Child & Family Tracker

Tracking the Socio-Economic Impact of COVID-19 on Children and Families in Nepal

Baseline Findings

Photo credit: UNICEF Nepal

Content

- The following are the findings of the first in a series of **monthly household surveys** to **track the socio-economic multi-sectoral impact of COVID-19 on children and families in Nepal**

- As such, this **first survey issue,** carried out at the **end of May 2020**, establishes the **baseline for the monthly surveys** to be carried out and issued over the coming months

- Where available, the monthly household survey data will be supplemented by relevant child-related data from other sources

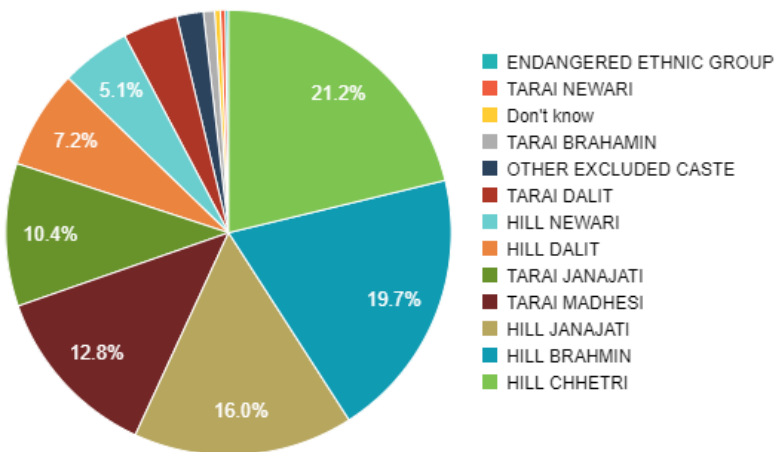|		
Household characteristics (gender, ethnicity, caste, place of residence, employment, income, disability)	**Livelihood losses**	**Immediate needs** (Food, WASH, fuel etc.)
Access to social protection	**Access to Nutrition**	**Access to WASH**
Access to health services	**Access to education**	**Child exploitation** (Child labour, trafficking, prostitution, child marriage)
Violence against children (GBV, corporal punishment, mental health)	**COVID-19 awareness & behaviour**	

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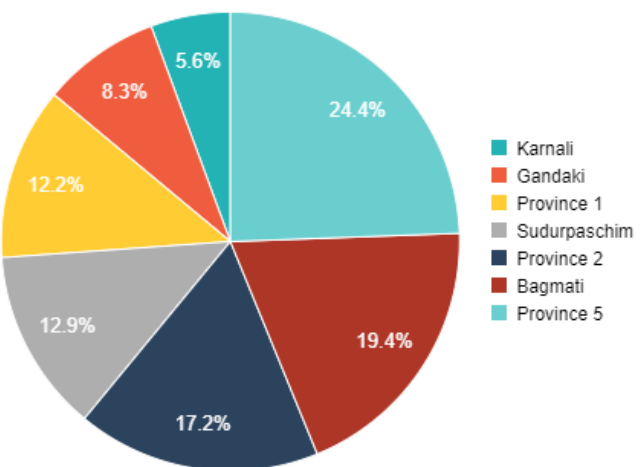
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Survey Methodology

- 85% of municipalities were covered by the survey

- Sample size: 7,500 households with at least one child (survey covered 42,244 people-38% children)

- Data quality: Whipple's index for age = 123, which is good for telephone interviewing.

- Sample was nationally and provincially representative.

- Some findings can be disaggregated at the district level and some even for the ward level.

- Geospatial projections are also possible at municipality level.

Properties of the sample: ethnicity & provincial distribution

- ENDANGERED ETHNIC GROUP
- TARAI NEWARI
- Don't know
- TARAI BRAHAMIN
- OTHER EXCLUDED CASTE
- TARAI DALIT
- HILL NEWARI
- HILL DALIT
- TARAI JANAJATI
- TARAI MADHESI
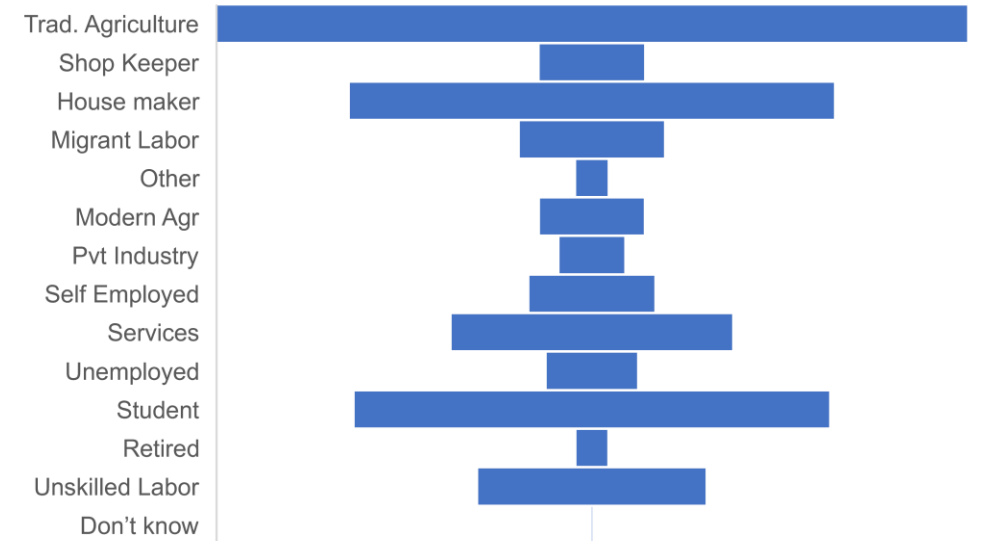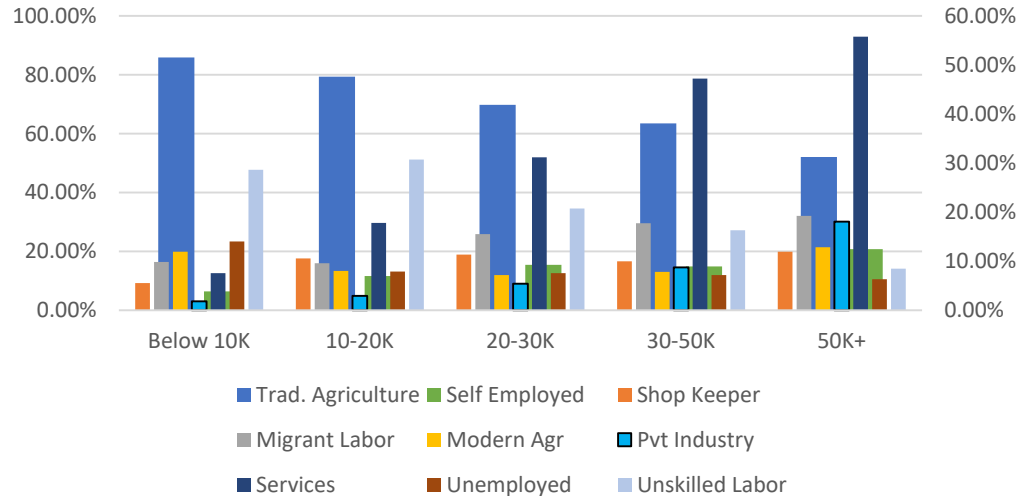- HILL JANAJATI
- HILL BRAHMIN
- HILL CHHETRI

The sample can be segmented according to key dimensions such as ethnicity, income group, province, place of residence, gender and disability status.
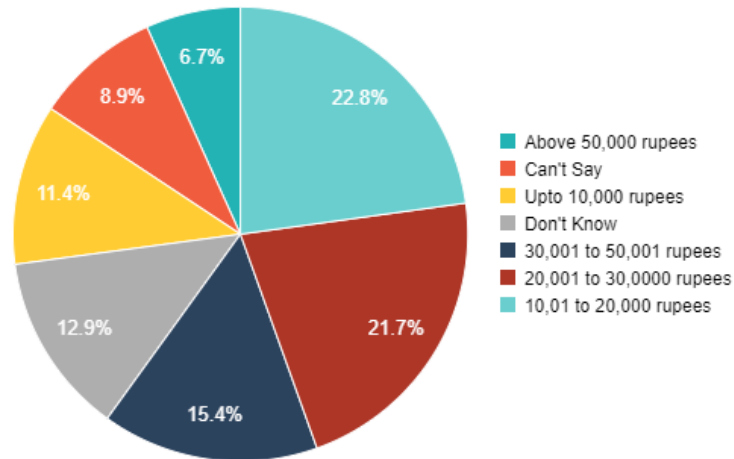

- Karnali
- Gandaki
- Province 1
- Sudurpaschim
- Province 2
- Bagmati
- Province 5

DISTRIBUTION OF RESPONDENTS BY PROVINCE

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Properties of the sample: employment & income grouping

Legend:
- Trad. Agriculture
- Self Employed
- Shop Keeper
- Migrant Labor
- Modern Agr
- Pvt Industry
- Services
- Unemployed
- Unskilled Labor

% HOUSEHOLD MEMBERS EMPLOYED BY SECTOR

- Above 50,000 rupees — 22.8%
- Can't Say — 8.9%
- Upto 10,000 rupees — 11.4%
- Don't Know — 12.9%
- 30,001 to 50,001 rupees — 15.4%
- 20,001 to 30,0000 rupees — 21.7%
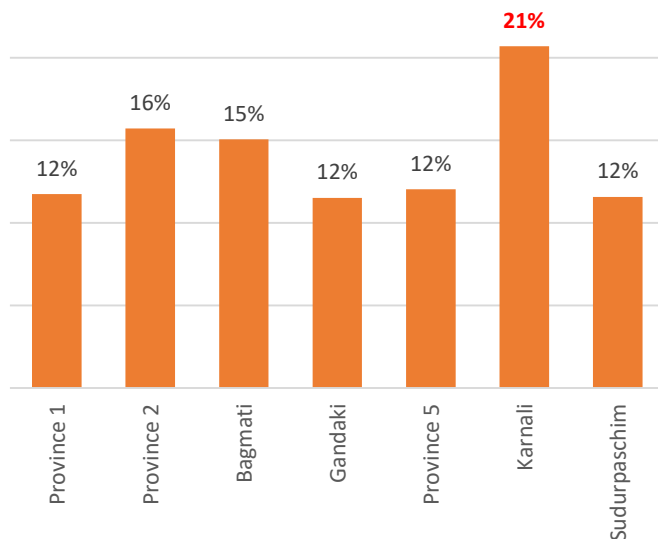- 10,01 to 20,000 rupees — 6.7%

DISTRIBUTION OF RESPONDENTS BY INCOME GROUP

- Agriculture employs 71% of the working population.
- 27% of the households have members who had paying jobs (e.g. teacher, government job, NGO employee and other similar private organizations).
- 21% of the households have members who are engaged in unskilled labour (e.g. daily wage labour, sweeper, household labour).
- Most of those engaged in unskilled labour and in traditional agriculture belong to the bottom two quintiles. Those in public services are better off.
- Compared to other ethnic groups, Hill Brahmins have the highest representation in the top income quintile.
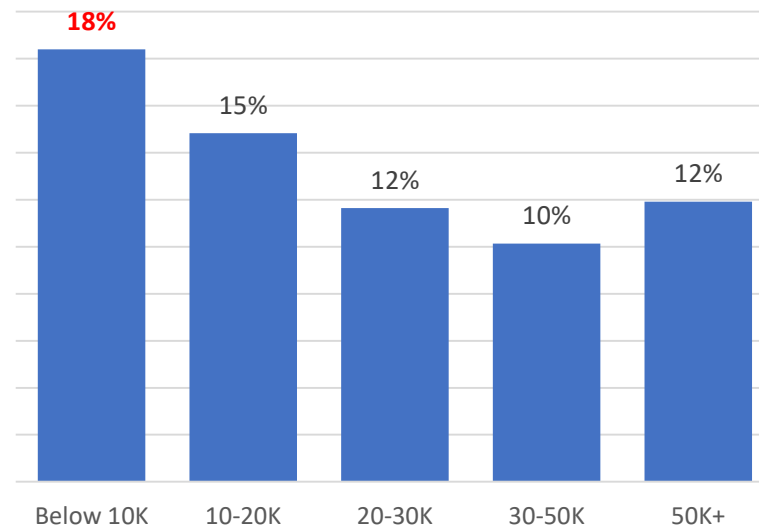
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Properties of the sample: Persons with disabilities

14% of households have members who have functional limitations – prevalence varies by income group, province and place of residence. *1 in 5 family members with functional limitations are children.*
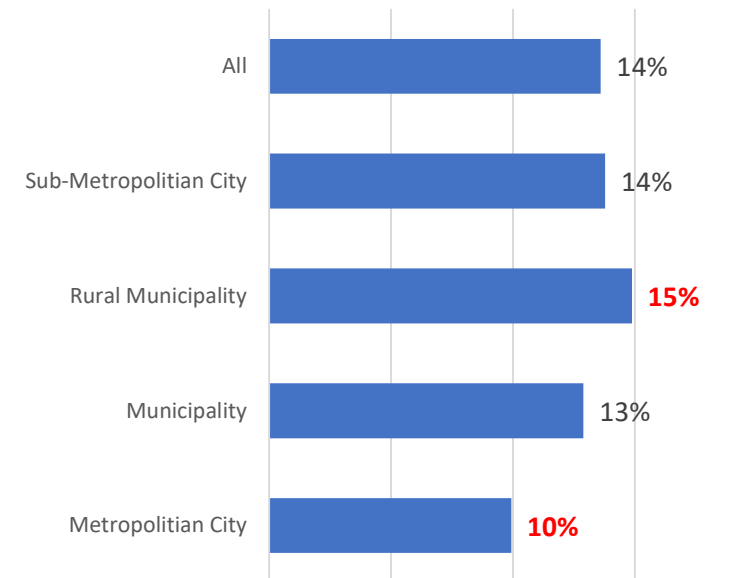
% REPORTING FUNCTIONAL LIMITATIONS BY PROVINCE

Province	%
Province 1	12%
Province 2	16%
Bagmati	15%
Gandaki	12%
Province 5	12%
Karnali	**21%**
Sudurpaschim	12%

% REPORTING FUNCTIONAL LIMITATIONS BY INCOME GROUP

Income Group	%
Below 10K	**18%**
10-20K	15%
20-30K	12%
30-50K	10%
50K+	12%

% REPORTING FUNCTIONAL LIMITATION BY RESIDENCE

Residence	%
All	14%
Sub-Metropolitian City	14%
Rural Municipality	**15%**
Municipality	13%
Metropolitian City	**10%**

| **Ages of household members with functional limitations**	**N**
Below the age of 2	18
Between 2 and 5	38
Between 5 and 18	173
Above the age of 18	879

- Families belonging to low income groups, living in Karnali or in rural municipalities, are more likely to have someone with functional limitations.
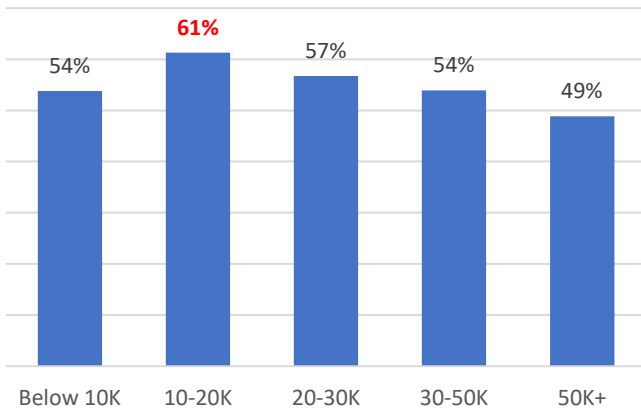
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Livelihood Losses

