the form of online lessons, workshops, webinars, etc.) - Food assistance, hygienic assistance, PPE
Healthcare workers	<ul style="list-style-type: none"> - Consultations and activities to prevent professional burnout - PPE

Volunteers and active representatives of non-profit sector	<ul style="list-style-type: none"> - Support in the preparation of distance learning sessions, related consultations (financial or technical) - Support for innovative initiatives - Support to create new working places
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The project plans to respond to the need with the following activities:

1. Public Health

- To meet the needs of the health and social care institutions concerning the COVID-19 pandemic. Equipment support for public health and social institutions – provision of PPEs, disinfectants, medical instruments and devices (15 healthcare and social institutions, 780 health and social care staff members)

Public institutions are selected according to the following: each oblast/city has an „operational staff” which is in charge of management of COVID-19 prevention and this staff determines which hospitals receive coronavirus patients in the first, second and third wave. First wave patients are usually received by county/oblast level hospitals, second wave patients are received by district hospitals, while smaller hospitals will be involved in the protection in the third wave. HIA plans to support first and second wave hospitals in close cooperation with the operational staff, considering rules of relevant health protocols and quarantine measures and also the actual situation in Zakarpatska (being in one of the worst situation currently but it changes from day by day), Kherson and Zaporizhia oblasts. Hospitals are operated by the Ministry of Health of Ukraine.

2. Preparedness and Prevention

- Distribution of awareness raising/prevention material about the COVID-19 pandemic (5,000 HHs, 11,250 people)

- COVID-19 prevention trainings for 600 people

Trainings are going to take place in Zaporizhia and Kherson oblasts.

Selection of training participants will be based on the following data:

- Beneficiaries’ database of NGOs working in Zaporizhia and Kherson oblasts: ‘League of Socially Responsible Women’, CF “Santis”, CF “Zlatograd”, CF “Happy child”, Charity organization “Temple”, NGO “Help constellation”, Association of foster families of Zaporizhia region;
- Recommendations of social services in Zaporizhia and Kherson;
- Recommendations of IDP councils in Zaporizhia and Kherson oblasts;
- Recommendations of City Departments of Health in Zaporizhia and Kherson;
- Recommendations of partner organizations from the educational sector (schools, colleges, institutes, universities)

Training courses will be held once a week for each group for one month.

Training will be led by medical professionals based on recommendations of city departments of health protection.

Training materials are provided by Zaporizhia’s and Kherson’s City Departments of Health.

One of the most vulnerable individuals of the pandemic are victims of domestic violence who have restricted access to specialized social services due to quarantine measures. A Crisis Centre and Shelter for victims of domestic violence is operated by the ‘League of Socially Responsible Women’ in Kherson city. The establishment of the Centre was supported by HIA, also methodological trainings, support were provided. Clients receive accommodation and specialized psychological social assistance for 3 to 6 months. Women living in the Centre will also participate in the training.

Prevention material will be distributed as described in the WASH activities.

3. Water, Sanitation & Hygiene (WASH)

- To support the basic hygienic needs of the target group by providing hygienic kits (personal hygienic material, household disinfectants, cleaning material) – 5,000 HHs (11,250 people)
- Provision of personal protective gears (face masks, disposable gloves, etc.) – 5,000 HHs (11,250 people)
- Minor WASH reconstruction at IDP center in Kherson (it accommodates 149 people)
- Touchless hand sanitizer dispensers in 30 public areas contributing to 2,400 people's hygienic needs

Hand sanitizers are primarily received by public institutions and public spaces visited by many people. The quantity of hand sanitizer liquid provided by HIA will be sufficient for at least 10 refilling. Dispensers are handed over to the institutions or space/area operators against acknowledgement of receipts. They will undertake to operate and refill the dispensers.

A refugee shelter will be reconstructed in Kherson city (Kherson, 76B Komkova Street). There are 12,600 refugees from Luhansk and Donetsk regions staying in Kherson oblast.

