DEVONSHIRE INITIATIVE | COVID-19 RESPONSE DISCUSSION PAPER

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This document is posted as of April 8th, 2020, and, due to the novel and fluid nature of the COVID-19 outbreak, it reflects our best knowledge at the time of posting. This paper is for informational purposes only and is not intended to be a substitute for professional medical advice, diagnosis, or treatment. It is not meant to replace any official guidance provided by the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), Health Canada, or any other official regulatory body. For any questions and for the latest updates on the status of the COVID-19 outbreak, please seek the advice of your official and local health body.
Executive Summary
Managing the spread, treatment and long-term impacts of the novel coronavirus is a global issue. National, regional and local governments are at the forefront of the response. But NGOs and mining companies are uniquely positioned to work with governments and take a leadership role in addressing COVID-19 responses globally.

The objective of this discussion paper is to share information and about the ways DI members and other organizations in our network are responding to COVID-19 globally and encourage cross-sector collaboration. This discussion paper was developed based on responses to the DI COVID-19 Response Plan Survey, a review of public information as well as one-on-one interviews and focus groups. The DI respects Chatham House Rules. When an organization’s name has been included, the information has been pulled from a public source or the organization has approved it.

This discussion paper includes three main sections. The first section outlines the approach organizations have taken to developing and implementing their response plans. The second focuses on different forms of collaboration. The third section outlines specific ideas and examples to manage key issues related to COVID-19 including:

- Prevention
- Treatment
- Food Security
- Shelter
- Data
- Economic Impacts
- Mental Health
- Social Cohesion and Human Rights

Findings
The impact of and response to COVID-19 is fluid and changing on a daily basis. At the time of writing, the main findings from our review are:

The initial response has focused on employee health and safety
All survey respondents have, or are developing a COVID-19 Response Plan. Immediate responses have focused on health and safety of employees and following government requirements and action. This includes shutting operations, repatriating staff, encouraging physical distances and following quarantine requirements. Following this initial response, mining companies and NGOs are building plans to promote prevention and participate in treatment with employees and host communities/countries.

In the next phase of their response, organizations can leverage or re-purpose their resources
Both mining companies and NGOs have resources and assets that can be used in the COVID-19 responses, including:

- Networks and established relationships with community leaders and members, that can drive information sharing and communication related to COVID-19 prevention and treatment;
- Networks and established relationships with peers and government organizations that can drive a collaborative, coordinated response to COVID-19 in a specific region;
- Logistics and supply chains that can support delivery and access to both health supplies (e.g. sanitizer, food) as well as medical supplies (e.g. masks, PPE etc.);
• Operations and activities that can be retooled or re-purposed to support the COVID-19 response (e.g. health clinics or camps, catering facilities, agricultural programs); and

• Finances and other resources to support local response initiatives.

Co-ordination and collaboration is key
A co-ordinated, transparent, cross-sector response to COVID-19 is required. However, during the initial phase of the response, most cross-sector activity has been ad-hoc. Regional and national governments should co-ordinate the response effort, however mining companies and NGOs can show leadership and encourage a collaborative approach.

Recommendations and Next Steps
No person, company, NGO or government will be unaffected by the impacts of COVID-19. We must all be involved in preventing the virus from spreading, treating people who become infected and rebuilding our social and economic systems when the virus has been controlled.

In order to support a co-ordinated, transparent and cross-sector response mining companies and NGOs should:

1. Connect with governments, peers and organizations from other sectors to co-ordinate your response to COVID-19. If these networks are not established, use industry associations, the Devonshire Initiative, the Canadian Government and media outlets to find relevant contact information and build relationships.

2. Share plans, case studies, data and experiences publicly. Post your organizations response to your website and provide specific contact details for organizations that want to touch base. Be clear about what resources you need and / or have.

3. Leverage your organization’s leadership, reputation and individual relationships to build a cross-sector network. Reinforce best practice and the importance of protecting and respecting human rights.

4. Develop partnerships to contribute to the response effort – leverage your resources and strengths to support organizations and governments that are best placed to lead the response effort locally.
Introduction

1. Context and Objective
Managing the spread of the novel coronavirus, treating people infected with COVID-19 and providing essential services as economies shut down is a global issue. National, regional and local governments are at the forefront of the response. But NGOs and mining companies are uniquely positioned to work with governments and take a leadership role in addressing COVID-19 responses globally. The objective of this discussion paper is to share information, illustrate the ways mining companies and NGOs are responding to COVID-19 globally and encourage cross-sector collaboration.