55% of respondents reported earnings or livelihood losses due to lockdown
Province 2, those from the 2nd income group and those living in sub-metropolitan cities reported the highest rates of earning and livelihood losses
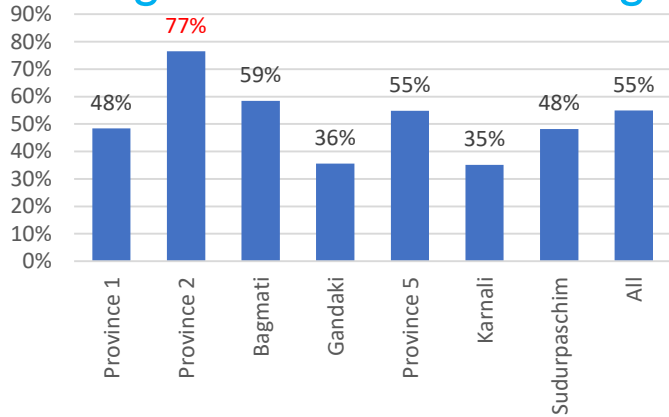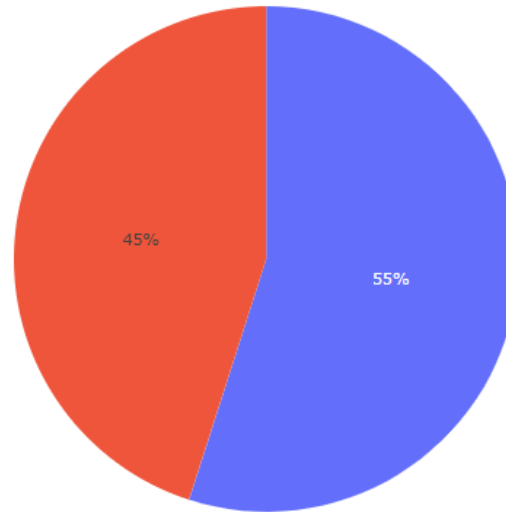

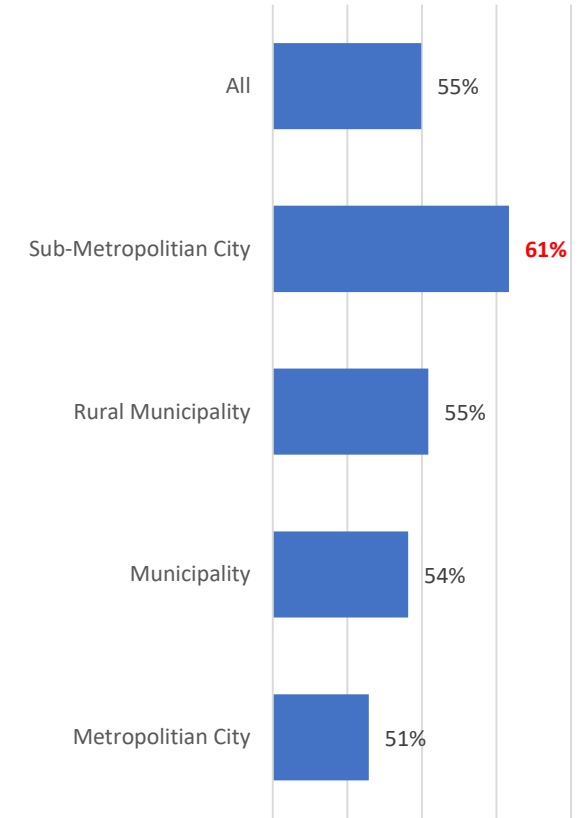% REPORTING EARNINGS OR LIVELIHOODS LOSSES
BY PROVINCE

% REPORTING EARNINGS OR LIVELIHOOD LOSSES
BY INCOME GROUP

% RESPONDENTS REPORTING EARNINGS OR
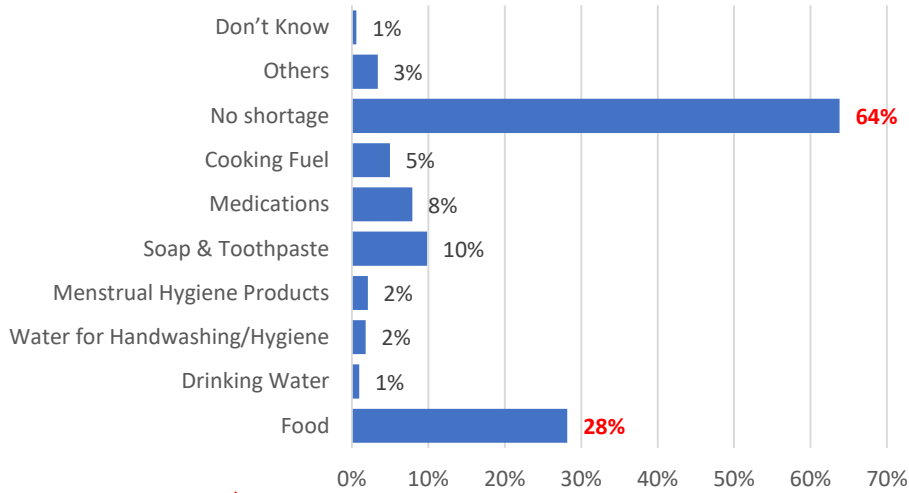LIVELIHOOD LOSSES (BLUE=YES=55%)

MUNICIPALITIES WITH HIGHEST % OF RESPONDENTS
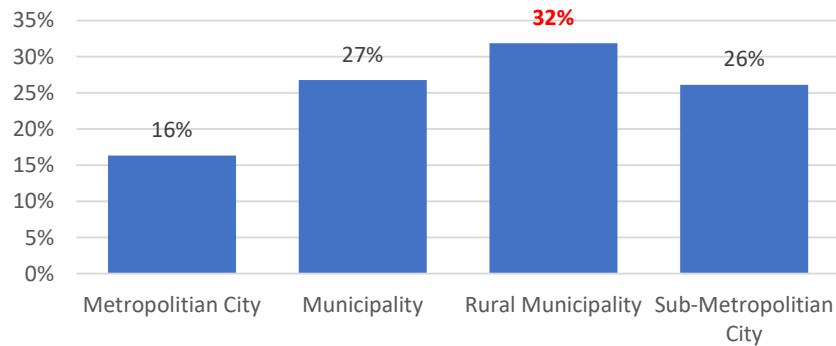REPORTING LOSSES (DARK BLUE)

% REPORTING EARNINGS OR
LIVELIHOOD LOSSES AND PLACE OF
RESIDENCE

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Immediate Needs
1/3rd of households reporting shortage of food, medicines, cooking fuel, soap and toothpaste
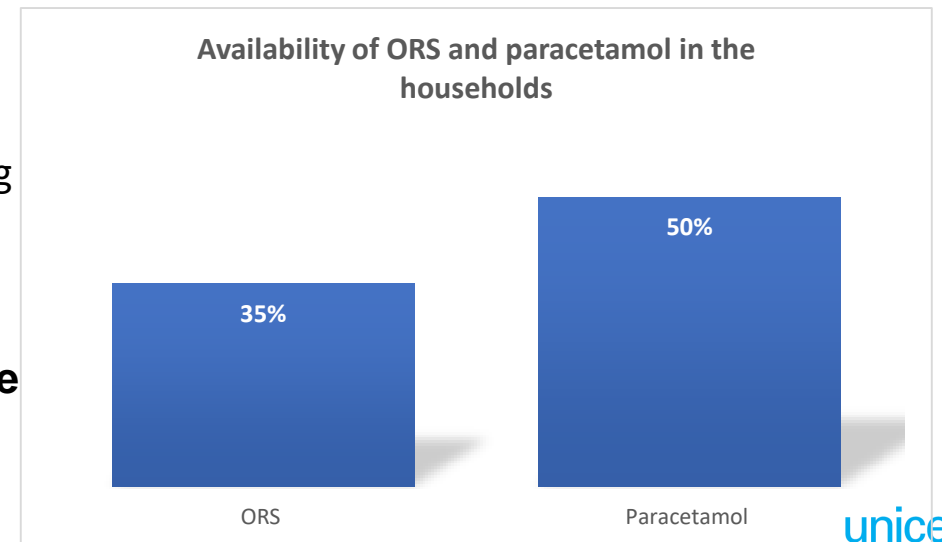

IMMEDIATE NEEDS OF HOUSEHOLDS (% RESPONDING YES)

- Don't Know — 1%
- Others — 3%
- No shortage — **64%**
- Cooking Fuel — 5%
- Medications — 8%
- Soap & Toothpaste — 10%
- Menstrual Hygiene Products — 2%
- Water for Handwashing/Hygiene — 2%
- Drinking Water — 1%
- Food — **28%**

- Rural municipality households have higher need for food compared to other residence areas.
- Triple impact of pre-monsoons (lean season), lockdown supply disruptions , demand and behaviour change due to loss of earnings
- Coping mechanisms: using savings, coping through agricultural work, food rations being provided
- **Relatively early stages of lockdown, needs might be more acute now**
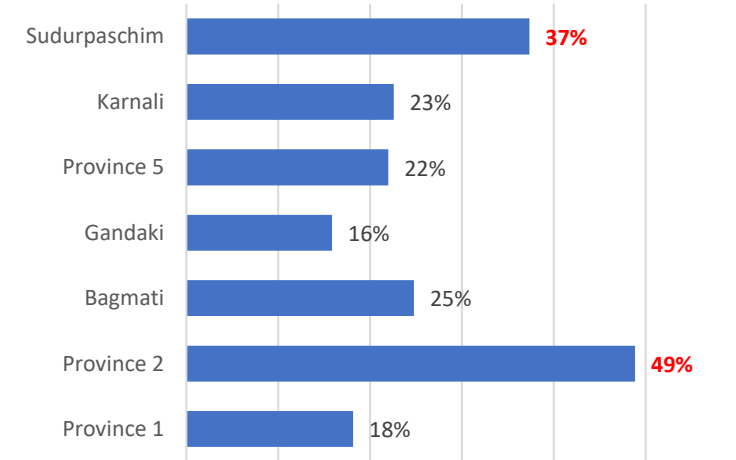
% REPORTING FOOD SHORTAGE AND PROVINCE

- Sudurpaschim — **37%**
- Karnali — 23%
- Province 5 — 22%
- Gandaki — 16%
- Bagmati — 25%
- Province 2 — **49%**
- Province 1 — 18%

% REPORTING FOOD SHORTAGE AND PLACE OF RESIDENCE

- Metropolitian City — 16%
- Municipality — 27%
- Rural Municipality — **32%**
- Sub-Metropolitian City — 26%

Availability of ORS and paracetamol in the households

- ORS — 35%
- Paracetamol — 50%

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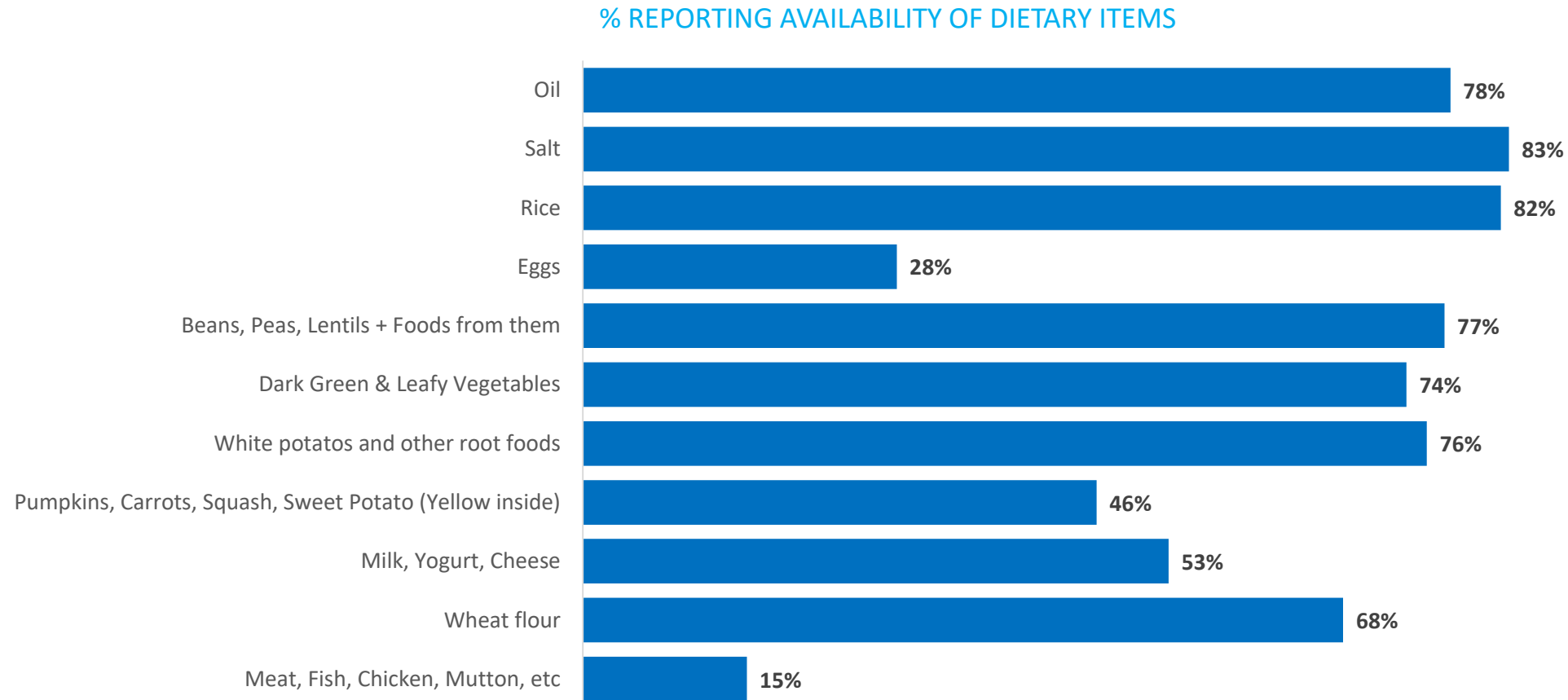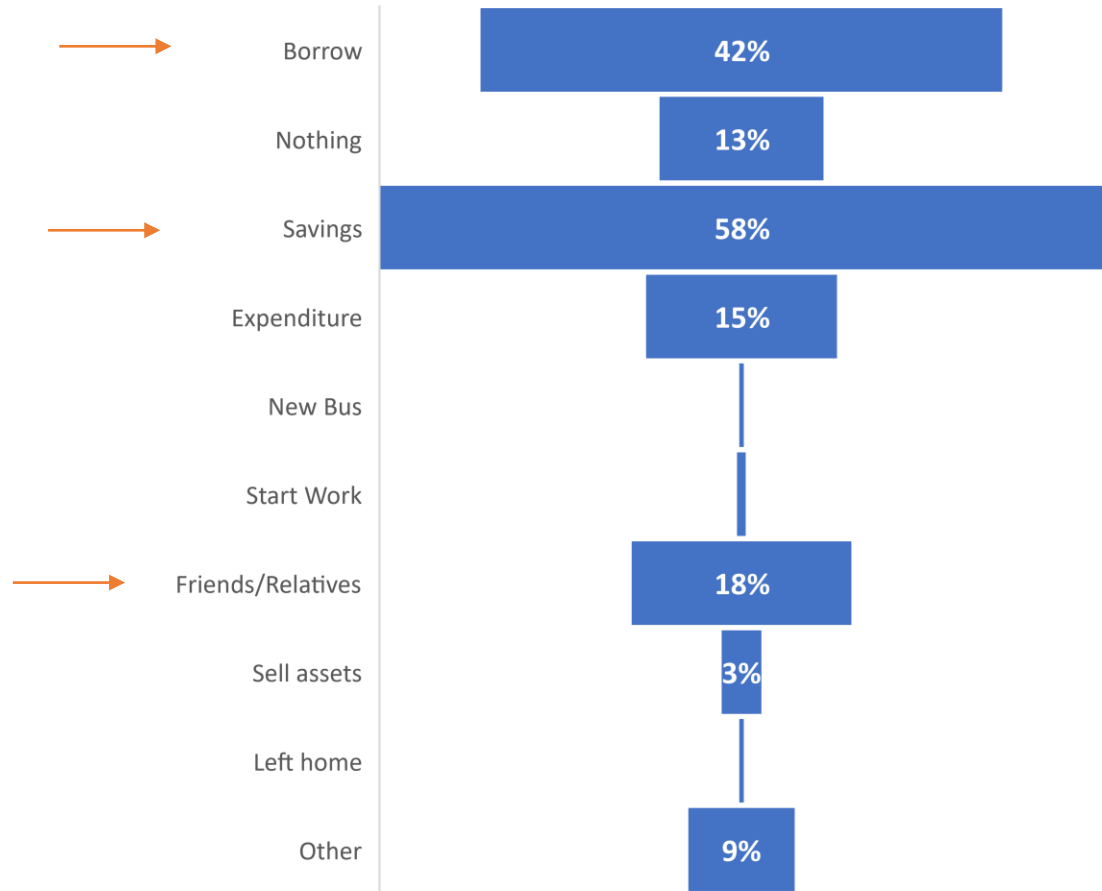
Immediate Needs

