

# EXTRAORDINARY WORK OF ORDINARY PEOPLE

PANDEMIC RESILIENCE IN URBAN INDIA

EXAMPLES, LESSONS, AND SPECIFIC RECOMMENDATIONS FOR COMMUNITIES, CIVIL  
SOCIETY ORGANISATIONS, AND GOVERNMENT AGENCIES



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## Citation

Vikalp Sangam, *Pandemic Resilience in Urban India – Volume 7 of the 'Extraordinary Work of 'Ordinary' People: Beyond Pandemics and Lockdowns' Series*, Vikalp Sangam Core Group, Pune, Dec 2022.

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# INTRODUCTION

**The COVID Pandemic brought the world down to its knees. Such has been the reign of terror of the pandemic, that the oft-repeated quote, 'That which does not kill us, makes us stronger' was changed to – 'That which does not kill us, mutates and tries again'. We are faced with an invisible enemy, and uncertainty still looms.**

Pandemics have struck mankind, but never before has humanity been impacted on such a scale. This time, an increasingly global world led to more frequent global travels leading to a faster spread of the contagion. It is estimated that such pandemics will be more frequent and their spells will last longer. Climate change, loss of habitat, and biodiversity has led to humans coming in close contact with wild animals, which means more humans are now exposed to pathogens significantly increasing the risk of zoonotic outbreaks like COVID and ebola.

These are testing times. In the past one-half years, every individual has learned some invaluable lessons about love, loss, and courage. We saw some extraordinary stories of play out – of people who rose to the occasion and worked hard to keep communities safe. As a part of Vikalp Sangam's series on 'Extraordinary Work of Ordinary People' – this report chronicles the work of such individuals and organisations in urban areas.

Urban areas, with a high density of population, have been predicted to be the epicenters of such outbreaks. Most cases have been recorded in cities with a share of over 90 percent of confirmed cases globally. The implications of this have been much far-reaching.

The urban poor has been the most affected since the beginning of the pandemic. Living in densely populated dwellings they became vulnerable to contagion. During the first wave, the stringent lockdown in 2020, had left them without a source of livelihood.

Over 80 percent of workers in the informal sector lost their livelihoods. In the absence of any source of income, millions of migrant workers made



a beeline for their native villages soon after the lockdown. The result: disrupted supply chains, rampant poverty (over 75 million people were pushed into poverty), a massive increase in unemployment, domestic violence, and mental health issues. As for children, those with no access to the internet or smartphones — their education came to a sudden halt. Even now, over 30 million children in India do not have access to online classes.

**The second wave of the pandemic was more lethal, saw the health infrastructure in cities buckle under pressure. In a matter of a few weeks, the death toll piled and the contagion spread to rural areas.**

During both the waves, there were numerous people, who tried to bring some balance to the chaos. Civil society organisations played a critical role in providing much-needed humanitarian assistance to communities under distress. Non-profits had to operate under extremely difficult circumstances, exacerbated by a stringent regulatory environment. An amendment to the Foreign Contributions Regulations Act (FCRA) made it more difficult for small grassroots organisations and intermediaries to operate.

Despite the challenges, funds were mobilized to help the urban poor. The migrant workers were provided with cooked food, dry ration, and essential goods. Frontline workers were provided with protective gear, communities were taught about basic hygiene and waste disposal. Distress helplines were set up to facilitate medical aid and support people with mental health issues and victims of domestic violence.

Now with new variants of the SARS-Co-V-2 emerging, things remain uncertain. After going through the worst phases of the pandemic, urban populations have proven to be resilient. Social distancing, contact tracing, and vaccinations have been able to contain the pandemic in densely populated urban areas. But COVID recovery is a long drawn process. The pandemic has had socio-economic impacts, which can only be addressed through long-term interventions that empower underserved communities.

This report highlights stories of some of many extraordinary initiatives, which not only provided humanitarian assistance, when it was needed but are also trying to build communities that are more resilient to future shocks.



# RELIEF RIDERS HYDERABAD

## HOW IT STARTED

Bicycle Mayor Network is a global initiative to not only accelerate the progress of cycling in cities but also a movement to ensure that our cities are more liveable and fit for the future. Armed with a bicycle and a will to create a better world, these Bicycle Mayors can accelerate the changes we need to see by uniting all citizens.

Inspired by the Bicycle Mayors of Bengaluru, who started the Relief Riders initiative young professionals from Hyderabad, Belagavi, Chennai, Delhi-NCR, Guwahati, Hubballi-Dharwad, Mumbai, Salem, Silvassa and Jaipur started their own initiatives. The objective of the group was to deliver medicines and other essentials to patients during the second wave of COVID.

**Hyderabad was the second city to take up this initiative in the country, after Bengaluru. The**



**Hyderabad chapter was formed in April 2020 and the core members include Ravi Sambari and Dinesh Sale, along with 300 more volunteers.**

## **CHALLENGES THAT NEEDED TO BE ADDRESSED**

Soon after the Relief Riders were formed, the group realised the gaps in the society, which the pandemic had created. Their fellow citizens were suffering and struggling. Many were sick and many were dying. Locked up in their homes, they could not step out for their basic needs – medicines or essential commodities. The most vulnerable were the senior citizens, who were left alone to fend for themselves – their children far away, some abroad, some within the state.

Many people in the US got in touch with us. They felt helpless when they realised that they had all the money, but they still could not help their aged parents back home.

*'We were the angels filling the gap, touching lives. Every day we wake up happy, busy, and ready to help. It is such a satisfying experience!'*

*– Santhana Selvan, Relief Riders, Hyderabad*



## **WHAT THEY DID**

If anyone was COVID positive and/ or stuck at home without help, the relief riders would come to their rescue. The group created a 'Free Food Network' – which had about 50 Free Food Providers, who had home kitchens spread across Hyderabad. The Relief Riders leveraged these delivery persons for delivering food to families in crisis.

For instance, they helped a physically challenged lady in a hostel in Champapet send certain essentials to her COVID positive father, admitted to TIMS Gachibowli, within the same day. This was done as a relay ride from Champapet to a mid-point by one rider volunteer, Giri. The second lap of the relay was taken care of by Abhishek and delivered to TIMS Gachibowli. TIMS and the area around it was a COVID hotspot, teeming with COVID cases. Volunteers had to take a calculated risk to venture into the area and help the needy. Most of the Relief Riders work in MNCs and have their families at their homes.