In Kherson city the largest place of compact residence for FDPs (forcibly displaced persons) is a four-story dormitory. 149 people live there - families whose small children have already been born during their staying in Kherson. During 2017 these premises were repaired. However, safety and protection of dwellers against coronavirus may only be guaranteed with some additional minor reconstructions. In order to avoid entry of strangers into the building, the old doors must be replaced with metal doors with automatic closing and combination lock. It is also necessary to divide the ground floor area and separate a 25 square meters' room for prams –it is necessary to repair plastering and painting, carry out electrical and other works, to install metal-plastic doors with a combination lock in this room. Common areas - bathrooms and showers - also need cosmetic repairs including painting with antiseptic paint, cleaning ventilation ducts and replacing forced ventilation systems in order to increase coronavirus protection of families.

4. Livelihoods

- Employment assistance courses, “self-employment during quarantine”, job finding – 120 people
- Entrepreneurship trainings for 100 people
- Professional trainings (e.g. video and photography specialist, decorator, 3D modelling, tailoring) for 200 participants

Training participants will be selected based on the following data:

- Beneficiaries' database of NGOs working in Zaporizhia and Kherson oblasts: 'League of Socially Responsible Women', CF “Santis”, CF “Zlatograd”, CF “Happy child”, Charity organization “Temple”, NGO “Help constellation”, Association of foster families of Zaporizhzhia region;
- Recommendations of social services in Zaporizhia and Kherson;
- Recommendations of IDP Councils in Zaporizhia and Kherson oblasts;
- Recommendations of City Departments of Health in Zaporizhia and Kherson;
- Recommendations of partner organizations from the educational sector (schools, colleges, institutes, universities)
- Participants can also submit their applications through social media

Self-employment during quarantine means: providing service for the customers, dealing with orders (for example, tailoring masks; courier service; service for sewing or repairing clothes; purchasing of food or medicines with home delivery for the clients; processing of digital work, preparing a portfolio, helping to write diploma projects, remote tutoring, etc.)

5. Food Security

- To meet the immediate emergency food needs of affected people, distribution of food kits containing non-perishable food (6,000 food kits, 11,250 people)

HIA will conduct a one-time distribution in the three oblasts and in Kyiv. Food items included in the packages cover 1,5 weeks' needs of beneficiaries, hygiene items will last for 1-2 months.

Distributions will be conducted in the following manner:

- Coordination with the relevant operating staff and authorities
- Final selection of beneficiaries, informing them on the date of distribution
- Handover of relief items on household-level by direct delivery to beneficiaries' homes in order to reduce the risk of infection
- Handover-receipt: exceptionally there will be no signing of handover records to avoid the risk of infection. Relevant authorities (the relevant lowest-level local government) will certify the distribution records. The exact lists including name, address and telephone number of beneficiaries will be available. At least 5% monitoring (through phone) will take place based on these lists.

Visibility: ACT/HIA logo will be placed on packing of parcels, the ACT logo will also appear on staff members' clothing; the awareness raising materials will also be handed over during distribution; this material includes detailed description of program donors and implementing organisations.

6. MHPSS and CBPS

- Psychosocial support for elderly, large families, single headed families and health/social care workers (for 250 people)

People will be reached through the following channels:

- Promotion in social media;
- Informing beneficiaries included in the database of NGOs: : 'League of Socially Responsible Women', CF "Santis", CF "Zlatograd", CF "Happy child", Charity organization "Temple", NGO "Help constellation", Association of foster families of Zaporizhia region;
- Informing beneficiaries included in the database of city social services in Zaporizhia and Kherson;
- Informing beneficiaries included in the database of IDP councils in Zaporizhia and Kherson;
- Informing beneficiaries included in the database of City Departments of Health of Zaporizhia and Kherson;
- Informing beneficiaries included in the database of partner organizations from educational sector (schools, colleges, institutes, universities)

Psychosocial support will be provided through:

- helpline, consultations and telephone tips for people who are unable to leave their homes;
- services such as purchasing food and medicine with home delivery for beneficiaries;
- conducting mutual support groups;
- counselling

- Art-therapy sessions

HIA will work with local partners – Santis Foundation (Zaporizhia Oblast) and League of Socially Responsible Women (Kherson Oblast) as they already conducted such activities from 2015 to 2018.

