COVID-19 Emergency Response

Updates as of May 04, 2020

Ballochistan Rural Support Proramme (BRSP)
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*BRSP joined hands with GoB and Law Enforcement Agencies to compliment their efforts to respond to COVID in districts of Barkhan, Chaghi, Dera Bugti, Duki, Harnai, Jaffarabad, Jhal Magsi, Kachhi, Kalat, Khuram, Khuzdar, Killa Abdullah, Killa Saifullah, Kohlu, Loralai, Mastung, Musa Khail, Naseerabad, Noshki, Pishin, Quetta, Sherani, Sibi, Sohbat Pur, Washuk, Zhob and Ziarat

**BRSP reached 5.51 million people of 787,142 HHs in 421 towns & rural councils of 27 districts***

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>31 Jan</td>
<td>Pakistan closed its border to travellers from Iran at Taftan border</td>
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<tr>
<td>07 Feb</td>
<td>BRSP initiated awareness raising campaign in Kharan and Chaghi districts</td>
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<td>10 Mar</td>
<td>WHO announces that COVID-19 is a Public Health Emergency of International Concern</td>
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<td>11 Mar</td>
<td>Pakistan re-opened its border, after a 14 days’ closure</td>
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<td>15 Mar</td>
<td>First case confirmed in Quetta, the patient was a 12-year old boy, who had returned from Iran with his family via Taftan border</td>
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<td>20 Mar</td>
<td>BRSP expanded its COVID-19 emergency response to 27 districts</td>
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<td>22 Apr</td>
<td>WHO declares COVID-19 outbreak a pandemic</td>
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<td>20 April</td>
<td>GoB, imposed full lock down in the province.</td>
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<tr>
<td>22 April</td>
<td>BRSP launched comprehensive need assessment of all Health Facilities</td>
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<tr>
<td>04 May</td>
<td>BRSP launched IPC mass awareness campaign in Quetta</td>
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**5.51 million people** given awareness on COVID-19 through loudspeakers, masajid announcements, billboards, banners, sessions and dissemination of IEC material

COVID-19 awareness messages are being broadcasted in Urdu and all local languages through Radio and Cable TV Network

81,117 masks, 27,378 sanitisers, 26,250 gloves, 30,380 soaps and 182 protective suits and 340 packs of tissue papers

Installation of 270 Handwashing places

Fumigation at BRSP offices, Town and 06 Rural UCs of Pishin district

PKR 08 million disbursed to 350 poor HHs in 8 districts as CIF/Interest Free Loan

23,543 HHs linked with Ehsaas Emergency Programme and district administration for Cash/In-kind support

BRSP participated in 162 coordination/task force meetings on COVID-19 response

59 Health Officials and HCF staff capacitated on COVID-19 case management, surveillance and rapid response. While, 1,542 CRPs/Volunteers oriented on COVID-19 preventive measures and mass awareness among communities.

Initiated comprehensive need assessment of Health Facilities/Quarantine Centres across the province.

A real-time data management system has been deployed. In addition, technical support is being provided to Health department and PDMA in data consolidation

BRSP’s fostered LSOs linked 12,655 poorest HHs with Dist; Administration for in-kind support. Through Self-help initiatives, 1,504 poorest HHs provided with food packages.
The substantial geographic presence and outreach to household level enabled BRSP to come up with swift and all-inclusive COVID-19 Emergency Response for complementing Government of Balochistan, Law Enforcement Agencies (LEAs) and Health Care Providers. With the support of GoB, LEAs, donors and the CIs BRSP has been able to expand its emergency response to 27 districts, spread over an area of 243,576 km², which is 70% of the province and also include the districts bordering with Afghanistan, Iran, Khyber Pakhtunkhwa, Sindh and Punjab.