Another interesting case that the group came across was a request from Kurnool, where there was a kidney patient, who needed a particular medicine. The medicine was not available in Kurnool, it was available in a medical shop in Hyderabad. It was far away and it was not possible for the chemist in Hyderabad to send it to the patient in Kurnool. Gautham, a relief rider volunteer stepped in. He collected the medicine from the chemist shop in Hyderabad and then went to the bus stand and sent the medicines to Kurnool via bus.

The Relief Riders initiative saw 725 cyclists from 12 cities help over 2,000 people during the pandemic. The riders have earned accolades from across the world for their humanitarian work during the peak of the COVID crisis.

*'The relief work was done during our personal time. I am happy that our families were very cooperative and supportive during this time. The days were hectic, we had over 100 calls coming in every day. We prayed for the pandemic to end so that people stopped dying and getting weakened by it'*

*– Sanathan Selvan, Relief Riders, Hyderabad*



## WHAT NEXT?

The Hyderabad chapter of Bicycle Mayors was formed during the covid era. The work of Relief Riders has been expanded to form the 'Hyderabad Green Army' which works on cleaning of lakes, and awareness campaigns on dangers of using plastic etc.

However, the Bicycle Mayors of Hyderabad have a long-term vision in place for the city of Hyderabad. They call it Mission 5030 – which means by 2030, all citizens of Hyderabad should use cycle, or walk or use public transport for 50 percent of their travel (for distances less than 5 kms).

The pillars for this campaign would be the state government, institutions (like colleges, schools and companies), communities, media and NGOs.

Santhana explains, "The state government is one of the most important pillars we want to engage with and they need to take the needs of pedestrians and cyclists into account in their plans. Development is not all about building flyovers.

The bicycle mayors are looking at three 'Es' to engage with them – education, enforcement and engineering. They plan to carry this out by:



- educating the Regional Transport Authority (RTA) on the importance of bicycles and pedestrians.
- Advocating for enforcement of laws for drunken and rash driving to ensure safety for cyclists
- Working with the government to create comprehensive cycling networks, rather than disjointed cycling lanes.

With institutions the Bicycle Mayors have already formed groups called 'Cycling Angels' to build and grow the tribe of 'fitness cyclists' and then encourage them to use cycle for their daily commute as well. "We conduct sessions in institutions to encourage people to use cycles within campuses and also ask companies to provide cycles to their employees for their daily commute," says Santhana.

They already have a community of 10K fitness cyclists, who are being encourage invest in a low-cost bicycle, which they can use for their daily commute. 'We don't want to limit cycling to just a hobby. Ideally, we would like to implement the concept of 15-minute-city in Hyderabad. It is a residential urban concept in which most daily necessities can be accomplished by either walking or cycling from residents' homes,' says Santhan

Besides the fitness cyclists, there is a large chunk of population that uses the bicycle for daily commute – the livelihood cyclists. They are invisible and unaccounted for. They need more encouragement to use bicycles more often. The Bicycle Mayors of Hyderabad started Project Diya to empower these community members. 'We refurbished old cycles and distributed them among needy communities,' says Santhan, who now plans to get corporate help for scaling up the programme.

For Blurb: 'Development is seen as flyovers only, but for holistic development, the governemnt needs to take into account the needs of pedestrians, cyclists and public transport users too.' – Santhana Selvan



# WASTE WARRIORS DEHRADUN

## HOW IT STARTED

**Waste Warriors was founded by Jodie Underhill and Tashi Pareek in 2012 as a registered society. Jodie formed a voluntary group called 'Mountain Cleaners' to organise clean-ups and waste collection at and from Triund, a waste-stricken mountain camp, located a four-hour hike (approx. 9 km) from McLeod Ganj.**

Today, Waste Warriors is an integrated solid waste management organisation, with active projects in Dehradun, Dharamshala, Rishikesh, and around Corbett and Govind National Parks. They have direct action programmes on community engagement, awareness-raising, clean-ups and area transformations, dry waste collection and aggregation, basic in-



infrastructure development, waste worker upliftment, and partnerships with government bodies. The society is governed by a board and is led by CEO Vishal and various CSR/EPR programs are led by program leads.

## **CHALLENGES THAT NEEDED TO BE ADDRESSED**

With the massive negative impact and spread of COVID-19, the Waste Warriors team focused on communities of informal waste pickers, low-income sanitation workers, as well as daily wage earners not in the waste sector. These families and their breadwinners were hit very hard by this crisis and during the months of the lockdown in 2020 and 2021. The waste-pickers rely heavily on basic income earned from daily wages or sale of recyclables. Their risk of contracting COVID-19 from waste is high.

‘For all the waste-workers, who we knew through surveys and direct engagements, as well as the countless ones and daily wage earners who we haven’t yet surveyed or engaged, staying at home means no daily income, little food, and worsening hygiene,’ says Naveen Sadana, lead outreach and advocacy, Waste Warriors.

## **WHAT THEY DID**

The Waste warriors thus reached out to some of the most vulnerable families in Dehradun, Rishikesh, Dharamshala and Ramnager with daily essentials. The team’s primary focus was on the procurement, packing, and distribution of dry food ration kits so that waste workers and those in need have their basic necessities of food met during the lockdown months. The ration kits contained rice, flour, pulses, sugar, salt, refined oil, spices, and basic vegetables like potato and onion, all of which lasted for one week for a family of four. They repeated the distributions for those in need, and were in touch with the team through their distribution database.

Waste Warriors partnered with the local authorities including police department, municipal corporation, district magistrate, and others, with most distributions carried out at police chowkis.

In 2020, the Waste Warriors used their distribution database to verify bank accounts in order to disburse direct cash deposits of ₹5,000 for those in need. They raised ₹13 lakh from 487 donors to help 5200 people, which included about 2,500 safai karamcharis

However, in 2021, the focus area shifted to procurement and distribution

of sanitation and hygiene kits, as well as basic medicines. This was done either through medical camps with doctors or directly along with the ration kits.

*'Initially, we had just one pick-up truck in Dehradun to conduct our distribution efforts. So procuring packing, transportation and distribution of relief kits was a challenge. But over a period of time, we developed mechanisms to streamline work and carry out our relief work'*

*– Naveen Sadana, lead, outreach and advocacy, Waste Warriors*

## IN THE LONG TERM

The Waste Warriors have been in touch with the safai karamchaaris they had engaged with during COVID. A dedicated cell is liaising with government departments to connect the safai workers to schemes like MGNERGA, Pradhan Mantri Jeewan Jyoti Yojana and Pradhan Mantri Awas Yojana etc. The team also works with National Skill Development Corporation (NSDC) to get Shram Cards for the workers.

