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COVID-19 pandemic: A call to action, a time to respond

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COVID-19 Pandemic: A Call to Action, A Time to Respond

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Effects of COVID-19 Pandemic are Far Reaching

- Globally 121 million COVID-19 cases and 2.6 million deaths
  - India: 11 million cases and 159,000 deaths
  - Kenya: 116,000 cases and 1,900 deaths
- GDP per capita declined 3.5% in 2020 in world’s poorest countries
- Food insecurity is expected to rise
- Migration has affected remittances and local labor markets
- Disproportionately borne effects
Effects of COVID-19 Pandemic

- Livelihood and social protection
- Mental health
- Food security and nutrition
- Gender-based violence
- Education
- Lack of access to and non-use of health services
Data

- Respondents were those who were already participating in research
  - India: 794 households with adolescents in Bihar
  - India: 2041 adolescents in Bihar and UP
  - Kenya: 4000 10-19 year olds across 4 counties
- Phone based interviews
- Topics: Effects of Covid-19 on economic activity, time use, experience of violence, hunger, social interactions, education
- Mix of quantitative and qualitative methods
Livelihood and Social Protection
Economic Distress: Bihar

Households with at least one member who lost job (%)

- Can survive < 2 weeks
- Can survive 2 weeks to a month
- Can survive > 1 month

(N=794)
Awareness of Social Protection Schemes

(N=794)
Cash Benefits Received

Cash in lieu of mid-day meals
Pending payments under MNREGA
Migrant workers
Rs.1000 as Corona relief package
Rs. 500 under PMJDY
Cash from at least one SP scheme

(N=794)
Mental Health
Mental health due to Covid-19 lockdown: Bihar and UP

(N=1439)
Who is More Likely to Experience Mental Stress?

- Members of households that have experienced job loss
- Members of households with financial resources to survive for less than two weeks
- Members of households with fewer rooms in the house
- Migrant households where a family member has not returned home
- Women who experienced violence during lockdown
Adolescents’ Mental Health Has Suffered: Kenya

Percentage (%)

Feel anxious, threatened, concerned when they think about COVID-19: 81%, 81%, 83%
Have had little interest/pleasure in things they usually enjoy in past 2 weeks: 49%, 17%, 38%, 58%
Have felt down, depressed or hopeless in past two weeks: 46%, 12%, 44%, 60%

- Nairobi
- Wajir
- Kilifi
- Kisumu
Mental Health

- Stress and anxiety over reduced family income was common amongst most adolescents.
- Anxiety over COVID-19 infection during school closure and in the anticipated re enrollment is experienced by many adolescents.
- Pregnant adolescents face stigma and stress emanating from family and community.
- Reduced interaction with peers results in stress.
Mental Health

• “I find that every time I am scared that this thing will strike so every time I am depressed, I don’t have someone and mostly it is psychological pain that has been a problem. I am psychologically damaged.” Adolescent, Nairobi

• “Sometimes you will realize that this child is just sitting idling, they seem to be in deep in thoughts, you can also notice that they prefer to go to the neighborhood to be around with other children their age.” Parent, Kajiado

• “Adolescents are stressed, because my son who is almost completing school, was so stressed up such that he was unable to study. Just like the girl who is in class eight. due to school closure. You would just see them seated and not talking to anyone, just feeling down. By the time you know what is disturbing him/her, you will realize that it is not anything else but school, especially her completing.” Parent, Kilifi
Food Insecurity
People are hungry: Bihar

Impact of lockdown on food intake in household

**Percentage of households reporting shortage of food items in last 30 days**

<table>
<thead>
<tr>
<th>Standard of living</th>
<th>Some income</th>
<th>No income</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>34.5</td>
<td>65.1</td>
</tr>
<tr>
<td>Medium</td>
<td>44.5</td>
<td>50.9</td>
</tr>
<tr>
<td>Low</td>
<td>59.1</td>
<td>41.1</td>
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<tr>
<td>Others</td>
<td>39.2</td>
<td>51.3</td>
</tr>
<tr>
<td>SC/ST</td>
<td>43.3</td>
<td>55.4</td>
</tr>
<tr>
<td>Rural</td>
<td>31.8</td>
<td>57.7</td>
</tr>
<tr>
<td>Urban</td>
<td>61.9</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HH with under 5 child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HH with pregnant woman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>48.2</td>
<td></td>
</tr>
</tbody>
</table>

**Percentage of households reporting reduced food intake during lockdown**

<table>
<thead>
<tr>
<th>Standard of living</th>
<th>No income</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
<th>SC/ST</th>
<th>OBC</th>
<th>Others</th>
<th>Urban</th>
<th>Rural</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Some income</td>
<td>68.6</td>
<td>47.3</td>
<td>69.1</td>
<td>56.7</td>
<td>64.5</td>
<td>60.3</td>
<td>51.3</td>
<td>54.4</td>
<td>62.2</td>
<td>44.2</td>
<td>65.8</td>
<td>59.2</td>
</tr>
<tr>
<td>No income</td>
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</tbody>
</table>

*Notes: All differences are statistically significant at 5% or better; The question on income: What is the source of income of the family during the lockdown?*
Food Security: Kenya

Skipped Meals/Ate Less in the Past Two Weeks due to COVID-19
Experience of Violence
Increased Tension and Violence in the Home since the start of COVID-19: Kenya

- **Nairobi**: 24%
- **Wajir**: 2%
- **Kilifi**: 11%
- **Kisumu**: 21%

For Increased Violence:
- **Nairobi**: 6%
- **Wajir**: 1%
- **Kilifi**: 5%
- **Kisumu**: 7%
In the past one month have you experienced the following type of violence:

- Emotional Violence
- Physical Violence
- Sexual Violence

For all reports of violence, half to three-quarters say it is happening more than pre-COVID-19.
Violence

• Increase in crime, conflict, domestic violence in the community during COVID-19 period due to loss of jobs and idle youth
• Some adolescents develop aggressive behavior as a result of domestic violence and conflict experienced at home during COVID-19 period

“During this time (COVID-19) there is a lot of conflict because there is no money...then the children see the conflict, the children are also bitter, they bring it out, so they see you having something they can come and steal, you joke around with them they will beat you up because they are already angry life is so unfair on them.” Parent, Kisumu
Education
**Adolescents’ Education: Kenya**

Fees are Main Barrier to Re-Enrollment

- **Nairobi:** 59%
- **Kilifi:** 83%
- **Kisumu:** 76%

Use of Mobile Phone in Remote Learning

- **Nairobi:** Girls = 34%, Boys = 33%
- **Kilifi:** Girls = 8%, Boys = 12%
- **Kisumu:** Girls = 18%, Boys = 26%
- **Wajir:** Girls = 9%, Boys = 16%
Summary

• Effects are disproportionately borne by different population sub-groups
• Policy and program action required on many fronts
• Policy makers and program managers have been able to act/acted on data and evidence
• Opportunity to collaborate and innovate
Call to Action

• Timing matters
  • Immediate needs: social protections, food security, mental health support, educational support
  • Longer term: Tracking of educational achievement, labour force participation, health outcomes and disparities

• Build back better
  • Strengthen data infrastructure
  • Strengthen health systems to withstand shock
  • Research on differential impacts, evaluating policy response
  • Develop coalition of public and private actors
Acknowledgements

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Thank You

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