

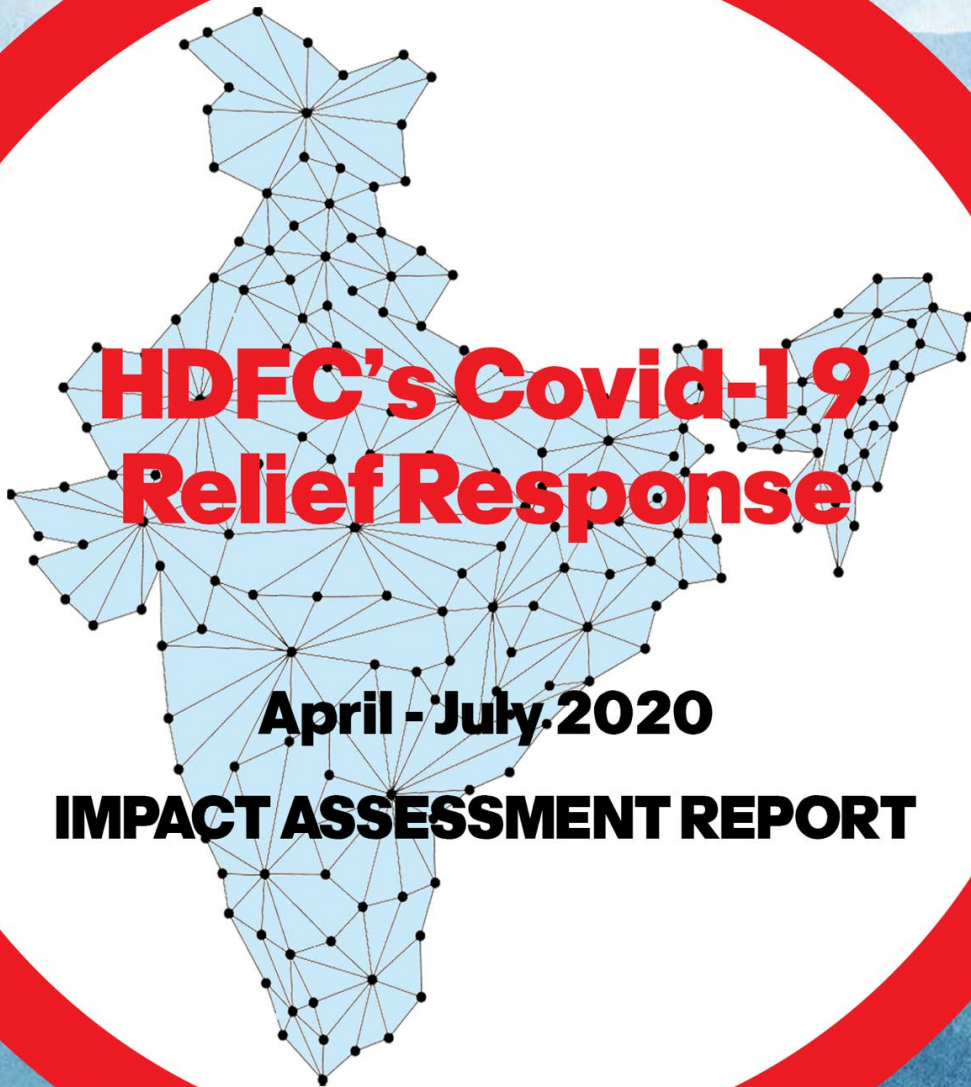


HT Parekh  
FOUNDATION

An Initiative by



WITH YOU, RIGHT THROUGH



# HDFC's Covid-19 Relief Response

April - July 2020

**IMPACT ASSESSMENT REPORT**



Water For  
Women



# Foreword

31 August 2020

COVID-19 is not merely a health crisis in the short term, but a devastating Human, Health, Economic and Financial crisis, likely to last for the next few years. As of end-August 2020, India had registered more than 3.5 million confirmed COVID-19 cases and is in the midst of slowly easing out lockdown norms across the country.

As a consequence of the complete nationwide lockdown for close to 3 months, the country has witnessed significant livelihood reductions coupled with disruptions in supply chain services and manufacturing industries. Such disruptions have negatively impacted economies across the globe; however, India's large domestic economy, significant forex reserves, adequate food supply stocks and high human capital, do give us a ray of hope to rise above the pandemic, provided the health crisis is managed efficiently.