Besides this, the Waste Warriors have started the work of solid waste management in some of the villages of Sahastadhara, and near Kempty Falls, by forming self help groups (SHGs).

They have also started a Swachhata Kendra or Material Recovery Facility (MRFs) for segregating waste in Dehradun, giving employment to 15 safai workers. Another MRF is being constructed in Himachal Pradesh. 'The idea behind the MRFs is to provide a better livelihood to the safai workers and an opportunity to live with dignity,' says Naveen Sadana.





# SNEHA

**Society for Nutrition Education and Health Action (SNEHA) is a Mumbai-based non-profit organisation founded in 1999 by a team of doctors from public hospitals.**

SNEHA works towards the vision of realizing healthy and safe urban communities in the informal settlements of Mumbai and beyond. The team at SNEHA has adopted a life cycle approach to break the intergenerational cycle of poor health in urban informal settlements, addressing four major areas of public health: maternal and new-born health; child health and nutrition; empowerment; health and sexuality of adolescents, prevention of violence against women and children.

The organisation has been working in partnership with the community and the public systems to improve health and nutrition indicators of women, adolescents and children living in the most vulnerable urban informal settlements.

The team believes that to improve urban health standards, one must target both care seekers and care providers. Thus, SNEHA works with urban slum communities to empower women and their communities to be catalysts of change in their own right. SNEHA also collaborates with existing public

health, nutrition, and legal systems to strengthen the quality of services.

## CHALLENGES THAT NEEDED TO BE ADDRESSED

SNEHA conducted a Community needs assessment in May/June 2020 to understand the pandemic-related challenges in the communities they worked. The major challenge they identified during the first and second wave, was the loss of jobs/livelihood. A majority of the communities they worked with comprised daily wage earners. During both the waves loss of income was prevalent. SNEHA's survey showed that 85 percent of households reported a loss of wages/unemployment by the primary earning member.

**Food insecurity:** The Government's Public Distribution System (PDS) system took some time to distribute food in the communities and till then with no income the communities found it difficult to purchase food. There were also many instances where people did not have the required ID or ration cards and were not eligible to collect rations from the PDS.

**Education gap:** Students were missing out on school/college as they did not have gadgets to access classes online. Many of the families only had one smartphone which the father would keep with him and therefore the children would miss classes.

**Vaccine hesitancy:** SNEHA along with other NGOs conducted a vaccine hesitancy survey in May-June 2021, which showed that 37% of community members were not willing or not sure of getting the vaccine. The reasons included worries about side effects, lack of trust in vaccines, and lack of family support (the last especially for women and youth)

**Violence against women and children:** Social isolation, confinement, and financial stress during the first lockdown led to an increase in violence against women and children. This seemed like an opportunistic infection that emerged in the conditions resulting from the pandemic. The National Commission for Women (NCW), which receives complaints from across the country, recorded a more than twofold rise in gender-based violence. The total complaints from women rose from 116 in the first week of March, to 257 in the final week. Complaints of rape or attempted rape rose sharply from two to 13, while cases of domestic violence increased from 30 to 69 over the same period. Simultaneously, there was an almost threefold increase in police non-response to women's complaints, with the NCW receiving 16 complaints on the issue compared to six earlier, as the police were busy enforcing the lockdown to curb the spread of COVID-19. Women

have generally reported that they are experiencing tremendous stress due to restricted mobility, and not being able to connect and share their daily lives with other women, increase in housework and caring for family members, managing economic resources sparingly, and bearing the burden of keeping family members happy.

They have said that in normal situations they had learnt to deal with domestic violence situations through positive and active coping strategies like venting in front of their friends and other women in their social network, making use of emotional support, positive reframing of their situation and calling on religion and humour. The COVID-19 situation has set them many steps back as they find it hard to use these coping strategies.

## WHAT THEY DID

Support to Survivors of Violence: SNEHA has been helping victims of violence since 2000. As the response to the pandemic unfolded, the programme moved counselling and crisis intervention services online. Existing helplines were augmented and survivors of violence could call or email counselling centres for assistance. The number of emails they received went up from 10 to 56 from Mid-April to Mid March 2020, while the calls went down from 100 to 56. Survivors found it difficult to call, especially when the abusive family members were at home sharing the same space.

A cadre of 300 volunteers circulated their contact details in communities. They also contacted their existing clients and offered to provide follow-up telephonically. As part of a long-term intervention process, SNEHA counsellors have managed to do the follow-up for 1,441 clients from mid-March to mid-April 2020. The SNEHA counsellors are providing mental health counselling and addressing the concerns of many women who have reported despair, anxiety, and suicidal ideation about the situation they are in. At the same time, SNEHA's volunteers are in touch with women in their neighbourhood and are in a position to provide emotional support, intervene with families and link them with the police in crisis situations.

**Food distribution:** To address acute food insecurity, SNEHA distributed rations to needy families, who were unable to access the PDS system. They worked with Public Distribution System to map ration shops in our coverage areas, provided information to families on accessing PDS, and helped families with no ration cards to access free food grains under emergency PDS schemes. During the first wave, they distributed fruit



and vegetable boxes in containment zones of Dharavi, one of the initial epicenters of the COVID-19 outbreak in Mumbai.

**Awareness generation:** SNEHA conducted comprehensive awareness generation on vaccination through IEC materials, tele-calls/home visits, group meetings, public announcements in the community, auto awareness drives, etc. They trained their staff, frontline workers, and community volunteers about how they could address vaccine hesitancy. Besides this, SNEHA also partnered with private players and the Municipal Corporations to mobilize community members for large-scale COVID-19 vaccination drives, which are still ongoing.

**Online Education:** SNEHA started a smartphone library in the communities where their youth volunteers deposited smartphones, and students borrowed and returned the phones as and when required to access their online school, college, or SNEHA's sessions on health. A register is being maintained to schedule the borrowing and track usage of the phones.

*'Over the years, SNEHA has formed a large base of trained community volunteers. They were our 'eyes and ears' to what is happening in the communities. They rose to the challenge of sharing information in the communities on COVID-19 precautions, health and nutrition, and helping with the distribution of rations.'*

*– Dr Nayreen Daruwala, SNEHA*



# TURN YOUR CONCERN INTO ACTION - INDIA AGAINST CORONA

## HOW IT STARTED

Mohit and Sanchi were pursuing their MBA, when they decided to turn their concern into action. TYCIA or Turn Your Concern Into Action was founded by these two college friends in 2011. They had come across undocumented children, who played and worked on the streets of their neighbourhood in Delhi. Mohit and Sanchi decided to get these children to school, but were utterly disappointed when both government and private schools could not provide any solutions. That's when TYCIA's first project, 'Pathshala' was born. Since then it has contributed to offering formal education to 103 children.



