

# Breakout Session 1: Socioeconomic impact of COVID-19

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# Breakout Session 1:

## Socioeconomic impact of COVID-19

Chair: Peter Fremlin	
Elijah Kipchumba	Food Security, Livelihoods and Social Assistance Under COVID-19: A Case of Persons with Disabilities in Uganda
Rifat Shahpar Khan	Impact of COVID 19 on the Lives of People with Disabilities in Bangladesh
Tim Hart	South Africans with disabilities' experience of COVID-19 findings from a large online survey
	Q&A

**Elijah Kipchumba**  
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Food Security, Livelihoods and Social Assistance  
Under COVID-19: A Case of Persons with  
Disabilities in Uganda

# Food Security, Livelihoods and Social Assistance Under COVID-19: A Case of Persons with Disabilities in Uganda

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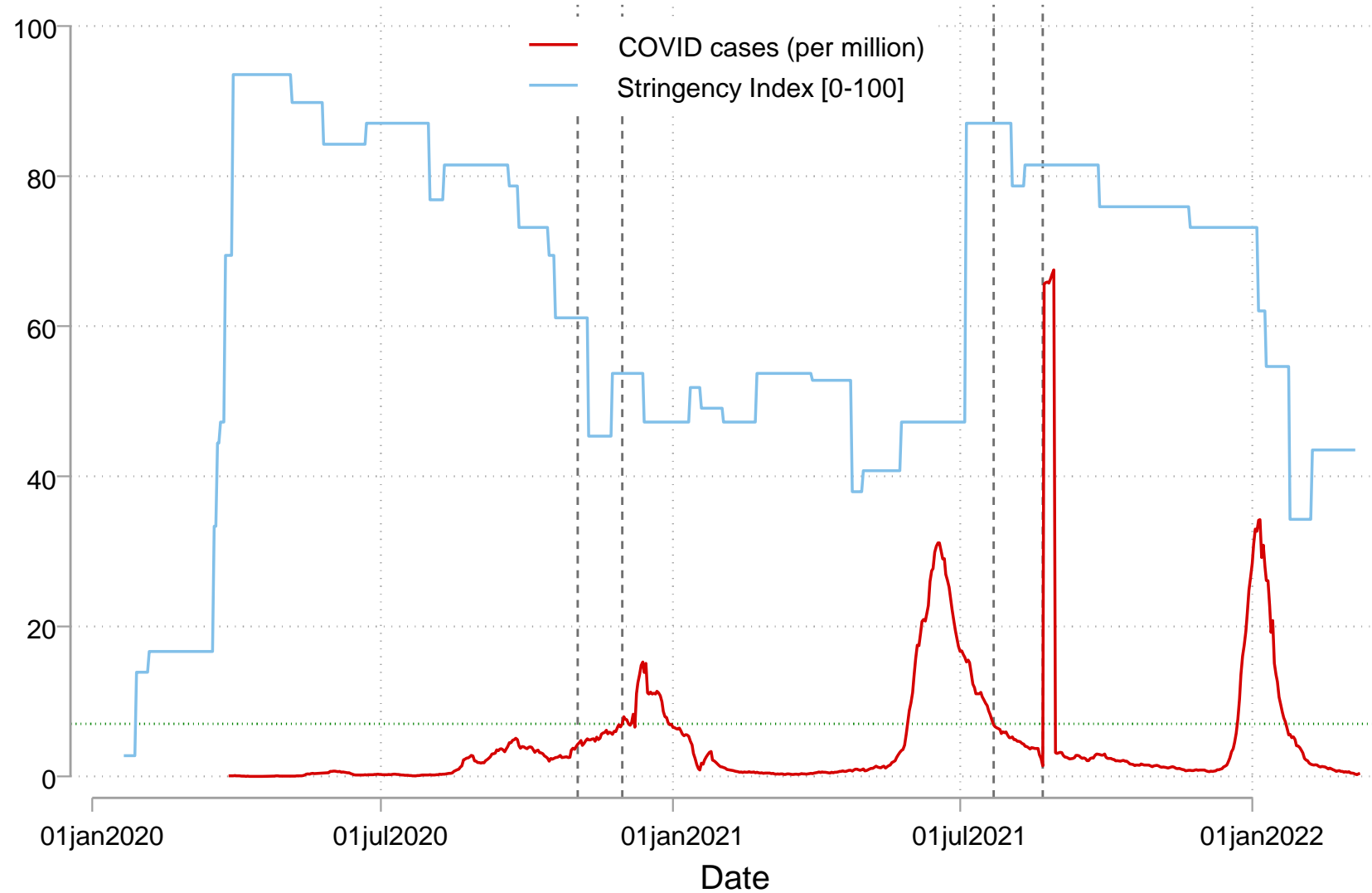
Hannah Kuper, Calum Davey, Morgon Banks, Munshi Sulaiman

