Impact of COVID-19 Pandemic on Rural Livelihoods in Zambia: A Gender and Wellbeing Perspective

Simon Manda

***Working Paper* IDRC-OXFAM-006**

AFRICAN ECONOMIC RESEARCH CONSORTIUM
CONSORTIUM POUR LA RECHERCHE ÉCONOMIQUE EN AFRIQUE

Bringing Rigour and Evidence to Economic Policy Making in Africa

Impact of COVID-19 Pandemic on Rural Livelihoods in Zambia: A Gender and Wellbeing Perspective

By

Simon Manda
The University of Zambia, Department of Development Studies
Great East Road Campus, Lusaka, Zambia

AERC Working Paper IDRC-OXFAM-006
African Economic Research Consortium, Nairobi
October 2022

THIS RESEARCH STUDY was supported by a grant from the African Economic Research Consortium. The findings, opinions and recommendations are those of the author, however, and do not necessarily reflect the views of the Consortium, its individual members or the AERC Secretariat.

Published by: The African Economic Research Consortium
P.O. Box 62882 - City Square
Nairobi 00200, Kenya

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List of abbreviations and acronyms

7NDP	Seventh National Development Plan
BoZ	Bank of Zambia
COVID-19	Corona Virus Disease 2019
CRFFSs	City Region Food and Farming Systems
DACOs	District Agricultural Officers
FAO	Food and Agriculture Organization
FGDs	Focus Group Discussions
FISP	Fertiliser Input Support Programme
GBV	Gender Based Violence
GII	Gender Inequality Index
GMAs	Game Management Areas
GRZ	Government of the Republic of Zambia
MoF	Ministry of Finance
MoH	Ministry of Health
NFIS	National Financial Inclusion Strategy
NGOs	Non-Governmental Organizations
ORS	Objective, Relational and Subjective
OSAWE	Own Savings for Asset and Wealth Creation
SONA	State of the Nation Address
SIs	Statutory Instruments
TMTRF	Targeted Medium-Term Refinancing Facility
WHO	World Health Organization
ZLS	Zambia Labour Force Survey
ZNPHI	Zambia National Public Health Institut

Abstract

The COVID-19 pandemic and the measures to contain it have induced livelihood struggles in rural economies, but livelihood impacts across gender and wellbeing remain under-researched. This report explores gendered impacts of COVID-19 on rural livelihoods and implications for wellbeing in rural Zambia.

Research design and methodology: The study uses a 3-D Objective, Relational and Subjective theoretical perspective of wellbeing. This enabled exploration of objectively quantifiable and verifiable elements, needs and aspirations of households (material), role and importance of social connections and relationships that shaped or constrained livelihoods (relational) and people's perceptions about whether their livelihood needs were being met in view of national policy responses (subjective elements). Using mixed methods research design, data was drawn from multi-level interviews and focus group discussions. We deployed household surveys which were followed by intra-household case study interviews as pathway to interrogating intra-household COVID-19 and livelihood dynamics.

Results: Reveal somewhat of a complex picture. COVID-19 ignited a triple crisis of work and markets with implications across material, relational, and subjective elements of wellbeing. Processes leading to market disruptions led to a gendered concentration of economic activities around men. Women increasingly face narrow as opposed to diversified livelihood strategies compared to their male counterparts, which means they quickly lose all options due to COVID-19 and get relegated to household work—unpaid and invisible. There are four main pathways through which gender impacts of COVID-19 manifest: 1) markets and material wellbeing; 2) household provisioning; 3) labour and care burdens, changes in relationships, and social networks; and 4) disruptions to membership organizations and related social initiatives. These elements have been compounded by the policy landscape which has a national level focus as opposed to touching rural grounds. These further affect material, relational and subjective elements of wellbeing especially for women.

Whereas women became more resilient to finding ways to support their families such as maintaining group savings initiatives, gendered impacts of COVID-19 reflect pre-existing socioeconomic vulnerabilities amplified/heightened by the pandemic in an

environment where agricultural and gender specific interventions have been missing. We argue that, whereas COVID-19 has been advanced in previous research as a crisis of markets and that it is indeed a crisis of markets, it is much more than that. Early-stage pandemic interventions must be holistic and consider community patterns of livelihoods and how they are disrupted or otherwise. This necessitates a focus on gender-sensitive initiatives that are locally driven, can build resilience, and empower women.

Policy recommendations: The study identifies six policy implications for this study.

1. ***State and non-state actions should promote gendered access to savings and credit:*** Women-run credit/savings schemes for rural women can relate to membership organizations, and women's collectives to channel resources aimed at strengthening livelihoods. These can build into local clubs some of which already exist.

2. ***Strengthen intra-household relations to increase men's participation in the domestic care:*** This will require shift in cultural norms and beliefs on the role of men and women in the household.

3. ***Promote gender-sensitive agricultural policies, including markets:*** Supporting gender-sensitive agriculture and creating livelihoods should form part of a long-term solution. Policy interventions such as FISP and other agro-projects should place at the centre of its thinking gender, including how pre-existing conditions shape differential access to opportunities. Gender thinking in input supply, production and market linkages will help to address differential access to markets and thus livelihood recovery. This includes facilitating linkages between women farmers and markets, brokering links between women and traders (e.g., marketing cooperatives).

4. ***Promote social protection – Social Cash Transfer:*** Social protection measures such as social cash transfers and food aid have been limited in coverage by shrinking fiscal space and debt burdens, precluding any additional government action. These initiatives, however, can help to enhance, not only agro-based livelihoods, but can also create opportunities for asset-based support measures among women on a rotation basis.

5. ***Build multi-level progressive partnerships and collaborations (vertical and horizontal):*** Engagement between state institutions and NGOs, including volunteers, and other organizations to provide agriculture and livelihood support and assistance to rural women. For example, extension services can go hand in hand with direct household support mechanisms.

6. ***Deliberate policy and other measures can help to advance women's access to markets during the pandemic recovery:*** This includes training, awareness, sensitization, and other measures that can help to advance women's access to markets during the pandemic recovery.

Acknowledgments

The African Economic Research Consortium would like to acknowledge the International Development Research Centre (IDRC), Ottawa, Canada, for financial, technical, and intellectual support. This work was carried out with the aid of a grant from IDRC. We would also like to recognize OXFAM for technical and intellectual support. The AERC is similarly grateful to the resource persons for in-depth comments and suggestions that shaped this study from inception to completion. The findings, opinions and recommendations are those of the author and do not necessarily reflect the views of the Consortium, its individual members or the AERC Secretariat; neither do they reflect the views of IDRC or its Board of Governors.

1. Introduction

The COVID-19 pandemic has resulted in the loss of human lives and rural livelihoods across Africa. The way in which COVID-19 affect men and women is, however, shaped by intersecting vulnerabilities and social differences in socioeconomic status, sex, and gender identity (Paul et al. 2021; Harris et al. 2021). Recent reports such as Stevano et al. (2021a) show that COVID-19 pandemic has heightened or sharpened labour burdens for household more generally, and for women specifically (McNay 2000). Some of these relate to care burdens and labour market engagement. Female-headed households face unique challenges than their male counterparts and that there might be pre-existing conditions that shape their vulnerability beyond the pandemic. There are problems to do with access to productive and livelihood resources such as land. Evidence also indicates that stay-at-home orders and social restrictions have increased unpaid care workloads, which have fallen disproportionately to women (Kabeer et al., 2021). Yet, what is possible for livelihoods for majority social groups under existing COVID-19 policy responses and discretions also remains unclear.

Whilst several systematic and non-systematic accounts about impacts of the pandemic on local livelihoods have emerged (Manda et al., 2021, forthcoming; World Bank, 2020), there has been no comprehensive analysis of micro-level changes in material, relational, and subjective elements and how they implicate gender dynamics. Furthermore, limited research on policy options to-date has distinguished, or articulated impacts of COVID-19 across different social groups, and how these elements relate to options for equitable and sustainable recovery (Malambo et al., 2020). At the macro-level, there seems to be no gender transformative policy responses, with current efforts being generic and blind to gender-specific elements (Wakumelo and Manda, forthcoming). More widely, these have failed to acknowledge and account for unequal impacts of the pandemic. The COVID-19 pandemic has heightened or sharpened labour burdens for household more generally, but for women (care burdens and labour market engagement affected).

COVID-19 has necessitated a focus on the interconnections between domestic structures and broader economic and political processes. Feminist perspectives have proved useful in bringing into the political economy of agrarian change the pervasiveness of gender relations and other interconnections with broader processes of social change (Razavi, 2009). Within COVID-19, this allows to conceptualize households and their connections to broader economic and political structures.

COVID-19 has raised the need to deepen analyses of rural markets as social and political constructions with highly unequalizing tendencies, on the one hand, and livelihood processes in their wider context (state policies, markets, and communities), on the other hand. The implications of building knowledge about the gendered impacts of COVID-19 on rural livelihoods in sub-Saharan Africa for analytical and policy purposes cannot be overemphasised. For example, early anthropological reports in Zambia interrogated processes of production, distribution, and consumption of food among rural households (Richards, 1939). Here, household provisioning—about the kitchen and the problems of the housewife highlighted economics of food distribution and consumption with women as central elements in domestic units and as part of wider groups vis-a-vis cooperative labour (Richards, 1939). Pre-capitalist systems of production were organized through social systems based on the exchange of labour and food within and between domestic units. Over a long period of time, rural production systems have increasingly been linked to wider changes in the Zambian economy (Moore & Vaughan, 1994). Some of these changes related to migrant labour systems that incorporated male labour in industrial economy—local responses to global processes of change that shape and affect processes of rural food supply and livelihoods—now driven therefore by women, including the so-called "unattached" women. These processes that were related to colonial policies affected, not only labour allocation, but also crops grown vis-a-vis the rise of cash cropping (Moore & Vaughan, 1994). There have been considerable burdens on women reflective of wider problems of agricultural in rural Zambia and the emerging role and importance of livelihood diversification (Chapoto & Subakanya, 2019). Livelihood impacts of COVID-19 should thus been seen through such an analytical lens—of women and how they are managing materially and changes to pre-existing relationships and implications for household provisioning (Razavi, 2009).

Whereas the promotion of land and labour systems is a longstanding concern in the political economy literature (Tsikata, 2009; Manda et al., 2019), these issues have become even more urgent given diverse COVID-19 impact pathways (World Food Programme 2020; Ministry of Commerce, Trade, & Industry 2020; Finn & Zadel 2020), exposing processes and outcomes through which rural economies have been incorporated in market-based systems (Tsikata, 2009). COVID-19 has exposed the different experiences of people based on different intersecting variables. These include gender and social relations. There are also elements to do with region, country, rural or urban location, citizenship, migration status, kinship, and generation. Seen through gender, these markers shape access and control of livelihood resources, including labour (Razavi, 2009; Sulle & Dancer, 2020). Recent policy formulations and interventions in Zambia and elsewhere across sub-Saharan Africa have somewhat failed to fully account for these differences, raising the need for studies that can shed light on gendered pandemic experiences.