HDFC Limited's CSR strategy to manage this crisis was focused on building the resilience of vulnerable and marginalised population groups who were significantly impacted. As a part of this project, enabled by the H T Parekh Foundation (philanthropic arm of HDFC), HDFC contributed INR 180 million in the period April to July 2020, benefitting over 200,000 individuals. We have engaged with 27+ small to mid-sized community-based organisations to understand the local challenges and needs, basis which we undertook specific relief initiatives. Based on insights received from our partners, we categorised our relief work into 4 broad categories - distributing dry ration, supporting cooked meals, and providing preventive and curative healthcare equipment. HDFC's contribution ensured that we have helped in addressing social and economic challenges faced by vulnerable communities, as well as supporting the healthcare system in a timely and humane manner.

In wake of the ongoing COVID-19 crisis, we need to re-examine the way we work individually and collectively. The Foundation is re-thinking many of its existing programmes with partners across the Education, Healthcare and Livelihood sectors. For example, to overcome the strong digital divide that still exists, we will need to adopt innovative ways of facilitating access to education for underprivileged children with our education partners. Also, in order to address the current livelihood crisis, we are working with our existing and new partners to support the welfare of migrant workers and women focused livelihood programmes.

Contemplating the current economic situation, we believe that every rupee of social investment should also fuel economic growth and make communities self-sustainable.

With HOPE for a positive outcome to this challenging health crisis, we stand committed.



Ziaa Lalkaka  
CEO

HT Parekh Foundation



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**HDFC**  
WITH YOU, RIGHT THROUGH

# Enhancing Outcomes Through Impact Assessment

## HDFC's COVID-19 Relief support

In the wake of COVID-19, several private sector entities, both in India and across the world, have liberally supported relief and response activities. Charitable contributions enabled the inflow of invaluable philanthropic support in a large economy that is under stress due to COVID-19.

Housing Development Finance Corporation Limited's (HDFC) COVID-19 relief work was undertaken as a part of its Corporate Social Responsibility (CSR) commitment along with additional funds received from voluntary employee contributions. H T Parekh Foundation (Foundation), the philanthropic arm of HDFC, enabled the execution of this relief work.

HDFC has committed INR 600 million to the Prime Minister's Citizen Assistance and Relief in Emergency Situations Fund (PM-CARES Fund). Additionally, separate funds of INR 180 million (up to July 2020) was earmarked to support communities by distributing dry ration kits, cooked meals and preventive and curative equipment.

## Water for Women Fund and RTI International India

Water for Women (W4W) Fund is the Australian Government's flagship water, sanitation and hygiene (WASH) program delivered as part of Australia's aid program, improving health, gender equality and wellbeing in Asian and Pacific Communities through socially inclusive and sustainable WASH projects. In response to the global pandemic, W4W Fund along with its partner organizations is supporting COVID-19 relief activities across the Asia Pacific.

As a W4W Fund sub-recipient, RTI International India (RTI) is working in the area of enhancing both quantum and impact per unit of charitable contributions made by various private sector entities. To this effect, RTI is engaging with various private sector entities to channel their contributions towards vulnerable and marginalised population groups (VMPPG). At the same time, RTI is leveraging 'learning-through-measuring' methodologies to enhance the impact of contributions by these entities.

## Collaborating to enhance outcomes

As a part of W4W Fund COVID-19 pivot, RTI International India assisted the H T Parekh Foundation in :