International Conference on Disability and Development, March 2022

# Introduction

- PWDs in Uganda, composed of 9% of the population:
  - Over three-quarter live below the poverty line (\$3.2 per day).  
Additional costs of disability not accounted.
  - Experience more discrimination, exclusion and even abuse
- Households with PWDs are more vulnerable to shocks; pre-existing conditions increases vulnerability.
  - Coping strategies – Inaction, support from relatives, drawing savings & assets, reducing consumption.

# COVID19 and Control Measures in Uganda



# Disability Inclusive Graduation (DIG) Project

- Built around BRAC's Ultra-Poor Graduation approach, consisting of integrated and sequenced interventions.
  - Social protection – consumption support, linkage to social programs
  - Livelihood – Assets transfer, technical training, assistive devices & therapy
  - Financial inclusion - financial literacy training, VSLA formation
  - Social empowerment – Life skills training & home coaching, advocacy
- Designed and implemented by BRAC, NUWODU and HI
- Aims to help 2,700 ultra-poor including 15% who are PWDs.

# Current Study: Methodology

- Leverage on ongoing impact evaluation of the DIG project.
- Cluster randomized control involving 185 villages (96 treatment & 89 control) from 4 districts of Northern Uganda.

	HH no PWD	HH has PWD	Total
<b>Control</b>	1,072	453	1,525
<b>Treatment</b>	1,267	595	1,862
<b>Total</b>	2,339	1,048	3,387

- Baseline survey in Nov 2020 and follow up phone survey July/August 2020
  - Phone survey covered subsample with phones - 2,481 (73% of sample)
  - Econometric model: Change between rounds, controlling for early DIG effects.



# Effect on Food Security

- Food security worsened for everyone, but less so for those receiving DIG intervention.
- No differential impact from COVID or DIG treatment by PWD status.

	(1)	(2)	(3)	(4)
	Meals	HDDS	HFIAS	FCS
DIG	-0.003 (0.049)	0.240 (0.120)**	-0.900 (0.413)**	1.979 (0.676)***
DIG X HH has PWD	0.027 (0.059)	0.012 (0.174)	0.446 (0.563)	0.623 (0.987)
HH has PWD	0.026 (0.044)	0.182 (0.123)	-0.761 (0.380)**	0.191 (0.749)
Constant	0.046 (0.036)	-2.574 (0.088)***	3.096 (0.326)***	33.514 (0.468)***
Baseline mean	1.689	6.765	10.304	
R-squared	-0.000	0.005	0.003	0.008
Observations	2481	2481	2481	2480

Meals refers to number of meals consumed per day in the last 7 days. Household dietary diversity (HDDS) ranges from 0 (poor) to 12 (good). Household food insecurity access scale (HFIAS) ranges from 0 (good) to 27 (poor). Food consumption score (FCS) ranges from 0 (poor) to 112 (good). Cluster-robust standard errors in parentheses.

\*  $p < 0.10$ , \*\*  $p < 0.05$ , \*\*\*  $p < 0.01$

# Effect on Livelihoods

- Crop farming unaffected by COVID. Engagement in wage work and non-farm business increased. Seven percentage point decline in poultry farming due to COVID but this is off-set by DIG intervention.
- No differential impact from COVID or DIG treatment by PWD status.
- Slight increase (<10%) in wage pay but large drops in farm earnings (> 50%). Aggregate income dropped. No differential impact from COVID or DIG treatment by PWD status.