2. Methodology
The findings in this discussion paper are based on survey responses, interviews, focus groups and a review of public material from DI members as well as other mining companies, NGOs and service providers (e.g. consultants). Some findings are anonymized. Where the participant has approved, or the information was found in the public domain we have included the organizations name and location. This information was collected between March 26th and April 7th, 2020. Many respondents note that at the time of writing this paper they were still in planning and reaction mode. Their efforts will evolve and change as the reality on the ground changes. This paper will be updated as relevant.

3. Regional Differences and Context
The impact and response to COVID-19 varies from country to country and region to region. Some regions are focused on prevention, while others are in the early stages of treatment and a small few are planning to rebuild their economy. Some communities/regions are on complete regulated/militarized lock down (e.g. South Africa and Peru) while others are relying on strong social expectations to self-isolate / social distance (e.g. most parts of Canada) and still other regions are operating under business as usual. There are many contextual factors that influence the ability to manage COVID-19 in a given region as well an organizations response.

- Percentage of population that is immunocompromised (e.g. elderly, high rates of HIV, TB, diabetes and other respiratory diseases).
- Access to health care and health care services (e.g. current clinic capacity, ability to build temporary clinics, access to respirators and PPE).
- Testing capacity, including ability to conduct tests and process results in a timely and safe manner.
- Ability for population to self-isolate and physical distance, including community density, household overcrowding, access to sanitization (e.g. water, hand sanitizer), food and other necessary supplies.
- Accessibility, clarity and relevance of education and sensitization campaigns.
- Recent experience with pandemics and health crisis’.
- Cultural and social practice of mass action and acceptance of government directives.
- Government access to data and ability to ‘trace’ patient’s movement/contact.
- Leadership of government, NGO and private sector, commitment to response.
- Co-ordination and collaboration between sectors, established organizational and individual relationships between organizations and sectors.
Section 1: Response Strategy

There are several interconnected elements that influence an organizations strategy for developing their COVID-19 response.

1. Operations

COVID-19 has impacted the operations of mining companies and NGOs in different ways.

Suspension of operations. Many organizations have shut operations or placed them on care and maintenance in order to promote social distancing and limit the spread of COVID-19. Within both the NGO and mining sector there is a focus on ending all activities that require gathering or movement of people, for example open pit and underground mining, processing (e.g. milling, leaching etc.), camp facilities like cafeterias and gyms, in-office work, in-person training and education programs, in-person provision of services (e.g. health care, legal etc.), and transportation of goods and services. The decision to shut operations was/is made based on:

- Regulatory requirements;
- Vulnerability of employees and community based on elements described above;
- Likelihood operations would increase the spread of COVID-19; and
- Cashflow and access to resources to maintain activities.

Maintaining operations. Some organizations have found ways to maintain operations because they are considered essential. For example, mining operations that support electricity services; essential construction and development programs such as food delivery, shelter and medical services. Others have maintained operations because the government and/or community believe the economic and social impact of suspending operations would have undue social impacts. The Tahltan Nation and Newcrest mining, for instance decided together to keep the Red Chris JV Mine in British Colombia operational (with changes to schedule, health assessments etc.). (Tahltan Central Government , 2020) Still other organizations have maintained operations, or not shut operations entirely because they want to be prepared to be part of the regional response and recovery from COVID-19. Many organizations have moved online. This is more appropriate and relevant for office work and in regions where households have ready access to the internet and resources to support work-from-home scenarios. See Alternative Work Arrangements in the Planning section for more information.

Adapting. A number of NGOs have integrated COVID-19 response programming into their current programs. For example, UNICEF's global response has adapted quickly to include several key elements:

- Strengthening risk communication and community engagement;
- Providing critical medical and WASH supplies and improving;
- Supporting continued access to essential health care services for women, children and vulnerable communities, including case management;
- Supporting access to continuous education, social protection, child protection and GBV services disrupted by the pandemic;
- Data collection and analysis of secondary impacts on children and women.