This report provides a detailed analysis of the livelihood impacts of COVID-19 across gender and implications for wellbeing. In Zambia, the COVID-19 pandemic is seldom conflated with gender, generating partial insights into the actual processes

that lead to vulnerabilities and implications for wellbeing across men and women. This necessitates a focus and scrutiny of what goes on in the household arena—internal workings and their connections to economic and political structures, including a division of unpaid work necessary to sustain the members of the household as well as interconnections between local communities and wider political and economic processes. At the heart of this report are questions about the material (changes objectively quantifiable and verifiable elements, needs and aspirations), relational (changes to social connections and relationships that shape or constrain livelihoods), and subjective elements (people's perceptions about whether their livelihoods needs are being met in view of national pandemic policy responses) of wellbeing at household, community, and national levels. This analysis offers useful insights into the implications of COVID-19 on women's livelihoods, different from men, critical for policy efforts to tackle livelihood challenges in rural geographies in an era of the COVID-19 pandemic. By so doing, the report brings into the pandemic debate the pervasiveness of gender relations and their interconnections with broader processes of social change and policy (economic and political structures).

The rest of this report is organized as follows. A theoretical perspective on livelihoods, gender, and wellbeing is provided in Section 2. Section 3 provides the research design and methodology, followed by an analysis of the livelihood impacts of COVID-19 across gender and implications for wellbeing in Section 3. Section 4 delves into study conclusions and wider reflections.

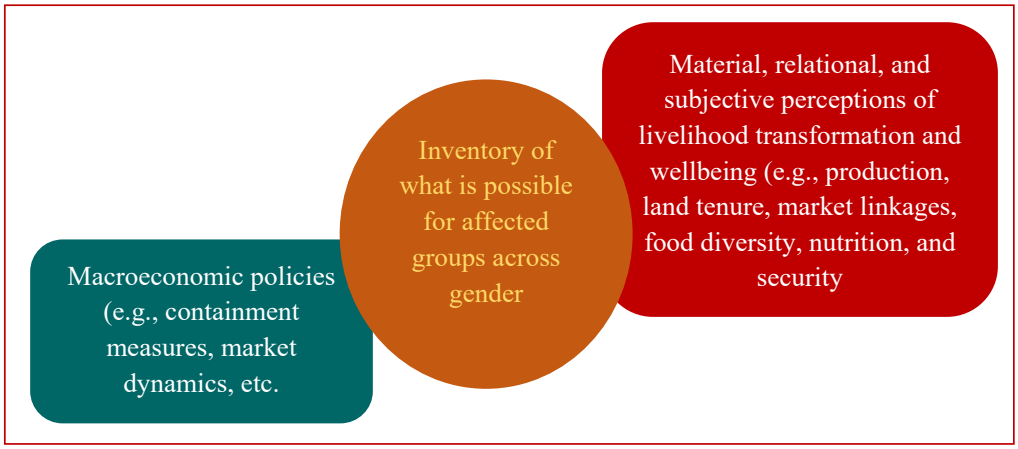
2. Livelihoods, gender and wellbeing in the era of COVID-19

The centrality of a livelihood points to "the capabilities, assets (material or social) and activities required for a means of living" (Scoones, 1998: 5). It is multi-dimension and much more than just a set of activities undertaken to subsist or gain an income. In this case, a livelihood is sustainable when it can cope with and recover from COVID-19 stress and shocks, maintain or enhance its capabilities and assets, and while not undermining natural base (Scoones, 1998: 5).

Efforts aimed at rebuilding economies in better ways during and after the COVID-19 crisis require more rounded accounts of people's experiences and approaches that can build sustainable livelihoods more broadly (Jung & Murphy, 2020; Barneveld et al., 2020). In these accounts and similar elsewhere, COVID-19 is advanced frequently as crisis of markets (Stevano et al., 2021a). These conclusions are often motivated by evidence of pandemic disruptions to markets, including transport systems due to containment measures. Market-focused framings of pandemic impacts place organizations such as markets and national governments at the centre of the crisis. These framings of COVID-19 have fortunately or unfortunately shaped policy responses to it with social approaches on how the pandemic affect human wellbeing and divergences across gender missing or less emphasized. Consequently, individuals and their opportunities have been viewed in isolation, yet the options that affected persons have depends greatly on intra- and extra-household relations and on what state and other institutions (McGregor & Sumner, 2010). The way people relate to adversity is crucial for wellbeing, and coping abilities represent individual set of behavioural (including mental) strategies adopted when facing pandemic experiences (Lazarus & Folkman, 1984). There are opportunities that are strongly shaped by social circumstances, and also policy. Analysis aimed at exploring pandemic impacts on livelihoods and gender can greatly benefit from conceptual approaches that enables opportunities to draw insights from human development perspective (beings and doings)—wellbeing (Clark, 2005).

Wellbeing perspectives to COVID-19 and rural livelihoods offers a rounded view of pandemic impacts on livelihoods, gender, and wellbeing, which is relevant for policy. Livelihood outcomes for rural producers exist within wider institutional and organizational structures—an interplay at national and local levels. Some of this relate to macroeconomic policies such as COVID-19 containment measures at national level and how they shape market dynamics at regional and local levels (Figure 1).

Figure 1: COVID-19, policy responses and livelihood transformation model



Livelihood assets promote choices, but households combine assets in diverse activities (livelihood strategies) that shape outcomes (outputs of livelihood strategies). Asking what, given context (e.g., policy, agro-ecological), combination of assets leads to what outcomes during a pandemic is important in understanding how asset availability, claims, access, and utilization are defined and re-organized. Farmer responses to large-scale agricultural investments help assess investment overall impacts at local level. The assumption is that livelihood response pathways due to COVID-19 can highlight changes to material availability, access, and utilization across gender—narrowing or diversifying livelihoods (the latter being desirable and resilient) (Manda et al., 2018). However, material disposition enables an inventory of what is possible for affected groups and across gender, but this is not enough to comprehensively understand gendered impacts of COVID-19—necessitating a focus on frameworks that can encompass several dimensions—theoretical depth.

We incorporate the 3-D wellbeing framework to place rural producers at the centre of the COVID-19 pandemic, enabling us to evaluate people's ability to achieve their material wellbeing through their relationships and people's subjective processing of this. Wellbeing is loosely defined to mean:

> "an individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, personal beliefs, social relationships, and their relationship to salient features of their environment" (World Health Organization, 1997).

We thus examine wellbeing across three dimensions: material (basic needs are met); relational (exercise of power and agency); and subjective wellbeing (perceptions). In simple terms: what do people perceive they need to have, needs to do, and need to be to achieve wellbeing and how have these been reorganized by COVID-19 (Table 1).

Table 1: 3D livelihood and wellbeing framework

Level	**Material wellbeing** ***Objective verification of needs, and aspirations in relation to COVID-19***	**Relational wellbeing** ***Relationships allow needs to be met***	**Subjective wellbeing** ***People perceive their needs are met in relation to policy response***
Household and intra-household (narrow)	What difference has COVID-19 made to needs and resources across gender?	What relationships have men and women developed because of COVID-19?	How satisfied are people with COVID-19 policy responses?
District/region (broad)	What changes have there been in material circumstances because of COVID-19?	How have relationships changed due to COVID-19	How has quality of life of different social groups changed due to COVID-19?
National (broader)	In what ways have material conditions for wellbeing changed due to COVID-19 and how do these reflect policies at macroeconomic level?	In what ways have relational circumstances changed due to COVID-19 and how do these reflect policies at macroeconomic level?	How do you think overall quality of life has changed due to COVID-19 and to what extent is this reflective of policies at macroeconomic level?

What has been possible for majority rural producers under existing COVID-19 policy responses and discretions is central to this research formulation. In Zambia, these COVID-19 related responses might be distinct from what is explicitly permitted or prohibited under current policy and legal provisions. However, impacts of COVID-19 are a function of the interplay between the three spheres: at narrow, broad, and broader levels. By explicitly integrating relational and subjective perspectives within material dimensions of the 3-D wellbeing urges development policy and practice to find ways to go beyond 'business as usual' approaches that centres narrowly on markets and trade.

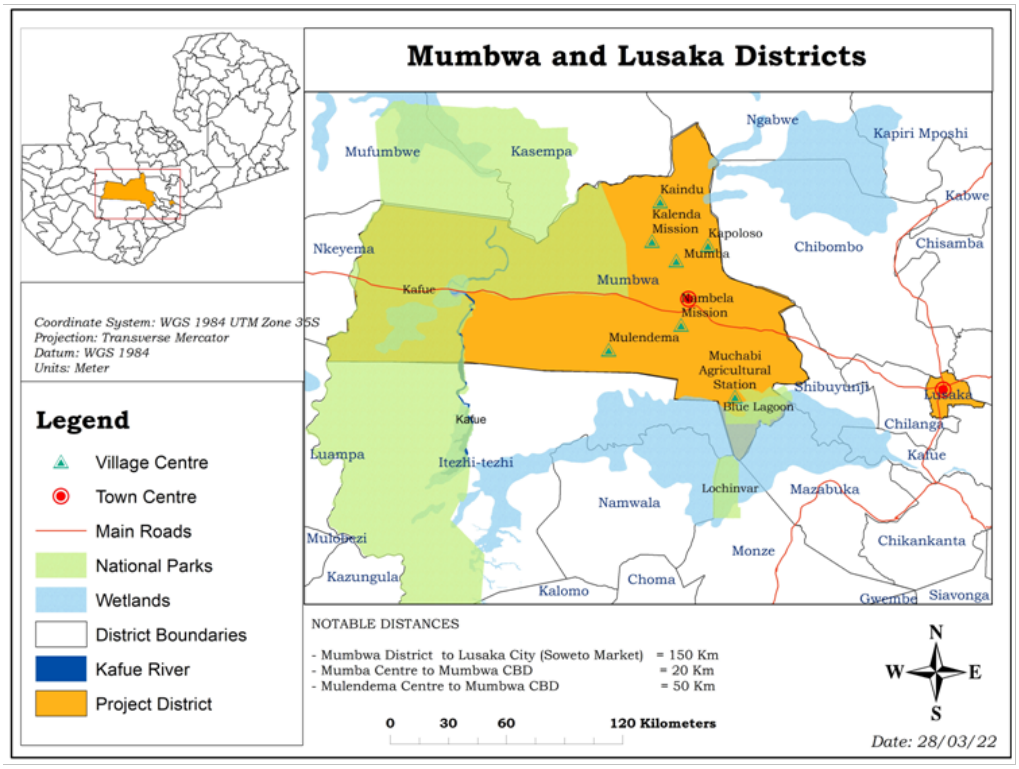
3. Research design and methodology

Researching the Mumbwa agricultural belt

The agricultural belt of Mumbwa (Belt onwards) is located in the Central Province of Zambia (Figure 2). The Belt is located on longitude 140° 59' 4" S and 27° 3 ´ 29'' E and has an altitude of 1185m. It constitutes 25% of the central province, covering a total land expanse of 23,800 square kilometres. About 12,600 square kilometres are arable land, making Mumbwa a desired investment destination for large-scale agricultural investments and small-scale agriculture. Meanwhile, about 11,200 square kilometres are designated National parks, game management areas (GMAs) and forest. Mumbwa town is situated 150km west of the capital Lusaka in the Central Province of Zambia, sharing borders with Lusaka, Namwala, Chibombo, Itezhi-tezhi, and Kasempa among other districts. The province has an area of 94,394 square kilometres. Official country Census of Population and Housing reports shows the province had a population of 1,307,111, comprising about 648,465 males and 658,646 females (Government of the Republic of Zambia [GRZ], 2010). With the population density of 13.8 persons per square Kilometre, the province has a population growth rate of about 2.6%. Meanwhile, Mumbwa district had a total population of 218,328 consisting of 110,177 females and 108,151 males with average annual population growth rate of 3.2% (GRZ, 2010). District interviews show this has now rebound to 230,000 (DI: 1.2021). Most people in the province are rural based (74.9%) and agriculture remains a dominant economic activity (GRZ, 2010).