	(1) Crop farming	(2) Livestock & poultry keeping	(3) Wage & salaried work	(4) Non-farm business
DIG	-0.001 (0.013)	0.207 (0.027)***	0.004 (0.034)	-0.011 (0.035)
DIG X HH PWD	0.012 (0.030)	0.014 (0.044)	-0.030 (0.049)	0.045 (0.050)
HH has PWD	0.031 (0.024)	0.032 (0.035)	0.063 (0.035)*	-0.027 (0.039)
Constant	0.014 (0.008)*	-0.071 (0.019)***	0.139 (0.024)***	0.060 (0.025)**
Baseline mean	0.941	0.758	0.695	0.184
R-squared	0.003	0.045	0.000	-0.001
Observations	2481	2481	2481	2481

Regression involves dummies of whether respondent engaged in specific income generating activity. Cluster-robust standard errors in parentheses. \*  $p < 0.10$ , \*\*  $p < 0.05$ , \*\*\*  $p < 0.01$

# Effect on Social Assistance

- Minimal social assistance for the ultra-poor from government. Reduced further as COVID progressed. NGOs stepped in but just a drop in the sea.
- No differential impact from COVID or DIG treatment by PWD status.

	(1) Gift	(2) Remittance	(3) Food aid	(4) Government cash	(5) NGO cash	(6) NGO non- cash
DIG	0.008 (0.029)	0.086 (0.030)***	0.036 (0.028)	0.021 (0.014)	0.529 (0.027)***	0.407 (0.022)***
DIG X HH has PWD	0.104 (0.046)**	-0.027 (0.044)	-0.006 (0.036)	-0.017 (0.026)	-0.052 (0.036)	-0.049 (0.034)
HH has PWD	-0.031 (0.033)	0.006 (0.035)	0.039 (0.022)*	0.018 (0.022)	0.008 (0.010)	-0.016 (0.020)
Constant	0.022 (0.022)	0.021 (0.021)	-0.121 (0.018)***	-0.048 (0.012)***	0.016 (0.009)*	0.046 (0.011)***
Baseline mean	0.143	0.109	0.138	0.049	0.013	0.026
R-squared	0.003	0.005	0.002	0.000	0.284	0.165
Observations	2481	2481	2481	2481	2481	2481

Regressions are dummies of whether household received support from a corresponding source. Cluster-robust standard errors in parentheses. \*  $p < 0.10$ , \*\*  $p < 0.05$ , \*\*\*  $p < 0.01$

# Summary and Conclusions

- COVID had large effects on wellbeing and livelihoods of the ultra-poor irrespective of PWD status.
- Social assistance from government to cushion them is largely absent.
- Households cope with shock by drawing down their assets (livestock and poultry) and switching to wage work/non-farm business which can have implications on their vulnerability.
- NGO programs shows early positive effects in attenuating effects of large covariate shock like COVID.