A large proportion of households are not able to confirm availability of key items of their regular diet.
Constrained access to proteins, dairy products and some vegetables

% REPORTING AVAILABILITY OF DIETARY ITEMS

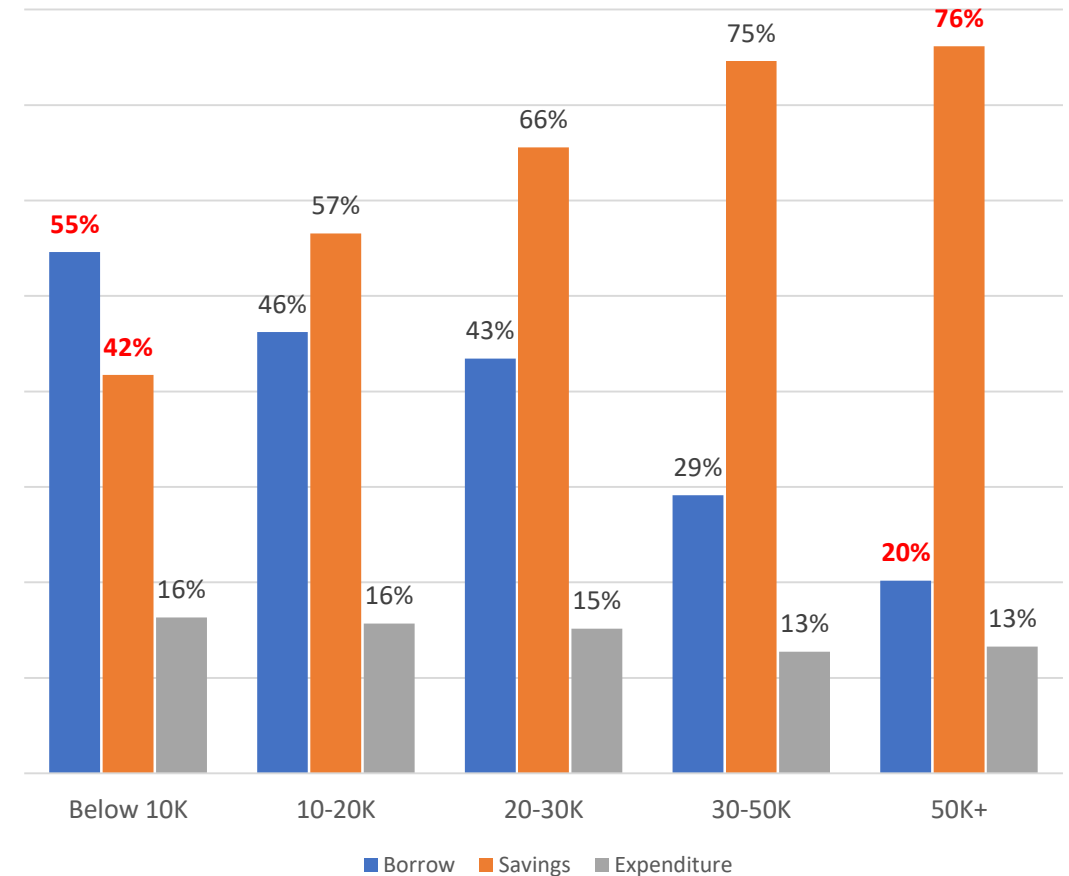| Dietary Item	%
Oil	78%
Salt	83%
Rice	82%
Eggs	28%
Beans, Peas, Lentils + Foods from them	77%
Dark Green & Leafy Vegetables	74%
White potatos and other root foods	76%
Pumpkins, Carrots, Squash, Sweet Potato (Yellow inside)	46%
Milk, Yogurt, Cheese	53%
Wheat flour	68%
Meat, Fish, Chicken, Mutton, etc	15%

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Family Coping Patterns
The majority of families are borrowing or depleting their savings.
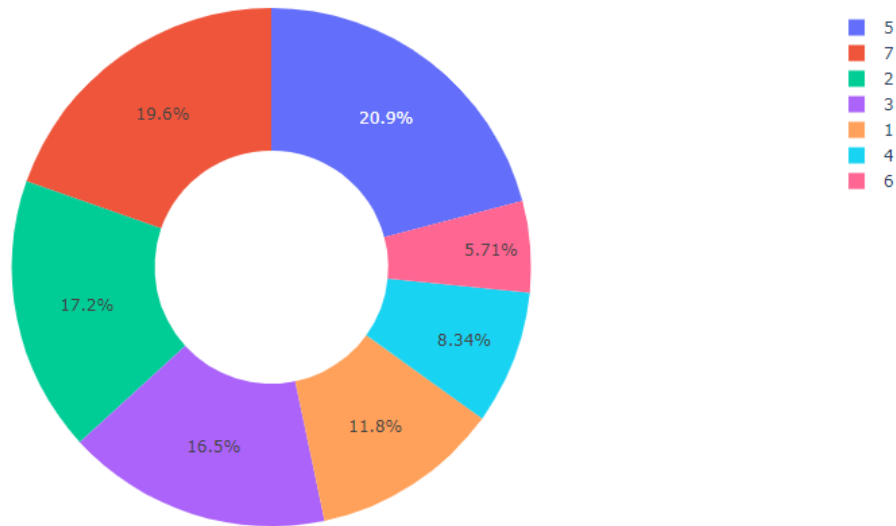## This varies across income groups. Family and friends provide crucial support.

FINANCIAL COPING BEHAVIOR IN RESPONDENT'S HH (% REPORTING YES)

Borrow → 42%
Nothing 13%
Savings → 58%
Expenditure 15%
New Bus
Start Work
Friends/Relatives → 18%
Sell assets 3%
Left home
Other 9%

CHANGES IN COPING PATTERNS ACROSS INCOME GROUPS

Below 10K: Borrow 55%, Savings 42%, Expenditure 16%
10-20K: Borrow 46%, Savings 57%, Expenditure 16%
20-30K: Borrow 43%, Savings 66%, Expenditure 15%
30-50K: Borrow 29%, Savings 75%, Expenditure 13%
50K+: Borrow 20%, Savings 76%, Expenditure 13%

■ Borrow   ■ Savings   ■ Expenditure

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Social Protection - Social Security Allowances
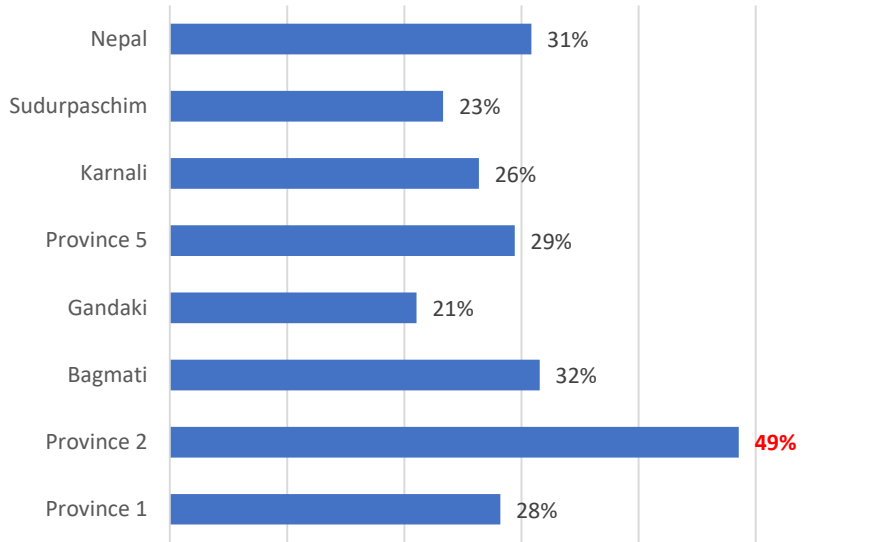

% DISTRIBUTION OF SSA RECIPIENTS ACROSS PROVINCES
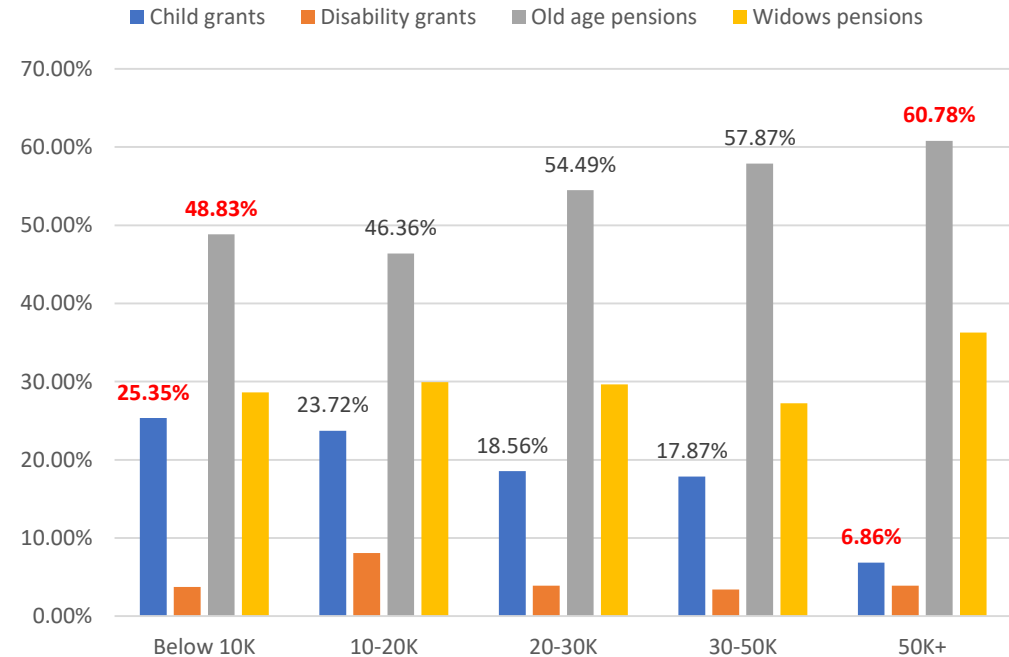
INCOME GROUP AND PERCENT OF RESPONDENTS RECEIVING DIFFERENT TYPES OF SOCIAL SECURITY ALLOWANCES IN THEIR HOUSEHOLDS
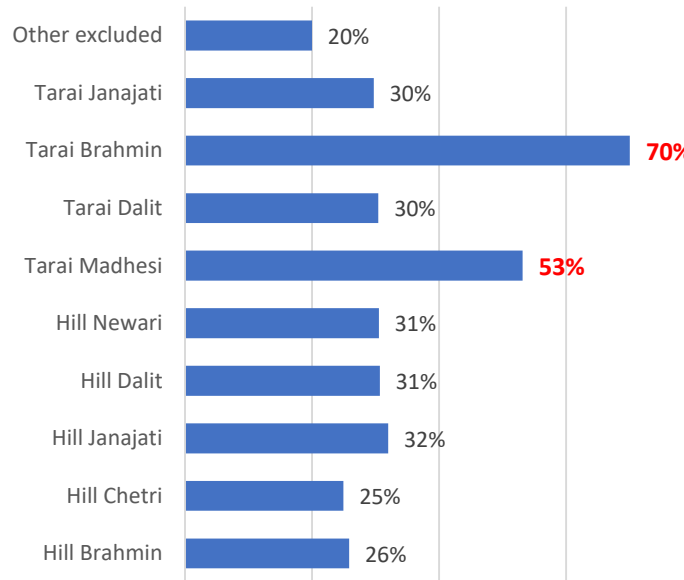
- 21% of households included in the survey received SP allowances.
- Only 12% of families reporting functional limitations receive disability allowances.
- More than half of the respondents receiving SP allowances came from Provinces 5, Sudurpaschim (7) and Province 2, implying a pro-poor slant in SSAs.
- Classifying the different types of social security allowances by income group of recipient households shows that child grants are more redistributive than other SSAs.