**Training tribal farmers, bridge schooling,  
educational solutions for the incarcerated youth**

**in Tihar Prison are some of the many projects TYCIA has undertaken over the years. Their core team of 11 members are driven by the mantra: Inclusive and equitable quality education and lifelong learning opportunities for all is the way to a fair and equal society.**

## **CHALLENGES THAT NEEDED TO ADDRESSED**

Soon after the first lockdown in 2020, the team at TYCIA quickly identified the issues that needed to be addressed. Their prior experience in conducting relief operations during the Nepal Earthquake and Muzaffarnagar riots helped. In such a situation, they needed to have eyes, ears, and hands on the ground to get credible information.

They conducted a thorough study of the issues on-ground and started their work by providing immediate relief to vulnerable groups – poor communities and frontline workers. The second wave of COVID saw their work on procuring oxygen concentrators etc. The organisation has creatively addressed issues of immediate aid, and vaccine hesitancy, besides working out long-term solutions for small business owners in Delhi-NCR region. They have also tried to ensure the education of underprivileged children in Delhi throughout the lockdown.

## **WHAT THEY DID**

**COVID Relief Work:** TYCIA assessed the ground situation to curate their interventions. They helped form 'India Against Corona' – a group of volunteers, who started as an informal WhatsApp group and have now reached almost over 150 members. The idea was to urgently fill the food gap created due to the COVID crisis amongst the vulnerable sections of our society. The group identified people, who need food and aid and then reached out to serve them.

**Auto Ambulances:** TYCIA operationalised a fleet of 30 auto-ambulances 24X7 in Delhi in collaboration with the Delhi state government. The ambulances provided free rides to the hospital for moderately ill patients who did not have access to other transportation. The auto-ambulances were fully sanitized and the drivers worked in full PPE gear



whenever transporting COVID Patients. Whenever idle, auto-ambulances also assisted in the transportation of elderly and immunocompromised individuals, and the delivery of ration kits.

**Vaccination awareness and facilitation:** When the government started the vaccination, hesitancy was at its peak. TYCIA thus started two initiatives to create awareness about vaccination, besides facilitating registrations and arranging for transportation to vaccine camps.

For the awareness campaign, lasting from June 1st to July 15th, 2021, TYCIA engaged local radio programming interviewing experts on vaccination, developing IEC materials. As a part of this campaign, India Against Corona (volunteer group) also developed Vaxbot, an interactive WhatsApp Bot that answers frequently asked questions on vaccination in English and Hindi, and can even assist in registration.

Similar to auto-ambulances, TYCIA started 'Vaccine Express' which was a fleet of modified local transportation, which drove from home to home in communities at risk, busting myths and registering as many individuals for the vaccine as possible. Each modified transportation vehicle is outfitted with a tablet, and these new vehicles combined will be able to register up to 3500+ people in a week.

**Support to frontline workers and hospitals:** At the beginning of the pandemic, during the first wave, there was an unprecedented rise in demand of PPE kits and masks. TYCIA distributed PPE kits and masks to not just the frontline workers, but also to the patients and their relatives who were visiting the hospitals. Besides, they partnered with government hospitals in order to provide trained human resources to assist their overburdened doctors and nurses. At the peak of the pandemic in Delhi, TYCIA placed 20+ frontline paid staff at GIMS in Noida LNJP hospital, Delhi and COVID Care Centre at Ramleela Maidan, Delhi who assisted the registration of over 8000+ patients and rendered other backend support.

**Oxygen support:** When the country gasped for oxygen, during the deadly second wave of COVID, TYCIA procured around 172 oxygen concentrators which have been circulated throughout the homes of patients in need and delivered to makeshift COVID Care facilities in Delhi, Haryana, Uttar Pradesh, Bihar, Jharkhand, Madhya Pradesh, Gujarat, and Assam. An oxygen plant was installed at a government hospital in Delhi with a capacity to serve critically ill patients at the hospital with constant supply of oxygen to 25-30 beds. In the long run, the oxygen plant will support 750-1,000 patients a year.

**Diaspora support:** TYCIA has been able to create a database of over 200+ registered doctors, nurses, and therapists living outside India, who have volunteered their time to consult virtually with the caregivers of the Indian patients in their homes, at no cost.

## LONG TERM SUPPORT

The Pandemic is still not over. TYCIA's team is continuously monitoring and assessing the situation. Apart from providing immediate relief to the communities, TYCIA has long term programmes to support them. A project called 'Saksham' provided direct money to street vendors, and helped them restart their business after the lockdown. These vendors had consumed all their savings during the lockdown and were struggling to start over.

The team also found a way to help students in 'Pathshala'— the school run by TYCIA in Dwarka, for children from underserved communities. Pathshala uses the worksheet model, where teachers physically handover the worksheets to the students in their homes and students then work on them and submit them. TYCIA will soon be working out a way to expand their education programme in urban areas.



# GREENPEACE INDIA

## HOW IT STARTED

Greenpeace started in 1971 with a small group of volunteers organising a music concert to raise funds to sail a boat from Vancouver to Amchitka to protest against US militarism and the testing of nuclear weapons. The tests went ahead but the protests gave birth to a new idea – Greenpeace.

45 years on, Greenpeace has a presence in over 55 countries around the world. Greenpeace India was founded in 2001. The initial campaigns to stop western companies using India as a dumping ground for toxic waste (1995), the iconic hot air balloon protest near the Taj Mahal (1998), and the campaign against toxic ship-breaking in Gujarat, gave Greenpeace India, the momentum to get registered in India by May 2001.

**Over the years, Greenpeace India has run several successful campaigns for clean and safe energy, safe food, and against toxic waste. From time to time, Greenpeace India has helped communities during humanitarian crises as well.**



## ISSUES ADDRESSED

The Covid-19 pandemic in India was associated with images of migrant labourers walking long distances to their hometowns as the country was shut overnight. Several groups within the civil society worked towards providing them relief – Greenpeace India was one of them.

fell into poverty in 2020. Unexpected job loss, forced 63% of India's informal workers to survive on just two meals a day. Together with sustainable farmers and other allies, Greenpeace India started 'Circles of Solidarity', to support vulnerable families, who largely work in the unorganised sector as helpers in homes, beauty parlours, small shops, as daily wage construction workers, barbers, cooks, dhobis, autorickshaw drivers, rickshaw pullers, etc. A majority of these labourers were migrants from Bihar, West Bengal, Northeastern states, UP, MP and were left to fend for themselves without any employment options during the pandemic.