Meanwhile, Mumbwa integrates several tribes, including Kaonde, Nkoya, Illa, Luvale, Tonga, and Bemba. Recent reports reveal gendered dynamics of farming in contexts where small-scale agriculture for own consumption and domestic markets co-exist with agribusinesses (Manda 2022). Crop production has tended to be subordinated by dominant household cropping.

Figure 2: Map of central province



Subsistence agriculture predominates, while some tribal groups target the Kafue River for fishing often as migrant labour. Dominant crops include maize, cotton, and soybeans. Cotton is driven by the cotton ginnery within the Belt which also employs a significant number of seasonal workers. There is also livestock production, and aquaculture which have lately benefited from political rhetoric and government policy pronouncement (Kafumukache, 2021). Horticultural production also exists, but this has often suffered from lack of stable markets and climate change. Agricultural trade exchanges benefit from emerging agribusiness dynamic in Zambia in off-takers such as ETG, COMACO, and Mount Meru particularly around commodities such as soybean (Manda et al., 2018, 2019). Agribusiness presence such as Zambeef actively purchases cattle and smaller livestock (e.g., goats which also make way to Lusaka and sometimes the Kasumbalesa border. Whereas agribusinesses such as Zambeef provide stable market linkages, there is a general hesitation on the part of farmers and cattle producers in the area specifically due to high veterinary costs. Farmers often incur huge losses due to livestock diseases. Small-scale chickens and goat farmers sell in the local market mainly, targeting local consumers and sometimes chain stores such as Choppies, but these are rare. Thus, trade and market linkages form crucial parts of livelihood in the district. The district also attracts wildlife tourism to the Kafue National Park located on its western border and records small to medium scale mining of gold

and other precious stones often characterized as illegal and driven by the presence of the Chinese entrepreneurs (Watala & Chileshe, 2018). Interviews show some male farmers are switching agriculture for mining which is seen as offering high- and consistent-income disbursement but face poor labour conditions (D1: 2021).

Gender characteristics of the Zambian economy

Generally, there are links between local realities and policies in Zambia, but sector-specific segregation of labour dynamics is largely missing.[1] Recent reports reveal that the COVID-19 crisis has exposed and intensified pre-existing gender imbalances and marginalization of women, girls, and people with disabilities in Zambia. Prior to the COVID-19 pandemic, condition of women such as educational attainment, political empowerment, health and survival, and economic participation were generally declining reflective of a high Gender Inequality Index (0.73)[2] (Table 2). Our study participants were agreed that whereas COVID-19 impacted many aspects of human life, implications for women, girls, and those with disabilities were distinct; women had always been frontline health workers at home and elsewhere. They *"are the primary caregivers of their families, including those infected with COVID-19 that are under home-based care"* explained the DACO (D1: 2021).

Table 2: Selected dynamics showing the status of women in Zambia (various sources)

Population	**17, 885,422 million (9,033,248 female and 8,852,174 male). About 60% of Zambia's population is below 35 years old**
Life expectancy at birth	For both sexes 65 years, females 68 years and males 62 years
Gender Inequality Index (GII)	0.73, indicating high levels of inequalities (2020)
Marital Status	73.4% and 26.6% male- and female-headed households, respectively
National poverty levels	Females 56.7% and males 53.8%
Literacy levels (15-45 years age category)	66% females and 82% males
Paid employment	39.5% women compared to 60.5% men
Average monthly incomes	K1, 928 and K1, 378 male-and female-headed households, respectively
Poverty	Out of 54.4 are poor (76.6% in rural areas and 23.4. in urban areas. World Bank (2021) shows that extreme poverty stands at 58%
Child marriages	29% (2018 Zambia Demographic Health Survey)
Teenage pregnancies	36.4% rural and 20% urban
Maternal mortality rate	Reduced from 398 deaths per 1,000 live births in 2014 to 252 deaths per 1,000 live births in 2018
Informal sector employment	93% of the Zambians are employed in the informal sector
National HIV prevalence amongst 15-49 years category	11.1% (7.5% among males and 14.2% amongst the females)

In Zambia, poverty is relatively higher amongst the female-headed household (42.9%) compared to male-headed households (40.3%).[3] For women, poverty and vulnerabilities point to poor access to and control of productive resources. There are inequalities in access, utilization, and ownership of land and other general economic activities which affect wealth accumulation.

The 2019 Labour Force Survey shows there are over 5 million women of economically active working age (15 years and above) compared to men at 4.5 million. However, women's proportion in the national labour force is relatively lower at 1.3 million compared to the men at 2 million. A similar pattern is observed for women in rural areas. Women's participation in labour markets is relatively lower at 26.7% compared to men at 44.8%. Further, only 1.1 million females are in employment—paid employment, self-employment or contributing family labour, compared to the men who are relatively more at 1.8 million. The large majority of the women (73.2%) are in the category unpaid family work, while for men, there are only 26.8% (Zambia Labour Force Survey, 2019). Zambia Demographic Health Survey [ZDHS], 2018). The 2018 ZDHS indicates that one in three women work in agriculture, while about 35% of the women are in sales and services, and only 8% are in managerial positions. Meanwhile, about 37% of the women in agriculture are less likely to be paid, compared to 26% of men. COVID-19 should be seen as affecting these pre-existing gender and livelihood dynamics.

COVID-19 trends and perception of the pandemic

Zambia recorded its first two cases of COVID-19 on 18 March 2020 in the country's capital Lusaka. Cases were later reported in Kafue, then Ndola and Kitwe districts in Copperbelt Province, and Kabwe in Central Province. Between March and April, there were fewer than 50 cases a day, but the number rose significantly in May (MoH/ZNPHI/WHO, 2020a). Although COVID-19 has since spread throughout the country, Lusaka, and other urban districts in the Copperbelt remain disproportionately affected. From 3 January 2020 to 25 February 2022, there have been 312,118 confirmed cases of COVID-19 with 3,947 deaths (World Health Organization [WHO], 2022).[4]

From first wave to the third wave of COVID-19, the months of June and July (winter), as well as November and December (rain season) were considered high risk months for high cases of respiratory illnesses which coincided with key harvest/production periods, respectively. One key feature of the pandemic in Zambia was that COVID-19 was largely urban centred and entry into rural areas is almost unknown. Perceptions of COVID-19 thus differed between rural and urban dwellers. Discussions with the District Health Planner (D3: 2021) reveal that since the first COVID-19 wave in March 2020, only a few cases had been recorded by the time of this research. A quarantine centre was set up at the local Mulungushi clinic, but cases were more prevalent in the urban areas of the district whilst the rural areas were not affected (D3: 2021). A general perception was “that COVID-19 was a disease for Lusaka and local people didn’t believe the disease was real” (D4: 2021). Over time, this perception changed due to increasing cases and the loss of 34 lives, including five prominent people and a District

Health Officer (4 out of 5 were men). The second and third waves were more severe, but even then, cases were urban biased and only a few in rural areas.[5] Respondents agreed the district recorded these cases due to its proximity to Lusaka and that *"most people in the district frequently travel to Lusaka for various business"* (D4: 2021). Group discussion participants frequently reported *"there is no COVID-19 here. Last year (2020), we heard about it, but no one has died in this community"* (GD2: 2021).

Discussions revealed rural misconceptions and myths about COVID-19. Reports were heard from the Ministry of Health that Kachasu (a traditional spirit) was being viewed as a cure for COVID-19, yet its intake presents serious health issues including lowering of the immune system especially for those with underlying health conditions (D3: 2021). In Mulendema, some men revealed they spent less time in the field for fear that excessive tiredness led to COVID-19. District interviews revealed some people linked COVID-19 to overcrowding and pollution—an urban dynamic (Lusaka) and further to international travel. Others mistook COVID-19 for cholera, reporting similarities in prevention measures such as avoiding contact with infected persons, avoiding overcrowded areas, and the need for frequent hand washing. Frequently shared national statistics about COVID-19 related cases instilled fear among Mumbwa urbanites, affecting their health seeking behaviours. Most urbanites were concerned about going to health care centres, fearing being tested for COVID-19 even if they complained about something else. Across rural and urban parts of Mumbwa, negative perceptions were reported that medical centres forced people to take COVID-19 medication even when one was negative. Group discussions placed COVID-19 within religious perspectives: "these are last days families shall be separated from each other" (GD2: 2021). District interviewees argued there appears to be a general misinformation about COVID-19 particularly that *"a national COVID-19 coordination arrangement is missing"* (Z3: 2021).

Data collection

Selection of participants

The Belt comprises about 42,000 farmers organized in 29 agricultural camps. Fieldwork started by scoping works to appreciate the geography, livelihood activities, and the way small-scale farmers are organized. Scoping involved discussing with key persons such as the District Agricultural Officers, including agricultural camp officers. Scoping-related questions were exploratory and via phone and email exchanges. To reflect government representative data, we targeted farmers in the Belt that were also part of government programme, Fertiliser Input Support Programme (FISP). We selected study camps based on access and proximity to the central business area as well as FISP participation. Data collection concentrated in three agricultural camps in Mumbwa: Mupona, Mulendema, and Mumba. Participants for qualitative study approach were generally purposively selected based on location and relevancy to the study. A snowballing technique was used to locate new, hard to locate and equally

relevant participants not previously identified through literature review or scoping. For survey participants specifically, a stratified random sampling was deployed for household surveys. This was based on the official ministry of agriculture register as official statistics of camps and their related population size.

Data collection approaches and analysis

An interdisciplinary approach informed by political economy and anthropology was used, combining qualitative and quantitative methods for primary data collection. This enabled an opportunity to place power relations at the centre of the analysis, treating women and men as groups of people with different preferences due to their different institutional position in the economy (Braunstein, 2007). By explicitly addressing the reproduction of labour rather than taking it as a given, this approach rendered unpaid work and unequal relations of power visible (Stevano, 2014).

Data collection was conducted in three stages. Stage I was scoping exercise. Scoping involved preliminary exploration of the agricultural Belt of Central Province more generally, and Mumbwa in particular. Initial consultations were made with District Agricultural Officers (DACOs). Scoping helped to understand dominant activities and organization of small-scale producers, including inclusion or exclusion in state and non-state development interventions.