BRSP’s result framework for COVID-19 emergency response revolves around six components, which includes:

1. Increased awareness regarding COVID-19 prevention and control
2. Enhanced capacity on Infection, Prevention and Control (IPC) particularly COVID-19
3. Increased resilience of citizen, communities, government line department staff, LEAs personnel and health care facilities through provision of PPEs, installation of Water and Sanitation facilities.
4. Improved WASH practices at public places and Health Care Facilities
5. Ensured food security and livelihood opportunities through provision of food supplies or the Cash Grants
6. Strengthened coordination among stakeholders and synchronized information flow

The salient feature of BRSP’s strategy, in this response, is that it does not treat this emergency response as standalone rather this has been integrated with all existing regular projects and programmes that are effectively been contributing to SDGs in the province. This integration would also contribute in post-pandemic socio-economic recovery.

1. Increased awareness regarding COVID-19 and Infection, Prevention & Control:

Under a comprehensive awareness raising campaign BRSP has reached out 5.51 million people in 421 UCs of 27 districts given awareness on COVID-19. This awareness campaign carried out through different means including:

- Mobile Loudspeakers announcements in 3,962 hamlets of 421 UCs
- 1,115 Masajid in 260 UCs
- 90,000 brochures/IEC distributed
- 1,542 CRPs Oriented, who further reached out 42,000 HHs in 190 UC of 15 districts
- 260 banners and 12 Billboards installed on all key locations and entrance of Quetta City
- In addition, COVID-19 awareness messages, in Urdu and all local languages, are being aired on FM 89 and local cable channels respectively across the province.

In addition, 1,000 copies of a book written on “COVID-19 - Islamic Perspective on Pandemics” by Dr. Atta-ur-Rehman, printed and distributed in 124 Madaris and Masajid in district Quetta.

Mass awareness campaign on comprehensive response for Infection Prevention and Control was launched in Quetta District in collaboration with LEAs, PDMA, District Administration, Municipal Corporation and Al-Khidmat Foundation, Ulema and representatives of minorities and trade union on 20th April and continued till date. Under this campaign 100% localities have been covered through mobile loudspeaker announcements and door-to-door awareness raising on COVID-19. While, 33,520 shopkeeper and street hawkers, donkey-cart riders and scavengers were provided and demonstrated with masks and
IEC material during this campaign. Hundreds of banners and leaflet displayed/distributed. Quetta Metropolitan Corporation fumigated the whole Quetta city covering around 172 km² area. Al-Khidmat Foundation fumigated regularly more than 1,000 Mosques, Churches, Gurdwara, Mandir (temples) and Parsi Colony. Assessment of health facilities and quarantine centers for identifying gaps in supplies and PPE kits BRSP started assessment in 25 districts of Balochistan to cover more than 750 health facilities including Quetta District.

Keeping in view the need and effectiveness of comprehensive response to COVID through IPC, BRSP is expanding this activity to 08 high risk districts i.e. Pishin, Jaffarabad, Chaghi, Noshki, Loralai, Naseerabad, Zhob and Killa Saifullah.

2. Enhanced capacity on Infection, Prevention and Control (IPC) particularly COVID-19

To enhance capacity of HCPs a thorough capacity building programme has been initiated, so far, 30 HCPs have been trained on IPC in District Noshki, the similar training events will be carried out in district Quetta, Chaghi and Naseerabad. In addition, BRSP’s Loralai district office hosted a training programme for 29 HCPs on COVID-19 case management, surveillance and rapid response. The training was organised jointly by USAID and District Health Department was held in BRSP Loralai office on April 17, 2020.

Furthermore, 119 janitorial staff has been trained on Environmental cleaning and disinfection principles for health care facilities and will provided with Calcium Hypochlorite for next three months to ensure cleaning disinfection of HCFs/Isolation Wards/Quarantine Centres in district Quetta, Killa Saifullah, Killa Abdullah, Naseerabad, Noshki and Zhob.

3. Increased resilience of citizen, communities, government line department staff, LEAs personnel and health care facilities through provision of PPEs

To equip the health facilities, quarantine centres and the front-line health care providers, district administration and Law Enforcement Agencies’ (Army, FC, Police, FIA, and Pakistan Customs) personnel; a total of 81,117 surgical masks, 27,378 hand sanitisers, 26,250 surgical gloves and 182 protective suits and 340 packs of tissue papers have been distributed.

Disinfectant sprays were carried out in all BRSP Offices, while in collaboration with district administration, town area and 06 UCs of district Pishin were fumigated. Moreover, during IPC mass awareness campaign in district Quetta.