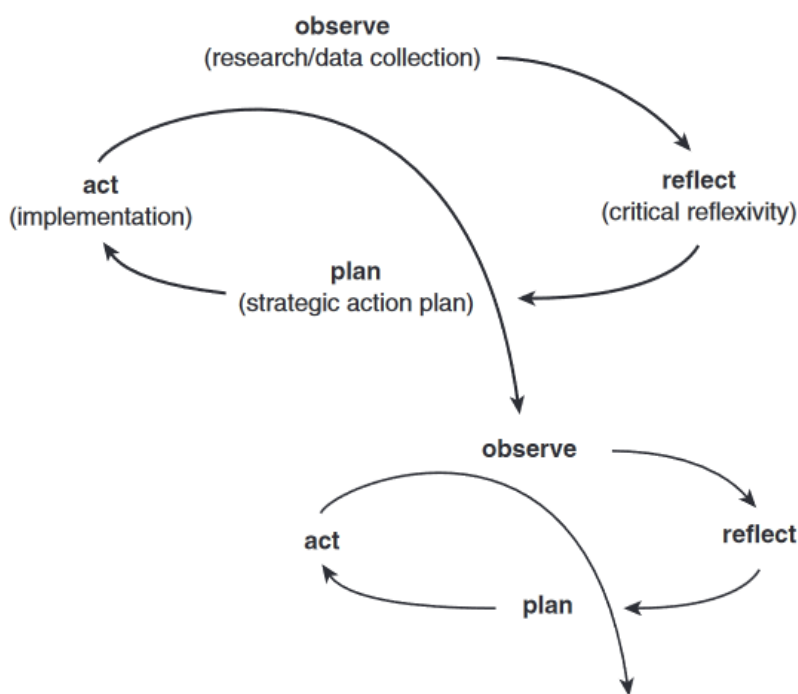
- a) Identifying community-based organisations (CBOs), working with VMPPGs like migrant workers, daily wagers, persons with disabilities (PwD) etc., who could undertake community wide COVID-19 relief work funded by the Foundation
- b) Coordinating with shortlisted CBOs for relief efforts supported by the Foundation
- c) Avenues for enhancing impact of the Foundation's overall COVID-19 relief contributions, by undertaking and learning from impact assessments

# Approach and Methodology: Impact Assessment

RTI has supported the H T Parekh Foundation in undertaking impact assessments of its COVID-19 relief contributions\* by leveraging '*learning-through-measuring*' methodologies. RTI adopted the **O'Leary's Cycle of Action Research** to measure impact of these contributions. In this model, the cycle converges towards better understanding and improved action implementation; and it is based on evaluative practice that alters in-between the action and critical reflective. This method of action research helps a program to gather experimental learning and realign its goals based on understanding developed in earlier cycles.

(\* excluding the Foundation's contribution toward PM-CARES Fund)

## O'Leary's Cycle of Action Research Model



A **Log Frame Approach** (LFA) was used to capture the cascading effect of this programme. Under each of the programme categories, multiple input, output, outcome and impact indicators were identified.

RTI in coordination with the H T Parekh Foundation reached out to individual CSO partners and built their capacity to collect requisite data. Based on primary and secondary data collected, RTI assessed and measured impact of individual programme categories. The details of indicators under each programme category along with its basis for calculation are mentioned under in the subsequent sections.

# Theory of Change: Dry Ration Distribution



	Indicators	Calculations	Basis for calculations	Value
Dry Ration Distribution	% of household expenditure on food reallocated due to support received from HDFC	<p><b>= a/b</b></p> <p>Where,            a- Average cost of dry ration kit supplied            b- Average household expenditure, in similar demographic profiles, on food items over duration equal to that of HDFC support</p>	Average monthly per capita expenditure on food is INR 450 (NSS 68th report)	68%
	Number of individuals in a specific geographic area receiving dry ration kits and duration of support	<p><b>=a*5</b></p> <p>Where,            a- Number of households supported</p>	Average family size of 5	145,652 Individuals
	% RDA* calorie content addressed for these beneficiaries	<p><b>= a/b</b></p> <p>Where,            a- Avg. calorie content of meal supplied per individual per day            b- RDA calorie content required per individual per day</p>	i. Average family size of 5, ii. RDA calorie requirement per individual per day as 2138 Kcal (Food Safety and standards Authority of India)	31%
	Amount of dry ration procured and distributed	Actual Numbers	Actual Numbers	27,781 Dry ration kits
	Budget spent on the initiative	Actual Numbers	Actual Numbers	INR 34 million