During the implementation phase of the appeal, special methods will be introduced in order to avoid the risk of infection (see further details under Implementation approach).

Impact

Contain the spread of the COVID-19 pandemic, decrease morbidity and mortality and to enhance the resilience of affected communities (especially IDPs, vulnerable groups and ‘frontline’ staff of health and social care institutions) in three oblasts of Ukraine and in Kyiv through the implementation of combined activities in 6 sectors.

Outcomes

1. Reduced vulnerability of at-risk groups in three oblasts of Ukraine and in Kyiv
2. Improved health state and nutritional status of vulnerable groups
3. Reduced morbidity and mortality of COVID-19 infected patients
4. Increased preparedness and resilience of communities/increased community engagement.

Outputs

Activities /sector

1. Public Health

- Provision of PPEs, disinfectants, medical instruments and devices for health and social care institutions (15 health and social institutions, 780 health and social care staff members)

2. Preparedness and Prevention

- Distribution of awareness raising/prevention material about the COVID-19 pandemic (5,000 HHs, 11,250 people)
- COVID-19 prevention training for 600 people

3. Water, Sanitation & Hygiene (WASH)

- Distribution of hygienic kits (personal hygienic material, household disinfectants, cleaning material) – 5,000 HHs (11,250 people)
- Provision of personal protective gears (face masks, disposable gloves, etc.) – 5,000 HHs (11,250 people)
- Minor WASH reconstruction at IDP center in Kherson (it accommodates 149 people)
- Touchless hand sanitizer dispensers in 30 public areas contributing to 2,400 people’s hygienic needs

4. Livelihood

- Employment assistance courses, “self-employment during quarantine”, job finding for 120 people
- Entrepreneurship trainings for 100 people
- Professional trainings (e.g. video and photography specialist, decorator, 3D modelling, tailoring) for 200 participants

5. Food Security

- Distribution of food kits containing non-perishable food (6,000 food kits for 11,250 people)

6. MHPSS and CBPS

- Psychosocial counselling for elderly, large families, single headed families and health/social care workers (for 250 people)

Outputs

1. Strengthened capacities and protection of staff of 15 health and social care institutions
2. More information available for 5,000 HHs (11,250 people) to avoid COVID-19 infection
3. 600 people receive COVID-19 prevention training
4. Improved access to food, hygiene items and personal protective gears in 5,000 HHs (11,250 people)
5. Improved hygienic conditions and better protection against virus spread in IDP center in Kherson accommodating 149 people
6. 30 public areas will be equipped with touchless hand sanitizer dispensers
7. 420 people will receive employment/entrepreneurship/professional trainings
8. 250 people will receive psychosocial assistance

General Project Activities:

- Update of community needs assessment
- Vulnerable communities survey
 - Relevant government departments/NGOs and faith actors coordination
 - Baseline survey
 - Community members identification and beneficiary selection
 - Beneficiary selection cross-checking with different stakeholders
 - Finalizing beneficiary lists, data entry
- Distribution Phase
 - Announcing dates and locations of distributions to the beneficiaries
 - Delivery of food and hygiene packages to distribution points
 - Distribution
- Reconstruction
 - Final survey and preparation of implementation plan
 - Conclusion of trilateral agreement
 - Reconstruction activities
 - Handover
- Trainings and counselling
 - Final survey, beneficiary selection
 - Methodological planning (including preparation of distance learning and on-line learning materials)
 - Trainings and counselling delivery
 - Post survey, collecting lessons learnt
- Project activities' post monitoring and evaluation
- Project implementation monitoring and reporting
 - Quarterly reports
 - Distribution reports
 - Project final report
- Project finalization

Exit strategy

By the end of the project the mortality rate is expected to decrease, the health state of target groups improves and the aid distributed will protect beneficiaries from catching the infection. Through close coordination and collaboration with local authorities, faith actors and community organizations, experiences gained during the implementation of the appeal, jointly developed methods and good practices will be used in further activities to strengthen the protections and resilience of local communities against COVID-19 pandemic. HIA and the NGO network established by HIA will continue to carry out their social, humanitarian and development programs in Ukraine for the benefit of most vulnerable groups of society, including those affected by COVID-19.