Phase II focused on the distribution of questionnaires, on the one hand, and holding Focus Group Discussions, on the other. We drew quantitative data from household surveys using questionnaires. Households were randomly selected to explore and examine quantifiable (objective) elements of wellbeing. This included a focus on how COVID-19 disrupted specific livelihood patterns, intra-household livelihood adjustments, and production dynamics across men and women. Where possible, questionnaires were administered to two members of the same household across gender. However, fewer men were generally available due to economic activities such as hunting and charcoal burning; that mean that majority of men were missing. Questionnaires focused on material changes within the household economy as they relate to COVID-19. Questions focused on household asset disposition and coping mechanism—the latter relating to acquisition and disposal. Questionnaires were also used to explore household activities across gender and the extent to which these changed due to the pandemic. More broadly, there was also a focus on intra-household relationships and decision-making processes.

Qualitative data was also drawn from Focus Group Discussions. Participants were purposively selected across age and gender. In each of the three camps, group discussions were conducted with women only, men only, and youths. Group discussions took a historical analysis, focusing on livelihoods and gender dynamics before and during COVID-19 pandemic restrictions. Group discussions enabled a focus on qualitative descriptions of subjective and relational wellbeing in local communities. Some of this related to community initiatives, inter-household relationships, and livelihood experiences.

Phase III focused on household case study interviews (semi-structured). Households were randomly selected as sub-sample from the survey respondents. This enabled a greater inclusion of women in the sample as well as more detailed insights into everyday experiences and changes to livelihood patterns due to COVID-19. This allowed a focus on relational and subjective perceptions of wellbeing, drawing on 16 households across three sites (n=48). This was combined with individual district and national interviews with state and non-state actors (Table 3)

More widely, qualitative data was drawn from multi-level interviews at national, district, and community levels. Interviews included state and non-state actors such as district government departments. At the district level, participants were drawn from the ministry of agriculture (e.g., DACO) and the local government (municipal council), the ministry of health, and the ministry of education. Participants also included NGOs such as Child Fund and market players such as agribusinesses (off-takers) such as Mount Meru and ETG. In targeted communities, interviews included individual agricultural camp officers and other key persons such as traditional leaders. At the national level, interviews were conducted with state departments (n=3), research think tanks such as the Centre for Trade Policy and Development (n=3), and academics (n=2). Qualitative data was also drawn from Focus Group Discussions. Participants were purposively selected across age and gender. In each of the three camps, group discussions were conducted with women only, men only, and youths. Group discussions took a longitudinal analysis, focusing on livelihoods and gender dynamics before and during COVID-19 pandemic restrictions (Table 3).

Table 3: Sources of data (2021-2022)

Methods/Camp	Agricultural Camps				
		Mupona	Mulendema	Mumba	Total
Household surveys		58	52	40	150
Group discussions	Men	6	8	7	21
	Women	9	7	6	22
	Youths	6	9	12	27
Semi-structured in-depth household interviews	Women	16	16	16	48
Community interviews	Traditional leaders/Agro-camp officers	3	2	4	9
District interviews	State, NGOs & market actors	State: 3	NGOs: 2	Market: 2	7
National interviews		State: 1	NGOs: 3		4
Total Participants					**288**

Quantitative data was sorted and analysed using SPSS—and in some cases using excel. Analysis outputs were largely descriptive to explore household dynamics across gender, including quantitative changes. Qualitative data, on the other hand, were analysed manually and using content analysis. This involved reading qualitative data transcripts and identifying themes emerging from the data—somewhat of the grounded approach which allows thematic areas to emerge from the data itself (Strauss & Corbin, 1990). This analysis was shaped and guided by the study objectives and the need to reflect—as much as possible—on local narratives around COVID-19 related experiences as they relate to gender.

Of the survey participants, 48% of the respondents were male compared to 52% female participants, with 14% (n=21), 74% (n=111), and 12% (n=18) identifying themselves as single, married or separated/divorced/widowed. Meanwhile, 24% (n=36) of the respondents were in the age group between 19 and 34 years of age, compared to 40.7% (n=61) and 35.3% (n=53) who were either in 35-49 and over 50 years of age, respectively (Table 4).

Table 4: Sample characteristics

Background Characteristics	Count	%
Age group		
19-34	36	24.0
35-49	61	40.7
50+	53	35.3
Gender		
Male	72	48.0
Female	78	52.0
Marital Status		
Single	21	14.3
Married	111	57.5
Separated/Divorced/Widow	15	10.2

Analysis considers livelihood changes and adjustments before (March 2020) and after COVID-19 (after March 2020).

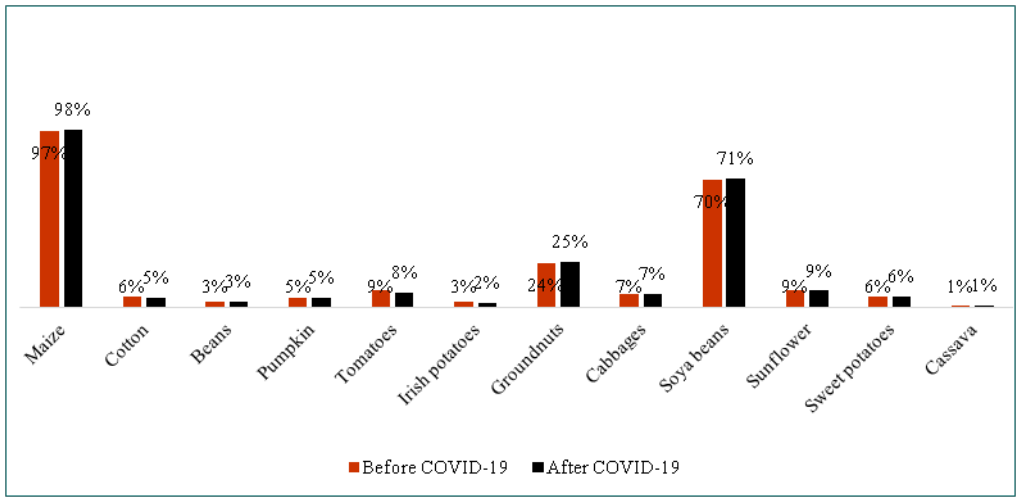
4. Results

Dominant economic activities in rural Mumbwa

In rural Zambia, pre-existing agricultural and economic activities shape vulnerabilities for women. One consequence is that women have ended up in specific sectors and occupations more broadly and trapped in household activities around food provisioning (Food and Agriculture Organization [FAO], 2018). Farming and livestock keeping are the dominant economic activities in Mumbwa. Across gender, farmers grow groundnuts, cotton, cassava, sweet potatoes, sunflower, cowpeas, and tomatoes, among others, but maize and soybeans dominate (Figure 3). District interviews show that the wider policy direction aimed at promoting large-scale agricultural investments and value addition ignited private sector participation in agriculture and a soybeans transition (e.g., Mount Meru, ETG, etc.) (see also Manda et al., 2019 on agribusiness expansion in Zambia). Thus, whereas maize production has been benefiting from a maize-centric policy focus since the 1990s, soybean expansion has benefited both from a change in policy towards crop diversification and a promotion of agribusinesses as processors and in value addition.

Broadly, at the time of this study, COVID-19 had peripheral direct impact on crop production and diversity among small-scale farmers in Mumbwa (Figure 3).

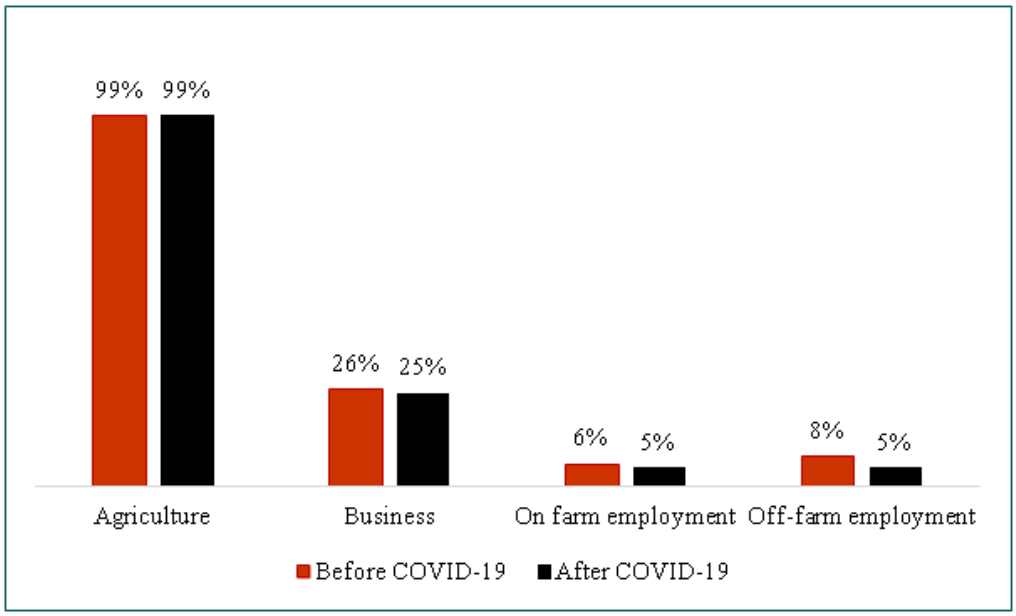
Figure 3: Crop production in Mumbwa



Source: Survey Data, 2021.

A similar pattern was observed across those engaged in business, off-farm, and on-farm employment (Figure 4). However, district officers complained COVID-19 affected extension services, disrupted meetings, field days, including agricultural shows.

Figure 4: Common economic activities before and after COVID-19



Source: Survey Data, 2021.

Farmers also rear chickens and livestock such as cattle and goats. Broadly speaking, production remained within the range of 2019, in some cases surpassing the previous year. Soybeans and maize have clear market off-takers such as local buyers and processors such as Mount Meru. Better-off farmers sell directly to millers in Lusaka and elsewhere, but generally faced transportation challenges and social restrictions related to COVID-19. COVID-19 generally altered market access for men and women. However, distance to Lusaka mean *"only men sell to the capital city, accessing lucrative markets than women."* Re-organizing market seeking behaviour affected material wellbeing and welfare, particularly among women.

