

Our Response to the COVID-19 Crisis

15 June 2021

Azim Premji Foundation¹ and Wipro have been working to help tackle the COVID-19 pandemic across India since March 2020.

Part A: Overall Summary

1. Our efforts, so far

Our integrated healthcare support has built capacity and enabled operations to serve over **15 crore people** in more than **100 districts** in some of the most deeply disadvantaged regions of the country. This has included:

- a. On-the-ground pandemic surveillance, monitoring, awareness building and community mobilization across more than 200 blocks, including people capacity development, operations, and relevant equipment.
- b. Public healthcare system capacity creation including over 10,000 oxygenated beds, 1000 ICU beds, 100 testing centres with approximately 80,000 per day testing capacity (including automated high throughput systems) and augmented facilities for treatment and prevention.
- c. Additionally, support to around 45 public-spirited hospitals serving the most vulnerable populations, with similar equipment, consumables, manpower and operating expenditure.

Our humanitarian support (including equivalent of almost **54 crore meals**) reached over **1.3 crore people** across 27 states and 3 union territories and has helped regenerate livelihoods of an additional **83 lakh people**. Livelihood regeneration support includes inputs for agriculture and allied activities, as well as access to welfare entitlements for the most vulnerable populations of drought-prone regions of the country.

2. Team on the ground

These efforts have been enabled by a team of **1600 members** spread across 50 districts from our own organization, over 55,000 team members of around **800 partner organizations**, over **10,000 public (government) school teachers** whom we work with and about **2500 alumni** of Azim Premji University, along with Wipro's technical expertise and distribution reach.

3. Financial commitment

Our comprehensive COVID-19 response has been supported by ₹ 1,125 crore, we have increased this commitment to ₹ 2,125 crore to enable our substantially expanding work on vaccination across 10 states, with a commitment to increase this further if the need demands. The objective is to support the public system to vaccinate people across the country at the earliest. These efforts would include augmentation of capacity of the public system to vaccinate, demand creation for vaccination through community mobilization and dealing with vaccine hesitancy. These committed funds are in addition to the financial outlay of our regular operations — which too continue.

The sections below detail our approach and efforts so far.

¹ Azim Premji Foundation is a philanthropic organization established by Azim Premji, with a vision of contributing towards developing a just, equitable, humane, and sustainable society.

Part B: Details

1. Healthcare support

Our approach is focused on containing the spread of the infection and reducing mortality, catering to both immediate as well as long-term public health infrastructure needs. Our efforts are at three levels — 1) strengthening the frontline through training to build awareness, conduct proper screening, tracing and quarantining while equipping them adequately with equipment and protection kits; 2) more effective testing by increasing testing capacity, utilising existing capacity more efficiently and enabling access by decentralising testing/sample collection; and 3) augmenting overall treatment capacities for intermediate as well as tertiary care of the public health system across levels.

In some of the most disadvantaged regions of **Chhattisgarh**, **Jharkhand**, **Karnataka**, **Madhya Pradesh**, **Rajasthan**, **Puducherry**, **Telangana**, **and Uttarakhand** – where we have direct presence or have partners with strong on-ground presence – our team is working directly with government functionaries at the frontline to understand the crises, identify critical gaps and co-evolve solutions to mitigate them at the earliest. Our efforts are in close collaboration with the state and district administrations here towards this integrated healthcare response (Fig.1).

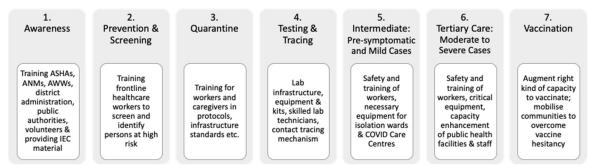


Fig. 1: Key Elements of our Integrated Healthcare Response

Over 10,000 oxygenated beds and 1000 ICU beds have and are being enabled in the public system by a range of equipment that we have committed and supplied. The equipment and devices include 18 PSA oxygen generation plants, 10,000 oxygen concentrators, 80 ventilators, 300 Bi-PAP machines, 600 High Flow Nasal Cannulas (HFNCs) and other ICU equipment along with supporting infrastructure such as hospital piping and cylinders. For enhancing testing, we have supported over 90 RT-PCR machines, 20 CB-NAAT machines and other equipment across locations - this includes setting up multiple turnkey testing labs in government hospitals of (e.g.) Almora (Uttarakhand), Ballari, Bengaluru (Karnataka) and Raigarh (Chhattisgarh). For the frontline, we have provided over 2 lakh PPE kits, 50,000 pulse oximeters and other equipment.