PROJECT MANAGEMENT

Implementation Approach

Response to COVID-19 pandemic in Ukraine will be implemented with the purpose of alleviating and mitigating coronavirus prevalence and threat among the vulnerable community groups, in cooperation with the *Ministry of Health, Center for Public Health, local authorities, church representatives and with HIA's local NGO partners - ADVANCE Transcarpathian Advocacy and Development Center (Zakarpatska Oblast), Santis Foundation (Zaporizhia Oblast) and League of Socially Responsible Women (Kherson Oblast)*. Project beneficiaries will be selected in close coordination with the *relevant departments of the local governments and with the oblast level State Emergency Service of Ukraine (Державна служба України з надзвичайних ситуацій)* verified against vulnerability criteria.

Local partners ensure access to up-to-date information on vulnerable groups, most urgent needs and assist in smooth implementation. Due to the rapidly escalating outbreak of COVID-19 in Ukraine, it is crucial that the ACT Alliance “emergency reserve” allocation process be conducted as quickly as possible to protect the lives of the most vulnerable ones.

To support the allocation and the broader delivery of humanitarian assistance during the COVID-19 outbreak, HIA will develop protocols on the delivery of humanitarian assistance. These will outline actions needed to reduce risks of virus transmission between humanitarian actors and people receiving assistance and ensure the humanitarian community has systems in place to enable it to continue to deliver assistance. It will also ensure that humanitarian staff are well-looked after and are equipped with information and supplies to protect themselves as well as those being in their care.

HIA's local staff has necessary experience in implementing emergency assistance and organization of distributions in a quick and effective manner. Special methods will be introduced in order to avoid the risk of infection. The main principle is to follow the actual Ukrainian epidemiological regulations and recommendations and to minimize the personal contacts of staff working within the appeal and the target group. To do so HIA will organize direct beneficiary distributions of the aid items. Personal contacts during the distributions will be avoided, therefore on exceptional basis handover records will not be signed by the beneficiaries. Local governments will certify the distribution records. In addition to this, telephone/Internet based monitoring of activities will be introduced. This allows avoiding the establishment of collective distribution points and also minimizing the unnecessary movement of people living in the target area. All planned implementation will take place in strict accordance with the latest regulations of the National Centre for Public Health coordination system, the Government and local health authorities.

Training and personal meetings, advisory sessions will be held with full respect to the actual pandemic related regulations. Virtual meetings, distance learning methods will be used in order to avoid the personal contacts in case needed.

Gender issues

HIA's local staff and partners will pay special attention to the vulnerable situation faced by women and girls. They are traditionally responsible for caring for the sick thus they are more exposed to the

virus. Others, especially IDPs and those living in informal settlements, have less or no access to healthcare services. HIA's local staff will have an increased focus on protection of women and girls. Local authorities and church leaders will be involved in project preparations and implementation to make sure that women get the same level of protection as others against coronavirus infection. Different forms of sexual and gender-based violence (SGBV) might also be increasing especially in lockdown and quarantined environments, which is a further issue that receives more focus under the current project.

Implementation Arrangements

Coordination

Besides the main coordination forum in Kyiv, several other locations are important as well for regional coordination where HIA is planning to implement proposed appeal activities: Kyiv, Zaporizhia, Kherson, Zakarpatska oblasts; the local level coordination with NGOs and relevant state authorities is ongoing. Selection of the project locations has been done in cooperation with the local authorities and NGOs in order to avoid any duplication.