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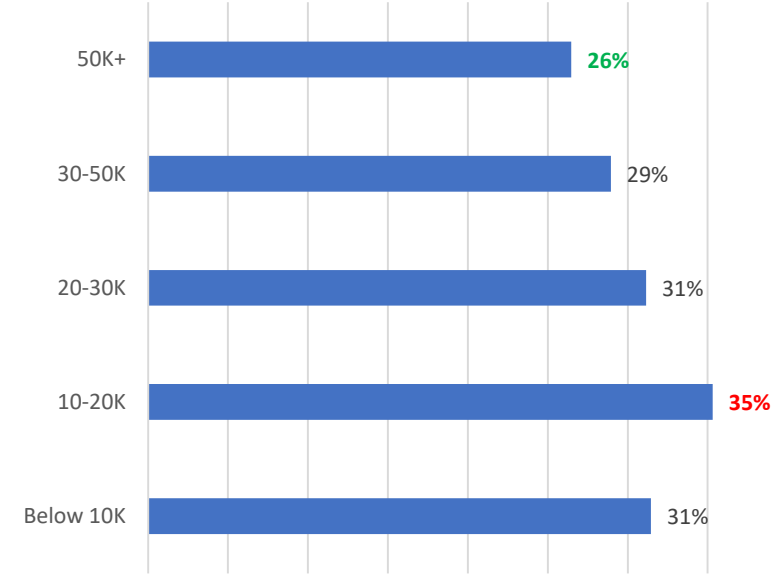
Social Protection
31% of SSA recipients reported "greater difficulty" in receiving payments due to lockdown

% REPORTING DIFFICULTIES IN RECEIVING SSA BY PROVINCE

Province	%
Nepal	31%
Sudurpaschim	23%
Karnali	26%
Province 5	29%
Gandaki	21%
Bagmati	32%
Province 2	49%
Province 1	28%

% REPORTING DIFFICULTIES IN RECEIVING SSA BY ETHNICITY

Ethnicity	%
Other excluded	20%
Tarai Janajati	30%
Tarai Brahmin	70%
Tarai Dalit	30%
Tarai Madhesi	53%
Hill Newari	31%
Hill Dalit	31%
Hill Janajati	32%
Hill Chetri	25%
Hill Brahmin	26%

% REPORTED DIFFICULTIES IN RECEIVING SSA BY INCOME GROUP

Income Group	%
50K+	26%
30-50K	29%
20-30K	31%
10-20K	35%
Below 10K	31%
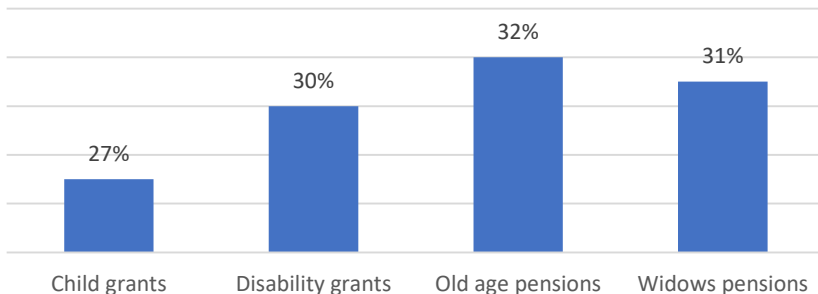
% REPORTED DIFFICULTIES IN RECEIVING SSA BY TYPE

Type	%
Child grants	27%
Disability grants	30%
Old age pensions	32%
Widows pensions	31%

- The largest number of those reporting difficulties belong to Province 2.
- Tarai Brahmins (70%) and Tarai Madhesis (50%) are significantly more likely to experience difficulties underscoring the predominance of geography/place of residence effect over caste.
- Respondents from 2nd income group are most likely to report difficulties - needs further unpacking.

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Nutrition

More than 1 in 5 respondents indicated that their children are experiencing changes in dietary intake. Children in low income households are more likely to experience changes in dietary intake.

Reduce amount of food at meals 2%

No food in 24 hrs. 0%

No change 74%

Reduce number of meals 3%

Reduce variety of meals 21%
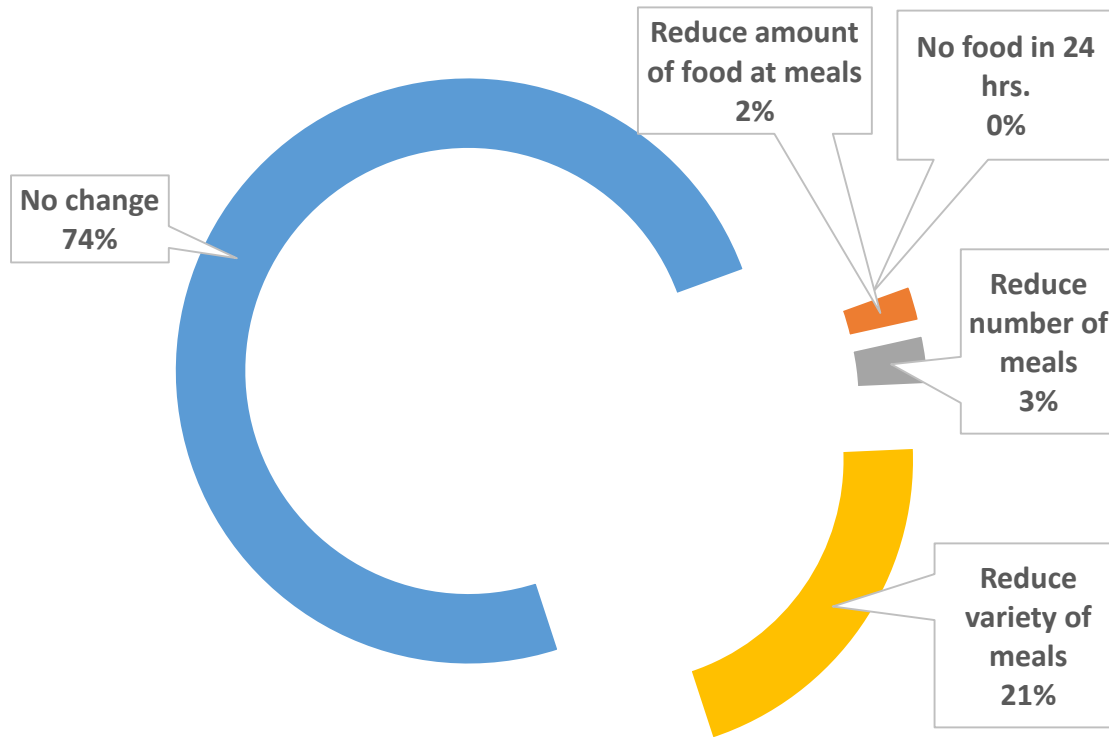
CHANGES IN CHILDREN'S DIETARY INTAKE DURING LOCKDOWN

% REPORTING CHANGES IN CHILDREN'S DIETARY INTAKE DURING LOCKDOWN BY INCOME GROUP

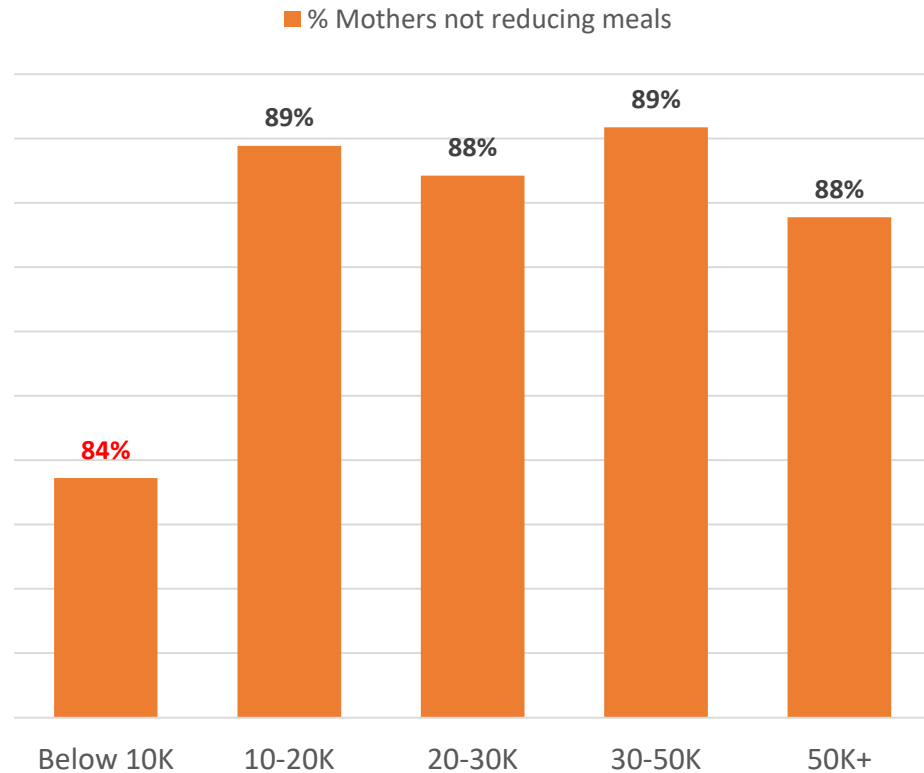| Below 10K	10-20K	20-30K	30-50K	50K+
32%	30%	25%	22%	12%
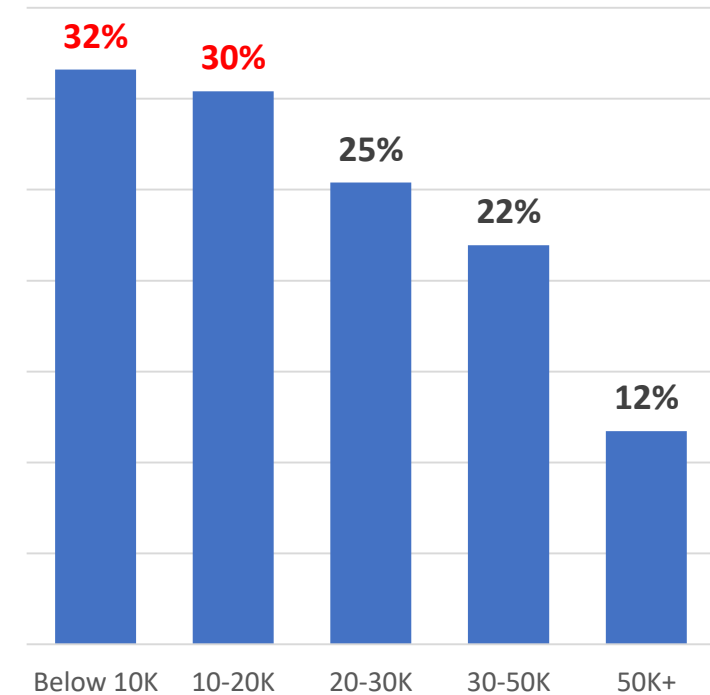
This is a key worrying observation indicating a behavioural response to increased hardship and uncertainty. Some of these changes could indeed be related to seasonal shortages.
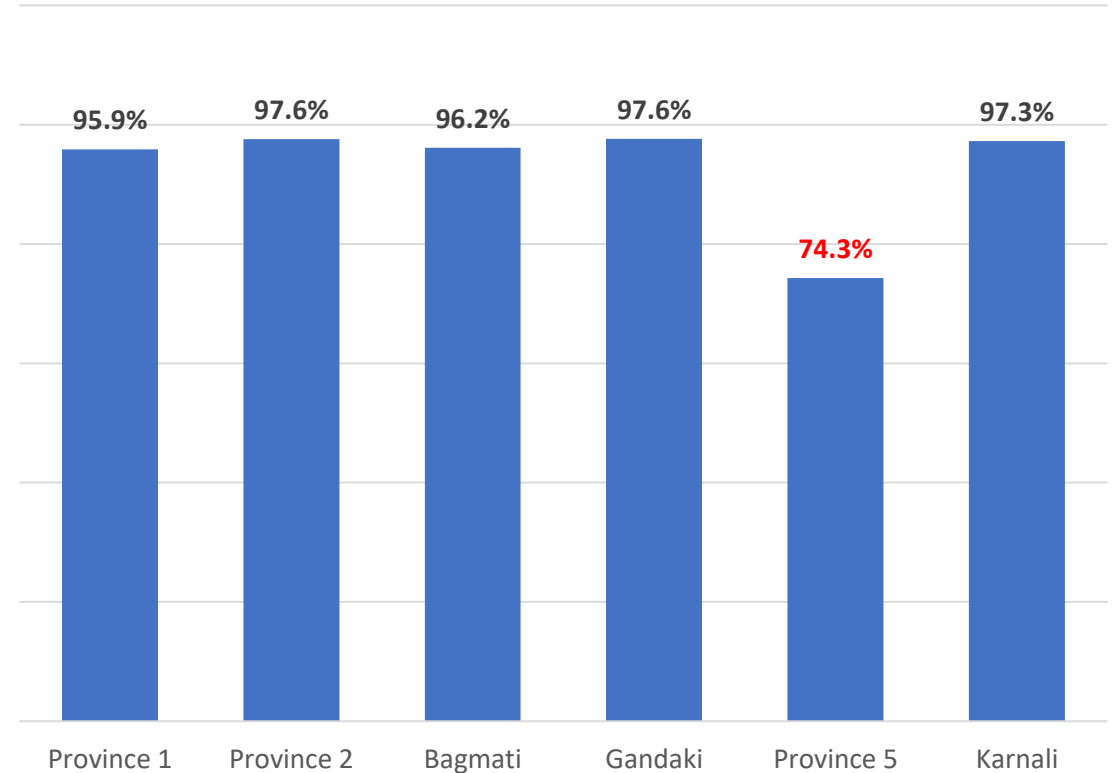
Nutrition

90% of mothers of children under two reported breastfeeding at the time of the survey (May 2020). Province 5 has significantly lower rates.
Breastfeeding mothers from the lowest income group are most likely to reduce the number of meals per day (16%) during lockdown.

■ % Mothers not reducing meals

84% | 89% | 88% | 89% | 88%
Below 10K | 10-20K | 20-30K | 30-50K | 50K+

% OF BREASTFEEDING MOTHERS NOT REDUCING THE NUMBER OF MEALS DUE TO LOCKDOWN

95.9% | 97.6% | 96.2% | 97.6% | 74.3% | 97.3%
Province 1 | Province 2 | Bagmati | Gandaki | Province 5 | Karnali

VARIATION IN BREASTFEEDING PREVALENCE BY PROVINCE
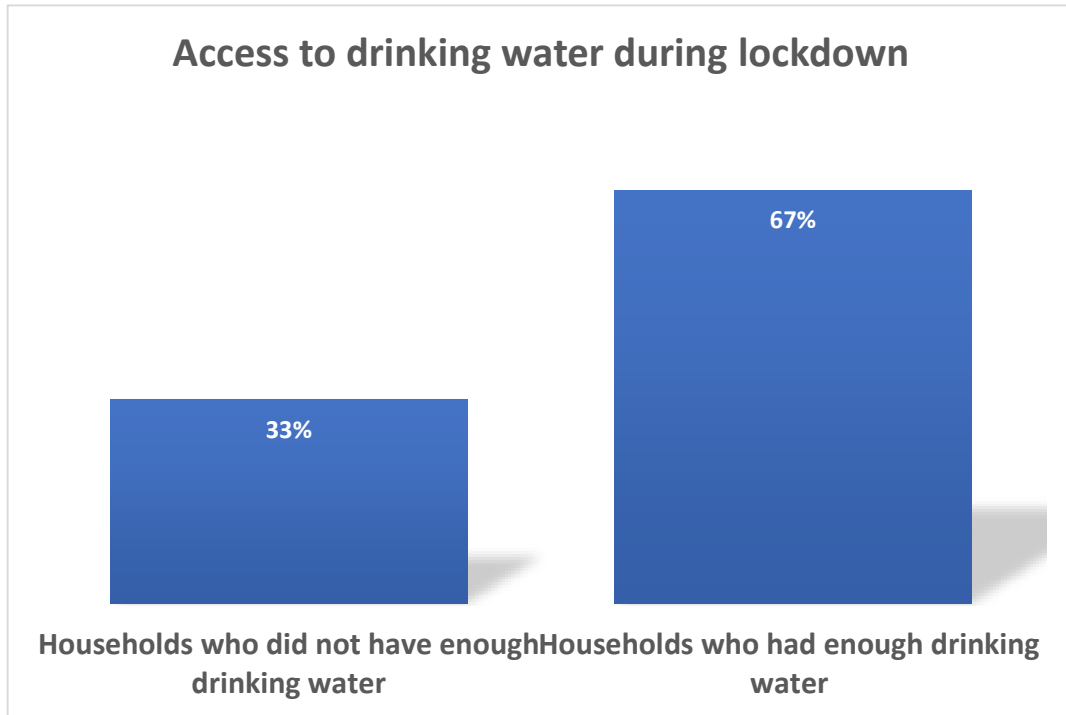
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Nutrition