Full details can be found on the UNICEF Novel COVID-19 Response website.
Amref Health Africa has also shifted programming to train community health workers about COVID-19 prevention. They have developed videos and other resources that are appropriate for the communities in East Africa where they operate, including densely populated communities with limited access to water and wash stations. (Amref Health Africa, 2020)

2. Planning
The mining companies and NGOs surveyed for this discussion paper have completed, or are developing a COVID-19 Response Plan. These plans are not necessarily presented as a written long form plan because they are responsive and adapting so quickly. Many plans include detailed check lists and requirements for the organization as a whole as well as each office / site.

How are they developed?
Most mining companies and larger NGOs have established Crisis Management Protocols, Emergency Response Plans and Business Continuity Plans that set the foundation for their COVID-19 Plan. Some organizations worked with insurance brokers or other emergency response consultants to develop their plan.

Tasks forces. Most organizations used a cross-functional task force with representatives from head office as well as in-country to develop their plan. The task force generally includes representatives from each department. The task force typically reports to a person/people on the senior executive team, who is responsible for sharing information between the executive and board and task force. For example, the COVID-19 taskforce at Kinross reports to the Chief Technology Officer, who is on the senior leadership team. Some organizations, such as Plan Canada, have sub-task forces focused on specific issues (e.g. program activities, communications, logistics fundraising).

The task force holds regular meetings to provide updates on implementations and make required changes to the plan. Some organizations have daily briefings at a corporate / head office level and meet with sites / country offices every 3-4 days.

What do response plans include?
Most organizations have an organization-wide plan and requirements as well as a specific plan for each country office or site. Response plans include the following information:

Expected phases and possible timeline of impacts and organizations responses. Most organizations have identified an early rapid response phase, followed by phases focused on strategic planning, engagement and communication; implementation and response; recovery and rebuilding. Separating into these phases allows for a focused response as well as longer term planning. Plan Canada’s strategy, for example includes 4 phases - Assess, Stabilize, Recover, and Reimagine. These timelines will differ between countries as the spread of COVID-19 is controlled in some countries and increases in others.

Roles and responsibilities. Clear roles and responsibilities are included in the plans, including department specific responsibilities; internal and external communications; implementation and monitoring. Some plans have been clear to differentiate rapid response teams from long term planners. This is especially relevant in regions where there are quarantine orders and planning needs to be done for when those orders are lifted.

Operations Planning. These are decisions related to suspending or adapting operations. This includes corporate wide bans on travel, events, and non-essential in-office work. It also includes decisions to
suspend operations for specific sites or programs. Some mining companies include plans to maintain sites in a state of readiness to restart. Some NGOs have re-directed resources for in-person training programs to developing communications and educational materials. For example, the Canadian Bar Association International Initiatives is adjusting the workplans of the project activities to concentrate on the production of public legal education materials (desk work and working with designers and printers), law reform and legal aid (provision of Lawyers to individual cases).

**Alternative work arrangements and provisions for remote work.** This includes scheduling changes to limit face-to-face interactions and family care requirements (e.g. caring for a sick family member, child care). Kinross has allowed flexible work arrangements to help employees manage family commitments, and is providing access to Human Resources specialists to ensure employees’ needs are being met. UNICEF Canada is also enabling all employees to work flexibly to accommodate childcare needs and providing mental and parental support resources to employees. Alternative work arrangements also include providing access to technological resources (e.g. laptops, internet and network access, conference calls) and online security protocols. One organization has allowed employees to expense $500 to purchase equipment to establish a home office.

**Employee health assessments and medical preparedness.** This includes plans for employee health assessments and screening and is especially relevant for mining operations and development programming that requires community visits. Some organizations have updated their emergency medical preparedness plans to be more focused on the unique issues presented by COVID-19. This includes site/office outbreak plans including isolation plans and on-site isolation facilities.

**Internal and external communications plan.** This includes daily webinars for employees, emails, websites press release, and feedback mechanisms for internal and external stakeholders. Find more in the Communication and Information Sharing section.

**Engagement and collaboration plans with eternal stakeholders.** This includes mapping and identifying key external stakeholder groups and plans for virtual engagement where possible. Find more in the Engagement and Collaboration sections

**Supply chain contingency plans.** COVID-19 has impacted economic systems and supply chains which will impact organizations access to goods and services for their operations as well as their response to COVID-19. Many organizations are analyzing their supply chains to determine what goods and services are at risk of being disrupted. Kinross is working with its critical suppliers to minimize potential supply chain disruptions. Sites and regions continue to review all key consumables and critical item supply chains in order to assess potential disruptions, and to identify mitigating actions, including alternative sources of supply. The company is implementing contingency and response plans at the global level and working to increase stock levels of critical items above normal inventory levels where possible.