**Rifat Shahpar Khan**  
BRAC

Impact of COVID 19 on the Lives of People with  
Disabilities in Bangladesh

# COVID-19 and Disability: Bangladesh

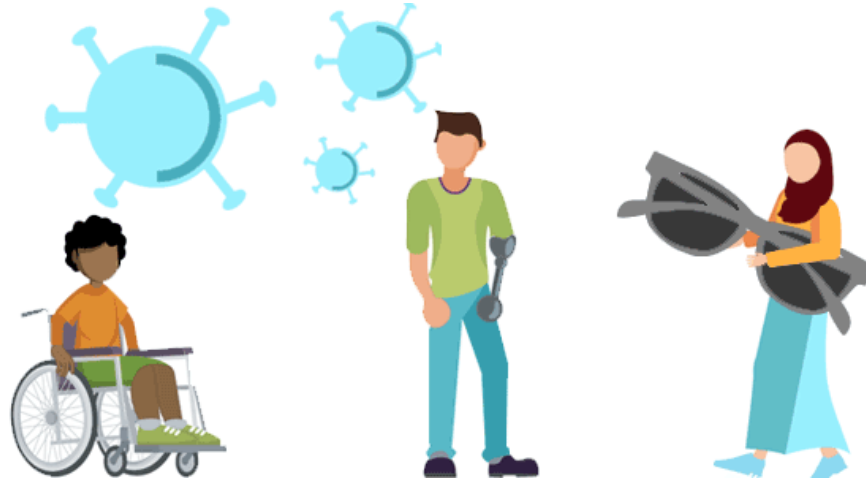


Image: WHO

**BRAC Institute of Governance and  
Development (BIGD)**



Inspiring Excellence

# Impact of COVID-19 on the Lives of Persons with Disabilities in Bangladesh

Study Name

**COVID-19 & Disability**

Conducted in mainly LMICs

**Including Bangladesh**

Study partner in Bangladesh

**Brac Institute of Governance and Development, Brac University**

Study Period

**April/May 2021 to early Nov 2021**



# Objective of the Study

- Explore **experiences** of people with disabilities during COVID-19,
- Examine the effects and **impacts** of the pandemic on their lives, identify their **coping mechanisms**
- Identify possible strategies to better **promote the inclusion** of people with disabilities in response activities



# Methodology

- Qualitative study tools: IDI (60), KII (21)
- Conducted in distance mode
- Transcription of mainly audio recording
- Code book
- Coding using NVIVO

# Age and Gender of Participants with Disabilities

- **60 IDIs**
  - Equal number of women and men with disabilities
  - 35 persons (58%) with disabilities participated independently; 25 persons (42%) with neurodevelopmental & multiple disabilities communicated through support from caregivers.
  - Three (3) age-groups
    - children/adolescents (10 to 19 yrs)
    - working age (20 to 59 yrs)
    - older population (60 yrs and above)

# Key Areas of Impact from COVID-19 on the Lives of Persons with Disabilities



Livelihood,  
Financial,  
Employment



Education  
and  
Learning



Access to  
Healthcare and  
its Impact



Psycho-social  
Impact

# Impact of COVID-19 on Livelihood and Employment of Persons with Disabilities

- 74%, n=44 of all were of working age:
  - of them, only 36 %, n=16 employed before pandemic
  - Most in low-paid, wage-based, small businesses and farming– supporting family in cattle rearing, farming etc.
- Most participants with difficulties in **communication, self-care, intellectual disabilities, psycho-social disabilities, hearing disabilities** of working age could not earn.

# Impact of COVID-19 on Livelihood and Employment of Persons with Disabilities

Most of those working before COVID-19 either **lost their jobs** or were **struggling with reduced income** during the pandemic.

*“Small factories/employers who usually hire persons with disabilities hardly received the Government’s stimulus packages for businesses. Many of these businesses collapsed, and employees with disability lost their jobs.”*

– an OPD leader with visual disability during a KII

Participants who lost jobs/income were constantly looking for alternate income source/jobs, **but to no avail.**

# Impact of COVID-19 on Livelihood and Employment of Persons with Disabilities

Most participants and their families were **challenged with reduced living expenses.**

*"Vehicles don't ply on the street nowadays. We are going through a very difficult time. Some days, I do not get to earn any money at all."*

– male with physical disability, 55

*"We are not worried about corona. We are poor. We have to work for our living. If Allah takes us back, there's nothing we can do."*

– a person with multiple disability

# Impact of COVID-19 on Education of Persons with Disabilities

- Nation-wide initiatives offering **distance education** or **online classes** **massively overlooked** the diversified needs of children with different types of disabilities in Bangladesh.
- Among 16 students, 11 (69%) had no access to smart phones.
- Students with disabilities in **poor families** and or living in **remote locations/rural areas** did not have much scope or access to online classes.
- No **incentive and/or support** given to students to access online classes, e.g., access to smartphones or the internet.

# Impact of COVID-19 on Education of Persons with Disabilities

*“We are very ill-fated that our education has come to a halt for the past two years.”*

– adolescent boy with visual disability (16) who misses studying and playing with friends



# Impact of COVID-19 on Education of Persons with Disabilities

Children with various types of neurodevelopmental disabilities, who were enrolled in schools have suffered greatly.