\* RDA: Recommended Dietary Allowances

# Theory of Change: Cooked Meals Distribution



**Input**



**Output**



**Outcome**



**Impact**

	Indicators	Calculations	Basis for calculations	Value
Cooked Meal Distribution	Total number of individuals supported	$= a/(b*c)$ Where, a- Number of meals distributed b- Duration of support (days) c- Meals per day	Actual Numbers	24,322 individuals
	% RDA calorie content addressed for these beneficiaries	$= a/b$ Where, a- Avg. calorie content of meal supplied per individual per day b- RDA calorie content required per individual per day)	RDA calorie requirement per individual per day as 2138 Kcal (Food Safety and standards Authority of India)	100%
	Total number of meals supported by HDFC	Actual Numbers	Actual Numbers	979,269 meals
	Amount of food material procured	Actual Numbers	Actual Numbers	423 tons
	Budget spent on the initiative	Actual Numbers	Actual Numbers	INR 18 million

# Theory of Change: Preventive Equipment Distribution



	Indicators	Calculations	Basis for calculations	Value
Preventive Equipment Distribution	Number of police personnel served	Actual Numbers	Actual Numbers	12,600 individuals
	Number of Healthcare workers served	= a/b Where, a- Number of PPE distributed b- Number of PPE kit required per individual	i. Support was for a period of 1 month ii. Each healthcare worker was on duty for max. 1 shift/day, and max. 15 days/month (Based on interviews with hospitals supported)	18,667 individuals
	% of reported PPE Kit need fulfilled by HDFC contribution (35 Hospitals)	= a/b Where, a- number of PPE distributed by HDFC b- reported need of PPE by hospitals	i. Support was for a period of 1 month ii. A COVID-19 hospital needs 21715 PPE kit per month	14%
	Number of protective gear procured & distributed to health workers	Actual Numbers	Actual Numbers	105,000 PPE kits *
	Number of protective gear procured & distributed to Police personnel	Actual Numbers	Actual Numbers	12,600 kits of protective gear
	Budget spent on the initiative	Actual Numbers	Actual Numbers	INR 110 million

\* PPE Kits: Personnel Protective Equipment kits comprising of Coverall Suits, Shoe Cover, Protective Eye Gear, N95 / 3ply Masks, Nitrile Gloves, Face Shield and Disposable Bags.

# Theory of Change: Preventive Equipment Distribution



	Indicators	Calculations	Basis for calculations	Value
Preventive Equipment Distribution	Improved mental wellbeing of healthcare workers	Secondary Research	Secondary Research	70%
	Medical expenses avoided due to likely COVID-19 infection in Police personnel protected in absence of HDFC contribution	$= a*b*c*d$ Where, a- No. of police personnel protected b- Probability of getting infected with COVID-19 c- % of people needing admission to dedicated COVID-19 hospitals d- Avg. cost of treating a COVID-19 Patient	i. As per Ministry of Health & Family Welfare, only 30% COVID-19 cases need admission to dedicated facility ii. Average cost of treating a COVID-19 Patient for 14 days as INR 72,250 (Secondary Research) iii. Probability of police personnel getting infected with COVID-19 as 1% (Secondary Research)	INR 3 million
	Medical expenses avoided due to likely COVID-19 infection in health workers protected in absence of HDFC contribution	$= a*b*c*d$ Where, a- No. of health workers protected b- Probability of getting infected with COVID-19 c- % of people need admission to dedicated COVID-19 hospitals d- Avg. cost of treating a COVID-19 Patient)	i. As per Ministry of Health & Family Welfare, only 30% COVID-19 cases need admission to dedicated facility ii. Average cost of treating a COVID-19 Patient for 14 days as INR 72,250 (Secondary Research) iii. Probability healthcare worker getting infected with COVID-19 as 100% (Assumed)	INR 405 million



# Theory of Change: Curative Equipment and Measures



**Input**



**Output**



**Outcome**



**Impact**

	Indicators	Calculations	Basis for calculations	Value
Curative Equipment Distribution	Number of people served	$= a \times 2$ Where, a- Number of ventilators distributed	Average number of COVID-19 patient served per month per ventilator as 2	432 individuals
	Number of ventilators distributed	Actual Numbers	Actual Numbers	18 ventilators
	Budget spent on the initiative	Actual Numbers	Actual Numbers	INR 15 million