1 in 5 children are experiencing changes in the frequency of breastfeeding.
Children under two in provinces 5, Karnali & Sudurpaschim are the most likely to face changes in the frequency of breastfeeding
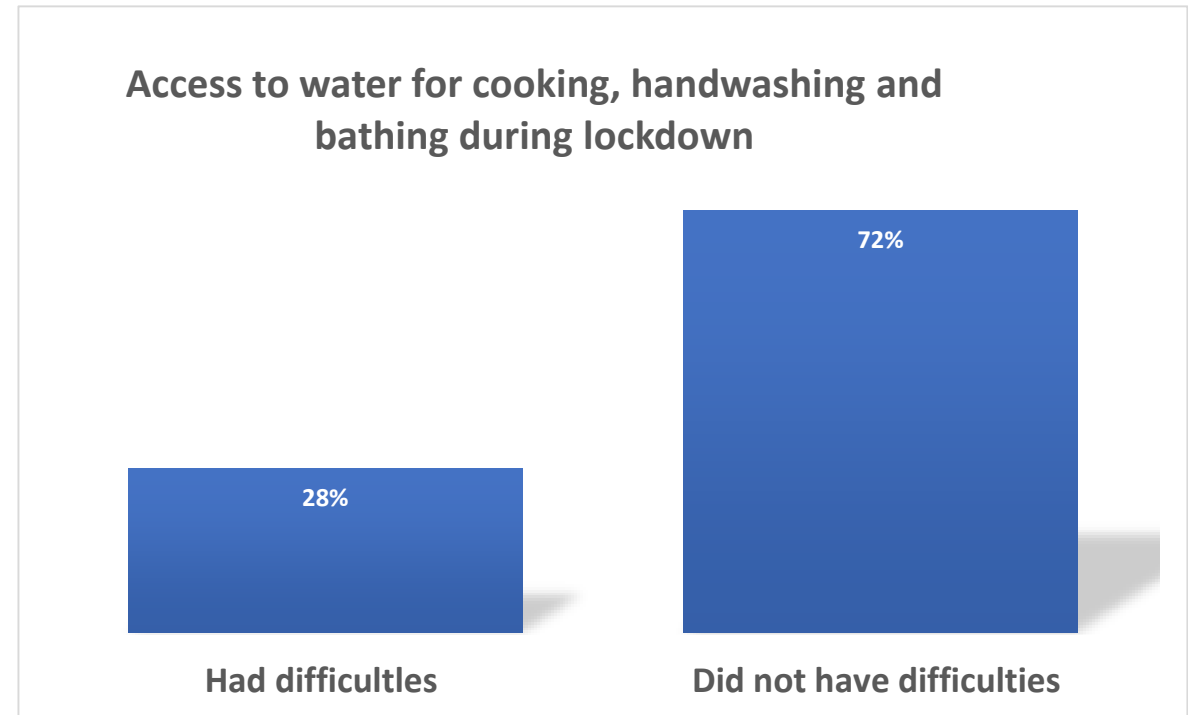
- 18% are breastfeeding more - a positive fallout from lack of access to other foods - with the highest percentage of mothers in Sudurpaschim and Karnali breastfeeding more often.

- 5% breastfeeding less; more mothers in Gandaki feeding less.

- 77% breastfeeding with same frequency; fewer mothers in Sudurpaschim & Karnali breastfeeding the same.

CHANGES IN BREASTFEEDING FREQUENCY BY PROVINCE (% MORE, % LESS, % SAME)

Province	Feeding same	Feeding more	Feeding less
Sudurpaschim	63%	34%	3%
Karnali	63%	32%	4%
Province 5	73%	24%	3%
Gandaki	77%	16%	7%
Bagmati	80%	13%	6%
Province 2	91%	4%	6%
Province 1	86%	11%	4%

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Access to WASH

Access to drinking water during lockdown

67%

33%

Households who did not have enough drinking water

Households who had enough drinking water

N=462 Interactive Voice Responses

Access to water for cooking, handwashing and bathing during lockdown

72%

28%

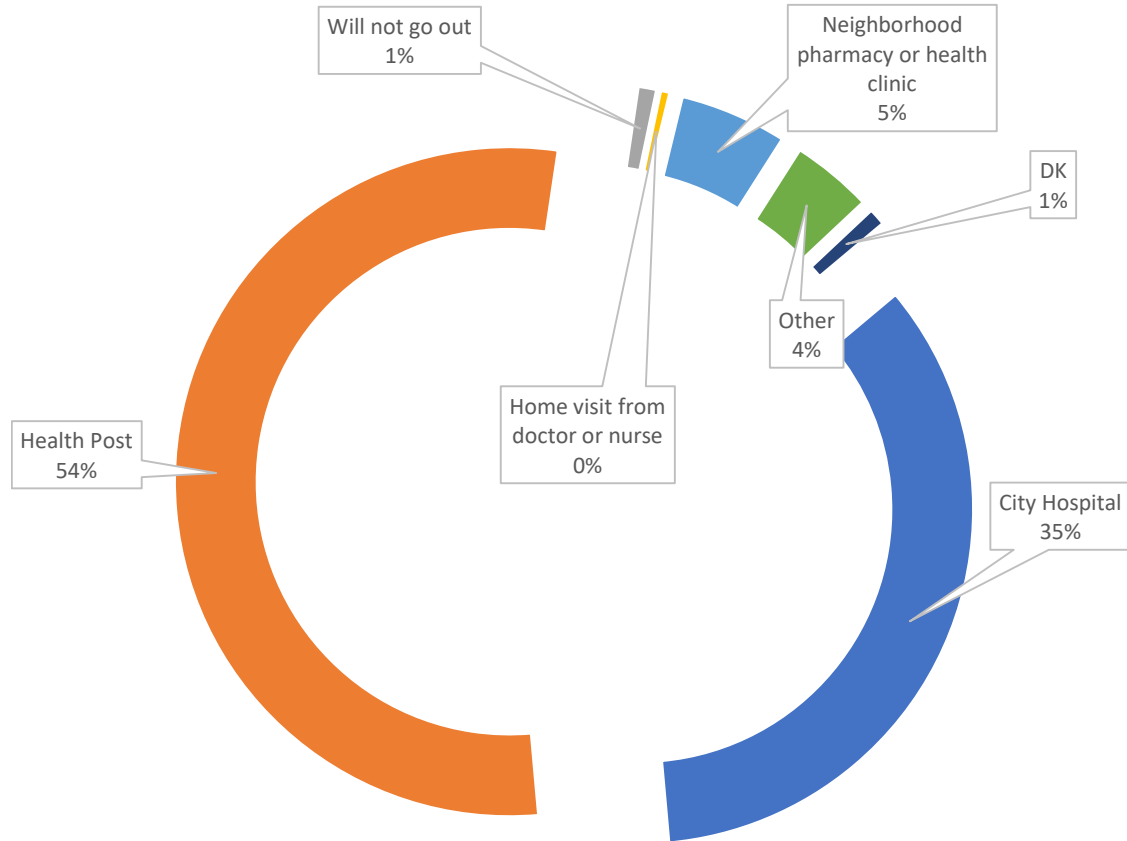Had difficultles

Did not have difficulties

N=434 Interactive Voice Responses

- **33 % of households did not have enough drinking water during lockdown.**
- **28 % of households had difficulties getting water for cooking, handwashing and bathing due to lockdown.**
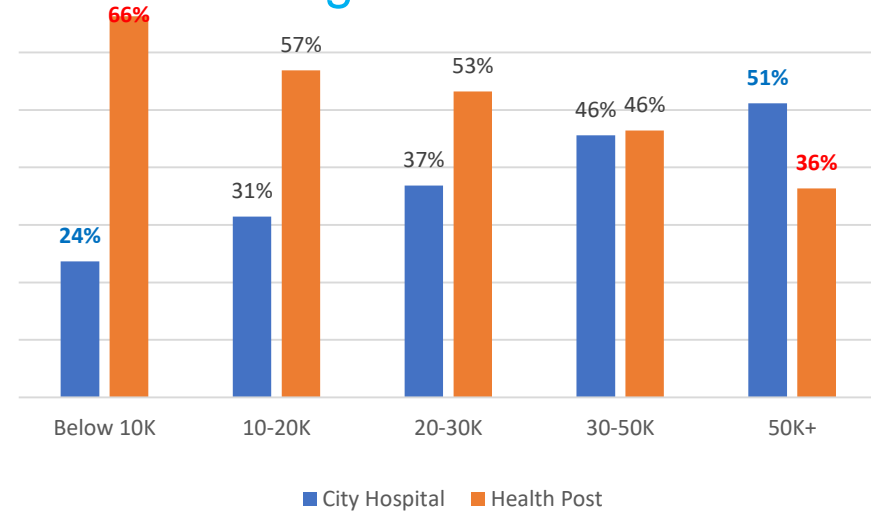
Note: WASH findings are from Interactive Voice Response of an additional 400 households (a component of the telephonic survey)
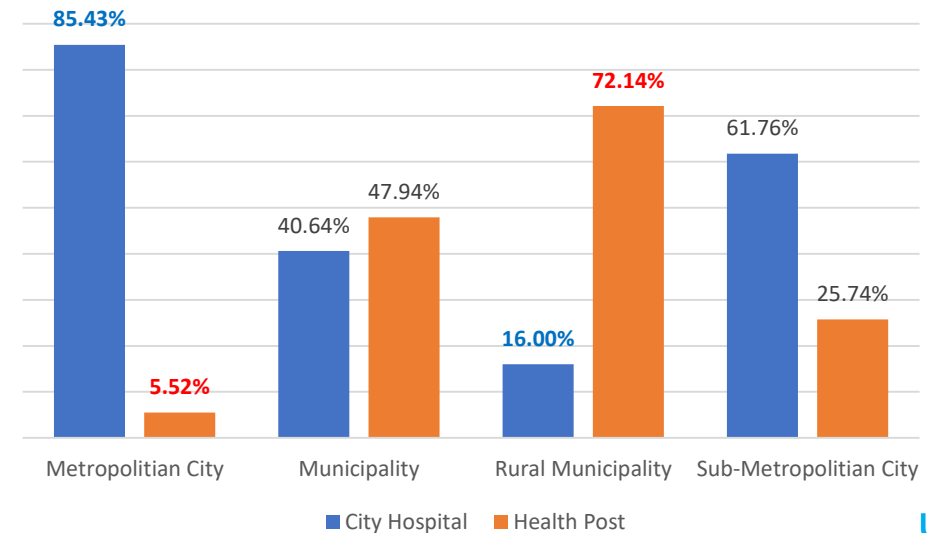
Access to Health Services

54% of respondents would seek treatment at health posts while another 35% would go for treatment to a hospital in the city but there is variation by income and other background characteristics

Will not go out
1%

Neighborhood pharmacy or health clinic
5%

DK
1%

Other
4%

Home visit from doctor or nurse
0%

Health Post
54%

City Hospital
35%

% RESPONDENTS SEEKING TREATMENT AT DIFFERENT FACILITIES

VARIATION BY INCOME GROUP

- Below 10K: City Hospital 24%, Health Post 66%
- 10-20K: City Hospital 31%, Health Post 57%
- 20-30K: City Hospital 37%, Health Post 53%
- 30-50K: City Hospital 46%, Health Post 46%
- 50K+: City Hospital 51%, Health Post 36%

City Hospital   Health Post

VARIATION BY RESIDENCE

- Metropolitian City: City Hospital 85.43%, Health Post 5.52%
- Municipality: City Hospital 40.64%, Health Post 47.94%
- Rural Municipality: City Hospital 16.00%, Health Post 72.14%
- Sub-Metropolitian City: City Hospital 61.76%, Health Post 25.74%

City Hospital   Health Post

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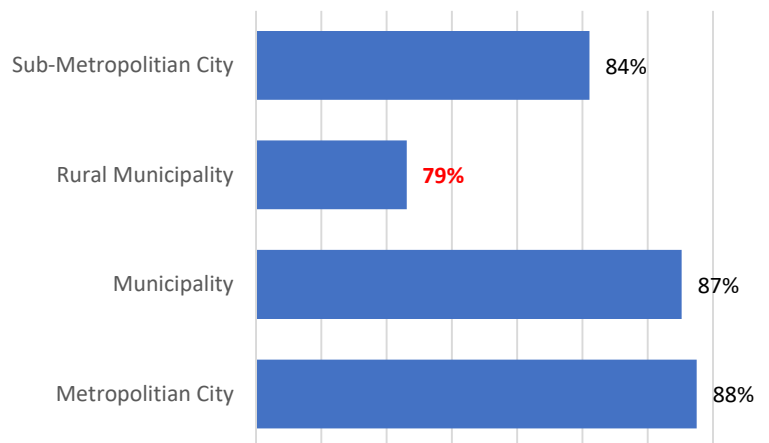for every child
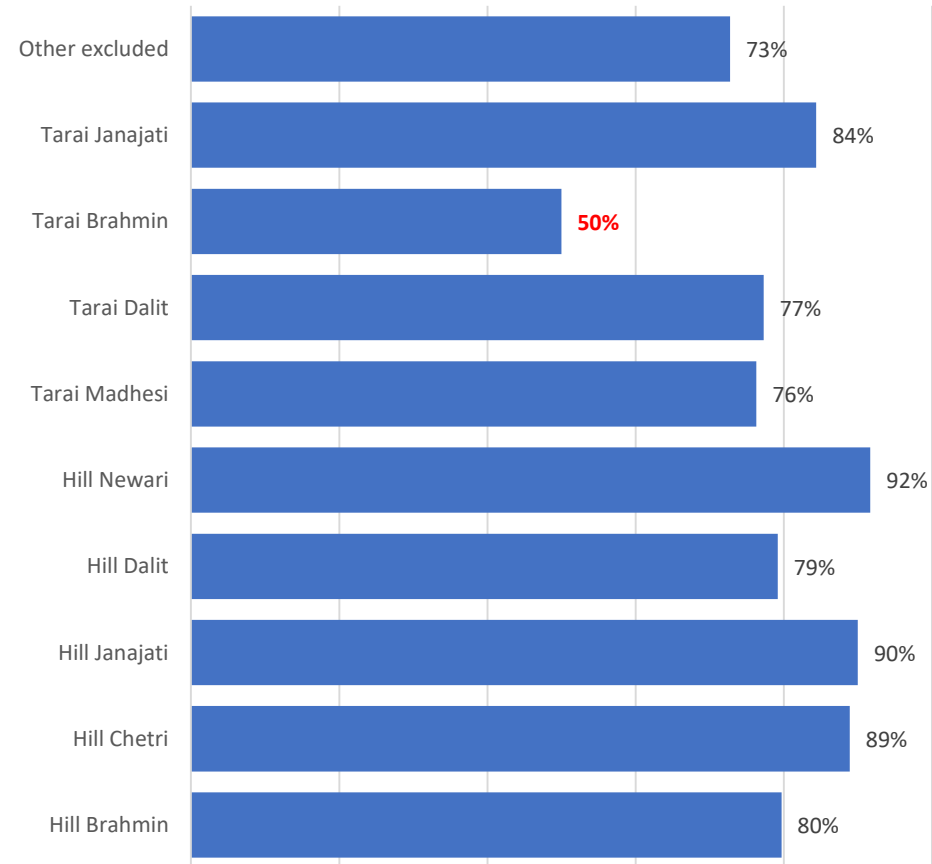
Access to Health Services

83 per cent of the households with pregnant women had access to ANC but the average masks differences by province, residence and ethnic group.
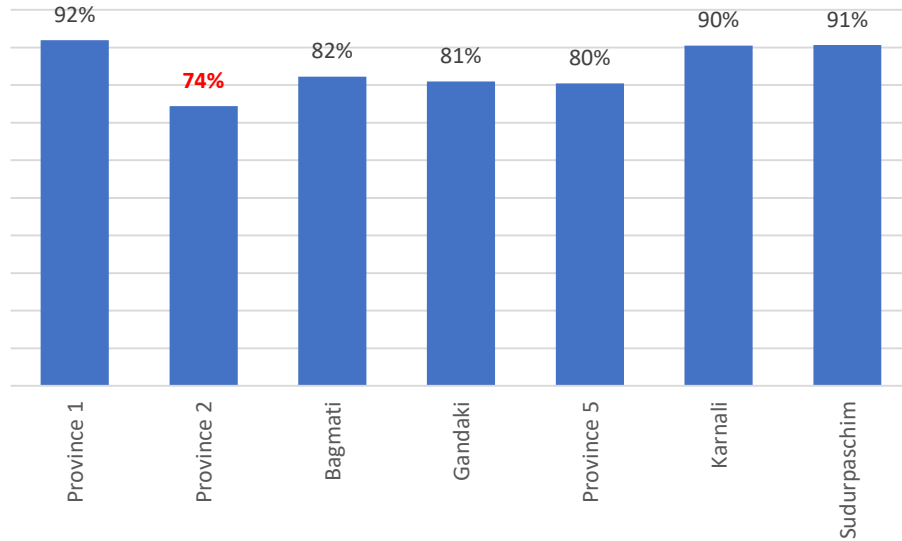
% PREGNANT WOMEN WITH ACCESS TO ANC BY PROVINCE

Province 1: 92%
Province 2: **74%**
Bagmati: 82%
Gandaki: 81%
Province 5: 80%
Karnali: 90%
Sudurpaschim: 91%

% PREGNANT WOMEN WITH ACCESS TO ANC BY RESIDENCE

Sub-Metropolitian City: 84%
Rural Municipality: **79%**
Municipality: 87%
Metropolitian City: 88%

% PREGNANT WOMEN WITH ACCESS TO ANC BY ETHNICITY

Other excluded: 73%
Tarai Janajati: 84%
Tarai Brahmin: **50%**
Tarai Dalit: 77%
Tarai Madhesi: 76%
Hill Newari: 92%
Hill Dalit: 79%
Hill Janajati: 90%
Hill Chetri: 89%
Hill Brahmin: 80%

Pregnant women in Province 2, Rural Municipalities and Tarai Brahmins have the least access to ANC.