Implementation

HIA will be responsible for project management, coordination, monitoring and reporting. The implementation will be carried out in cooperation with HIA's partner NGOs in Ukraine, having well established infrastructure and long term operational experience in similar actions. HIA has concluded a Memorandum of Understanding with its partners, having local offices in the following regions:

- Overall programme coordination and implementation: HIA offices in Berehove and HIA HQ in Budapest.
- Local partners involved in the implementation: ADVANCE Transcarpathian Advocacy and Development Center (Zakarpatska Oblast), Santis Foundation (Zaporizhia Oblast) and League of Socially Responsible Women (Kherson Oblast)

HIA has an established human resources development department with required human resources tools. Preference is given to the local human resources (local HIA staff and staff of local NGOs). Staff related to implementing the program will be based in the project sites while support will also be provided from HIA headquarters in Hungary. HIA's accounts comply with national laws. Regulations, accountability and transparency will be observed in all transactions and reporting.

Procurement of aid items will be done according to HIA's procurement guidelines in force (especially parts that are describing the procurement in emergencies). During the procurement process preference will be given to Ukrainian local companies. In case there will be no interruptions in banking services the value of aid material will be transferred from HIA directly to the vendors. Audit report will be prepared after 90 days of completion.

Project Consolidated Budget

	Appeal Total	Hungarian Interchurch Aid (HIA)
Direct Costs	304,167	304,167

1	Project Staff	4,452	4,452
1.1	Appeal Lead	-	-
1.2	International Staff	-	-
1.3	National Staff	4,452	4,452
2	Project Activities	255,025	255,025
2.1	Public Health	51,420	51,420
2.2	Community Engagement	-	-
2.3	Preparedness and Prevention	13,541	13,541
2.4	WASH	80,729	80,729
2.5	Livelihood	39,548	39,548
2.6	Education	-	-
2.7	Shelter and Household items	-	-
2.8	Food Security	59,545	59,545
2.9	MHPSS and Community Psycho-social	10,240	10,240
2.10	Gender	-	-
2.11	Engagement with Faith Leaders	-	-
2.12	Advocacy	-	-
3	Project Implementation	8,286	8,286
3.1.	Forum Coordination	6,802	6,802
3.2.	Capacity Development	1,484	1,484
4	Quality and Accountability	24,763	24,763
5	Logistics	10,759	10,759
6	Assets and Equipment	882	882
Indirect Costs		40,493	40,493
Staff Salaries		36,082	36,082
Office Operations		4,412	4,412
Total Expenditure		344,660	344,660
ICF (3%)		10,340	10,340
Total Expenditure + ICF		355,000	355,000

Project Monitoring, Evaluation and Learning

The Monitoring and Evaluation (M&E) will be done in accordance with ACT guidelines, principles and standards. HIA's local office will be responsible for narrative and financial reporting towards HIA HQ. Based on these reports HIA will submit regular situation reports, narrative and financial reports to ACT Secretariat. HIA and its local office will comply with the Core Humanitarian Standard (CHS) and Sphere standards during implementation. Considering the challenges posed by lockdowns, monitoring will use non-traditional approaches such as remote monitoring through telephone/internet/skype. The project will be directly implemented and monitored by HIA-Hungary. HIA will submit progress (quarterly) and final project reports (financial and narrative). Results, lessons learned, conclusions and recommendations for the future (good practice to enhance protection and resilience in a pandemic situation) will be presented for all stakeholders (NGOs, churches, community based organizations) involved/consulted during the implementation. HIA also plans to share the results of the appeal with national and local level state authorities.

Safety and Security plans

HIA staff carries out its activities in accordance with HIA's Security Policy for International Operations and ACT Safety and Security Guidelines.

COVID-19 pandemic is a fast-evolving crisis, the situation changes every day, and so do decisions imposed by different governments, altering people's realities immensely. The COVID-19 response is led by WHO at global level, under leadership of Ministry of Health at country level.