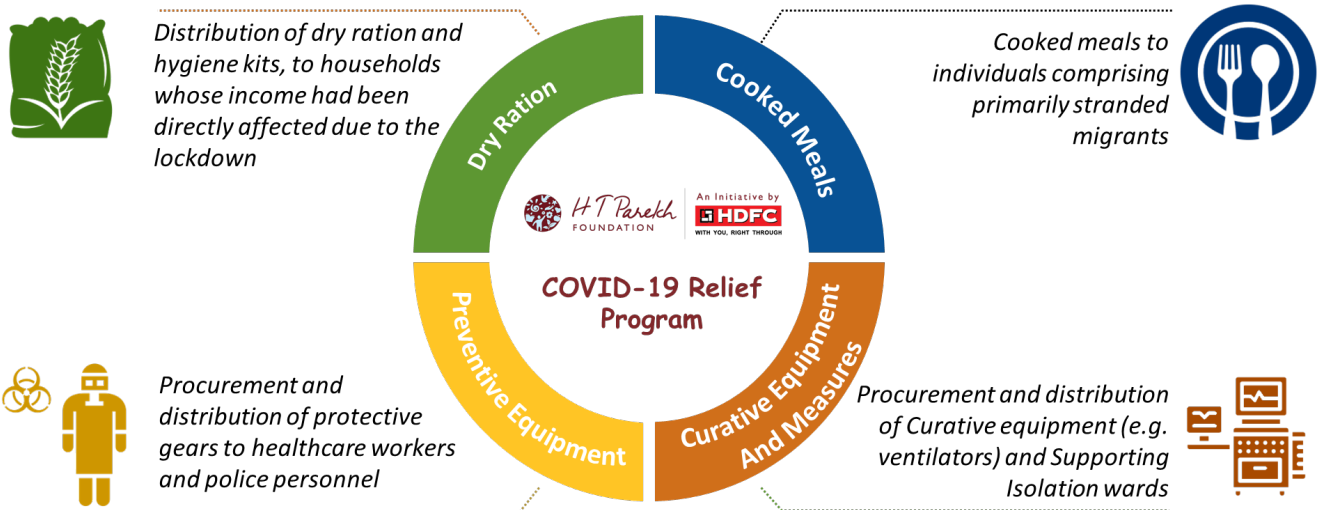
Isolation Wards	Number of COVID-19 patients served in the isolation center supported by HDFC	Actual Numbers	Actual Numbers	88 individuals
	Budget spent to support isolation wards	Actual Numbers	Actual Numbers	INR 3 million

# HDFC's Overarching Strategy: COVID-19 Crisis

## HDFC's COVID-19 Response:

HDFC's COVID-19 response was aimed at alleviating the Human & Health crisis faced by socio-economically vulnerable sections of society, healthcare workers and frontline personnel, such as the police & sanitation workers. Assistance was provided from HDFC's CSR commitment along with additional funds received from voluntary employee contributions into the Foundation, which enabled the execution of this relief work.

The Foundation's response was immediate, timely and focused on need-based interventions. The Foundation undertook efforts to reach out to a wide range of stakeholders including state governments, urban local bodies, hospitals, community-based organisations etc. Based on insights received from these wide-ranging stakeholder groups, relief measures were categorised broadly under four heads:



'Prevention is better than cure' – hence, 3 of the 4 categories above aimed to alleviate concerns of safety and/or sustenance of the population at risk of being affected by COVID-19. Moreover, the Foundation also acted to address the need of those already infected, through the distribution of curative equipment and treatment facilities in hospital quarantine wards.