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Education
95% of respondents reported their children had stopped going to school.
29% reported their children had access to distance learning but less than half were using it.

Has DL **Have & Using DL**

Below 10K: **18%**, **5%**
10-20K: 23%, 9%
20-30K: 32%, 13%
30-50K: 37%, 20%
50K+: **49%**, **32%**
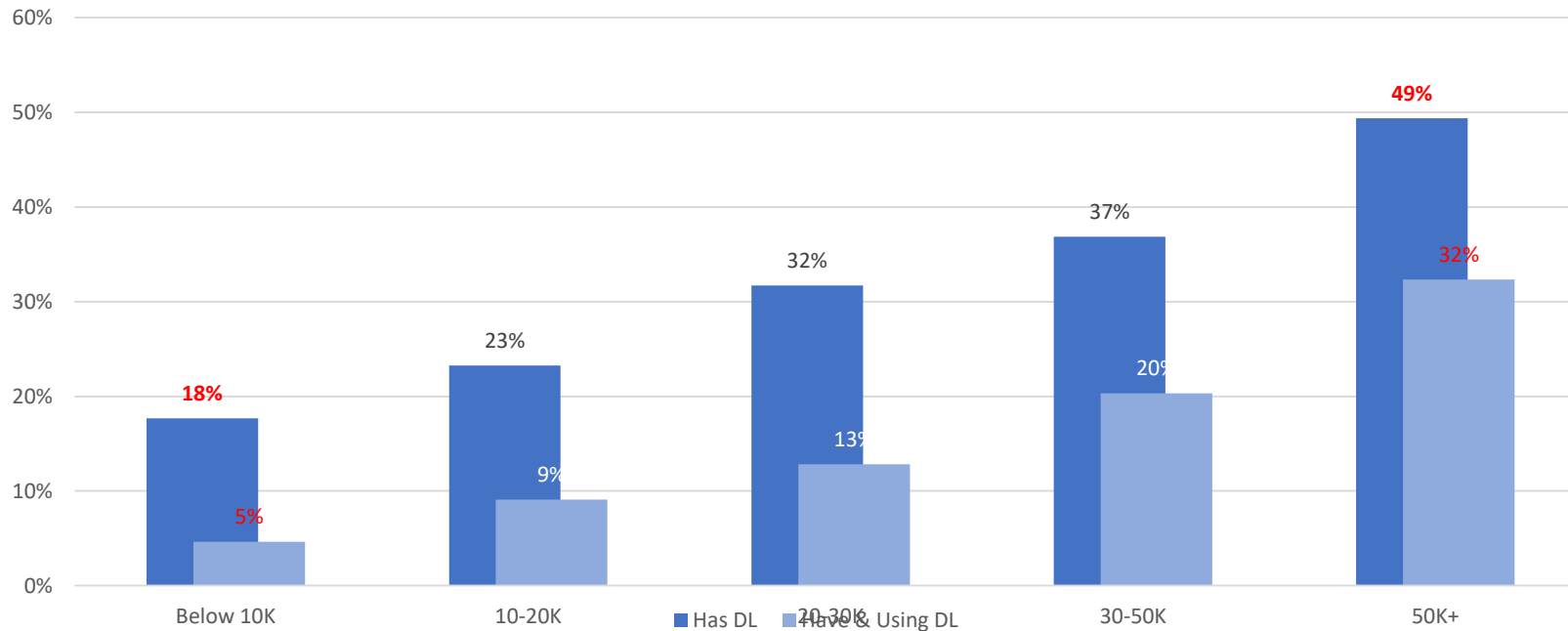
Children in low income households are less likely to study at schools that have been offering distance learning and more likely not to be able to use it.

Children's continued loss of access to education in low income families might have irreversible negative effects on the country's economy
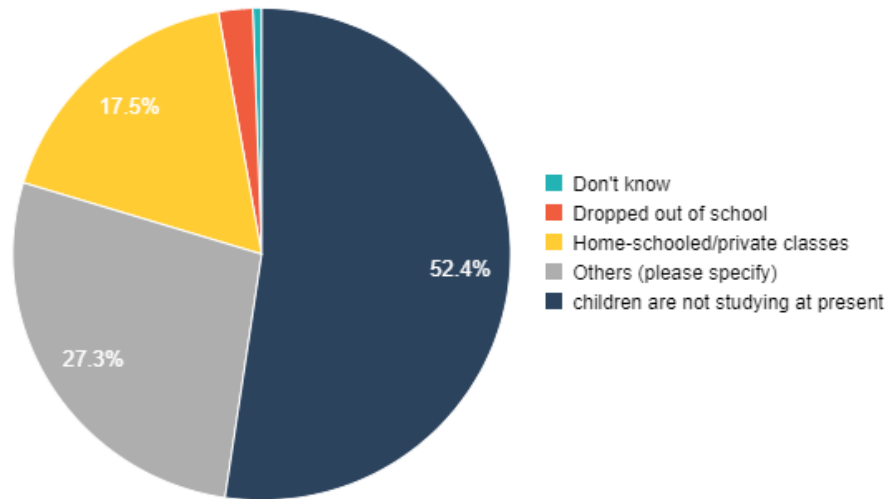
This will adversely affect the potential of the country to ensure equitable and sustainable development.
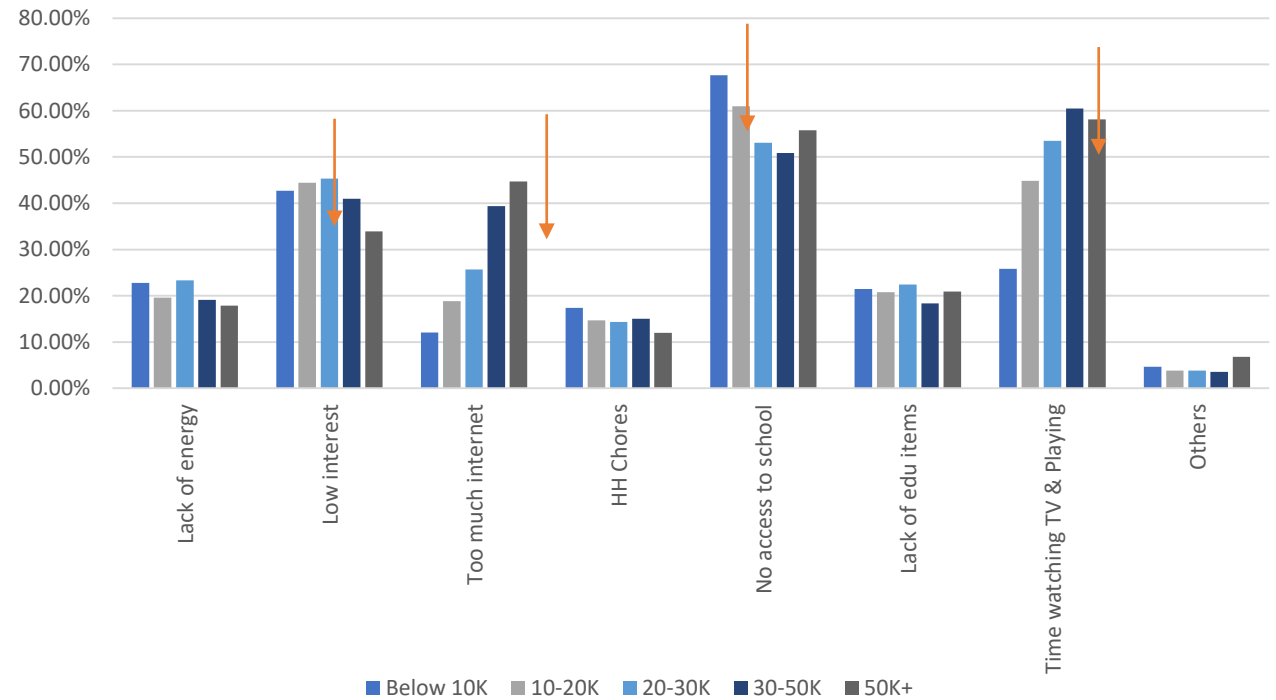
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Education

Children in 52 % of households stopped studying during lockdown.
93% of children who were studying during lockdown experienced various difficulties with studying at the time of the survey.

Legend (pie chart):
- Don't know
- Dropped out of school
- Home-schooled/private classes
- Others (please specify)
- children are not studying at present

52.4%
27.3%
17.5%

HOW CHILDREN WERE STUDYING DURING LOCKDOWN

Bar chart categories: Lack of energy, Low interest, Too much internet, HH Chores, No access to school, Lack of edu items, Time watching TV & Playing, Others

Legend: Below 10K, 10-20K, 20-30K, 30-50K, 50K+

% REPORTING DIFFICULTIES IN STUDYING BY DIFFICULTY TYPE AND INCOME GROUP
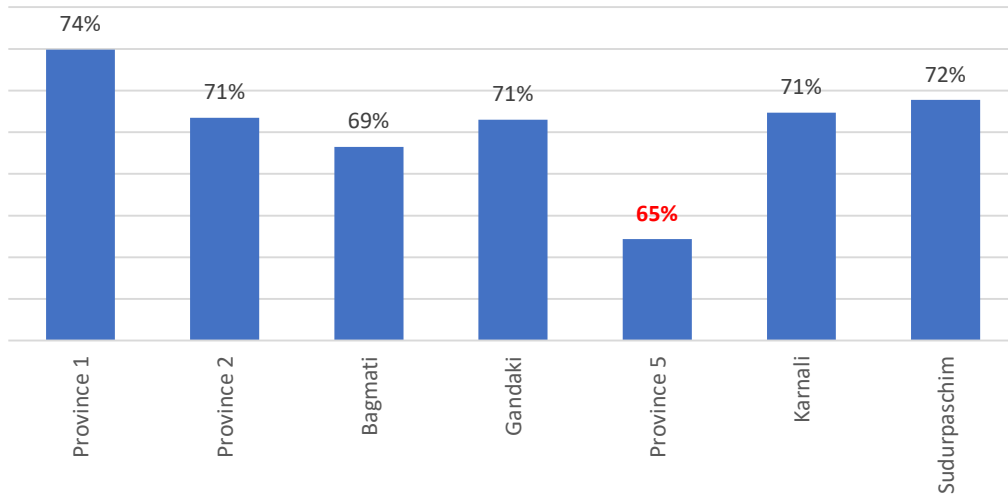
Increased screen time, low interest & energy plus stopping studying – emerging signs of distress?
While 1/12 families report psychological distress in children, issue comes out more explicitly over educational activities
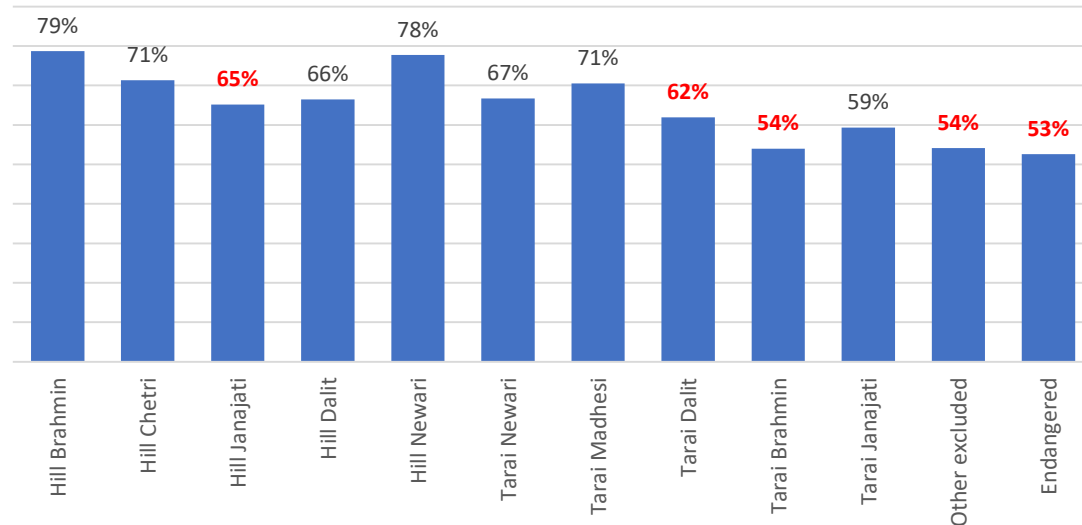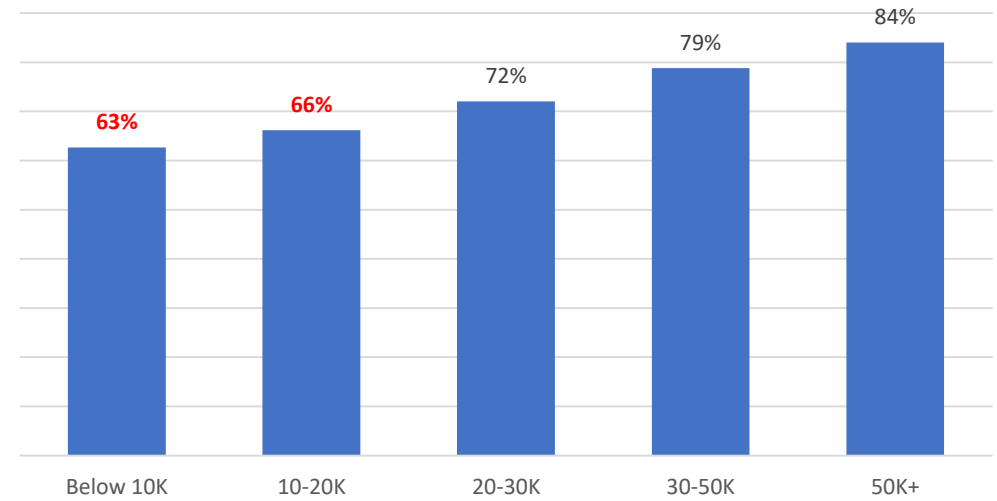Variation by income group: tv + internet more likely to affect children in upper income groups

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(Child) Protection
70% of respondents know where to report domestic violence

% KNOWING WHERE TO REPORT DOMESTIC VIOLENCE BY PROVINCE

Province 1: 74%
Province 2: 71%
Bagmati: 69%
Gandaki: 71%
Province 5: 65%
Karnali: 71%
Sudurpaschim: 72%

% KNOWING WHERE TO REPORT DOMESTIC VIOLENCE BY ETHNICITY

Hill Brahmin: 79%
Hill Chetri: 71%
Hill Janajati: 65%
Hill Dalit: 66%
Hill Newari: 78%
Tarai Newari: 67%
Tarai Madhesi: 71%
Tarai Dalit: 62%
Tarai Brahmin: 54%
Tarai Janajati: 59%
Other excluded: 54%
Endangered: 53%

% KNOWING WHERE TO REPORT DOMESTIC VIOLENCE BY INCOME GROUP

Below 10K: 63%
10-20K: 66%
20-30K: 72%
30-50K: 79%
50K+: 84%

Knowledge gap likely to be the highest in Province 5, among the lowest two income groups, certain Tarai ethnic groups, other excluded ethnic groups and Hill Janajatis.

