

COVID COLLECTIVE PROJECTS FROM AROUND THE GLOBE

Authoritarian Responses to Covid-19: Humanitarianism and Displacement

→ Global
→ Institute of Development Studies (IDS)
Action Aid International
World Vision International

This project looked at the links between discrimination and marginalisation of refugees and IDPs and authoritarianism during Covid-19. Using examples and cases from different global contexts it examined how the dynamics of marginalisation, authoritarianism, Covid-19 responses and International Humanitarian Law obligations interacted at local to national scales.

Understanding the impacts of the pandemic on those living and working informally in cities in sub-Saharan Africa

→ Kenya, Malawi, Uganda, Zimbabwe
→ University of Manchester Global Development Institute (GDI)
ACTogether Uganda
Dialogue on Shelter Trust (DoSt), Zimbabwe
Slum Dwellers
International-Kenya (SDI-K)
Urban Action Lab Makerere University (Kampala)

This project aims to understand the impacts of the pandemic on those living and working informally in cities in sub-Saharan Africa and improve governance, policy and programming responses.

Covid-19 & Disability

→ Turkey
→ Koç University
London School of Hygiene and Tropical Medicine (LSHTM)

This research explored the experiences of Syrian refugees living with disabilities in Istanbul during the Covid-19 pandemic, including their inclusion in response measures. It supported the Turkish government, aid agencies involved in the refugee response, FCDO and other actors' responses to Covid-19 in real time.

Livelihood Transitions and Coping with Shocks: Women in the Domestic Service Sector coping with Covid-19

→ Bangladesh
→ BRAC Institute for Governance and Development (BIGD)

The study gathered evidence of how Covid-19 is affecting the women working in the ready-made garment and domestic service sectors, their livelihoods transitions and coping strategies, to help identify interventions that can be useful for their recovery.

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This brief aims to provide rapid syntheses of a selection of recent relevant literature and international expert thinking in response to specific questions relating to international development. It was written by **Brigitte Rohwerder**, Researcher at the Institute of Development Studies, and commissioned through the Covid Collective.

The Covid Collective is based at the Institute of Development Studies (IDS) and is funded by the UK Foreign Commonwealth and Development Office (FCDO). The Collective brings together the expertise of, UK and Southern based research partner organisations and offers a rapid social science research response to inform decision-making on some of the most pressing Covid-19 related development challenges. The views and opinions expressed do not necessarily reflect those of FCDO, the UK Government, or any other contributing organisation.

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Find out more about the Covid Collective www.covid-collective.net

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COVID COLLECTIVE KEY ISSUE GUIDE:

Equity, inclusion and exclusion of those most effected by the pandemic



Summary

The Covid-19 pandemic exposed and worsened already existing inequalities, increased extreme poverty and food insecurity, led to human rights violations, and negatively affected progress towards the achievement of the Sustainable Development Goals (UN, 2022; Rohwerder, 2020). Marginalised and socially excluded groups such as women and girls, people with disabilities, older people, children, young people, informal and migrant workers, refugees and internally displaced persons, racial and ethnic minorities, indigenous peoples, and LGBTQI people, bore the brunt of the crisis (Rohwerder 2020).

‘Often, these populations tend to be marginalised and excluded; depend heavily on the informal economy for earnings; occupy areas prone to shocks; have inadequate access to social services; lack social protection; are denied access to such services on the basis of age, gender, race, ethnicity, religion, migrant status or other forms of discrimination; have low levels of political influence and lack voice and representation; have low incomes and limited opportunities to cope or adapt; and have limited or no access to technologies.’ (UN, 2020c, p. 6).

As a result, they were more likely to suffer from adverse health, socioeconomic, and political impacts of Covid-19 pandemic. In this Key Issues Guide we focus on a number of these excluded groups and the difference that inclusion can make for their experience of the pandemic and its response.

Key Issues

Poverty

The economic shocks caused by the Covid-19 pandemic erased the last four years of steady progress in poverty reduction (UN, 2022; Rohwerder, 2020). The number of people in extreme poverty (living on less than \$1.90 a day) increased for the first time since 1998 (UN, 2022). An additional 93 million people worldwide were pushed into extreme poverty in the first year of the pandemic and little progress has been made since, in terms of catching up with the pre-Covid-19 poverty reduction trend (UN, 2022).