## WHAT THEY DID

Despite facing the lockdown, the wrath of climate change, and other obstacles, sustainable farmers rose as heroes. Greenpeace India along with its allies connected these heroes from rural areas to the vulnerable communities in Delhi, Bengaluru and Chennai – creating a 'Circle of Solidarity'

**Immediate Relief:** The initiative started in 2020, during the lockdown. Since then, in association with their allies, Sahaja Organics, Cividep and Organic Farmers Market, Greenpeace India was able to procure ration kits from organic farmers in Delhi-NCR and Karnataka. Over 210 families from Bangalore's Munnade and Garment Labour Union communities, and 200 families from Tamil Nadu's marginalised Irular & Narikuravar tribe received these kits.

In Delhi, Greenpeace tied up with Urban Kyari at Palla Bakhtawarpur village to package dry ration kits to be distributed to the urban poor Zamrudpur – a slum in Delhi. Their on-ground partner, Samadhaan Abhiyaan was able to identify 470 families in the area, which needed immediate assistance.

**Art therapy for mental wellness:** Mental health is hardly a concern, when one is fending for food, sleeping on an empty stomach. Families faced an intense battle; on one hand, there was the possibility of a Covid-19 infection and on the other hand, there was the reality of a hunger crisis.

With mental health declining and anxiety on the rise, Greenpeace organized online art therapy sessions to help communities heal and develop a positive mindset to sail through the crisis.

**Procuring Oxygen Concentrators during the second wave:** As hospitals struggled with falling oxygen supplies, Greenpeace East Asia sent oxygen concentrators to some of the most affected areas in India, as part of our global Covid-19 response work. Greenpeace India facilitated and coordinated the distribution of 30 oxygen concentrators to rural Telangana along with 30 each to Karnataka and Tamil Nadu.

## IN THE LONG RUN:

Besides immediate relief, Greenpeace India is looking at a long-term engagement with the communities, looking to create solutions to urban mobility, air pollution and food security.

To address urban mobility and air pollution, the organisation started an initiative called 'Power the Pedal'. The project provides an easier and environmentally friendly option to the urban poor, for navigating through their cities. Everyday, India's urban poor wrestle with multiple mobility challenges daily, from being packed into crowded transport to walking long distances, navigating traffic and spending most of their salary on transport. The needs of millions of low-wage earners in cities are neglected as private vehicles occupy the streets. Through Power The Pedal project, women labourers in Bengaluru and Delhi are choosing the cycle as their own safe, affordable, independent and sustainable mode of transport.

Greenpeace India has been working with a leading cycle manufacturer to develop customised cycles for these women. In the first phase of the campaign, 500 cycles will be distributed to women engaged in domestic work in Delhi and garment factory labourers in Bangalore.

The Circles of Solidarity would continue to connect them with organic food farmers from neighbouring villages. The programme will serve two purposes. Not only will it help the urban poor access safe food at a cheaper rate, but will also create a sustainable livelihood for farmers making them nutritionally secure in rural areas. Affluent urban communities will form the third crucial link to the circle by creating a financial cushion for these two communities. While organic farmers will be able to sell their produce at market price, the urban poor will be able to access safe food at a subsidised rate.



# IGSSS

## HOW IT STARTED

Indo-Global Social Service Society (IGSSS), established in 1960, a non-profit organization working with the mandate for a humane social order based on truth, justice, freedom and equity. The organisation is supporting quality development programmes across India to empower individuals and communities belonging to the poor, marginalised and vulnerable sections of the society with special focus on women and children.

At present IGSSS has an outreach with 2,04,078 families in 45 districts and 13 states across the country, having thematic focus on sustainable livelihood, climate change adaptation, urban poverty reduction, disaster risk reduction. Gender & youth are underlining theme across all the interventions. The organization has been awarded by India Today Group for "Best NGO offering health services during COVID 19 in this year".

## CHALLENGES THAT NEEDED TO BE ADDRESSED

A strict lock-down was common for both the waves of pandemic COVID 19, imposed across the country. All types of inter and intra-state mobility



became restricted with strong patrolling of state administrations. Majority of the infection cases and casualty were detected either from the state capitals or other business cities of the states. The strict restrictions in mobility led to a crisis in livelihood and food security of informal sector workers and other marginalized and weaker sections. Sudden stop of earning, little or no savings were spent rapidly on daily household expenses. The government provided relief rations for managing the crisis, but this was not adequate and available only for the PDS or id card-holders. For families with no ID or ration cards, relief from local NGOs/ CBOs were the only source of ration.

The relief distributions too were impacted, with the sudden surge in the number of positive cases. This amplified the food scarcity for migrant families in urban areas. In a few project areas, some additional crisis was reported due to inadequate supply of PDS, hoarding and price upsurge of ration items etc. Apart from this, extreme crisis and limited mobility led to violence and trauma within the families members, especially in women.

## WHAT THEY DID

The IGSSS team reached 18 lakh people in 20 states and two Union Territories accross India.

IGSSS responded to the crisis by building capacities of the project staff team and selected local volunteers on the Humanitarian Response framework for undertaking relief response and emergency management interventions.

**Immediate Relief:** For urban poor communities, IGSSS formed and strengthened basti youth task-force team under Urban Disaster Risk Reduction pilot. This task force helped providing emergency services during lockdown, which included distribution of ration and health & sanitization kits; drives for sanitization, cleanliness and sensitization; vaccination camps etc. During both the waves, IGSSS distributed over 60,000 hygiene kits, over 1 lakh food kits. The second wave saw distribution of medical consumables such as oxygen concentrators, BiPAP machines and pulse oxymeters.

**Policy Advocacy:** IGSSS undertook research and studies focusing on issues faced by migrant labourers during the crisis.

**Partnerships:** The pandemic also saw the civil society coming together to form alliances mitigate the crisis. IGSSS too forged partnerships with local

CSOs and worked with local administration and policy makers for policy realignments and course correction. The team liaised with local duty bearers and connected communities to schemes and entitlements during the pandemic.