COVID-19 impacts across livelihoods, gender and labour dynamics

We identify gendered impacts of COVID-19 on livelihoods through four main frames:

Impacts on markets and material wellbeing

As outlined before, farming and livestock rearing remain dominant activities in Mumbwa. There is production maize, soybeans, groundnuts, and cotton. There is also

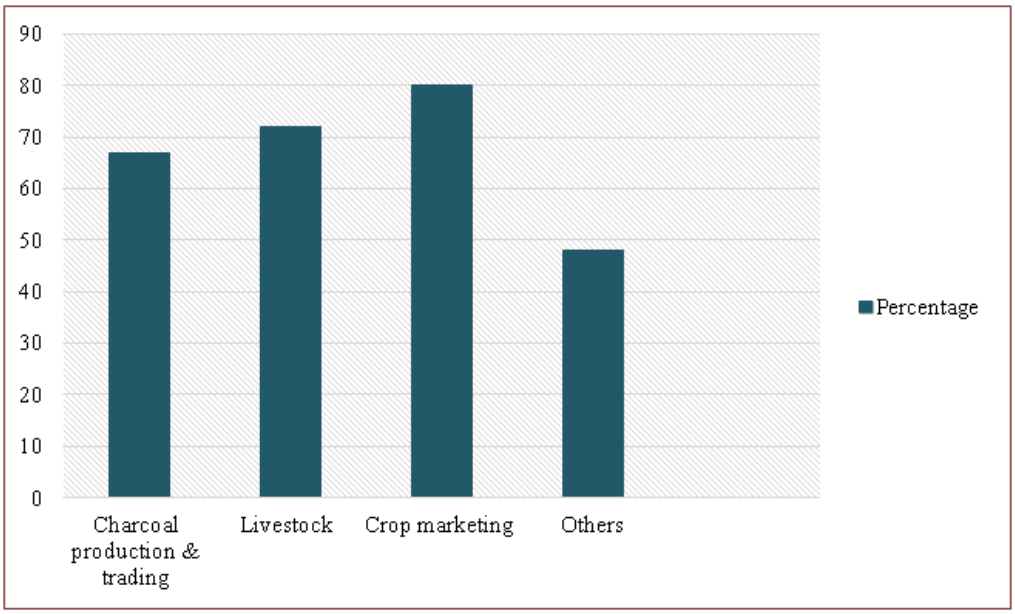
production of cassava, sweet potatoes, sunflower, and tomatoes. Before COVID-19, women sold their agricultural produce within Mumbwa to expanding agribusiness related to off-takers such as Mount Meru, ETG, and COMACO. They are also market linkages in Lusaka for horticultural produce such as tomatoes and cabbages. In some cases, potential buyers visited rural communities in search for various farm produce.

Women traded in horticultural crops such as tomato, as well as charcoal and livestock (e.g., goats) in Mumbwa and the capital Lusaka. Some women visited nearby districts (e.g., Itezhi-Tezhi) to order fish for resale in Mumbwa urban and rural community markets. Market access within and outside Mumbwa allowed access to lucrative markets for rural producers, enabling access and control of incomes by women.

Women explained that incomes allowed acquisition of material assets, resources, and access to basic needs important for household welfare. However, women generally retreated to their domestic sphere and scaled back their market engagements both within Mumbwa and in Lusaka, leading to a concentration of men in marketing and trading activities. District officers frequently argued that social restrictions meant that only men are able to sell in the capital city, accessing lucrative markets than women. COVID-19 disrupted market access among rural producers, especially for women who previously were *"leading the role in the marketing of horticultural and other commodities than men"* (Interview DACO, 2021). Buyers reduced their frequency to Mumbwa communities, and transportation costs altering market seeking behaviours. Women farmers producing tomatoes and cabbages complained about lack of markets, *"yet horticulture is a new space where we find many women operating,"* explained the DACO. There were disruptions relating to declining demand and increasing transportation costs to Lusaka.

COVID-19 contributed to a general social immobility of women compared to their male counterparts who were able to cut corners on pandemic rules. As a result, women were unable to maintain agricultural production due to low incomes and lack of inputs (high priced and unavailable) on the one hand and marketing challenges on the other, forcing them to sell at farm gate prices. This further reduced their incomes affecting food security and household provisioning. Analysis revealed women were more likely to withdraw from market seeking processes than men (72%), leading to a general male concentration (86% perceived male domination in marketing and trading). Women were more likely to adhere to COVID-19 rules and stay at home than their male counterparts. *"We have seen a concentration of men especially in horticulture crops than before"* explained one DACO. Several factors drive women's retreat from agriculture. Some of this relates to increasing household and care burden (e.g., children that previously were in school), and men who have lost their job opportunities elsewhere (e.g., Chinese informal mines) who now must enter into new economic spaces (masculinity). One key aspect was that women found it increasingly difficult to hire extra labour to Lusaka or pay for increased transportation costs. Meanwhile, majority of women in retail trade were affected by commodity prices (63%) and others dropped out of businesses completely (13%). This was reflective of the withdrawal of women from economic activities (Figure 5).

Figure 5: Perceived reduction of women economic activities



Note: n=150.
Source: Survey Data (2021).

A loss of access and control of income further raised input challenges for women. Inputs prices were frequently blamed for concentrating women in seasonal crops such as legumes. One NGO respondent from COMACO argued:

> *"Women have scaled back on maize and horticulture crop production…They cannot afford fertiliser and herbicides. They have been driven into low-cost indigenous crops such as cowpeas and pumpkin leaves. These lack clear market linkages"* (D5: 2021).

Men on the contrary *"flexed their financial muscle and enhanced their visibility in horticulture than before"* (D5: 2021). And that this situation was supported by how "*pre-pandemic asset disposition for men plays a crucial role in the recovery process, but women fair badly at both levels*" (D5: 2021). In some cases, men quickly exploited artificial markets such as production of lemons widely believed as having COVID-19 medicinal value.

Meanwhile, small to medium scale mining activities driven by the Chinese are considered important sites of employment for men. However, social disruptions due to COVID-19 means men (in some cases migrant workers) also lost out on informal mining employment opportunities. Interestingly, no reports of out-migration were heard in local communities during COVID-19. Meanwhile, reports of in-migration were heard such as from Monze, but these were driven by economic reasons as migrant workers in large-scale agricultural investment sites and mining areas.

Overall, market disruptions affected access to incomes for women, which in turn compromised flexibility to acquire material access to agricultural inputs and basic needs necessary for household welfare. Household case study interviews reveal a general declining scope for individual decision-making for women, reported among 53% of household case studies.

Transforming household provisioning, labour, and care burdens

As with other parts of the country, women play a central role in household provisioning. They are central in production and consumption, including labour and care responsibilities (Moore & Vaughan, 1994). Before COVID-19, women participated in agricultural activities such as land preparation, planting, weeding, harvesting, and marketing. There are also household caring responsibilities, including food provisioning, cooking, and preparation. Women's centrality in household provisioning, labour, and other responsibilities point to the fact that they *"fetch firewood, water and cook for their families, making decisions on overall consumption"* explained the DACO (D1: 2021).

COVID-19 reorganized patterns of household provisioning, labour, and care responsibilities in five principal spheres. First, majority of the respondents perceived declining patterns of food consumption and dietary diversity during COVID-19. Whereas food availability and access were a challenge due to market dynamics and social restrictions, with COVID-19 *"it is not a matter of having a balanced meal but putting whatever food on the table"* explained one female group discussion participant. With COVID-19, *"food commodity prices have really gone up, including prices of inputs"* (GD3: 2021). Group discussions reported adjustment to food consumption patterns: "we used to eat chicken, but this is now impossible due to prices" (GD3: 2021). Crucially, all household case study interviews perceived a *"heightened role of women in household provisioning during COVID-19"* (GD3: 2021). Seeing through consumption and care responsibilities, women expressed opinions that *"it generally felt households' responsibility had increased with COVID-19"* even for those whose number of household members remained the same.

Second, before COVID-19, children and dependants were spending more time in school, and men were equally engaged in economic activities including wage labour in mining and trading. Men generally sought employment in companies such as those in manganese mining, transport, and logistics. This absence of children and men and other dependants due to these activities created opportunities for women to plan their time and engage in income generating activities as well. Group discussion and in-depth household interviews reveal *"with COVID-19, a woman now carries the burdens of a home entirely on herself"* (Household Case Study, 2021). Companies that previously hired local labour scaled down and were no longer employing, forcing men to be home. There are also children and dependants that have been forced to be home due to closure of schools.

As a result, most women (73%) perceived increased caring work and responsibilities with others arguing, *"everyone is now home and there are too many mouths to feed and care for"* (Household Case Study, 2021; CI1:2021). They complained about how their work as providers for their families increased with the pandemic. Time allocation for every day responsibilities became problematic. Heightened responsibilities for women also related to increased supervision of children after the closure of schools. Thus, *"closure of schools means supervision responsibilities now fall on us parents and this is a lot of work. Unfortunately, our mothers bear much of that responsibility"* explained one traditional leader and corroborated by other district interviewees. Meanwhile, some women were calling on the government to *"open a community school for our children especially those below seven years"* (Household Case Study Interview). Analysis reveals this was reflective of the challenges related to long school closures in Zambia.

Third, some women reported increased caring responsibilities as a coping strategy and economic response pathway. Whereas the general pandemic response strategy among households involved falling out or switching businesses (including credit sales), some women reported taking extra dependants such as grandchildren to allow their mothers to go and look for work in other towns (e.g., as far as Nakonde in the Northern Province, 15%) and relying on remittances. They explained this strategy often changes when economic conditions normalize by recalling the so-called 'ambassadors'. Other women reportedly took care of children of relatives based in urban areas who either had lost their jobs or were struggling economically in the face of COVID-19 (15%): *"my house increased by one dependant. My brother could not take care of his son"* (Household Case Study Interviews). Despite these case burdens, women generally experienced an increased participation in production work, in the face of declining hired labour (Table 5).

Table 5: Perception of labour intensity before and after COVID-19

Task	Men before	Men during	Women before	Women during	Male youths before	Male youths during	Female youths before	Female youths during
Land preparation								
Planting								
Weeding								
Spraying								
Caring								
Marketing								
Food provisioning								

Notes: Orange = High; Black= Medium; Green = Low; White= NA).
Source: Based on group discussions.

The fourth aspect relates to revelations that care responsibilities increased sharply for the sick and elderly, including children (67%), and other family members during the pandemic. Heightened roles were reported in cooking oil, frequency in water (44%), and food provisioning (84%).

Fifth, girls were particularly affected by long closures of schools. Group discussions reported that, with the closure of schools, more young women fell pregnant, and some were forced out of school even after giving birth, creating opportunities for early marriages. Group discussion with the women revealed that the girls were less likely to return to school in part due to a culture and perception as well as knowing that in the future progression would be hindered by funding challenges. Young men reportedly engaged in illicit beer drinking and stealing.

Interruptions to relationships and social networks

In rural Zambia, relationships and social networks are important in building patterns of consumption and processes leading to solidarity, and coping strategies. They are also important in community labour sharing mechanisms. Traditional patterns of household and community relationships can act as fall-back strategies. In Mumbwa, relationships pointed to solidarity and the ability to draw support from various sources, but *"these networks are particularly significant to women"* explained one female traditional leader. Before COVID-19, relationships with neighbours and wider community relations acted as reliable sources of assistance, including food and credit. Social networks were frequently cited by women as providing *"avenues for building psychological wellbeing during difficult times".* Changes to relationships and networks mean people were conscious about who they interacted with, how they interacted, where they bought their essentials, altering pattern of visitation that previously built fall-back strategies.

Adjustments to relationships and social networks were reported *"to protect our families from the disease"* (Household Case Study Interview). Group discussions and household case studies revealed declining visitations affected family unity and neighbourhood ties and general solidarity. Reduced family and wider interactions negatively affected material sharing that come alongside social networks among women. Women expressed opinions that reliance on social networks for survival during COVID-19 reduced as *"everyone was scared of contracting COVID-19".* COVID-19 affected ability to receive visitors (51%) and visit relatives outside Mumbwa (and thus remittances) (54%), and relationships within the community (64%). It also affected relationships with other families within the communities (64%), relationships within the families (66%), and related food availability (48%). Meanwhile, restrictions around social gathering eroded women solidarity such as during bereavements or cerebrations. Survey data shows respondents received assistance from relatives (30%), neighbours (27%), and membership organizations (20%). A smaller number received support from community associations (13%) and other members of the community (10%).