To be read in conjunction with Protection Cluster assessments pointing out to the fact that 65% of girls did not know GBV response mechanisms.
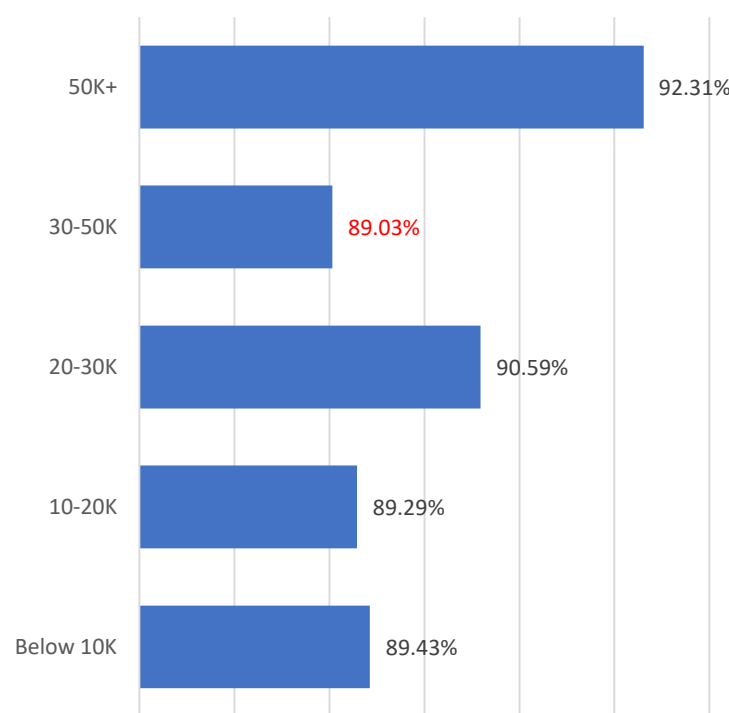
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Child Protection

1 in 10 respondents reported an increase in physical violence in the household.
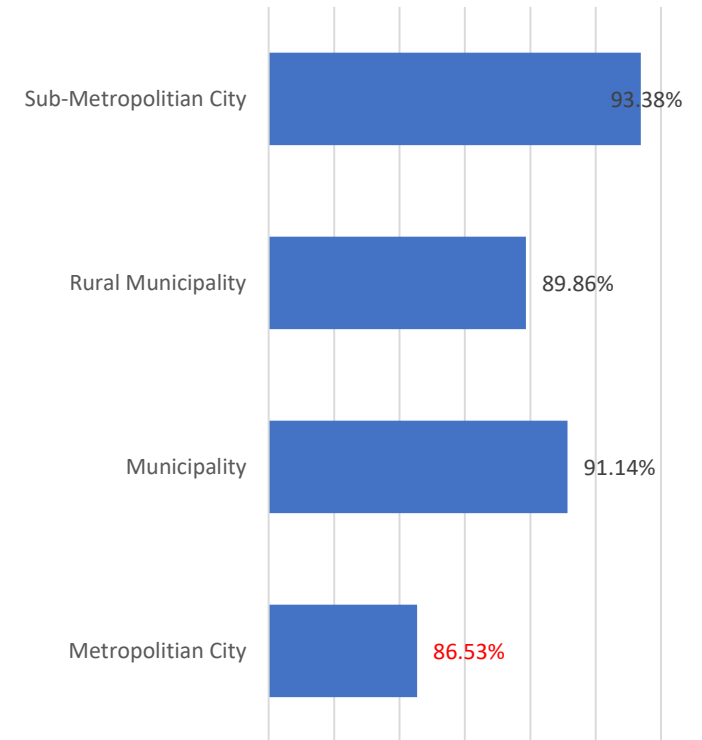5% of respondents reported noticing an increase in violence towards children in their communities.
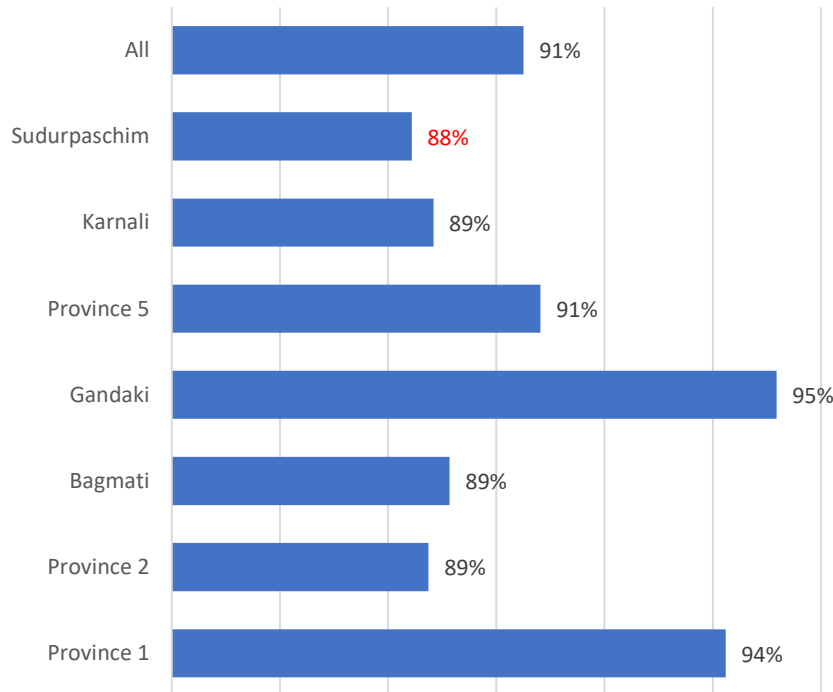
% REPORTING NOT BEING INVOLVED IN PHYSICAL VIOLENCE BY PROVINCE

% REPORTING NOT BEING INVOLVED IN PHYSICAL VIOLENCE BY INCOME GROUP

% REPORTING NOT BEING INVOLVED IN PHYSICAL VIOLENCE BY RESIDENCE

To be read in conjunction with other protection data sets, including helpline data. Possibly observing exposure to personal violence in Sudurpaschim the 4th highest income group & in metropolitan cities compared to other areas; needs tracking

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Child Protection

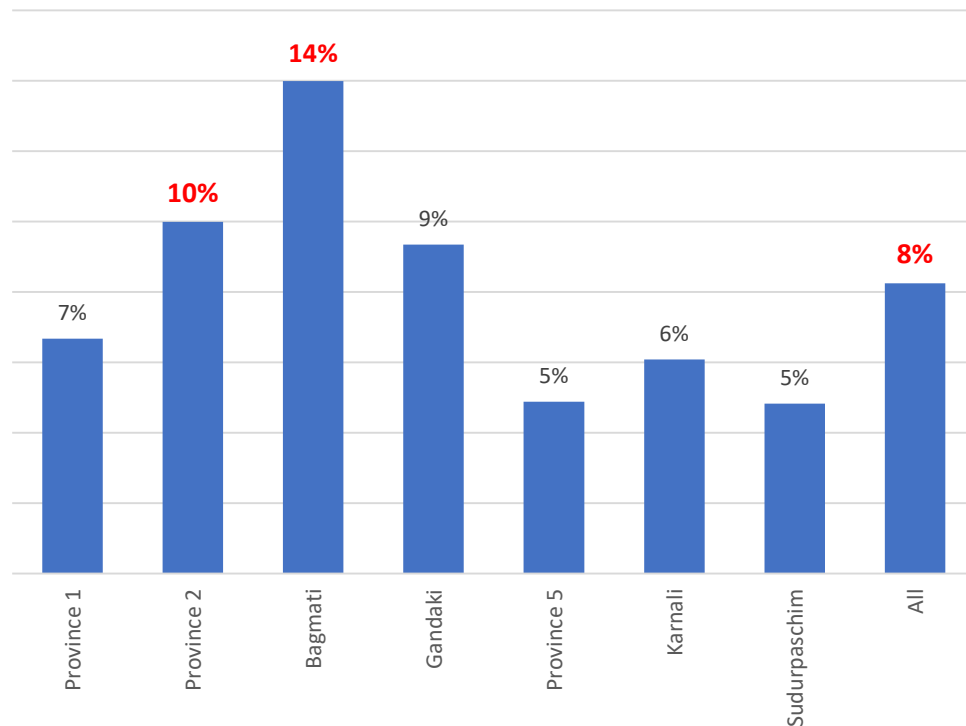Some children continue helping their families earn income even during lockdown.

Percentage of households with children who work to help in earning income
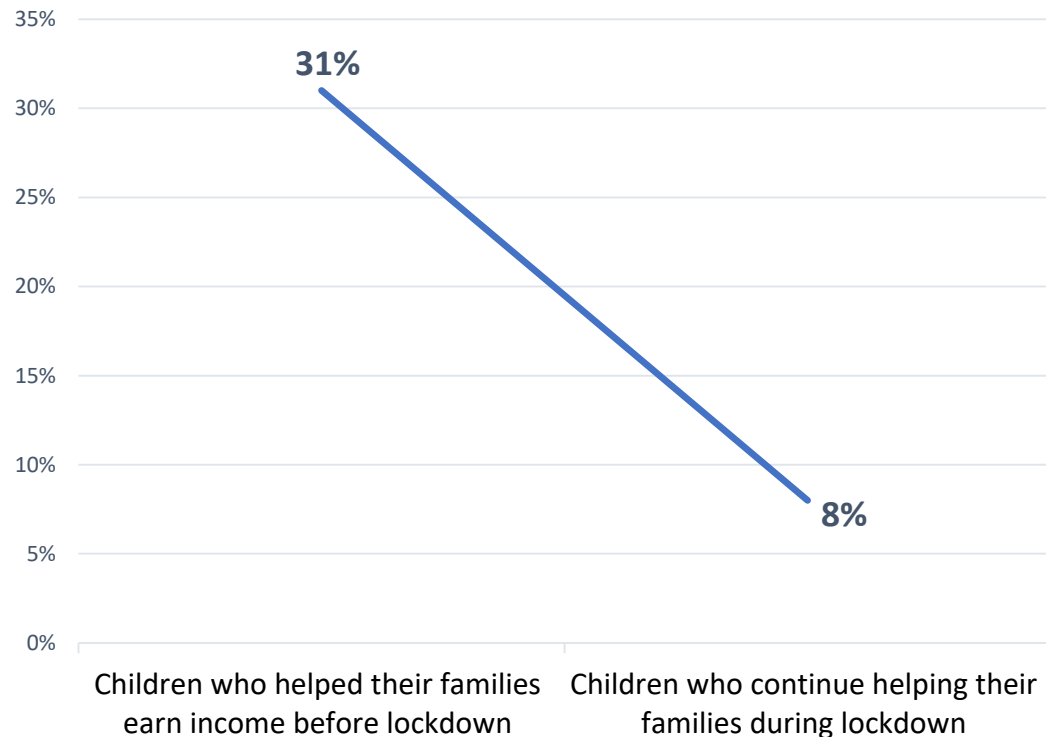

- 31 % of 7,500 respondents reported that their children worked to help them earn income before lockdown.
- During lockdown, children in 8% of the households were working at the time of the survey.
- Among currently working children, 76 % are those who worked before and continue working during lockdown.
- 24 % of currently working children might have started to work to help their families earn income due to financial distress caused by lockdown.

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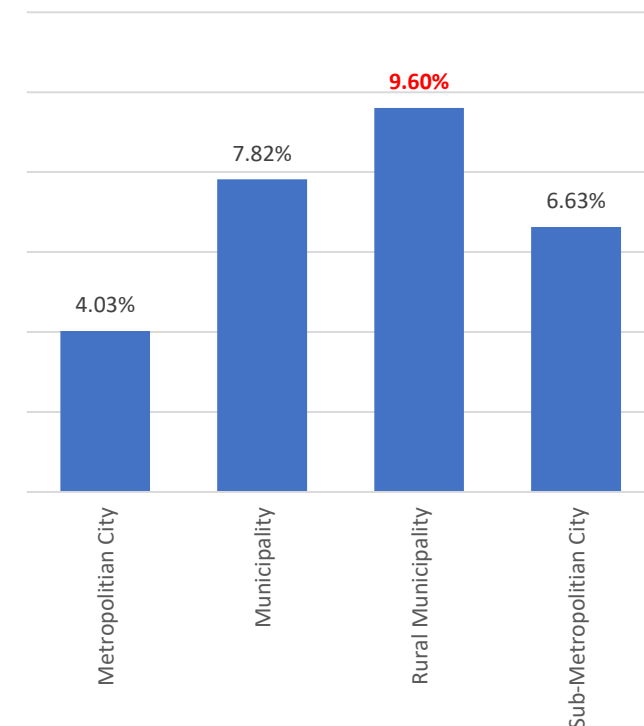
Child Protection
Children's contribution to HH income: disaggregation

% HHS WITH CHILDREN EARNING INCOME BY PROVINCE (SINCE LOCKDOWN)