**Livelihoods:** Promotion of alternative livelihood through enterprise and entrepreneurship. The livelihood issues were highly visible in the 2nd phase, women were eager for livelihood support. Due to this livelihood support to the marginalized community became prioritized in phase II. Over 20,000 people were provided livelihood support and over 8,000 people were provided with direct cash assistance.

**Helplines:** IGSSS set up helpline numbers, which provided relevant information in times of distress. In several cases, the team provides psychosocial counselling to the traumatized community members. Over 300 migrant workers were provided safe transport to their native places during the first lockdown.

**Vaccination drives:** Vaccination drives were prioritized in the second wave. The team undertook sensitization drives to fight hesitancy and facilitate vaccinations for over 60,000 people across India.



# HUMANITARIAN AID INTERNATIONAL

## HOW IT STARTED

HAI is an Indian CSO, registered under the Indian Trusts Act and the FCRA. HAI has been founded by a team of Indian humanitarian and development professionals with a collective national and global experience of over 300 years. While, as of now, HAI's activities are exclusively confined to India, it strives to expand its work outside India too, particularly to complement our government's bilateral support to developing and least developed countries on poverty alleviation and humanitarian programmes.

The models of development and humanitarian architecture have largely been defined by the western world for the developing world. HAI aspires to evolve development and humanitarian paradigms, which though remains informed of western architecture, but remains independent of it to promote and strengthen localised humanitarian and development model, leading to an efficient South-South cooperation.





## **HAI works on four thematic areas, Humanitarian response, Climate change & adaptation, Disaster risk reduction, Humanitarian advocacy.**

While the activities under the first three are exclusively confined to India, HAI has emerged as a strong actor, on a global stage, in favour of local organisations across the global South. Operational since 2016, HAI has been able to work in several states including Odisha, Assam, Maharashtra, Karnataka, Kerala, Uttarakhand, Delhi-NCR and Uttar Pradesh.

### **ISSUES THAT WERE ADDRESSED**

HAI paid special attention towards disaster risk reduction after the sudden lockdown announcement by the Government of India. The team reached out to the most affected, marginalized population, and families of the informal sector. HAI, especially, catered to the daily wage earners and the hardest hit refugee communities in Delhi, who lost their source of earnings which further pushed them to face the challenges of food insecurity.

There are approximately 400 Pakistani Hindu Communities spread across the country. HAI has been operational in the Majnu ka Tila camp, Delhi since 2018 and the Signature Bridge camp since 2019, covering the entire population of approximately 230 families, helping them get legal aid, education for their children and helping them access basic amenities and medical aid. These refugees were one of the hardest-hit communities in Delhi and as soon as the lockdown started, the HAI made sure these communities were food and income-secure.

HAI also supported state governments and police assess the situation in COVID hotspots through drones.

### **WHAT THEY DID:**

HAI was one of the early responders to the pandemic. They used innovative and unconventional methods to continue reaching the people in need.

**Immediate Relief:** When the first lockdown was announced on March 24, HAI suspended all its ongoing programmes and started its COVID-19 relief work within two days and focussed on providing immediate relief to vulnerable communities. During the first wave, HAI distributed cooked

food to over 1,42,000 people, including migrants travelling in Shramik trains across the country. Their team also identified 1,501 families, including 192 refugee families, who were provided with dry ration sufficient for 1-2 months

Over 1,700 Sanitation and ASHA workers from Delhi, Gurugram and Bengaluru were given Personal Protective Apparel (PPA) kits, and 82 auto/taxi drivers were helped in Bengaluru for COVID-19 safety retrofitting to make their auto/taxi COVID-19 safe. A helpline was set up and during the first wave, HAI received more than 300 distress calls from food-insecure families and arranged for at least two weeks food, milk, medicines and necessary provisions in different states.

**Drones for Humanity:** Drone for Humanity (DfH) is an inclusive platform of drone owners, registered drone pilots, artificial Intelligence data analysts, humanitarian professionals, organisations, and institutions for actionable interventions. The platform focuses on preparedness and mitigation measures, not only during humanitarian crises but also during normal circumstances.

When the COVID pandemic broke out, the Drones for Humanity, literally rose to the occasion to conduct surveillance of COVID hotspots and quarantine centres. Some of the drones were also retrofitted with high decibel PA systems, which were used to spread public safety awareness about the risks of COVID-19. DfH worked with state governments and police in Delhi; Cuttack and Bhubaneswar in Odisha; along with Bangalore and other hotspots in Karnataka.

**Oxygen Banks:** During the second wave of COVID, HAI stepped in to establish oxygen banks in six states – Delhi, Uttar Pradesh, Karnataka, Maharashtra, Odisha, and Assam. A COVID patient could get an oxygen concentrator for 7 days, if they were able to provide a valid prescription.

## IN THE LONG RUN

**Livelihoods:** HAI is working with communities to help them become self-reliant. During the first wave, they supported 40 women in Bengaluru to start income-generating activities. Besides this, over 300 daily wage earners across the country were linked with different government schemes including the AYUSHMAN Bharat scheme to access healthcare. 121 daily wage earners were provided with health screening and certification to help them re-enter the job market.

**For Refugees:** Apart from providing immediate relief to the refugee communities in Delhi, HAI continued to support them. They provided them legal aid, and remedial education for their children to ensure age-appropriate learning outcomes. The refugee camp at Signature Bridge, Delhi was powered through solar electricity during the pandemic. Also thanks to HAI's petition to the NCPCR, a water tanker with potable water is now available at the camp.







# SJR REDWOODS

## HOW IT STARTED

Situated near the newly-rejuvenated lower Ambelipura lake, the SJR Redwoods, Bangalore looked no different from any other residential complex, with the usual ornamental plants. The COVID Pandemic however, created a unique opportunity for the residents. The members of the Apartment Garden Committee changed and the newly-appointed members, Kavitha Kishore and Sameer Shisodia, who are both nature enthusiasts took the initiative to create a 'Food Forest' within the premises of their apartment complex. The management committee of the complex liked the idea. With most of the residents working from home, they were able to interact more with the neighbours and ensure active participation. The 2-acre common land now boasts of hundreds of varieties of fruits, flowers and herbs teeming with life.

## ISSUES THAT WERE ADDRESSED

The residents of SJR Redwoods have proven that one can live in harmony with nature, even in an urban settlement. In 2019, the apartment complex had the usual landscaping of ornamental plants. A lot of money was being spent on the disposal of the garden waste (approximately 6 tonnes a

year), which was being sent to landfills. There was excessive spraying of chemicals, which deteriorated soil health. "We were living next to the lower Ambelipura Lake. Which was rejuvenated as a part of a citizen's initiative. So we thought it was a good idea to use those learnings and create a food forest within the complex," says Sameer Shisodia.