**Cash flow planning and financial outlooks.** Changes to operations, supply chains, commodity prices, product demand and donor priorities will have both short- and long-term impacts. Many Canadian based NGOs that operate globally have expressed concern that redirecting government and corporate funding to the domestic responses will result in fewer resources to respond in other countries, which will arguably be hard hit by COVID-19.
3. Community Engagement
Most organizations have established engagement practices with mining impacted communities. However, many dialogue mechanisms rely on in person connections (e.g. community meetings, round tables, one-on-one meetings, participation in cultural events). Both mining companies and NGOs are looking for innovative ways to engage with community stakeholders while respecting physical distances and quarantine requirements. Where communities have access to social media, Facebook and What’s Ap have become central tools for both sharing information and driving discussion and dialogue with the community. Many companies and NGOs have provided specific email addresses on their websites for communities looking to find information about COVID-19 or engage.

4. Communication and Information Sharing
Communication and information sharing are the foundation for an effective collaborative response. Communications from NGOs and mining companies should be targeted at employees, communities, peers, government leaders and health authorities. Good communication is clear, accessible, consistent and appropriate for the audience. Organizations have focused communication on several categories:

- **COVID-19 Facts.** Confirmed information the prevention and treatment of COVID-19 from reliable resources such as the WHO and Government of Canada.
- **Regional Data.** Data related to confirmed and presumed cases and models of various scenarios.
- **Organizations Response Plan.** Including prevention measures and impacts to operations and regular services.

At the time of writing, there were no clear examples of respondents feeding into a public communication hub. Some organizations have daily virtual updates for employees, as well as relevant external stakeholders, using Zoom or conference calls. Some organizations have posted their plans publicly to their website. Many organizations have identified examples or strategies to role out a communication plan with community stakeholders that is appropriate for the context, including targeted communications at food access points (e.g. grocery stores and markets) and sanitization points and posting to widely used Facebook or What’s Ap Groups.

A few organizations have made messaging and communications related to COVID-19 central to their response plans. For example, UNICEF Canada is equipping partners with tools for governments, teachers, parents, teenagers, children. These tools are publicly available on their website. The Artisanal Gold Council is also raising awareness about the possible direct and indirect impacts of COVID-19 on the ASGM sector and is monitoring the situation through its local networks. The information is published regularly on their website.
Section 2: Collaboration

Past experience with pandemics and emergency response indicates that a collaborative approach is essential to preventing and treating COVID-19. A collaborative approach will also be required to support people who have been impacted and rebuild social and economic systems when COVID-19 is controlled. Collaboration can focus on different activities, including data and information sharing; collaborative response planning and formal partnerships and joint ventures to implement responses. Collaboration can take many forms. Many organizations use multiple forms of collaboration at the same time.

1. Internal Collaboration
Internal collaboration is between the various functions and departments of an organization. Some examples include a multi-disciplinary task force where department heads are represented and daily communications flow down to employees and external stakeholders (e.g. communities, governments etc.). Department heads are responsible for working within their department and across regions to feedback information and implement the response plan. There are some examples where not all departments are represented. Many companies and NGOs were clear that this was NOT an effective approach and led to a breakdown in communication and confusion with employees. All departments are impacted by COVID-19 and have a role in the response.

2. Peer-to-Peer Collaboration
Peer-to-peer collaboration is between organizations in a similar sector or industry. At the time of writing, most examples of peer-to-peer collaboration were based on learning and sharing ideas. In some cases, this peer-to-peer collaboration has been facilitated by industry associations, established peer networks or has been spearheaded by individuals. For example, in March, independent consultants, Synergy Global, the Wits Mining Institute and Global Compact South Africa started hosting regular webinars for social performance practitioners to share lessons learned and concerns. The Mining Association of Canada has established a COVID-19 Working Group that is in constant contact. This working group provides a forum for sharing information on best practices to protect employees and the communities, as well as challenges and successes regarding their implementation. Industry associations in other countries have also helped support in-kind support to government health authorities from across the mining sector. And finally, some companies in Southern Africa are considering how they can co-ordinate between themselves in a specific region.
3. Community-led Collaboration

Community-led collaboration is guided and directed by community leaders and priorities. Many mining companies and NGOs have experience with community-led initiatives and where relationships are established communities should lead the collaborative response to COVID-19. Community-led collaboration is specifically important when designing relevant approaches for:

- Social distancing requirements, sensitization and education;
- Developing plans to ensure communities have food security, shelter and access to sanitation;
- Sharing information, developing community databases to identify vulnerable groups and tracking experiences with the virus;
- Managing treatment and access to care; and
- Planning for appropriate and safe burial and funerary services.