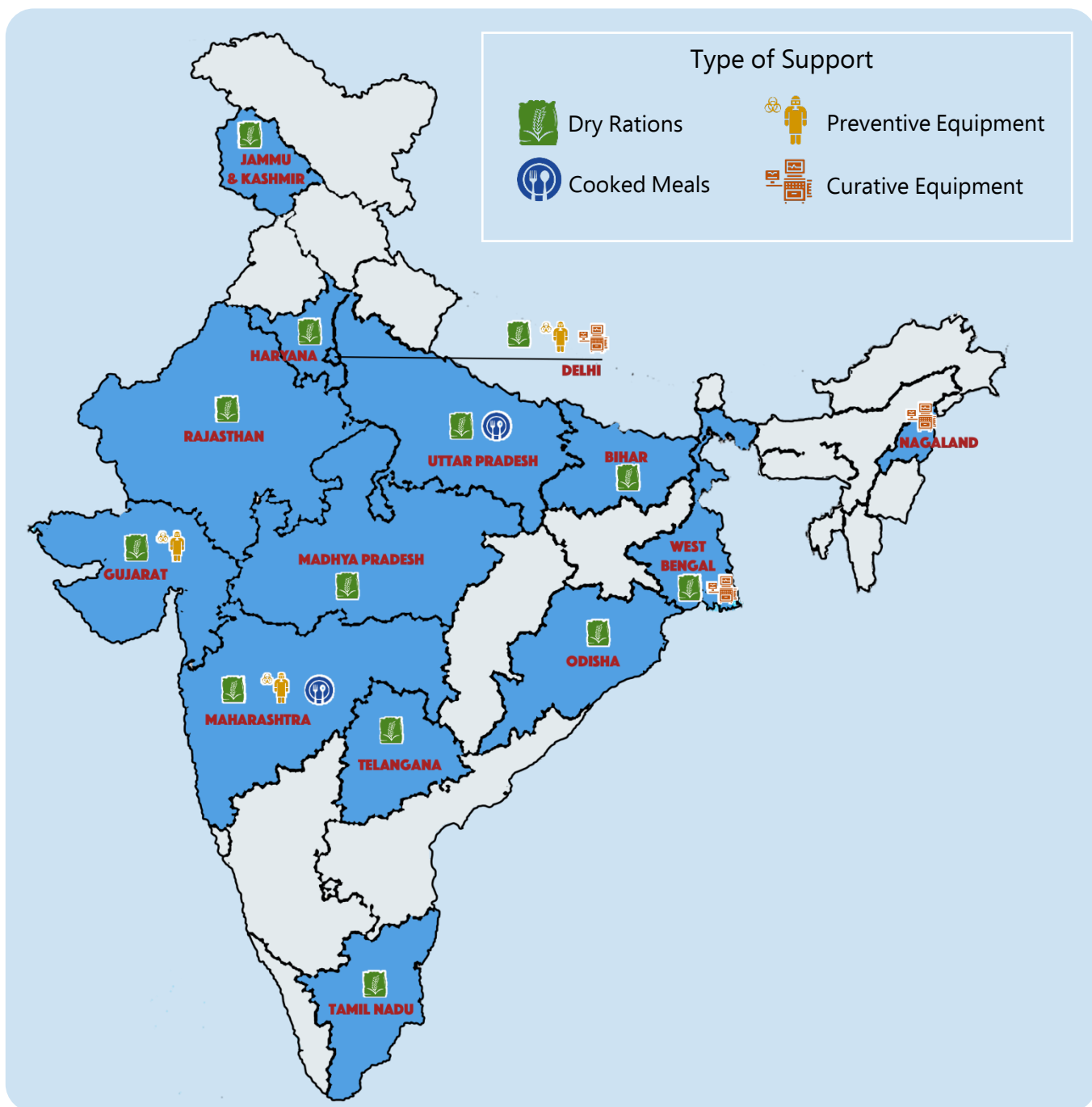


**INR 180 Million**  
contributed toward COVID-19 relief activities

**201,760**  
individuals benefited across **14** states of India with a per individual spending of **INR 890**



# HDFC COVID-19 Relief support: Geographic Reach



## Beneficiaries of HDFC's COVID-19 Relief Program comprised



Senior citizens



Persons with Disabilities



Migrant Workers



Healthcare workers



Daily wage workers



Sanitation Workers



Single Women/Widows



Police Personnel

# Relief Activity # 1: Dry Ration & Hygiene Kit Distribution

A direct impact of the COVID-19 lockdown was the loss of livelihood for those dependent on daily wages. With a loss of income and no immediate respite in sight, this vulnerable population struggled for basic amenities and necessities. Through the Foundation, **24** community-based organisations were rapidly mobilised to distribute dry ration and hygiene kits to these vulnerable communities.

## INPUT



**INR 34 million**

Grant allocated to **24 CBOs** to distribute dry ration and hygiene kits across India

**HDFC supported the following community-based organisations for the distribution of dry ration and hygiene kits**



## OUTPUT



**27,781 kits**

Distributed to beneficiaries comprised of Persons with Disabilities (PwD), elderly, single women (widow/ separated), daily wage earners, migrant construction workers, waste picker and tribal communities.