## WHAT THEY DID

"We proposed soil health, biodiversity-friendly approaches for "wilder" planting, including food forests, as well as composting," says Shisodia. These measures helped the residents save about 1.5 lakh a year and do away with chemical sprays completely. The food forest now has several fruiting varieties such as papaya, banana, guava, custard apple, mango, jamun, and cherry, along with palms, bamboo, and sugarcane.

"We produced fruit and herbs for our consumption, creating a better habitat for a variety of life around. We did a few workshops, got many volunteers to drive various aspects, oriented staff towards more ecology-friendliness, started a nursery and shared produce and saplings widely," says Shisodia.

With a zero budget model, the garden committee at SJR Redwoods engaged the residents through multiple workshops to create awareness. No money was spent on getting seedlings or seeds. Plants were propagated through saplings from trees that were already there in the complex. Seeds were procured from the fruits and vegetables that were consumed in the homes everyday. The residents were trained to create plant nurseries and seed banks.

# IN CONCLUSION: CHALLENGES FACED AND LESSONS LEARNED

COVID paralysed the entire ecosystem of urban areas. While it impacted each one of us, the worst affected were the vulnerable migrant populations in the cities of India. But humans have this amazing ability to emerge resilient after every crisis. The pandemic tested us, and thanks to the extraordinary work of some ordinary people we all dared to hope.

**Non-profit organisations continued to operate despite a funds crunch brought about by competition from the PM Cares Fund and the new FCRA amendments that were introduced in October 2020. Taking risks, these extraordinary people trudged on.**

The stories featured in this report are about interventions that have not only provided immediate relief but have also looked at the long-term needs of communities, which make them resilient. Besides catering to Interventions – like literacy and skill-building programmes will go a long way in building resilience in such communities.

## **DISASTER RESPONSE SHOULD NOT BE REACTIVE**

“We live in an age, where one needs to foresee the situation and build resilience in communities that are vulnerable,” says Sudhanshu Shekhar Singh of Humanitarian Aid International. This is the reason why Humanitarian Aid International (HAI) continues to work with refugee communities in Delhi to make sure they are not left out in any future crises.

Similarly, in the long-term, Greenpeace India envisions creating a circle of solidarity, through multiple interventions that connect in jhuggi clusters of



cities to organic farmers in villages. They empower women in urban areas by distributing bicycles and ensuring food security. And on the other hand, rural communities are benefiting through organic farming.

TYCIA Foundation, on the other hand, is closing the education gap created by the pandemic. And SNEHA has made the best use of its wide volunteer base to reach out to survivors of domestic violence, which was at its peak during the pandemic. The Waste Warriors of Uttarakhand reached out to the sanitation workers of the state with relief kits, are now working to get basic identification and documentation proofs for waste workers, which would allow them to access government relief schemes and services. Without these, they are highly vulnerable to be excluded from such relief efforts.

## **THE GENDER LENS**

There is a dire need for a holistic and intersectoral response to community needs in times of disasters. Disasters have a different impact on men, women, boys, and girls. Dr Nayreen Daruwalla, Programme Director, prevention of violence against women and children at SNEHA, who witnessed a spike in issues of domestic violence strongly advocates a well-thought-through disaster response plan. "Decision-makers must be aware of the gendered and intersectional effects of interventions and must include survivors of domestic violence in the planning and implementation of public health strategies," she says.

## **CHANGING MINDSETS TAKES TIME**

A very unique citizen's initiative to have been featured in this report is the Food Forest of SJR Redwoods Bengaluru. The residents of the apartment complex decided to utilise their time at home to preserve biodiversity in their apartment common area. The two-acre forest is now teeming with life – with several species of fruiting trees, herbs, insects, and even snakes.

"Adoption of ideas is a slow process, and conventional thinking and goals need to be addressed through education, participation, etc, and will take multiple years of effort! It helps to have decision making and ideas driven by a larger group of stakeholders, and make it a shared learning experience," says Sameer Shisodia, a member of the garden committee at SJR Redwoods.

The initiative has given rise to a community that appreciates and respects nature. "We also have snakes in our complex, but the children have even learned not to be scared of them. We are learning to live in harmony with nature," says Sameer Shisodia, a member of the garden committee at SJR Redwoods.

## **CONTINUOUS ASSESSMENT OF THE SITUATION**

Mohit of TYCIA Foundation tells us that the only way to make initiatives more impactful is to assess the situation continuously. "Eyes and ears should always be open. The situation on the ground should be assessed continuously for creating interventions that can transform lives," says Mohit.

For SNEHA, their 'eyes and ears' were the several community volunteers they had trained over the years. "They rose to the challenge of sharing information in the communities on COVID-19 precautions, health and nutrition, and helping with the distribution of rations," says Dr Nayreen Daruwalla, programme director, prevention of violence against women and children.

## **STAYING CONNECTED TO THE COMMUNITY**

An important lesson SNEHA learned was to encourage community stewardship for any health emergency. For this, continuous communication and coordination with the community members were important. With social distancing, it became very important to effectively use, technology to augment in-person interventions and to understand the needs and perspectives of community members. Through the use of technology, SNEHA moved their interventions online, with health and safety counselling through telecalls, video-calls, WhatsApp groups with community volunteers, etc. "At the outset of the pandemic and resultant lockdowns, the first challenge was to stay connected with our communities and our public system partners," says Dr Daruwalla.

With the loss of jobs and no way to sustain themselves in the city, a lot of people moved to the villages and SNEHA faced challenges in staying connected with these families. In such cases, the programme teams tried their best to be in touch with them via phone calls.

## **VOICE OF THE MARGINALISED NEEDS TO HEARD**

There is a need for urban planning that reduces vulnerability of the marginalised, enables their voice in decision-making, creates localised livelihood opportunities less prone to lockdowns and system collapses.

## **TIME MANAGEMENT**

The Hyderabad Chapter of Relief Riders juggled their nine to six jobs to help out citizens in distress. While they focused on their jobs from 9 am to 6 pm. Their relief work started from 6 am to 9 am in the morning, and then 6 pm to 10 pm in the evening.

## **DON'T GIVE UP AND YOU WILL FIND A SOLUTION**

In 2020, the key challenges the Waste Warriors faced during our relief efforts included procurement of large quantities of dry food rations, packing of relief kits, and transportation of these kits to the areas of need. We only had one pick-up truck in Dehradun to conduct our distribution efforts for the communities in need.