Many of those who escaped extreme poverty in recent years and who lived very close to the poverty line in urban and rural areas, with little ability to withstand the economic shock of Covid-19, were vulnerable to falling back into poverty as a result of the pandemic (Sumner *et al.*, 2020). Poor and other marginalised groups were especially hard hit by the economic (and other) consequences of the pandemic (UN, 2020a). Young people, women, and those in the informal sector were disproportionately affected by job losses, working-hour losses and pay cuts in 2020, worsening their existing working poverty rates (UN, 2022; Rohwerder, 2020). Only 28.9 percent of people considered vulnerable had access to social assistance cash benefits in 2020 to help them cope with the effects of the pandemic compared to 46.9 percent of the global population, with only 7.8 percent of those considered vulnerable receiving assistance in low-income countries (UN, 2022).

The loss of or reduction in household income due to Covid-19 led to cutbacks on essential health and food expenditures, which can have long term consequences for their life courses (Rohwerder, 2020). People turned to negative coping mechanisms such as food rationing, child marriage, and child labour (UN, 2022; Bolton, 2022; Rafaeli & Hutchinson, 2020).

Effects on those living in informal settlements

Those living in informal urban settlements were especially at risk of transmitting Covid-19 due to the high concentrations of people in these settings and limited access to services and infrastructure to contain the virus (Lenhardt, 2021). The people living there were generally in precarious economic situations in the informal sector and often food insecure, especially women (Lenhardt, 2021;

Collyer *et al.*, 2021). In addition, informal settlements have largely been excluded by Covid-19 response and recovery plans (Lenhardt, 2021). Workers in the informal sector were more likely to lose their jobs than those in the formal sector during the Covid-19 pandemic (UN, 2022; Rohwerder, 2020; Lenhardt, 2021). They lacked access to social protection when forced to stay home over lockdowns and often had little savings to rely on (Rohwerder, 2020; WIEGO, 2020).

Effects on women

The Covid-19 pandemic worsened gender inequality, as women and girls' progress on things like time spent on unpaid care and domestic work, employment, education, availability of and decision-making regarding sexual and reproductive health, and gender-based violence fell behind (UN, 2022; Rohwerder, 2020). Reports in almost every country worldwide indicated big increases in gender-based violence during the outbreak of Covid-19 and the measures taken to contain it (UN Women, 2020).

Women were more vulnerable to losing their livelihoods due to their greater representation in sectors worst affected by the crisis, including the informal sector, while also making up 70 percent of frontline health and social care workers (UNFPA, 2020; Cochran *et al.*, 2020; Rohwerder, 2020). Increased care responsibilities also pushed women and girls out of the workforce or education (Rohwerder, 2020). Safe abortion services were at particular risk during the pandemic, which was used as a deliberate opportunity to push for a roll back of women's sexual and reproductive health rights in some countries (Mijatović, 2020).

Organisations were concerned about increased risks of transactional sex, sexual exploitation and abuse in the response to Covid-19, especially for those women and girls already disadvantaged in their communities (Rohwerder, 2020). The effects of the pandemic put more girls at risk of child marriage, owing to economic shocks, school closures and interruptions in social services, meaning that by 2030, up to 10 million more girls are likely to become child brides than pre-pandemic estimates (UN, 2022). In addition, cases of female genital mutilation increased during the pandemic because of school closures and financial insecurity (UNFPA, 2020).



Effects on people with disabilities

People with disabilities were amongst those most affected by the Covid-19 pandemic (Bolton, 2022; Lippman *et al.*, 2022). The health conditions of some people with disabilities, issues with the provision of care and support, and the lack of accessible communications about Covid-19 prevention meant that people with disabilities had a disproportionate risk of dying because of Covid-19, as well as facing increased poverty and inaccessibility of essential services (Rohwerder, 2020; Lippman *et al.*, 2022). There was a “failure to ensure their safety in congregate living; failure to include them in access to food, ICT, testing, and hygiene; failure to give them evidence-based priority for vaccines or treatment; inadequate support for those living alone; lack of messaging; postponement of medical treatment; and failure to collect disability disaggregated data” (Bolton, 2022). The shift to online learning generally occurred without consideration of the access needs of children with disabilities, and many students with disabilities dropped out of education as a result (Rohwerder, 2020).