Disruptions to relationships and networks lead to several consequences. Reports were frequently heard in local communities that COVID-19 affected the quality (as fallback strategies) and quantity (number of friendships) of social networks and relationships. It led to social isolation, affecting kinships and extended family relations: *"People now just became focused on their children and spouses at home. People could not visit friends and family in different locations"* (D1: 2021). Where these visited, they were looked with suspicion: *"you cannot chase people who have come to visit you, but we had to be careful"* (FGD1: 2021). Meanwhile, COVID-19 restrictions stretched family relations between different locations.

Women were more likely to perceive declining relational changes with children and partners as more people stayed at home and altered household composition. Only a few reported intra-household relationships improved because people were mainly at home, especially among married couples. Interestingly, group discussions with women reported less incidences of gender-based violence *"because men were not drinking and had no excuse for fighting"*. Whereas women continued to help each other in communities, physical assistance was *"disturbed because we couldn't gather as before"* (GD6: 2021). As a result, looking for food became difficult with COVID-19 because *"women are both responsible for looking for food and cooking it. Men don't cook in our community as they consider cooking as a job for women."* Given that women are more concerned about the day-to-day wellbeing elements of their families than men, breakdown of relationships and social relations were seen to affect women more than men (CI1: 2021).

Disruptions to membership organizations and social initiatives

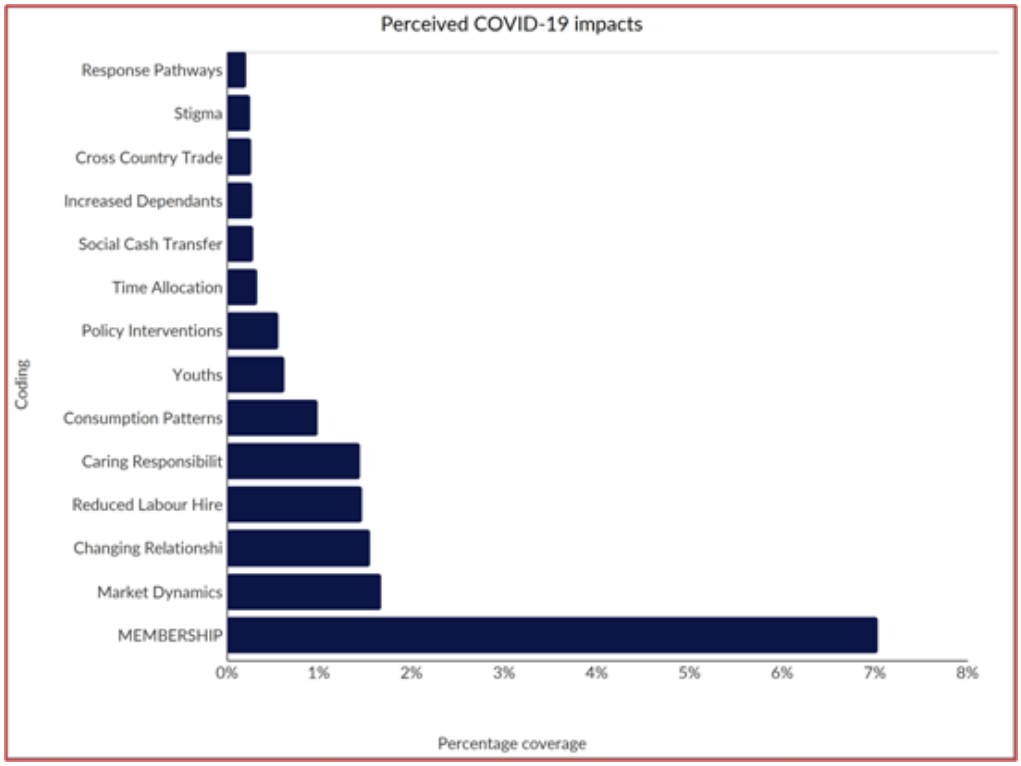
Membership organizations and social initiatives such as village banks are important alternative sources of financial support for rural communities in Zambia. These have emerged as part of policy efforts to build financial inclusion and avenue for women support and empowerment.[6] Village banks have gained traction among state and non-state actors as platform for enabling financial inclusion for rural small-scale farmers (Mukendi & Manda, 2022). As with other areas in Zambia, village banks in the study sites are dominated by women (80%) compared to men (20%) (see also Mwenge & Bwalya, 2020). Before COVID-19, women from low-income households used village banks to save their incomes as well as borrow at 10% interest. Facilitated by FinTechs such as Mobile Money Digital Platforms, village banks were sources of funds that allowed memberships in state driven cooperatives such as the Fertiliser Input Support Programme (FISP), feeding into agricultural production (fertiliser/seed/herbicides). They enabled access to funds for school fees and health services. Village banks supported consumption and acted as sources of emergency funds during adversities. In some cases, village banks supported business initiatives such as selling used clothes (locally known as Salaula). Group discussion revealed that the initiatives *"allowed access and control of income by women away from men".* Village banks also offered avenues for social interactions, where women shared experiences and ideas on many fronts—relational wellbeing.

One frequently reported membership organization in the study areas was the Own Savings for Asset and Wealth Creation (OSAWE) initiative—village banks. These were popular among women, in some cases a ratio of 13:1. Women explained village banks allowed access to financial resources that in turn enabled them to hire extra labour, access to small loans (borrowing at three times the saved amount) as well as save at 10% interest. Interviews showed village banks were crucial in linking women to input suppliers (seed, fertiliser, and chemicals) (either through markets or via state driven cooperatives), mechanization equipment suppliers, and energy companies such as solar companies for energy solutions. They were important avenues for promoting aggregation of field crops and livestock and marketing linkages, which gave flexibility to women rather than walk longer distances to market centres. They acted as sources of emergency fund. There were banks whose objectives pointed to chicken rearing, piggery, and farming—building entrepreneurship culture among women.

COVID-19 led to poor communication, group meetings and related decision-making process. Women explained that *"savings reduced because most members lacked money to save"* and repayment became difficult. General membership and subscriptions generally declined due to liquidity challenges among members. Lending to members was also restricted and adjusted downwards irrespective of one's subscription levels or whether one wanted to borrow for an emergency. Groups became unsustainable as one woman reported there are insufficient funds to keep our village bank going. COVID-19 social restrictions affected wider mobilization for new membership. This affected ability for women to join cooperatives and access subsidized inputs despite government flexibility to accept part payments for cooperative membership. One woman in Mupona explained *"I don't belong to any cooperative due to insufficient funds for registration"* (Household Case Study Interview). Some women further explained how collapse of social initiatives affected ability to invest in wider income generating activities such as goat and sheep rearing. Given that majority members in village banks were women, intra-household case study interviews revealed these impacts were more pronounced among women than men (Figure 6).

Social restrictions and general fear of the disease meant that women were unable to conduct their monthly meetings. There were alternative approaches developed as response to the pandemic such as of channelling funds only through top leaders or via FinTech Digital Platforms, but this raised trust and accountability issues. Whilst some groups risked their lives to hold meetings secretly and exercise agency, *"things were never the same, the general spirit was missing"* explained one woman. Within this perspective, women expressed opinions that *"COVID-19 did not only affect village banks. It also affected solidarity amongst women coz as you know this initiative is built on trust and we know each other well. So, COVID-19 tested our friendships"* (Group Discussion, 2021).

Figure 6: Perceived COVID-19 impacts



Source: Intra-household Case Study Interviews NVivo Output.

There are wider implications stemming from the dynamic of membership organizations and social initiatives. More work was perceived to have fallen on women given inability to hire extra labour in field preparation, planting and weeding, and charcoal business such as cutting trees and packaging. This was alluded to by reduced labour availability and also deteriorating incomes related initiatives. Reports were frequently heard in household interviews and focus group discussions of how women enterprises (e.g., farming, charcoal, etc.) generally suffered from inability to hire extra labour due to insufficient finances, fear of COVID-19, and falling social initiatives. One respondent from a female-headed household explained *"I normally hire three to four workers to help in field preparation but reduced this to only one during COVID-19,"* adding that this affected her time allocation whilst concentrating work on herself. Community labour sharing mechanisms that most women relied upon during labour crises proved less reliable due to COVID-19 social gathering restrictions which meant that each household engaged farming and other works independently with their family members affecting solidarity.

Policy landscape and implications for wellbeing on the agricultural Belt

Macro policy interventions shape possible coping responses in rural areas, affecting perceptions of wellbeing. Zambia implemented several policy interventions to curb the spread of COVID-9 and to promote recovery. Presidential Statements in early 2020 set the tone for COVID-19 policy responses and agricultural activities in Zambia (25 March 2020/25 April 2020). These adopted a gradual/conscious facilitation of continued economic activities amid the pandemic:

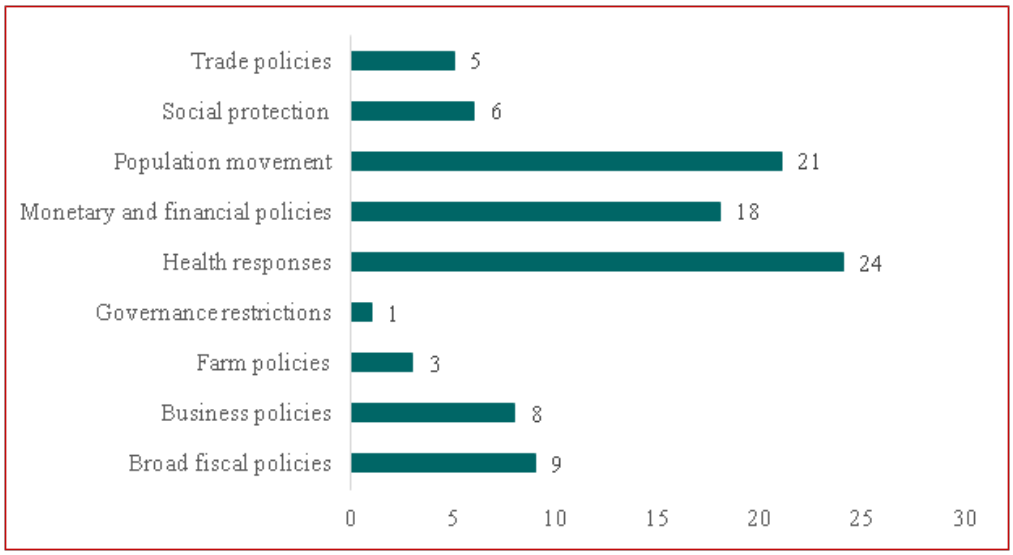
> *"If we control movement of our people and restriction of some businesses, where will the money come from...to pay salaries…FISP….What about the money for SCT? Who will harvest the crops? Who will deliver farming inputs? COVID-19……window of opportunity for farmers to produce/sell their products to chain stores that for a long time have denied them business and opted for foreign products…..chain stores should prioritize local agro products in their localities…....only products that cannot be sourced from locals should be imported"* (President ECL, SONA, 25 April 2020).