Based on the above, HIA staff strictly follows:

- the information and guidance provided by the Ukrainian Ministry of Health for updates, contingency plans and strategies.
- international recommendation for adjusting food distribution standard operating procedures in the context of the COVID-19 outbreak

Compliance with the above recommendations and updates ensure that communities for whom HIA works are not placed at an increased risk while providing aid (Do No Harm). Local staff, volunteers is also supplied with PPE and hygiene items to protect themselves at locations where there is a risk of catching/transmitting the infection (Duty of Care). Regular meetings and briefings ensure that they are informed on the latest news concerning the pandemic and risks related to travel and transport are regularly discussed.

PROJECT ACCOUNTABILITY

Does the proposed response honour ACT's commitment to safeguarding including PSEA? All staff and volunteers of requesting members, particularly those involved with the response, will be required to sign the requesting members' Code of Conduct. If you don't have one, members can use [ACT's Code of Conduct](#).

Yes No

Code of Conduct

HIA's Code of Conduct lays down the basics of ethical behaviour to be followed by HIA's humanitarian and social workers when working with aid beneficiaries in Hungary or abroad. Hungarian Inter-church Aid is a signatory to the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief and as a member of ACT Alliance, HIA also adheres to ACT Alliance's Code of Conduct Policy for the prevention of misconduct, including corruption, fraud, exploitation and abuse, including sexual; and to ensure child safeguarding, ACT Alliance Guidelines for the Prevention of Sexual Exploitation and Abuse, ACT Child Safeguarding

Policy and Policy Guidance Document and the ACT Alliance Guidelines for Complaints Handling and Investigations.

HIA's staff members in Ukraine also perform their work based on the above policies. They all signed HIA's Code of Conduct and are aware of the provisions of ACT's Code of Conduct. Staff members have been working for HIA for a long time, their conduct, personal commitments and approach are well-known by their immediate local superior. Their attitude towards beneficiaries is in line with the requirements towards humanitarian aid workers.

Safeguarding

HIA, as member of ACT Alliance, believes that all forms of violence, abuse and exploitation are an affront to children's dignity as human beings. We believe that all children have a right to be safe at all times, and that all children have equal rights to protection from all forms of abuse, neglect, and exploitation, regardless of their gender, nationality, age, religious or political beliefs, family background, economic status, legal status, ability, physical or mental health or criminal background, and that any form of child abuse or exploitation is unacceptable. Any decision or action taken will always be done in the best interests of the child, and children will be consulted and their views taken into account on all matters involving them.

Staff recruitment: Individuals need to provide their consent to a criminal record check and should be informed of the purpose for which the resulting police clearance certificate should be used, including being sighted by the organization. For locations or individuals where a police background check is not feasible, other measures should be taken to screen the individual's suitability to work with children. This may include gaining additional personal references.

Training is carried out for all staff and each staff member, having completed the training, signs HIA's Child Safeguarding Code of Conduct. Staff members are obliged to report on all concerns related to abuse of a child. They shall report the case to their immediate superior within 24 hours of the incident being observed or reported, or as soon as possible after that. HIA's management shall take any disciplinary measures necessary against staff members if they are found to have breached the Child Safeguarding Code of Conduct.

Conflict sensitivity / do no harm

HIA staff is aware that aid – and how it is administered – can cause harm or can strengthen capacities for peace in the midst of conflict-affected communities. Some people attempt to control and use aid resources to support their side of the conflict and/or to weaken the other side. If they are successful or if aid staff fails to recognise the impact of their programming decisions, aid can cause harm. However, the transfer of resources and the manner in which staff conduct the programmes can strengthen local capacities for peace, and reduce the divisions and sources of tensions that can lead to destructive conflict. HIA performs its activities with the highest possible conflict sensitivity which requires that it:

- Understands the context in which it is operating
- Understands the interaction between the intervention and the context, and
- Acts upon that understanding, in order to avoid negative impacts and maximize positive impacts on the conflict.