We are also supporting **ambulances** in specific locations like Bangalore, Yadgir (Karnataka), Jaipur (Rajasthan) and Bhopal (Madhya Pradesh) to enable better access to these treatment facilities. We are also enabling **deployment of trained personnel** including **doctors** in underserved areas.

In addition to the public system, we have supported **45 public-spirited hospitals**, serving the most vulnerable across the country, with similar equipment, consumables, manpower and operating expenditure. These hospitals together have over 5000 beds and 500 ICU beds serving over 2 crore people.

Our learning partnerships with premier institutions like the **National Centre for Biological Sciences** (NCBS), Bengaluru and **Christian Medical College** (CMC), Vellore has helped generate a better understanding of critical issues related to COVID-19 and has helped promote better clinical and operational processes by conducting training sessions for doctors and other healthcare staff especially those who serve in the rural areas.

Over the next few months, in addition to the above-mentioned efforts, we plan to do significant work on the ground towards **universal vaccination**. This includes working with the government and other partners to augment the right kind of capacity to vaccinate (e.g. centres, mobile camps) and mobilise people to overcome vaccine hesitancy. We plan to do this across **85-110 districts** in **10 states.** These will cater to some of the most underserved regions and vulnerable populations in the country. We will also extend our partnership with premier scientific institutions like CMC, Vellore to do research that will have practical implications in the context of this work.

2. Humanitarian support

Our focus is to mitigate human implications of the crisis by providing **cooked meals, dry ration,** and hygiene kits as immediate support and taking structured steps for **regeneration of livelihoods** in some of the adversely affected regions of the country. All this has been done in close coordination with government school teachers, government functionaries, local bodies and community-based organizations helping us identify and reach the most vulnerable.

Till date, through our immediate humanitarian assistance we have reached around **1.3 crore people** in **27 states** and **3 union territories**; our food support translates to around **54 crore meals** to the most vulnerable. This includes the last two months, when we have reached around 43 lakh people with cooked meals or dry ration support, delivering over 21 crore meals.

Our support for livelihood regeneration intends to address, very specifically, the immediate issues of food insecurity and livelihood vulnerability through an emergency response (Fig. 2) with our existing partners in rain-fed areas, prioritising most vulnerable households in these regions.

Agriculture & Allied

To provide immediate relief to

- Rain-fed marginal farmers by providing partial support for the cost of kharif inputs, increasing cultivation of food crops and establishing nutri-gardens
- Livestock rearers by supporting para-vet services to reduce mortality i.e. supporting vaccination costs through a one-time infusion of medicine and vaccines

To improve resilience of vulnerable groups by

 Supporting select-farmers' institutions (FPOs) for longer-term resilience, funding their operating expenses till they can access institutional support

Welfare

- To ensure work for all by improving access and implementation of rural employment schemes (MGNREGA)
- To ensure food for all by improving inclusion and implementation of civil supplies (PDS), pension benefits and direct cash transfer benefits.

Fig. 2: Key Elements of our Livelihood Regeneration Support

Till date, we have reached over **83.5 lakh people** across **13 states** – Andhra Pradesh, Assam, Chhattisgarh, Gujarat, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Odisha, Rajasthan, Uttar Pradesh, and West Bengal – in more than 300 blocks.

Part C: Annexures

Annexure 1: Medical equipment/consumables support, till 14 Jun. 21

Table 1: Summary of medical equipment/consumables committed through our supply chain

#	Category	Item	Quantity/Description
1.	Oxygen Capacity	Oxygen Concentrator	10,179
2.		Oxygen Plant	18
3.		Others	Liquid oxygen tanks, jumbo cylinders, and pipelines
4.	HDU/ICU Capacity	Ventilator	80
5.		Bi-PAP machines	319
6.		HFNCs	598
7.		Multi-para monitors	621
8.		Beds - ICU/Semi- Fowler/Air	338
9.		Other equipment and accessories	58 ECG machines, 29 X-ray machines, other equipment such as infusion pumps, defibrillators, and other accessories
10.	Testing	RT-PCR machines	87
11.		RNA extractors	25 Automatic RNA extractors, 5 Liquid Handling Systems, 1 Automated Nucleic Acid Extraction System
12.		CB-NAAT machines	21
13.		Other equipment	20 Bio-Safety Cabinets, and multiple other equipment such as nuclease free water plants, centrifuges, PCR workstations, autoclaves, and magnetic racks
14.		Accessories	Including cartridges, test kits, and transport medium
15.	Screening	Thermometers	23,900
16.		Pulse Oximeters	54,237
17.		Other equipment	Such as 1200+ glucometers and BP apparatus
18.	Frontline safety	N-95 Masks	2,74,712
19.		PPE Kits	2,31,672
20.		Others	Such as 3-ply masks, sanitisers, and soaps