*“Before the pandemic, my daughter learned to write her ABCs, but as schools were closed in the last 18 months, she had forgotten to write her alphabets.”*

– mother of 13-year old child with severe intellectual disability



# Impact of COVID-19 on Health of Persons with Disabilities

Persons with disabilities were **more vulnerable to contracting the virus** for various reasons, such as:

*“People can walk without bumping into others, but in my case, I **get bumped into others**. If someone is coughing or sneezing, and there are people around him, they can move away immediately, **but I can’t**. Sometimes, people even cough on me.”*

- person with visual disability desperately looking job after his business collapsed

# Impact of COVID-19 on Health of Persons with Disabilities

Significant impact on persons with disabilities who were **unable to access and/or benefit** from generalized/specialized healthcare due to:

- shut down of some service centres
- for fear of exposure to COVID-19
- lack of information and/or access to services available online

**Inadequacy and/or unavailability** of the much-needed therapies have had **various adverse effects** on the quality of their lives

# Impact of COVID-19 on Health of Persons with Disabilities

Those who cannot reach out to service points and/or do not have the means and/or family support to reach or **were in doubt about accessing the services** or remained without services/vaccination (Source: 2 IDI)

Despite the physical inaccessibility of the vaccination centres, once persons with disabilities was able to reach, who **were prioritized to receive services** for vaccination (Source: KII with OPD)

# Psychosocial Impact of COVID-19 on the Lives of Persons with Disabilities

**Suffered severely from psychological distress:** adolescents/ young adults with neurodevelopmental/ psychosocial disabilities **particularly vulnerable.**

*“Self-isolation is a very difficult, and perhaps an impossible task for some people with down syndrome and other intellectual disabilities.”*

- mother of a young adult with down syndrome who contracted the virus despite being aware

# Psychosocial Impact of COVID-19 on the Lives of Persons with Disabilities

**Suffered from anxiety of losing their loved ones to coronavirus.** For some of them, the coronavirus disease appeared almost synonymous with people dying.

*“I am scared, people die ... boys, girls, everyone can die from corona.”*

- young woman with multiple disabilities and communication/psychosocial difficulties

# Psychosocial Impact of COVID-19 on the Lives of Persons with Disabilities

Older, dependent people with disabilities **worried about the safety of family members**, e.g., what might happen if they lost their jobs?

*“She only gets worried when a lockdown is issued. She worries that it could get her son fired from his job.”*

– primary caregiver of an elderly woman who has difficulties remembering

# Psychosocial Impact of COVID-19 on the Lives of Persons with Disabilities

The vulnerability to **violence** also increased for various reasons. Some **succumbed to violent behavior**.

*“Usually, he is very calm and quiet. But during the lockdown, he developed violent tendencies. We are taking him to the Mental Hospital for three months now. I don’t know why he becomes so hyper all of a sudden.”*

– mother of a young adult with intellectual disability



# Psycho-social Impact of COVID-19 on Caregivers

Extraordinary pressure on the caregivers, **mainly mothers/female**, who often single handedly provided care.

*“I worry because I don’t know what the boys might do to my grown-up daughter. There’s no telling if they will attack her or say something bad. I have to stay in others’ houses in fear. I wouldn’t have to worry so much if she was a boy. I don’t have a husband who could support me in these situations.”*

– a single mother of a 16-year old girl with communication and physical disabilities

**Concerns and anxiety** of primary caregivers, particularly mothers, have dramatically **increased during the pandemic**.



# Conclusion

- Persons with disabilities and/or the OPDs largely not included in **planning and decision-making processes in COVID-19 response in Bangladesh.**
- This **created/increased existing barriers**, particularly for **women and girls**, less independent, and voiceless (e.g. socio-economically, educationally)

# Recommendations

- Systematically engage with OPDs to **ensure disability-inclusive planning and close the systemic gaps in design and implementation of response activities.**
- Introduce **disability-disaggregated data** on all key areas including **health and wellbeing, education and learning, employment and livelihood.**
- Implement the principle of **mandatory inclusion of disability** as a theme for any future research, including those focusing the pandemic **to inform decisions.**
- Business stimulus packages should **tie up clauses for retaining persons with disabilities** during any future emergencies such as the COVID-19 pandemic.