4. Improved WASH practices at public places and Health Care Facilities

To promote hand-washing practices 270 Handwashing points have been installed at public place in 18 districts, this also includes installation of Hand Washing Points at 26 HCFs and Quarantines Centres in Quetta, Kohlu, Chaghi, Killa Saifullah, Loralai, Noshki, Zhob and Killa Abdullah districts. In addition, 30,380 Soaps have been provided to district authorities, health department, health care facilities and quarantine centres in 21 districts.

Furthermore, to improve WASH in Health Facilities, work has been initiated on Construction/Rehabilitation of WASH services (including construction of MHM and PWD oriented washrooms) in 12 health care facilities. The total cost this component is PKR 29.58 million. Similarly, to improve WASH and IPC in education facilities 20 schools of Quetta districts are being targeted with the total estimated cost of PKR 25.48 million.
5. Ensured food security and livelihood opportunities through provision of food supplies or the Cash Grants

Besides, raising awareness and contributing to strengthen the health facilities, it is also urgent and necessary to create livelihood opportunities, protecting jobs and promoting small enterprises for poor HHs and vulnerable working group. In this regard, BRSP ensured disbursement of PKR 08 million to 350 HHs through Community Investment Fund, Income Generating Grants and Interest Free loan. While, for the immediate support, 23,543 poorest HHs were facilitated in their registration with Ehsaas programme and linked with district administration, other CSOs, Philanthropists. Furthermore, BRSP in collaboration with an MPA distributed a ration package and hygiene items (Soaps & anti-septic liquid) to 2,000 poorest HHs District Killa Abdullah.

A special “Zakat/Charity Committee” constituted by DC Pishin on the suggestion of BRSP, mobilized PKR 2.5 million from the personal contribution of committee members and other local/oversees philanthropists that would be used for distributing food packages and/or disbursement of cash grants to the poorest HHs of the district. The Committee consists of political parties, local notables and BRSP. In addition, through this forum, a local philanthropist distributed 300 floor bags (50 kg each) to 300 poorest HHs in tehsil Huramzai, Pishin.

Under this component, BRSP fostered CIs, also played a key role as 38 LSOs not only linked the poorest HHs with district administration and other charity organisation, but also through self-help initiatives, served 1,510 HHs with distribution of food packages. Further, 408 TVET beneficiaries trained under BRSP’s Skills Development Programme, produced 7,622 masks in 29 UCs of 8 districts for selling out in local market to reduce the spread of COVI-19 in communities.

Assessment for livelihood restoration is under progress in three UCs of Killa Abdullah and one UC of Kharan districts, after the assessment around 1,520 HHs will be provided with livelihood support.

6. Strengthened coordination among stakeholders and synchronized information flow

Close coordination with Government Departments, LEAs and other development partner, positions as utmost priority in BRSP implementation strategy in both regular and emergency operation. Hence, BRSP’s HO and district teams maintained regular and close liaison with GoB, Administration, concerned departments/authorities and CSOs to ensure coordinated efforts to fight the pandemic. Till date, BRSP has participated in 162 coordination/task force meetings on COVID-19 response. While, regular sharing of BRSP’s contribution with all stakeholders is also ensured.

Apart from providing HR Support to maintain MIS on COVID-19 in emergency cell at Department of Health, GoB; BRSP, in consultation with PDMA, health Department, UNICEF, has developed an android-based MIS to record 4W progress, which has been deployed at PDMA and is also being set up at Department of Health.

Moreover, for more effective and meaningful response, BRSP has initiated two Comprehensive Need Assessment Exercises in 25 districts i.e.
   i. Need Assessment of Health Facilities/Quarantine Centres
   ii. Assessment of WASH facilities at Public Places.

The both assessments will give an overview of the existing capacity and immediate requirements for next three months, which will help GoB, donor agencies and other stakeholders to plan their response to address acuter needs in both Health and WASH sectors.
Mapping of HCFs under Health Facility Need Assessment

Health Facilities Assessment
Our Partners:

European Union

Salute to the defenders of Pakistan