The lockdown restrictions in Dharamshala also limited our staff movement, which caused delays in procuring material, transportation, and packing the relief kits. Over time, they were able to overcome these challenges through better coordination. The district authorities supported them in procurement. A small team was created to pack ration kits and a centralised database was created to reach out to as many beneficiaries as possible. All the relief efforts were documented to enable repeated efforts in the same areas, as well as covering areas in need based on the requirement.

## **WORKING IN TANDEM WITH LOCAL AUTHORITIES**

IGSSS has a strong team that specialises in minimizing disaster risks in both rural and urban

project areas. But pandemic was a new and emerging category of disasters altogether. The team learned its lessons from the first wave and





was thus better prepared during the second wave. The first wave was more challenging because of the sudden lockdown imposed by the city administrations. But the team managed because of a good rapport with the local administration and expert leadership.

“Our state-level network of CSOs for emergency response and policy advocacy played a vital role during the pandemic. The team at IGSSS found that in the states in which they were actively implementing interventions, the networks were very active and were able to participate in policy advocacy for overcoming the pandemic,” says Aravind Unni of IGSSS. The organisation thus rejuvenated its CSO networks to enhance its participation in policy advocacy.



## Extraordinary Work of 'Ordinary' People: Beyond Pandemics & Lockdowns

This is a series of documents being brought out by the Vikalp Sangam Core Group, showcasing stories of community resilience in the face of COVID-19 and the lockdowns imposed by the government. Across India, while a vast number of people suffered the consequences of food insecurity, loss of livelihoods, illnesses, and dislocation, several communities have been able to tide over the crises because they have built and sustained strategies of relative self reliance in food, health, livelihoods, governance and other aspects.

### The volumes so far

- **Vol 1 : Extraordinary Work of 'Ordinary' People: Beyond Pandemics and Lockdowns**  
[English](#) - [Graphic Novel](#) - [Hindi](#) - [Gujarati](#) - [Kannada](#) - [Tamil](#) - [Malayalam](#) - [Spanish](#)
- **Vol 2 : Community Forest Rights and the Pandemic: Gram Sabhas Lead the Way**  
[English](#) - [Graphic Novel](#) - [Hindi](#) - [Gujarati](#) - [Spanish](#)
- **Vol 3 : Pandemic Resilience in the Western Himalayas**  
[English](#) - [Tamil](#) - [Spanish](#)
- **Vol 4 : Seeding Hope : Women's Collectives Create Pathways for Change**  
[English](#) - [Telugu](#) - [Hindi](#) - [Gujarati](#) - [Marathi](#) - [Tamil](#)
- **Vol 5 : Youth Stories of Hope, Resilience & Collective Dreaming**  
[English](#) - [Hindi](#) - [Malayalam](#)
- **Vol 6 : Pandemic Resilience in North East India**  
[English](#)

Vikalp Sangam is a platform to bring together movements, groups and individuals working on just, equitable and sustainable pathways to human and ecological well-being. It rejects the current model of development and the structures of inequality and injustice underlying it, and searches for alternatives in practice and vision. About 80 movements and organizations around the country are members of its Core Group (listed below).

For more information please see: <https://www.vikalpsangam.org/about/>

- Action for Community Organisation, Rehabilitation & Development (ACCORD)
- Agragamee
- Alliance for Sustainable and Holistic Agriculture (ASHA)
- Alternative Law Forum (ALF)
- Ashoka Trust for Research in Ecology and the Environment (ATREE)
- Bhoomi College
- Blue Ribbon Movement (BRM)
- Centre for Education & Documentation (CED)
- Centre for Environment Education (CEE)
- Centre for Equity Studies (CES)
- Centre for Financial Accountability (CFA)
- CGNetSwara
- Chalakudyputhura Samrakshana Samithi / River Research Centre
- Chetna
- Dakshin Foundation
- Deccan Development Society (DDS)
- Deer Park
- Development Alternatives (DA)
- Desert Resource Centre (DRC)
- Dharamitra
- Ektha
- EQUATIONS
- Fridays For Future (FFF)
- Gene Campaign
- Goonj
- Greenpeace India
- Health Swaraj Samvaad
- Ideosync
- India and Bharat Together (IABT)
- Jagori Rural
- Kagad Kach Patra Kashtakari Panchayat (KKPKP)
- Kalpavriksh
- Kriti Team
- Ladakh Arts and Media Organisation (LAMO)
- Let India Breathe (LIB)
- Local Futures
- Maadhyam
- Maati
- Mahila Kisan Adhikar Manch (MAKAAM)
- Mahalir Association for Literacy Awareness and Rights (MALAR)
- Movement for Advancing Understanding on Sustainability And Mutuality (MAUSAM)
- Mazdoor Kisan Shakti Sangathan (MKSS)
- National Alliance of People's Movements (NAPM)
- National Campaign for Dalit Human Rights (NCDHR)
- National Coalition for Natural Farming (NCFN)
- Nirangal
- Non-timber Forest Produce Exchange (NTFP-EP)
- North East Network (NEN)
- North East Slow Food and Agrobiodiversity Society (NESFAS)
- People's Resource Centre (PRC)
- Peoples' Science Institute (PSI)
- Pune Zilla Gharkamgar Sanghatana (PZGS)
- reStore
- Revitalising Rainfed Agriculture Network (RRA)
- Rythu Swarajya Vedika
- Sahjeevan
- Sahodaya Trust
- Sambhaavnaa
- Samvedana
- Sangama
- School for Democracy (SfD)
- School for Rural Development and Environment (SRDE)
- Shikshantar
- Snow Leopard Conservancy India Trust (SLC-IT)
- Sikkim Indigenous Lepcha Women's Association (SILWA)
- Social Entrepreneurship Association (SEA)
- Society for the Promotion of Participatory Ecosystem Management (SOPPECOM)
- South Asian Dialogue on Ecological Democracy (SADED)
- Students' Environmental and Cultural Movement of Ladakh (SECMOL)
- Thanal
- The Himalaya Collective
- Timbaktu Collective
- Titli Trust
- Travellers' University
- Tribal Health Initiative (THI)
- URMUL
- Vrikshamitra
- Watershed Support Services and Activities Network (WASAN)
- Youth Alliance
- Yugma Network
- Yuva Ekta Foundation (YEF)
- Dinesh Abrol
- Ovais Sultan Khan
- Sehjo Singh
- Sushma Iyengar