In addition to direct supply of this equipment, we have committed significant financial support to public-spirited hospitals across the country for a similar set of equipment/consumables

Annexure 2: State-wise humanitarian assistance, till 14 Jun. 21

Table 2: Summary of food and dry ration support

#	State	People reached ²	
1.	Andhra Pradesh	2,71,586	
2.	Arunachal Pradesh	9,350	
3.	Assam	1,55,545	
4.	Bihar	2,75,642	
5.	Chhattisgarh	2,10,043	
6.	Delhi	4,57,510	
7.	Goa	1,250	
8.	Gujarat	2,26,530	
9.	Haryana	13,375	
10.	Himachal Pradesh	750	
11.	Jammu Kashmir	13,714	
12.	Jharkhand	3,49,537	
13.	Karnataka	38,52,285	
14.	Kerala	55,829	
15.	Madhya Pradesh	3,43,957	
16.	Maharashtra	15,59,097	
17.	Manipur	39,650	
18.	Meghalaya	1,76,501	
19.	Mizoram	2,630	
20.	Nagaland	6,200	
21.	Odisha	4,41,780	
22.	Puducherry	13,745	
23.	Punjab	9,300	
24.	Rajasthan	5,97,427	
25.	Tamil Nadu	4,07,927	
26.	Telangana	3,19,376	
27.	Tripura	1,000	
28.	Uttar Pradesh	1,27,967	
29.	Uttarakhand	94,692	
30.	West Bengal	8,36,761	
31.	Others (uncategorized)	7,710	
32.		1,08,78,666	

In addition to cooked food and dry ration assistance, other humanitarian aid (including personal hygiene items, cash) has reached over **22 lakh people**.

² These numbers are an approximation, derived from the number of ration kits and hygiene kits disbursed at household level, assuming 5 members per household/family

Annexure 3: State-wise livelihood regeneration support, till 14 Jun. 21

Table 3: Summary of districts covered; people reached

#	State	Districts	People Reached ³
1.	Andhra Pradesh	Anantapur, Chittoor, East Godavari, Kadapa, Kurnool, Srikakulam, Visakhapatnam, Vizianagaram	13,67,705
2.	Assam	Bongaingaon, Chirang, Goalpara, Kamrup, Karbi Anglong, Majuli	3,62,150
3.	Chhattisgarh	Koriya	1,13,835
4.	Gujarat	Ahmedabad, Aravalli, Bhavnagar, Dahod, Dang, Mahisagar, Narmada, Navsari, Panchmahal, Patan, Surendranagar, Tapi	9,16,090
5.	Jharkhand	Bokaro, Dumka, East Singhbhum, Godda, Gumla, Hazaribagh, Khunti, Koderma, Lohardaga, Ramgarh, Ranchi, West Singhbhum	11,62,700
6.	Karnataka	Chikkaballapur, Kalaburagi, Yadgir	1, 37,785
7.	Kerala	Wayanad	250
8.	Madhya Pradesh	Alirajpur, Anuppur, Barwani, Betul, Burhanpur, Chhatarpur, Dewas, Dhar, Dindori, Hoshangabad, Jhabua, Katni, Khandwa, Khargone, Niwari, Raisen, Sagar, Shahdol, Sidhi, Singrauli, Tikamgarh, Vidisha	6,32,890
9.	Maharashtra	Pune, Yavatmal	1,67,095
10.	Odisha	Angul, Boudh, Dhenkanal, Ganjam, Kalahandi, Kandhamal, Kendujhar, Koraput, Mayurbhanj, Nabarangpur	13,82,115
11.	Rajasthan	Ajmer, Banswara, Bhilwara, Karauli, Pali, Pratapgarh, Rajsamand, Sirohi, Tonk, Udaipur	10,98,612
12.	Uttar Pradesh	Mau	1,95,000
13.	West Bengal	Alipurduar, Bankura, Birbhum, Kalimpong, Jhargram, Jalpaiguri, Nadia, North 24 Parganas, Paschim Medinipur, Prasari, Purulia, South 24 Parganas	8,17,780
14.	Grand Total		83,54,007

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³ Estimated number; does not represent unique beneficiaries. i.e. each beneficiary could have received more than one type of intervention across agriculture and welfare and also within welfare, hence counted more than once.