Province 1: 7%
Province 2: 10%
Bagmati: 14%
Gandaki: 9%
Province 5: 5%
Karnali: 6%
Sudurpaschim: 5%
All: 8%
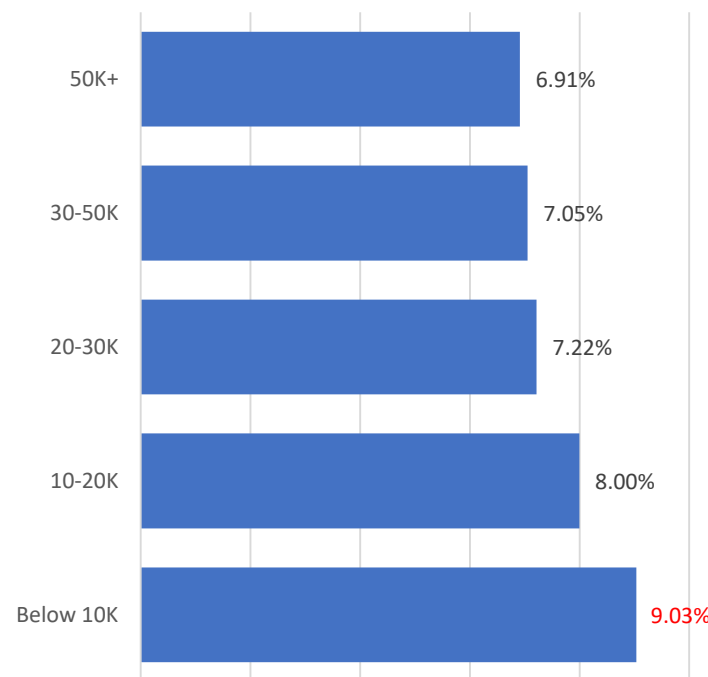
% HOUSEHOLDS WITH CHILDREN EARNING INCOME BY INCOME GROUP (SINCE LOCKDOWN)

50K+: 6.91%
30-50K: 7.05%
20-30K: 7.22%
10-20K: 8.00%
Below 10K: 9.03%

% HOUSEHOLDS WITH CHILDREN EARNING INCOME BY RESIDENCE (SINCE LOCKDOWN)

Metropolitian City: 4.03%
Municipality: 7.82%
Rural Municipality: 9.60%
Sub-Metropolitian City: 6.63%

Respondents from Bagmati province, those in lower income groups and those living in rural municipalities tend to report a higher share of children earning income during lockdown – also heavily correlated with loss of family earnings (trend analysis forthcoming).
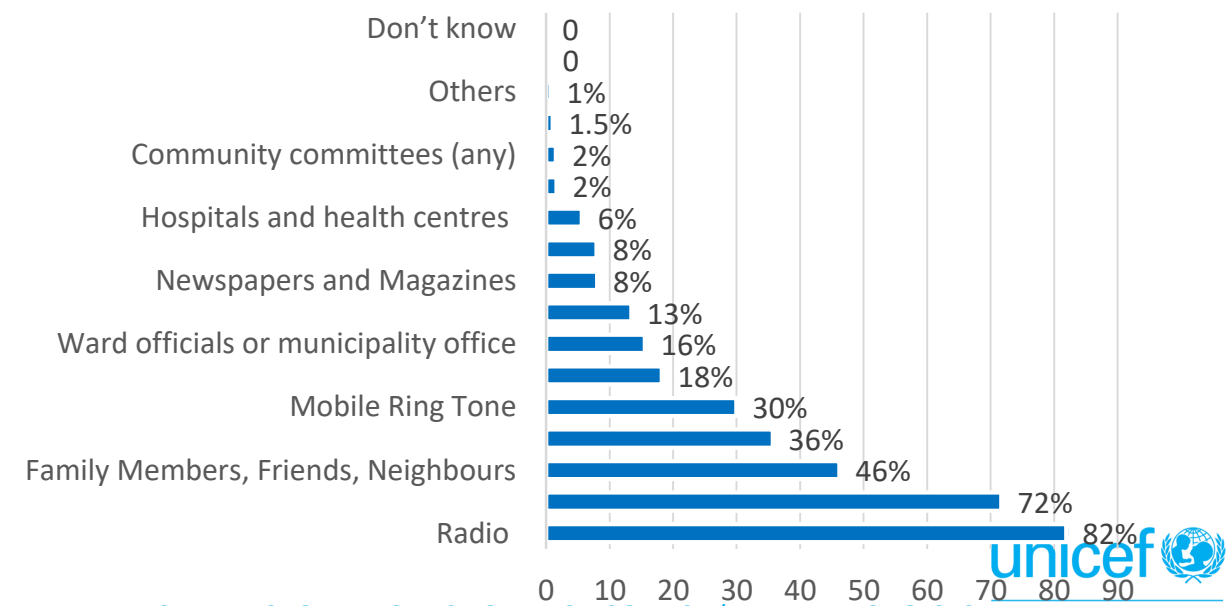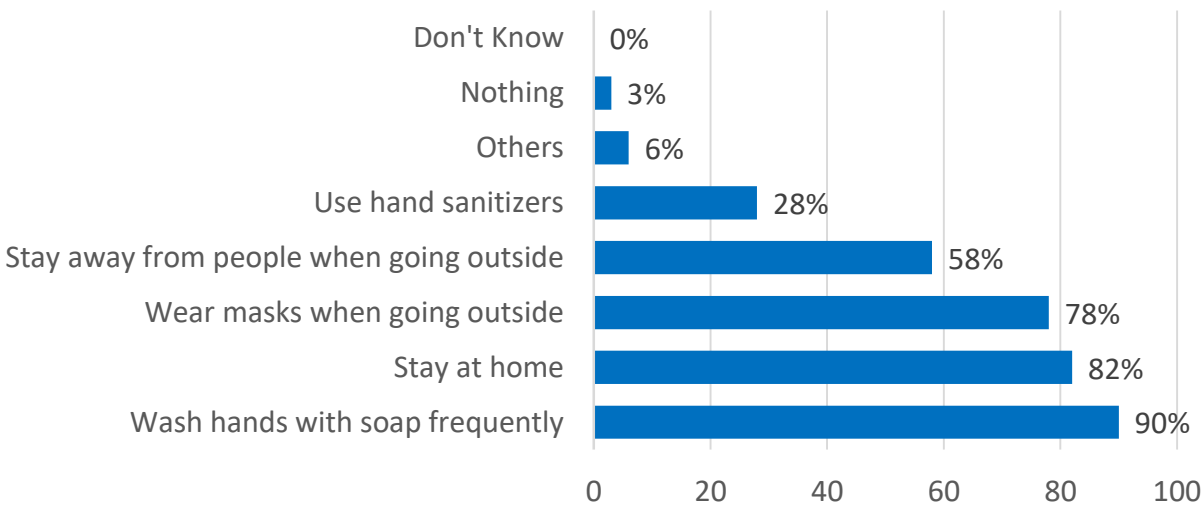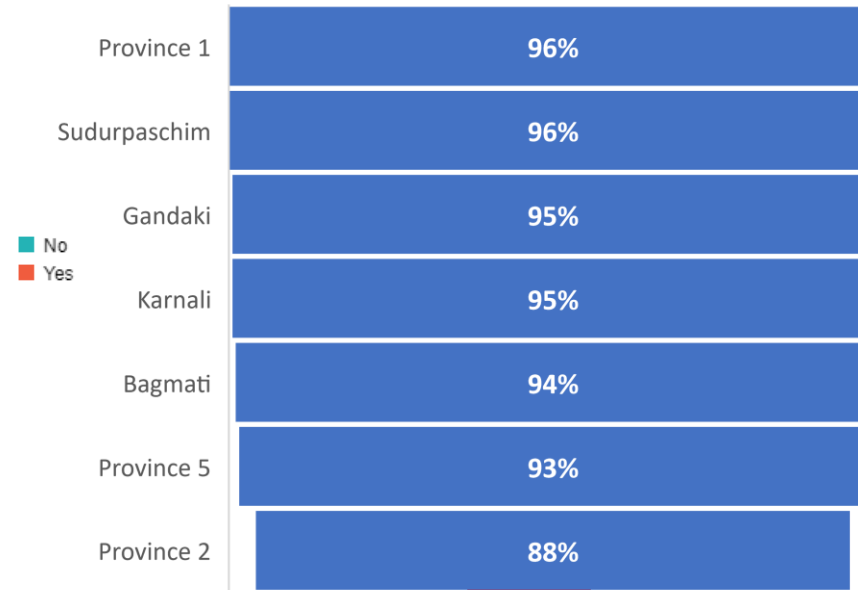
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Child Protection/ Child Mental Health (to be monitored)

Respondents' assessments of whether children were experiencing psychological stress in their household suggests that 1 in 12 households had children who were experiencing at least one type of stress.

% RESPONDENTS SAYING YES FOR EACH CATEGORY
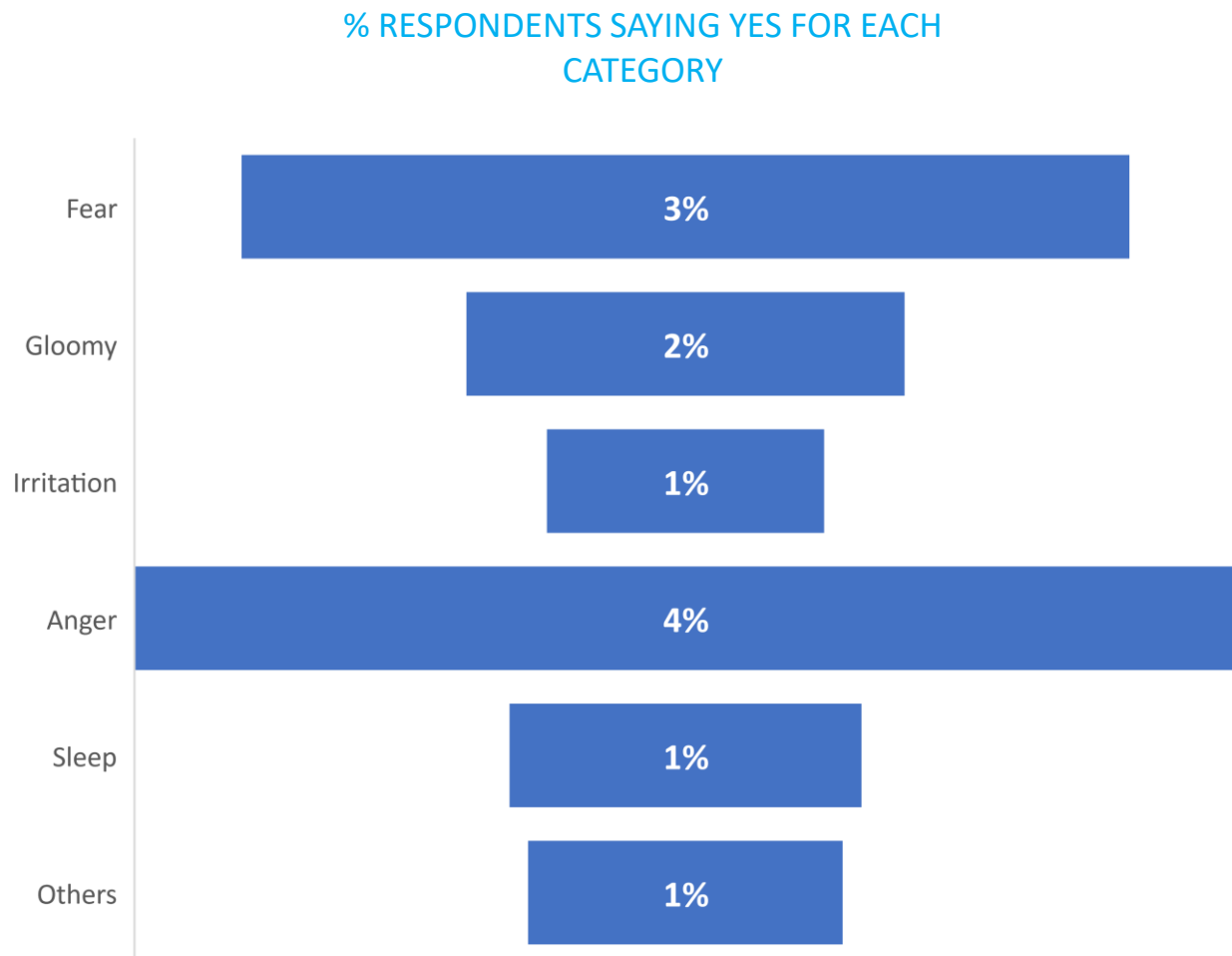
- Likely to be under reported.
- Respondents reported that <u>fear and anger</u> are the main stress symptoms faced by children.
- Significant variation by background characteristics of respondent.
- Respondents with children working in the household are more likely to report children feeling anger or fear.

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COVID-19 Awareness and Actions

Pie chart: No 6.7%, Yes 93.3%

Bar chart (by Province):
- Province 1: 96%
- Sudurpaschim: 96%
- Gandaki: 95%
- Karnali: 95%
- Bagmati: 94%
- Province 5: 93%
- Province 2: 88%

Bar chart (actions):
- Don't Know: 0%
- Nothing: 3%
- Others: 6%
- Use hand sanitizers: 28%
- Stay away from people when going outside: 58%
- Wear masks when going outside: 78%
- Stay at home: 82%
- Wash hands with soap frequently: 90%
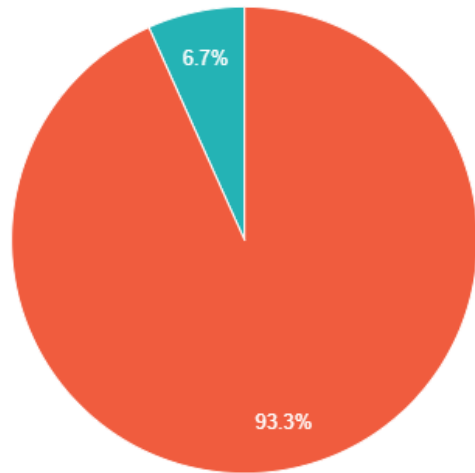
PER CENT RESPONDING YES FOR EACH ACTION (MULTIPLE RESPONSES ALLOWED)

Bar chart (sources):
- Don't know: 0
- Others: 1%
- (unlabeled): 1.5%
- Community committees (any): 2%
- (unlabeled): 2%
- Hospitals and health centres: 6%
- (unlabeled): 8%
- Newspapers and Magazines: 8%
- (unlabeled): 13%
- Ward officials or municipality office: 16%
- (unlabeled): 18%
- Mobile Ring Tone: 30%
- (unlabeled): 36%
- Family Members, Friends, Neighbours: 46%
- (unlabeled): 72%
- Radio: 82%

PER CENT RESPONDING YES FOR EACH SOURCE (MULTIPLE CHOICES ALLOWED)

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Key Insights/Conclusions

Livelihood Losses
54% of households reported loss of earnings or livelihoods

Immediate Needs
1/3rd of households reporting shortage of food, medicines, cooking fuel, soap and toothpaste

Coping Mechanisms
incurring debt and depleting savings (55-44%)

Social Protection
20% of households reported receiving social security allowances

Social Protection
31% of social security recipients experience difficulty receiving them

Nutrition
20% children experiencing changes in dietary intake

WASH
28 % of the same households had difficulties getting water for cooking, handwashing and bathing due to lockdown.

Health
- Only 54% of hh sought treatment at health centers

Education
95% children not attending school, 30% of households reported schools offering distance learning

Education
Only 47% with access to distance learning actually use it

Violence against children
5% of respondents reported noticing an increase in violence towards children in their communities.

Child Protection
Over 8% of households continue to depend on children for household Income

Disability
14% of households reported having a family member with a functional limitation; 20% of them are children

COVID 19 Awareness & Behaviour
93% risk awareness of Covid-19
90% are hand washing

Lessons learnt and next steps

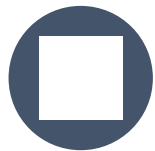Advantages of digital solutions but also caveats - difficult to establish rapport with respondents.

Design of SMART questions (learning process).

Only reported summary/descriptive findings of baseline (pre-monsoon + lockdown).

Forthcoming: Regressions + geospatial mapping.

Strengthen inter-agency collaboration

Next and future round/s of surveys will help unpack trends and dynamics over time.

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