Government's position on the lockdown divided state actors between those calling for an immediate lockdown and those expressing concerns that Zambia could not afford strict restrictions given shrinking fiscal space and debt crisis. For Lusaka, for example, a total lockdown seemed impossible given its reliance on imported food and on city region food and farming systems (CRFFSs). The government issued two Statutory Instruments (SIs): 1) SI No. 21 of 2020) declared SARS-CoV-2 as notifiable infectious disease in line with Section 9 of the Public Health Act; and 2) SI No. 22 of 2022 spelled out measures aimed at controlling the spread of the disease, including mandatory quarantine measures for patients and those suspected to be suffering from COVID-19 (Manda, 2022, forthcoming). Social containment measures were generally less stringent, allowing peri-urban and rural producers such as Mumbwa to still supply urban markets.

Analysis of policy responses (Figure 7) shows health related policy guidelines dominated state responses (*n*=21). There were also those related to social restrictions (*n*=21), and monetary and financial policies (*n*=18). In addition, there have also been broad fiscal (n=9) and business-related policies (n=8). Meanwhile, there are economic measures such as the ZMK2.5 billion as financial relief for businesses and provision of tax rebates to different sectors affected by the COVID-19 pandemic, e.g., tourism sector (BOZ 2022). On the monetary side, key among the measures introduced by the Bank of Zambia (BoZ) to mitigate the impact of the pandemic on the economy is the Targeted Medium-Term Refinancing Facility (TMTRF), which has been in implementation since April 2020 (BOZ, 2020). These policy interventions have largely been at macro-level. Agricultural, and most crucially gender-specific interventions, have been missing.

In agriculture specifically, the government banned importation of onions, only to lift the ban a month later due to local supply gaps among small-scale producers. The government also allowed partial payments towards farmer access to inputs but economic challenges means rural access to inputs was limited.

Figure 7: Count of thematic areas of policy pronouncements in Zambia between March and December 2021



Source: Malambo et al. (2020).

Whereas the government identified agriculture as a priority and COVID-19 recovery sector, access requirement through bank and bon-bank financial institutions have been exclusionary for small to medium scale enterprises including poor rural women. COVID-19 policy interventions *"have generally excluded many of us in rural areas"* explained one DACO. In ranking the adequacy of state response between 17% and 25%, district officers argued *"there is a lot that we could have done as country to address rural livelihood challenges and support to small-scale producers"* (DACO).

These elements had implications on material, relational, and subjective forms of wellbeing at narrow, broad and broader levels (Table 6). In terms of objective verification of needs and aspirations in relation to COVID-19, the pandemic affected at narrower levels market access to inputs, inducing changes in cropping patterns. At a much narrow level, narrower adjustments led to reduced production and incomes. More broadly, COVID-19 affected availability and access to inputs due to wider market disruptions and gender market access. These dynamics affected material wellbeing across incomes, market access to food, and other basic necessities.

Meanwhile, in terms of relational aspects of wellbeing, COVID-19 increased at narrow levels women dependence on men—the former scaling back from their economic engagements, and the latter increasing concentration in marketing opportunities. At a narrow level, COVID-19 intensified caring responsibilities for

women whilst changing relationships across family members. This had implications at broader level in terms of changing access to market opportunities for women thereby concentrating marketing processes among men and control of incomes and decision-making.

Table 6: COVID-19 and implications for wellbeing (a 3D livelihood and wellbeing framework)

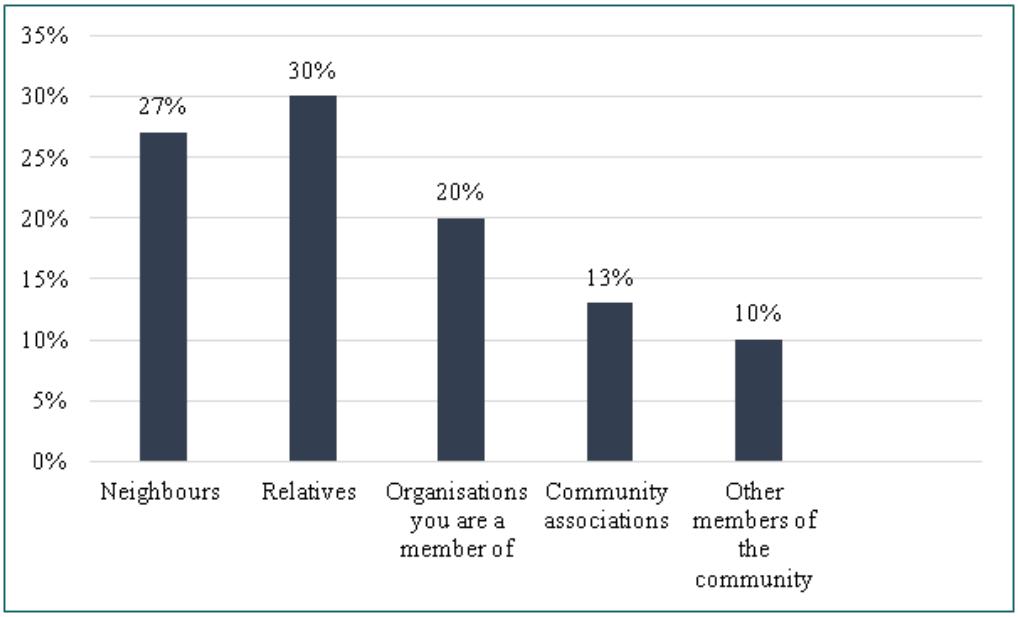
Level	Material wellbeing (Objective verification of needs, and aspirations in relation to COVID-19)	Relational wellbeing (Relationships allow needs to be met)	Subjective wellbeing (People perceive their needs are met in relation to policy response)
Household and intra-household (narrow)	• Market access to inputs • Changes to cropping patterns	• Increased women dependence on men • Intensified caring responsibilities	• Dissatisfaction with COVID-19 policy responses • No agro-recovery interventions
District/ Regional (broad)	• Reduced incomes • Reduced production	• Changing relationships across family members	• Reduced quality of life • Changing consumption patterns (food insecurity) • Reducing/declining economic activities
National (broader)	• Input availability access • Market access	• Control of incomes and decision-making • Changing marketing processes	• Livelihood struggles (production and marketing) • Missing agro-specific policy interventions

Subjective perceptions of wellbeing pointed to women's perception of the extent to which their needs were met in relation to the national pandemic policy response. Men and women expressed dissatisfaction with COVID-19 policy responses pointing to missing agro-recovery interventions at narrow level. At a broader level, women perceived declining quality of life seen through changing consumption patterns (food security) and reduced participation in economic activities. At a broader level, however, these dynamics at a narrow and broad level led to livelihood struggles in terms of production and marketing within an environment with missing agro-specific policy interventions (Table 6).

Results show that COVID-19 induced narrower livelihoods patterns for women than for men. Common coping strategies among women included informal borrowing of money to buy food, cutting meals, asking for assistance from neighbours and relatives (material aspects). All women-headed households reported reliance on remittances as a key coping strategy during the pandemic, including a heavy reliance on food aid. Meanwhile male-headed households engaged in piece works (off-farm), reorganized intra-household food allocation to prioritize children and heads of households and generally cutting on the number of meals in that order. Coping strategies depended on household composition, particularly labour availability.

Across the households, COVID-19 intensified reliance on assistance from neighbours, relatives, and membership organizations such as local village savings groups (Figure 8). Whereas these remained important sources of support, COVID-19 still affected help-seeking behaviours as people feared interacting with each, sometimes fearing that sharing of food would spread the disease.

Figure 8: Sources of assistance during the pandemic



Perceptions in male and women FGDs revealed a large majority of women-headed households were more likely to engage in on-farm piece-works than male-headed households. Results also show that women-headed were more likely (63%) to quickly sell household assets, livestock, and land than male-headed households as response to the pandemic. Women-headed households were also more likely (57%) to move, either migrate to urban areas, migrate to other districts or areas within the districts. However, both sets of households (male/female), to a larger extent, prayed and hoped the situation changes, reflective of hopelessness and lack of agency in rural communities. There were several challenges facing women as a result of the pandemic (Table 7).

Whereas household asset profile generally remained the same during COVID-19 (Figure 9), qualitative data shows that female heads of households were more likely to face or complain about land shortages during the pandemic than their counterparts in male-headed households. Within this perspective, female-headed households generally reduced on the number of crops they cultivated during the pandemic compared to male-headed households. Women-headed households were more likely (70%) to report household/family conflicts over land during the pandemic than

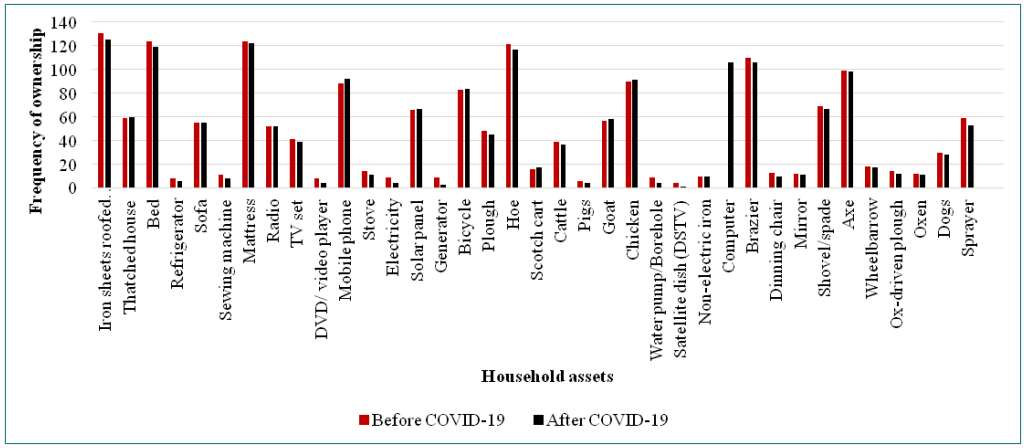
their male counterparts (40%), with a larger majority of women complaining of land shortages. Analysis shows that women-headed households were more likely to face household and family conflicts over availability, access and utilization of resources compared to their counterparts in male-headed households.

Table 7: Challenges affecting women material wellbeing

Challenges	Clarification
Costs of inputs	Women lack the financial muscle to afford a bag of fertiliser at ZMK620. Consequently, COVID-19 has seen women get under what men produce as opposed to standing on their own, increasing dependency (D5: 2021).
Closure of businesses (markets, bars, restaurants)	Women are the majority of those who work in bars, restaurants and selling in markets. They are the biggest losers. They have lost out and are now back home and to communities (D1: 2021).
Social restrictions	Social restrictions reduced group meetings. This has led to loss of women initiatives such as village banking and savings initiatives and door to door selling.
Marketing	Social restrictions raised challenges for marketing, but men are more likely to ignore these rules than women. This means restrictions related to marketing affect women more than their male counterparts.