The collaborative effort from the Tahltan Nations and Newcrest mining in British Colombia is a good example of community-led collaboration. Together the Indigenous governments and mining company made plans related to medical support for three communities, mining operations at the Red Chris JV and employee rosters, access to groceries and health supplies, and a joint-working group for future decisions. (Tahltan Central Government, 2020).

4. Cross-sector Collaboration

Cross-sector collaboration is between organizations from different sectors. This can include collaboration between mining companies, NGOs, local governments and community organizations, regional and national governments and international organizations (e.g. WHO, UN agencies). This can also include collaboration with other industries including other natural resource development companies (e.g. commercial agriculture, renewables and oil and gas) as well as health providers (e.g. pharmaceutical companies, medical supplies etc.) and mineral end users (e.g. technology companies).

Many companies and NGOs noted that that main challenge to driving a cross-sector response is access to information about how other organizations are responding as well as multi-stakeholder forums where the response is being planned/discussed.

At the time of writing, most cross-sector collaboration related to COVID-19 is based on information sharing and financial, and in-kind donations in order to support the health authorities or local organizations that are best placed to drive the response.

- Kinross has donated approximately $1 million across all sites to facilitate improved testing, provide medical supplies, improve health infrastructure, support local businesses and help vulnerable groups. Kinross has partnered directly with government health authorities, with mining industry associations, community partners, local businesses, schools and individuals. The company is actively working on a longer-term strategy looking at continued response plus eventual recovery, with lines of action likely to focus on health and local economic reactivation.

- Newmont Ghana has announced a US$100,000 support package for Ghana’s public health efforts to minimize the transmission of the Coronavirus disease in the country. This will include support for two testing centers in Accra and Kumasi, as well as preventive measures in and around its Ahafo and Akyem mines and the Ahafo North Project area. (Folley, 2020)
• Responsible Steel hosted a multi-stakeholder panel on COVID-19 impacts. (Responsible Steel, 2020)

• Rio Tinto has pledged $25 million to support global grassroots, community COVID-19 preparedness and recovery. (Rio Tinto, 2020)

• The Canadian government has announced $159.5 million in funding to support international efforts to fight the COVID-19 pandemic. These funds aim to support partners on the front lines who are working to prevent, detect and respond to COVID-19 with a focus on vaccine development, and global health-security capacity building. This investment also aims to ensure that its international partners can maintain their services for vulnerable populations where possible, including support for sexual and reproductive health and rights. (Global Affairs Canada, 2020)

• In Chile, BHP and the Medical Faculty of Universidad Católica, have combined efforts to raise the testing capacity and strengthen the Familial Health Centers of the South East Area of the Metropolitan Region, as well as Antofagasta and Tarapacá. BHP has contributed $8 Million USD to the effort. (BHP, 2020)

To date cross-sector collaboration for COVID-19 tends to be ad-hoc and based on previously established individual relationships and networks. Moving forward, mining companies and NGOs are interested in methods to drive a cross-sector collaborative approach in order to:

• **Follow a joint plan or road map that can inform organizations response.** A regional plan would ideally be led by government bodies, including health authorities. It would clearly identify the resources needed and co-ordinate private and NGO responses. It would also establish hubs for organizations to share and receive information and data

• **Leverage resources and limit overlap.** Organizations are looking for direction and opportunities to utilize supply chains, transportation networks, and warehouses to deliver health and medical supplies as well as other essential services (e.g. food); utilize under used resources such as empty camps and spaces for hospital services; re-tool operations to develop health and medical supplies (e.g. sanitizer, PPE etc.) and share prototypes for required health and medical supplies.
Section 3: Issue Areas

COVID-19 response plans include several specific issue areas. For the purposes of this discussion paper we have grouped them into several categories.