**Dry ration and hygiene kit entailed procurement of**



**308 tons Rice**



**128 tons Wheat**



**89 tons pulses**



**33,368 liters of oil**



**61,661 sanitary napkins**



**34,175 soaps**



**15,000 face masks**



**27 tons Spices**

# Relief Activity # 1: Dry Ration & Hygiene Kit Distribution

## OUTCOME



**145,652**  
**Individuals**

Reached from various vulnerable and marginalised communities across **13 states** of India



**31%** of the daily calorific needs of more than 145,652 beneficiaries were fulfilled for a **21-day** period

## IMPACT



**68%**

Of household expenditure reallocated to other immediate needs

Due to this contribution, **more than 27,700 families** were able to reallocate their usual household expenditure on food, to other immediate needs for one month

## CASE STUDY: RETURNEE MIGRANT WORKERS



Trinath Sethy and his wife had walked for almost **3 days and 3 nights** covering **275 km** from Visakhapatnam to reach their hometown Kularsing in Nandapur block, Odisha.

They and many others from their village generally migrate out as laborers in construction sites, leaving their children with their old parents. After reaching their hometown, they had to stay at quarantine centers for 14 days and even after this quarantine period they had no income source. In this difficult time HDFC, through its partner **Pragati** has supported these families with dry ration for the duration of **30 days**.

# Relief Activity #2: Cooked Meals Distribution

The lockdown and loss of livelihoods led to India witnessing one of the largest forced human migration of recent times. Due to the lockdown, most migrants were stranded with no sustenance or shelter and unable to return to their homes. They were also at a high risk of being infected. HDFC supported **3 organisations** for the distribution of cooked meals.

## INPUT



**INR 18  
million**

Grant allocated to following organisations to distribute cooked meals



## OUTPUT



**979,269  
cooked meals**

Distributed to vulnerable and marginalised population groups like migrant workers, daily wage earners and homeless persons

### Meal Preparations entailed procurement of the following



**155 tons  
Wheat**



**135 tons  
vegetable**



**15,854  
liters of oil**



**65 tons  
Rice**



**43 tons  
pulses**



**5 tons  
Spices**



**3 tons  
sprouts**



**1 ton  
fruits**

# Relief Activity #2: Cooked Meals Distribution

## OUTCOME



**24,322**  
**Individuals**

Reached primarily comprising  
stranded migrants



**100%** of recommended dietary allowance (calories) addressed by cooked meal package (average 2 meals/ day)

**90%** more nutritious than a typical daily calorie intake of these beneficiaries

## CASE STUDY: Project Sahyog – Food with Dignity



As a part of the HDFC's food relief efforts for vulnerable communities, a partnership with **Tiffins & Thots** helped reach nutritious cooked meals to stranded labors and daily wage earners across Thane, Vikhroli, Mumbra and Bhandup in the Greater Mumbai region.

Meals were prepared out of **2 cloud kitchens** managed by **5 women entrepreneurs**. A meal packet consisting of a vegetable 'khichdi' or 'pulao' (Indian rice preparations) were distributed across the locations through volunteers and the local administration. This program was unique since it not only provided the much-needed food relief for stranded communities but also ensured that the women entrepreneurs did not lose out on their income during the lockdown. The program ensured distribution of **25,000 meals over 31 days**.

# Relief Activity #3: Preventive Equipment Distribution

Healthcare workers and police personnel were at the forefront of this crisis, with a limited number of PPE kits available initially and a high risk of infection. Our interventions focused on procuring and distributing personal protective gear for healthcare workers and police personnel – two communities who were overburdened by the scale of the crisis.