The COVID-19 pandemic is a new challenge to NGOs, a situation that has never been met before. While they strive not to cause further damage or suffering, they also find themselves in an unprecedented situation where risks are tied to action and inaction alike.

HIA, based on its experience and knowledge of the local context, the needs and vulnerabilities of the population, does its best to analyse and regularly review the situation and decides on the most effective response based on it.

Complaints mechanism and feedback

HIA's local staff members follow ACT policies to ensure appropriateness, relevance, effectiveness and efficiency of actions. Complaints and feedback mechanisms are a combination of the following elements: help/complaint/suggestions desk, follow-up phone calls to beneficiaries, personal interviews, monitoring reports and final reports.

Communication and visibility

ACT Alliance and ACT members' corresponding stickers and streamers are placed on food and hygiene parcels and also on PPE items and the ACT logo will appear on staff members' clothing. HIA's local staff members receive support from their respective HQ communication officer who shall assist in the documentation and communications work. Press releases and other communication materials will be produced to provide updates on the COVID-19 response by ACT members. HIA staff members will also pursue active communications with local and regional authorities, UN agencies, and other stakeholders.

Annexes

Annex 1 – Summary Table

Hungarian Inter-church Aid																									
Start Date	01.08.2020.																								
End Date	31.05.2021																								
Project Period (in months)	10 months																								
Response Locations	Zaporizhia, Kherson, Zakarpatska oblasts and Kiev city, Ukraine																								
Sectors of response	<table border="1"> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td>Public Health</td> <td><input type="checkbox"/></td> <td>Shelter and household items</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Community Engagement</td> <td><input checked="" type="checkbox"/></td> <td>Food Security</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Preparedness and Prevention</td> <td><input checked="" type="checkbox"/></td> <td>MHPSS and Community Psycho-social</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>WASH</td> <td><input type="checkbox"/></td> <td>Gender</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Livelihood</td> <td><input type="checkbox"/></td> <td>Engagement with Faith and Religious leaders and institutions</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Education</td> <td><input type="checkbox"/></td> <td>Advocacy</td> </tr> </tbody> </table>	<input checked="" type="checkbox"/>	Public Health	<input type="checkbox"/>	Shelter and household items	<input type="checkbox"/>	Community Engagement	<input checked="" type="checkbox"/>	Food Security	<input checked="" type="checkbox"/>	Preparedness and Prevention	<input checked="" type="checkbox"/>	MHPSS and Community Psycho-social	<input checked="" type="checkbox"/>	WASH	<input type="checkbox"/>	Gender	<input checked="" type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy
<input checked="" type="checkbox"/>	Public Health	<input type="checkbox"/>	Shelter and household items																						
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<input checked="" type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions																						
<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy																						
Targeted Recipients (per sector)	Public Health – 780 people; Preparedness and Prevention – 11,850 people; WASH – 13,799 people; Livelihood – 420 people; Food Security – 11,250 people; MHPSS and CBPS – 250 people;																								
Requested budget (USD)	US\$ 355,000																								

Annex 2 – Security Risk Assessment

Principal Threats:

Threat 1: COVID-19 situation deteriorates causing further stricter lockdown and movement restrictions

Threat 2: Staff might contract and spread Covid-19

Threat 3: Security incidents caused by the closure of the contact line in Eastern Ukraine

Threat 4: Currency fluctuations may cause inflation resulting in price hike of project commodities

Threat 5: Relief items are not available at the local market

<i>Impact</i>	Negligible	Minor	Moderate	Severe	Critical
<i>Probability</i>					
Very likely	Low	Medium	High	Very high	Very high
Likely	Low	Medium Further movement restrictions / stricter lockdown	High Currency fluctuations cause inflation resulting in price hike of project commodities	High Relief items are not available at the local market	Very high
Moderately likely	Very low	Low	Medium	High Staff might contract and spread Covid-19	High Security incidents, tension in project area
Unlikely	Very low	Low	Low	Medium	Medium
Very unlikely	Very low	Very low	Very low	Low	Low