## Recommendations

- Utilize **disability-friendly technology** and **apps** to make online platforms more interactive for students with disabilities.
- Create **financial support provisions** for students to participate in **remote learning**.
- Implement **measures to bring drop-out** students with disabilities back to school.
- Focus on making **skills training** accessible for youth with disabilities.
- Make the government's **pledge on disability-inclusion** a reality.

THANK  
YOU



Image: Disability Rights Texas

**Tim Hart**  
**Institute of Development Studies**

South Africans with disabilities' experience of  
COVID-19 findings from a large online survey



# **South Africans with disabilities' experience of COVID-19 findings from a large online survey**

**15 March 2022, London, UK**

6th International Conference on  
Disability and Development:  
Disability and COVID-19

By

Tim Hart, Mary Wickenden, Yul  
Derek Davids, Stephen Thompson,  
Mercy Ngungu, Yamkela Majikijela,  
Tinashe Rubaba, Nthabi Molongoana

# Introduction

- The research specifically looked at the socio-economic, wellbeing and human rights related experiences
- Data collected through an online voluntary survey with nearly 2,000 respondents
- Possibly one of the largest datasets on people with disabilities' Covid-19 experiences in a single country



# Study Motivation

- Between 12%-20% of the SA population over 5yrs have some form of disability
- COVID-19 – What is impact on persons with disabilities in South Africa?
  - Overlooked generally by disaster relief
  - Ignored by pandemic directives
  - Impacted negatively by regulations aimed at virus control
  - Neither DM Act (2002) or the DMF (2005) acknowledge people with disabilities or that they have diverse needs different to other vulnerable groups in the country
  - Stipulations of Section 3.5 of WPRPD Disaster implementation framework far from complete

# Background

- Desire to explore further evidence but constrained by Covid-19 regulations relating to fieldwork – online self-administered survey with associated weaknesses.
- Strong collaboration between national DPO, national research council and international research institute.
- Research process very collaborative and knowledge exchange encouraged and respected
- Roles of 3 partners: IDS funder liaison, and overall leadership, HSRC local project management and research design, and NCPD access to people with disabilities and DPO networks. NCPD instrumental in survey distribution and high response rate
- 1857 final valid responses

# High Level Key Findings

- Very little government intervention – reliance on DPO sector and other NGOs
- Communication about Coronavirus and monthly meetings inadequate for certain types of disabilities as most rely on Television – captions not existent, SASL interpreters not always visible, language challenges
- Resulted in confusion about intervention services available
- Negative economic impact of regulations 30% unemployed at start of Lockdown
- 13% Job losses, 11% reduced pay, 6% compulsory leave, negative impact on own business
- 31% receiving disability grant but 33% receiving the (paltry) SRD grant -£17/m.
- 10% elderly persons grant
- Thus most are poor – less GBP 238 / ZAR 5000 per month

# Unfamiliar Experiences

- Higher food insecurity experiences - generally 40% at some stage
- BUT 29% during the survey - after 16 months of pandemic relief interventions
- 76% difficulty in paying for basic living expenses and noticed increases in disability expenditure (hygiene, sanitation, medication)
- 60% reliant on daily carer services and 73% interrupted
- Rehabilitative services interrupted for long period – medical, counselling, physical therapy
- Disability specific services also interrupted – repairs to assistive devices delayed
- Psychosocial experiences – 60% Stressed, 54% Depressed, 52% Scared/Anxious, 42% Lonely – limited social interaction as many live alone
- Most government and other providers considered by 48% to be doing a poor job
- 37% rely on state but greater movement to DPOs - 51% for COVID-19 specific support

# Conclusions

- Disability Rights Disaster Framework far from complete – must be completed urgently
- Overlooked by many interventions – lack of disability-inclusive approach
- Mitigation and control regulations had negative consequences on rehabilitative and other services
- Diversity of people within sector ignored
- Information and interventions more accessible to those on the system – existing grant recipients
- Little interaction/collaboration across departments and with DPOs
- Data driven response but lack of disability data!
- 83% feel that government should monitor circumstances during pandemics – ensure continuity of services and monitor rights protection