## INPUT



**INR 110 million**

Grant allocated to procure and distribute personal protective gear for healthcare workers and police personnel

## OUTPUT

**105,000**

PPE kits distributed to healthcare workers

**12,600**

Protective gears distributed to police personnel

### Distribution of PPE to healthcare workers and police personnel entailed procurement of



**157,600 units** of 3 ply masks



**117,600 pairs** of nitrile gloves



**105,000 units** of coverall suits



**105,000 units** of protective eye gear



**105,000 pairs** of shoe covers



**105,000 units** of bio-disposable bags



**70,000 units** of N95 masks



**5,240 liters** of sanitizer



**5,000 units** of face shields



# Relief Activity #3: Preventive Equipment Distribution

## OUTCOME



**12,600**

Police  
personnel protected



**18,667**

Healthcare  
workers protected



**14%**

of reported need for protective gear for one month across **35 hospitals** of Delhi, Gujarat and Maharashtra fulfilled by contribution towards healthcare workers

## IMPACT

### Avoidance of medical expense

**408 million** of estimated medical expenses avoided due to reduced likelihood of these healthcare workers and police personnel to contract COVID-19

### Improved mental wellbeing

**70%** Estimated reduction in occupational psychological stress of these beneficiaries by ensuring availability of protective gear thereby preserving their mental health and enhancing productivity \*

## CASE STUDY: PROTECTING COVID-19 WARRIORS



The rising COVID-19 cases amongst the police personnel and related security forces had become a matter of concern as they worked day and night, including in and around containment zones. Keeping in view personal safety of these COVID-19 Warriors, HDFC through its partner **Praja Foundation** distributed **10,600** protective gears (mask, gloves) and **4,240** liters of hand sanitizers to **93 police stations** across 13 zones of Mumbai.

*"The safety masks were extremely important for us because we worked in the containment zones. We managed to deliver the masks, gloves and sanitizers which were of an excellent quality to the police stations for their use." – Ast. Police Inspector, Mumbai Police*

\* Source: Clinical Medicine & Research| Volume 14

# Relief Activity #4: Curative Equipment and Measures

Lockdowns and disruptions in supply chain and logistics coupled with high demand led to a shortfall of life saving ventilators as early as April 2020. Responding to this crisis, HDFC donated specialised ventilators to support Delhi, Nagaland and West Bengal's healthcare efforts in their response to COVID-19.

## INPUT



**INR 15 million**

**18**

Specialised ventilators procured and donated to support Delhi, Nagaland and West Bengal's healthcare system

## OUTCOME



**432 Patients**

with serious COVID-19 complications will be supported by these equipment over a period of next one year



**3 of the 18 ventilators** can address respiratory ailments including COVID-19, even in infants

## CASE STUDY – COVID-19 TREATMENT/ ISOLATION CENTERS



**HOLY FAMILY HOSPITAL & MEDICAL RESEARCH CENTRE**  
Bandra, Mumbai



**Masina Hospital**  
Your Health. Our Mission.

The emergence of COVID-19 made dedicated isolation centers a critical factor to control the spread of COVID-19, particularly in densely populated cities like Mumbai. In context of the current pandemic, hospitals had to shut down most of their regular Out-patient department (OPD) and In-Patient department (IPD) services, which significantly impacted their revenues during April - June 2020. Responding to this immediate need, HDFC extended its support at two treatment & isolation centers in Mumbai viz, Holy Family Hospital, Bandra and Masina Hospital, Byculla.

**INR 3 million**

of grant allocated to support monthly operational expense of these treatment/ isolation centers which includes personnel cost, medical supplies, meals for in-patients, cleaning, sanitisation etc.

**88**

COVID-19 patients estimated to have been treated here for the duration of our support at these isolation centres

### **About HDFC Limited**

HDFC Limited is India's leading mortgage lender and a well established financial conglomerate. It has assisted more than 78 Lakh families in acquiring their own home over the last 43 years. It has emerged as a financial conglomerate with the Group's presence in banking, asset management, insurance (life & general), real estate venture capital and education finance.

### **About H T Parekh Foundation**

The H T Parekh Foundation is the philanthropic arm of HDFC Limited. The Foundation was established in October 2012 to commemorate its Founder, Shri H.T. Parekh's significant contribution toward the development sector in India. The Foundation works across rural and urban India, and partners with organisations across Healthcare & WASH, Education, Livelihood and Disability.



### **Acknowledgment**

*HDFC Limited and the H T Parekh Foundation appreciates the support extended by the Australian Government, Dept. of Foreign Affairs and Trade, and Water for Women (W4W) Fund. The W4W subgrant recipient RTI International India (RTI) assisted the Foundation in the analysis & preparation of this Report.*