1. Prevention, Education and Testing

To date prevention measures have relied on access to health supplies such as hand sanitizer and washing stations; social distancing or quarantine; and education and sensitization about prevention measures.

To support prevention measures, many organizations have:

- Shut operations that could not meet social distance or quarantine requirements.
- Made changes to work schedules or moved to remote work in order to limit physical interactions between employees. Some organizations that have maintained operations have made changes to lunch times, increased rest periods or staggered staff arrival.
- Used their supply chains and facilities to deliver hand sanitizer or set up washing stations.
- Promoted education about social distances and quarantine with employees and community members.

Many organizations have challenges or question related to prevention, including:

- What does social distancing look like in densely populated communities with limited water access?
- Should organizations be promoting use of basic surgical masks for asymptomatic people? What guidance about effective prevention measures should organizations follow?
- How do we maintain quality control when things are moving so quickly? For example, how do we ensure hand sanitizer is adequate?

The Center for Global Development has noted that limited resources in Low and Middle Income Countries should focus on effective and relevant prevention methods such as access to water and sanitation, targeted testing and data collection. (Amanda Glassman, 2020)

Community Awareness and Education

Many mining companies and NGOs have noted the importance of education (also known as sensitization) and sharing reliable information about COVID-19. The Center for Global Development has recommended that the WHO, regional health bodies develop more targeted guidance for these contexts. NGOs and mining companies can play an important role in delivering these materials and taking a train-the-trainer approach to equip health and community workers with the right information.
Amref Health Africa has developed guidance and training that is specific for communities living in East Africa. (Amref Health Africa, 2020) In addition, women require targeted access to information on COVID-19: Care has noted the importance of providing information about COVID-19 in ways that take into account differing literacy rates amongst women and men, and their different levels of access to mobile phones. (Care, International Rescue Committee, 2020)

Testing

In some regions testing has driven an effective response to COVID-19 because it allows governments to target resources as well as quarantine and isolation requirements. There are a few examples of organizations supporting increased testing. Newmont Ghana announced a US$100,000 support package for Ghana’s public health efforts with a focus on two testing centers in Accra and Kumasi, as well as preventive measures in and around its Ahafo and Akyem mines and the Ahafo North Project area. (Folley, 2020) Vale has procured 5 million rapid-COVID-19 tests for Brazil that started to be delivered in March. Many survey respondents noted that testing should be a priority. Where and when testing becomes more available mining companies and NGOs can play an essential role in organizing and providing logistics to provide mass testing, especially in remote areas.

Vaccines

Equal distribution of a vaccine will also play a significant role in containing the spread of the virus. Success will depend on equal distribution and delivery of a vaccine once it’s developed. A report in the Harvard Business Review underscored the importance of investing in the infrastructure for distributing a vaccine globally as soon as it is proven safe and effective, especially in low income countries or remote communities. (Rebecca Weintraub, 2020) NGOs and mining companies can contribute to equitable distribution in the regions where they operate by financing the purchase of vaccines, supporting health care systems to deliver the vaccine, identifying residents, leveraging data and strengthening supply chains.  

2. Treatment

Effective treatment of COVID-19 requires access to specific resources including isolated hospital beds, ventilators and PPE for health care workers. Most health care systems are quickly overwhelmed by the need and health care workers have had to prioritize treatment of some patients over others. Mining companies and NGOs can contribute to effective treatment by providing resources such as:

- Facilities to host temporary community health clinics;
- PPE, including face masks; and
- Respirators.

For example, Suncor has donated 40,000 N95 masks to the Canadian Federal Government, which directed them to communities in Nunavut, the Northwest Territories and the Yukon. (Suncor, 2020)

Where it is expected that COVID-19 will lead to an increase in mortality rates, some mining companies and NGOs are planning to support socially appropriate funerals and burials that don’t present further health and safety risks.

