



Wellbeing in the COVID-19 pandemic

How are primary actors coping?

Summary – September 2020

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The global impact of the COVID-19 pandemic has caused considerable human suffering and exposed the limitations of health, education, and economic systems around the world. The crisis has disproportionately impacted the marginalised communities that VSO works with.

What we did

VSO conducted wellbeing assessments in sample VSO countries to better understand the vulnerability, inequality and priority needs of primary actors – which includes community volunteers – and how VSO can help. The assessments were guided by the following questions:

- What is the situation among primary actors during the COVID-19 pandemic?
- How are primary actors coping with their challenges?
- What services are and are not available in the community?
- What are the priority needs of primary actors during this time?

Who we spoke to

The assessment reached a total of 6,306 primary actors – 2,861 through a rapid yet in-depth wellbeing assessment carried out in Nepal, Pakistan, and Malawi and 3,445 through a digital rapid assessment survey on resilient livelihoods conducted in several countries including Kenya, Philippines, Nigeria, Cambodia, Tanzania, Bangladesh, Pakistan, Ethiopia and Uganda

What we found

Access to basic services

Access to services by primary actors in the countries surveyed has significantly declined due to the pandemic. This is particularly apparent in health, education and livelihood services. The existing assistance from governments and NGOs does not meet the needs of the population, which have risen as a direct effect of COVID-19.

Priority needs

Across all the surveys, the immediate need for food, due to reduced access and affordability during the pandemic, emerged as the greatest priority for primary actors and community volunteers. Additionally, the strengthening of health and education services, increased employment and income opportunities, improved access to services for survivors of GBV, and better awareness-raising on measures for protection against the transmission of COVID-19 have also come out as priority needs.

Gaps in service provision

Food assistance, psychosocial support and support for survivors of GBV are all priorities in the current situation, according to people surveyed, yet these services are not currently being provided to the majority of people. The COVID-19 crisis has magnified existing socio-economic inequities and the burden is higher on marginalised and vulnerable groups, particularly those with disabilities who, based on the findings in this study, are remarkably left out of COVID-19 response interventions.

Our response

VSO country programmes have already started using the findings from these surveys to guide and repurpose their response interventions through initiatives like radio-based distance learning, distributing food, hygiene kits and providing cash grants to the most vulnerable primary actors.

Key findings and recommendations

The most marginalised communities are facing immediate food shortages.

Recommendation: Respond to food security challenges by assisting and advocating for programmes that will help the most vulnerable communities regain and advance their food security.

Healthcare systems are overwhelmed in the crisis.

Recommendation: Support the strengthening of health services. The level of mental health impact is a big indicator that reduced access to, and quality of, healthcare is a risk to the wellbeing of the most marginalised communities.

The majority of children have had no access to education during school closures.

Recommendation: Support virtual literacy and numeracy learning through radio programmes and teacher training for distance/technology-based learning for children in the poorest, most marginalised and vulnerable communities.

Livelihoods are significantly impacted, people are seeking new ways to generate income.

Recommendation: Expand livelihood opportunities through skills-for-market training and employment, income, social protection and credit support.

Mental pressure was identified as a major priority need.

Recommendation: Promote psychosocial support programmes to help people cope with the stress of the crisis.

The burden is higher on marginalised and vulnerable groups.

Recommendation: Encourage gender mainstreamed programme design to ensure that the specific needs of all people are being addressed in COVID-19 response interventions.

Access to services by primary actors in the countries surveyed has significantly declined due to the pandemic.

Recommendation: Advocate for improved access to basic services for rural and vulnerable communities, including those with disabilities and survivors of GBV.

Some of the most marginalised communities have trouble accessing information, especially online.

Recommendation: Expand awareness-raising through ICT e.g. radio-based programmes on measures for protection against the transmission of COVID-19 and identifying reliable information to reduce the spread of rumours. Consider training community volunteers to lead community awareness-raising activities that follow social distancing guidelines.