Effects on displaced persons

During the Covid-19 pandemic, the 164 million international migrant workers and their families were more exposed to the loss of employment and wages compared to nationals (UN, 2020b). Migrants in irregular situations, migrant workers with precarious livelihoods, or those working in the informal economy often have limited or no access to social protection measures, putting them in a very vulnerable position due to the economic impact of the pandemic (UN, 2020b). Forcibly displaced persons' (refugees, internally displaced persons and asylum seekers) rights, especially the right to seek asylum and the principle of non-refoulement, were at risk as a result of some measures taken by governments to respond to Covid-19, creating a protection crisis (Hazard, 2020; UN, 2020b; Rohwerder, 2021; Lippman *et al.*, 2022). Forcibly displaced persons were more likely to lose their job and be unable to meet their basic needs, especially for food (Rohwerder, 2021). The pandemic exacerbated already high levels of xenophobia, racism, and stigmatisation and resulted in attacks against refugees and migrants in some places (Rohwerder, 2020; Lippman *et al.*, 2022). Forcibly displaced persons were also distrustful of accessing services as they feared deportation (Lippman *et al.*, 2022).

Emerging Lessons



Support grassroots resilience through self-help groups

Across the world, neighbourhood groups were set up to help each other, especially those who were vulnerable, during the pandemic. In Ethiopia, for example, neighbourhood support networks and community members took turns in going to the market to purchase food and goods for each other, while households were asked to donate to the woreda (neighbourhood) for food-insecure households (Bolton, 2022). In Kenya, a well-established community-led network collected data on infection rates, existing responses, and additional support needed in multiple informal settlements, which developed widespread public support and initiated effective government responses (Collyer *et al.*, 2021). In Bangladesh, in the absence of official help, slum dwellers initiated robust medical and non-medical measures to tackle the disease, at personal and household levels and then communitywide, with the local government getting involved in these activities later on (Collyer *et al.*, 2021). With more practical support and recognition, such self-help groups can help build marginalised people's resilience and meet urgent needs in crises.

Include the most marginalised in crises responses

The response to the Covid-19 pandemic shows the importance of crises responses being inclusive, especially of groups that are particularly affected (Rohwerder, 2020). Data gathered on the impacts of pandemics and other crises should be disaggregated and analysed to see who is marginalised and at risk to leave no one behind (UNFPA, 2020; Rohwerder, 2020). Responses to crises should be human rights based and involve those most impacted by the negative effects in the decision-making, governance, and monitoring of the response (UNAIDS, 2020). Marginalised groups should be deliberately included and their barriers to participation in decision making, communication, budgeting, and the response should be overcome to ensure their participation is meaningful (Hazard, 2020; UN, 2020b; Rohwerder, 2020).

In the long term, countries need to invest in protecting people's health, economic, and social rights as key defences against global epidemics and their fallout (UNAIDS, 2020; UN, 2020a).

Ensure research is inclusive of the most marginalised

The Covid-19 pandemic led to researchers needing to adapt to the pandemic context to illuminate the multidimensional challenges of the pandemic, especially to ensure they included the most marginalised people (Taylor and Knipe, 2022).

Vulnerable voices have been safely included in remote research by researchers using a range of means of communication to increase opportunities for involvement (Taylor and Knipe, 2022). For example, to ensure the active participation of people with disabilities, researchers turned to “multiple channels (text, email, etc.), trained trusted friends and local authorities such as teachers to take telephone calls and interpret them for the participant, encouraged participants to draw their responses on paper and send them, and ensured that these approaches met with existing standards for disability-inclusive research through trained data collectors, accessible materials, and appropriate safeguards” (Taylor and Knipe, 2022: 5). However, serious attention needs to be given to ethical considerations, such as whether vulnerable groups will be at risk if discussing serious issues remotely (Taylor and Knipe, 2022). Participatory methods have been successfully used to study the experiences of marginalised groups of the Covid-19 pandemic, including using peer (community-based) researchers (Lippman *et al.*, 2022; Bolton, 2022).