Around the world health service organizations (both private and public) are developing new designs to protect health care workers who are treating COVID-19 patients. This includes face shields, tools for intubation and testing breathing capacity. Many of these interventions are very basic and relatively
straightforward to reproduce. Health service organizations and technology companies are also developing mobile apps for educating as well as tracking information related to COVID-19. Some organizations have noted the potential to collaborate with health service organizations to share prototypes with health authorities in the regions where they operate and/or sponsor the development or delivery of innovative PPE. An example of a health service organization that is sharing prototypes is Canadian company Klick. You can find more on their COVID-19 website. (Klick, 2020)

Vale has launched a “COVID-19 Challenge” offering $1 Million in cash prizes for companies in Canada and Brazil to bring innovative COVID-19 solutions to the marketplace with a focus on risk monitoring and prevention and patient monitoring. (Parizot, 2020)

3. Food Security

Food access points are quickly becoming opportunities for transmission of the virus as well as opportunities to educate and sensitize communities. In addition, access to food has been and will continue to be impacted by disruptions to supply chains. Some companies in Southern Africa have provided grocery drop offs to communities to ensure access to food and limit movement/gathering of people. Some other organizations are re-purposing small scale commercial agricultural production for local food production. This is seasonally dependent but can also be part of a longer-term food security planning for regions that anticipate long term disruptions to food distribution.

4. Shelter

There are several elements of shelter that are increasing the risk of spreading COVID-19 and make social distancing challenging. Overcrowding of dwelling is common around the world and often means that there are an increased number of elderly and other immunocompromised people that will be adversely impacted by COVID-19. Homelessness is also an issue that can lead to increased spread of COVID-19 with immunocompromised people. And finally, many low-income communities are extremely dense and have limited access to water and wash stations. This again makes social distancing and increased sanitation difficult. Many organizations are calling for more guidance and innovation on how to social distance and provide access to water stations in these environments. Some organizations have noted that providing isolation shelter to sick patients or immunocompromised populations can protect the most vulnerable.

In addition, requirements to stay home (amongst other things) have increased insistences of gender based and domestic violence. In some regions, government and organizations have focused on providing greater access to women’s and homeless shelters and other social services and to address these challenges. The Center for Global Development has listed a number of other activities that NGOs and companies can support to limit violence against women and children. (Megan O'Donnell, 2020) Rio Tinto Iron Ore Company has worked with Hope Haven in Labrador to provide a furnished housing unit for the community of Labrador City and Wabush. (Rio Tinto, 2020)

5. Data

Reliable data related to COVID-19 cases (e.g. deaths, recovery’s) and tracing patient interaction is quickly becoming a central part of developing projections and limiting the spread of the virus. Accurate projections support preparation for treatment and informed response decisions. There are number of health care organizations and technology companies that are working on mobile apps and other data
collection methods to track cases, patient symptoms, contacts and the impacts of COVID-19. Amref Health Africa has developed a dashboard specific to COVID-19 in Africa. (Amref Health Africa, 2020)

Care and the International Rescue Committee recently completed a Rapid Gender Analysis on the impacts of COVID-19. The assessment uses secondary data collected between March 12 - 20, 2020 and highlights the gendered impacts of COVID-19 prevention, treatment, impacts and decision making. One of the findings from the analysis is the importance of using sex and age disaggregated data. (Care, International Rescue Committee, 2020)

Many organizations have also noted that how data is received, stored, and shared has many implications for its effectiveness. Data and contact tracing also presents many concerns related to privacy and other civil liberties.

6. Economic impacts
The economic impacts of COVID-19 have and will continue to touch every element of the global economy. Where operations are suspended many unions have encouraged companies to continue to support workers through furlough or reduced wage programs. It is unclear which suspended operations have maintained wages for employees, or how employers have supported employees to access government emergency relief programs.

Many mining companies and NGOs are aware of the outsized impact on small and medium sized businesses. SMEs in mining supply chain are especially impacted because they can be seasonal; capital intensive and / or because they tend to be more cash flow sensitive. Companies and NGOs are looking for innovative ways to support these businesses including pre-payments for services; interest free loans; wage subsidies; support and guidance to apply for government programs; and encouraging other business to provide relief for SMEs (e.g. land lords, banks and mobile carriers).

The Center for Global Development recently noted that over 60% of the worlds work force participate in the ‘informal economy’ and 93% the world’s informal employment is in emerging and developing countries. Informal workers are not supported by work-from-home and wage subsidy programs and much less likely to stay at home during the pandemic. The CDG suggests cash transfers could be an effective measure to realistically support shelter-in-place and social-distancing efforts for those people who work in the informal economy. (Amanda Glassman, 2020)

7. Mental Health
People across the world are experiencing increased stress related to caring for patients, implementing social distancing / quarantine requirements, concerns about access to food and shelter, economic impacts and job loss, and increased instances of gender-based and domestic violence. Several organizations have been clear to provide employees access to mental health supports. Some organizations have also provided funding to support community access to mental health support (e.g. Kids Help Phone in Canada). Many organizations also pointed to the importance of being kind, empathic and checking in on colleagues and neighbours during this time.

8. Social Cohesion and Human Rights
COVID-19 responses, particularly social distancing / quarantine requirements and economic impacts are presenting significant stress to communities around the world. Where social cohesion is already fragile, many organizations are concerned that COVID-19 responses will lead to social disruptions including riots...
and violence. The sentiment that COVID-19 is a “disease of the wealthy” will also create tension in regions where there is significant wealth disparity.

Impacts on children
World Vision Canada noted that one of the key lessons learned from the Ebola crisis was the “accompanied spikes in abuse, sexual exploitation, forced marriage, child labour and various other forms of violence against girls and boys. The reasons for this increase in violence are many and well-documented. Children were left unaccompanied and separated from their parents and caregivers due to death, illness and hospitalization. The normal systems designed to keep children safe – whether child welfare structures or community-based mechanisms – were weakened. Quarantine measures made girls and boys more vulnerable. Child protection responses were either delayed or insufficiently integrated.” (World Vision Canada, 2020)

Human rights
To limit the spread of the virus, many regions and countries have instituted lockdown or quarantine measures. Some regions have deployed the military and / police force to manage these quarantine requirements. This increases the opportunity for human rights abuses, by government authorities and / or security/military/police personnel. In addition, the growing reliance on effective data, the use of private health information and ‘contact tracing’ presents further opportunities for human rights abuses, including those related to privacy. Mining companies and NGOs have pointed to the importance of maintain and in some instances strengthening human rights programs. This can include key messages and training for security staff and leveraging relationships with governments to reinforce the organizations commitment to respecting human rights and governments responsibility to protect human rights.
Recommendations and Conclusions

No person, company, NGO or government will be unaffected by the impacts of COVID-19. We must all be involved in preventing the virus from spreading, treating people who become infected and rebuilding our social and economic systems when the virus has been controlled.

In order to support a co-ordinated, transparent and cross-sector response mining companies and NGOs should:

1. Connect with governments, peers and organizations from other sectors to co-ordinate your response to COVID-19. If these networks are not established use industry associations, the Devonshire Initiative, the Canadian Government and media outlets to find relevant contact information and build relationships.

2. Share plans, case studies, data and experiences publicly. Post your organizations detailed response to your website, including the specific locations you are working. Provide specific contact details for organizations that want to touch base. Be clear about what resources you need and / or have.

3. Leverage your organizations leadership, reputation and individual relationships to build a cross-sector network, reinforce best practice and the importance of protecting and respecting human rights.

4. Develop partnerships to contribute to the response effort – leverage your resources and strengths to support organizations and governments that are best placed to lead the response effort locally.
List of Resources and References


DI Member Survey Data

On March 20th, 2020, DI members were invited to participate in a survey about their response to COVID-19. As of April 3rd, 10 members participated in the survey. Below are some of the survey responses. These and other findings from this survey are included in this discussion paper.

### Status of organizations response plan

- Completed
- Currently in development

### Mechanism or platform to engage with other stakeholders

- Cross-sector COVID-19 task force
- One-to-one collaboration
- Leveraging other dialogue mechanisms or platforms.

### Stakeholder groups the organization is working with to develop response plan

- Local / regional / national businesses
- Parents and teachers
- Community based organizations
- Local service organizations (health workers, police)
- Regional / National governments
- Community leaders and local governments
- Employees

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Anticipated Impact of COVID-19

- Disproportionate impacts on vulnerable groups: 60%
- Change in community social structures: 30%
- Disruption to local economy: 60%
- Continuity/style of stakeholder engagement: 60%
- Supply chain resilience: 50%
- Staffing for key functions: 40%
- Logistics/costs to repatriate staff: 40%
- Lack of funding/capital: 70%
- Continuity of operations: 90%
- Community health & safety: 100%
- Employee health & safety: 100%
- Other: 10%

Resources required to continue operations

- Supplies specific to your operations/projects: 60%
- Access to other stakeholders: 50%
- Transportation: 40%
- Funding/capital: 50%
- Personal Protective Equipment: 30%
- Other: 10%