Social restrictions meant that women could not engage in income generating activities like selling second-hand clothes due to social restrictions, and could not engage in gardening because *"we had no way to sell our produce"* (CI1: 2021). Women reported no major sale of assets as fallback strategy: *"there were no land sales or selling of household possessions, most of us live on family land so selling, it is not allowed"* (GD6: 2021). However, some sold goats, mattresses, and charcoal fuelled stoves. However, realities for female-headed households were different as these were more likely to sale household assets as coping mechanism.

Figure 9: Household asset ownership before and after COVID-19



5. Conclusions, reflections and recommendations

Conclusions and reflections

The COVID-19 pandemic and the measures to contain it have induced livelihood struggles in rural economies, but livelihood impacts across gender and wellbeing remain under-researched. This report explored gendered impacts of COVID-19 on rural livelihoods and implications for wellbeing in rural Zambia, using a 3-D Objective, Relational and Subjective (ORS) wellbeing and theoretical perspective. There are four main pathways through which gender impacts of COVID-19 manifest: 1) markets and material wellbeing; 2) household provisioning; 3) labour and care burdens, changes in relationships, and social networks; and 4) disruptions to membership organizations and related social initiatives. These elements have been compounded by the policy landscape, which remains macro as opposed to touching rural grounds. These further affect material, relational and subjective elements of wellbeing, especially for women.

The study revealed somewhat of a complex picture of livelihood impacts of COVID-19 across gender and wellbeing. COVID-19 disrupted markets thereby displacing women from their previous economic activities. There were disruptions to sources of commodities of resale value, and market outlets within and outside Mumbwa district. Related increasing transport costs, which affected access to external markets such as Lusaka, affected material wellbeing. These dynamics have consequently centralized men in production and marketing, displacing women. For women, pandemic related inflationary pressures further induced challenges of access to inputs, leading to a general scale down of their agricultural activities, retreating to their domestic spheres.

Intra-household analysis has revealed deeper insights into COVID-19 impacts on household provisioning, labour, and caring burdens. Whereas provisioning responsibilities labour demands, and care burdens increased generally for households, more impacts were felt by women. Loss of jobs by men (e.g., mining areas) meant women had to work even harder towards their daily subsistence and care for the members. Closure of schools increased supervision responsibilities for women thereby affecting time allocation. COVID-19 impacted social networks and led to even greater consequences on relational wellbeing. COVID-19 restrictions and general fear of the diseases eroded solidarity in the community and within immediate and extended families, the former linked to declining food assistance and the latter pointed to declining remittances (relational wellbeing). Related to relational wellbeing is a general

collapse of membership organizations and social initiatives. The study revealed how COVID-19 negatively impacted women initiatives. Social restrictions and eroding social relations led to a collapse of women savings initiatives (relational wellbeing). This affected access to emergency funds, incomes for input access in cooperatives, and food provisioning amid a declining profitability potential of village banks.

Micro-level COVID-19 impacts and consequences relate to inadequate policy responses that are macro-focused. A general perception among rural communities is that national COVID-19 policies have left poor and vulnerable households behind and that missing agricultural specific interventions and gender-sensitive initiatives have contributed to the challenges of recovery in rural areas (subjective elements). Modalities to assist women around care burdens and targeted approaches for livelihood support have been missing. A focus on economic recovery at macro-level, such as the economic stimulus package, has left behind rural areas, especially vulnerable and poor women and youths in rural geographies.

What is possible for women and men at household level relates to several factors, including perceptions of the role and importance of national policy and institutional frameworks. Women cannot generate sufficient incomes to improve their livelihoods since their labour does not necessarily translate into increased incomes. This is because women tend to: a) perform supportive roles, b) have less access to productive resources, c) their production activities tend to be at subsistence levels, and d) they tend to have limited access to information. Whereas previous research present COVID-19 as a crisis of markets, this study argues this is narrow, and conceals essential elements related to wider consequences of markets. This study has shown impacts of COVID-19 extend beyond markets and considers people's total way of life—livelihoods. There are impacts across work, markets, and social relations, worsening the care burdens for women, including food and income provisioning (Stevano et al., 2021b). Whilst women generally scaled back their activities and stayed at home, men continued their activities, entering new economic arrangements. One consequence has been concentration of marketing activities among male counterparts compared to women.

Whereas women show more resilient to finding ways to support their families such as food provisioning, group savings initiatives, gendered impacts of COVID-19 generally reflect pre-existing socioeconomic vulnerabilities, but these have been heightened by COVID-19 in an environment where agricultural and gender-specific interventions are absent. The policy landscape shows recovery efforts have been concentrated at macro-level with little or no mechanism to be relied upon by different actors to touch the rural grounds. There are NGO efforts albeit at limited scale, but these have equally not been gender-sensitive. Pre-existing conditions matter in recovery/response. Access to land/inputs makes a difference in recovery but women are marginalized. One consequence is that women increasingly face narrow as opposed to diversified livelihood strategies compared to men: they quickly lose all options due to COVID-19 and get relegated to household work—unpaid and invisible. The study shows this has been compounded by social initiatives such as village banks. Whilst works on their

transformative potential are only emerging, the role and importance of village banks was laid clear in this study. For example, reduction in hired labour also responded to market uncertainties as well as disruptions to village banks themselves.

COVID-19 changed relationships and inter-household and community relations, leading to loss of economic opportunities, but women appear more resilient. Results show women became more resilient in order to cope with COVID-19 related challenges such as household provisioning and income sources. For example, COVID-19 social restrictions led to a collapse of social networks and community initiatives such as village banking (OSAWE) and other lending initiatives. Relationships and social networks matter during the pandemic. Reliance on these sources of assistance was generally lower than before COVID-19. COVID-19 led to a declining pattern of reliance on these sources of assistance but their centrality in household provisioning, welfare, and wellbeing means these changes were perceived more among women than men.

The study shows women responded differently to the COVID-19 pandemic than their male counterparts within somewhat of a triple crisis of work, markets, and social relations. Women quickly retreated to household responsibilities, struggling to negotiate and engage in off-farm economic activities compared to their male counterparts, entrenching socioeconomic inequalities. Relegation of women to the household economy worsened the care burdens for women such as through food and income provisioning. Ability to abrogate COVID-19 rules and possibilities of leaving homes in the name of finding jobs and other economic activities mean caring burdens will always fall on the shoulders of women even when this means risking their own lives in the case of caring for COVID-19 patients. For women, however, care burdens also combined with their own efforts around food and income provisioning—the latter linked to community level social savings initiatives. Access to land and inputs makes a difference in pandemic recovery, but marketing also plays a crucial role. However, women increasingly face narrow as opposed to diversified livelihood strategies compared to their male counterparts, which means they quickly lose all options due to COVID-19 and get relegated to household work—unpaid and invisible. Whereas women became more resilient to finding ways to support their families such as maintaining group savings initiatives, gendered impacts of COVID-19 reflect pre-existing socioeconomic vulnerabilities amplified/heightened by the pandemic in an environment where agricultural and gender specific interventions have been missing. There is need for locally driven gender-sensitive initiatives that can build resilience and empower women. Some of these relate to modalities to support women in care burdens which can release time for productive work.

Current policy interventions have been generic and blind to gender specific elements in rural areas, failing to acknowledge and account for unequal impacts of the pandemic. This raises the need for locally driven gender-sensitive initiatives that can build resilience and empower rural women. Labour dynamics relate to a general increase in household care burdens. That the women called for interventions in childcare reflect wider challenges around increased household caring responsibilities.

Policy implications

The study identifies six policy implications.

1. ***State and non-state actors should promote gendered access to savings and credit:*** Women-run credit/savings schemes for rural women can relate to membership organizations, and women's collectives to channel resources aimed at strengthening livelihoods. These can build into local clubs, some of which already exist.

2. ***Strengthen intra-household relations to increase men's participation in the domestic care:*** This will require shift in cultural norms and beliefs on the role of men and women in the household.

3. ***Promote gender-sensitive agricultural policies, including markets:*** Supporting gender-sensitive agriculture and creating livelihoods should form part of a long-term solution. Policy interventions such as FISP and other agro-projects should place at the centre of its thinking gender, including how pre-existing conditions shape differential access to opportunities. Gender thinking in input supply, production and market linkages will help to address differential access to markets and thus livelihood recovery. This includes facilitating market linkages between women farmers and markets, brokering links between women and traders (e.g., marketing cooperatives).

4. ***Promote social protection – Social Cash Transfer:*** Social protection measures such as social cash transfers and food aid have been limited in coverage by wider shrinking fiscal space and debt burdens, precluding any additional government action. These initiatives, however, can help to enhance, not only agro-based livelihoods, but can also create opportunities for asset-based support measures among women on a rotation basis.

5. ***Build multi-level progressive partnerships and collaborations (vertical and horizontal):*** Engagements between state institutions and NGOs, including volunteers, and other organizations to provide agriculture and livelihood support and assistance to rural women. For example, extension services can go hand in hand with direct household support mechanisms.

6. ***Deliberate policy and other measures can help to advance women's access to markets during the pandemic recovery:*** This includes, training, awareness, sensitization, and other measures that can help to advance women's access to markets during the pandemic recovery.

Notes

1. Poor district data management systems mean all the officials from the ministries interviewed in this study could not provide statistics of COVID-19 infections, job losses/ unemployment, number of vaccinations, and most importantly teenage pregnancies and GBV cases.

2. The Gender Inequality Index (GII) range is from 0 to 1. A score of 0 entails equality whilst a score of 1 shows total inequality.

3. 2015–16 Gender Status Report.

4. https://covid19.who.int/region/afro/country/zm

5. Actual statistics on rural prevalence are not available in Zambia.

6. Policies addressing financial exclusion as part of poverty reduction include the Zambia's Seventh National Development Plan (7NDP) and the National Financial Sector Development Policy Financial inclusion efforts include the National Financial Inclusion Strategy (NFIS) (2017–2022) and the Rural Finance Policy and Strategy (2012).

7. Respondent's names have been concealed to guarantee anonymity.

8. During data collection, this protocol will be modified to suit different group dynamics (e.g., across age and gender).

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Appendixes

Appendix A: Interview Participants – September–October 2021[7]

Interview codes: Z = public institutions; G=research institutions; P=private-sector experts; Q=NGOs; N=farmer organizations; K=donors; and D=district/sub-district.

Code	Position/Institution	Place
Z1	Ministry of Health	Lusaka
Z2	University of Zambia	
Z3	Centre for Trade Policy and Development	
D1	District Agricultural Coordinating Agency	Mumbwa
D2	District Aids Coordination Advisor	
D3	District Health Planner (MoH)	
D4	Community Development Officer (Ministry of Community Development and Social Services (MCDSS)	
D5	Community Market for Conservation (COMACO)	
D6	Child Fund Officer	
GD1: 2021	Momba – Men	Mumbwa
GD2: 2021	Female group – Mumba Agricultural Camp	
GD2: 2021	Mupona – Mixed	
GD3: 2021	Mupona – Youths	
GD4: 2021	Mulendema Agricultural Camp – Women	
GD5: 2021	Mulendema Youths	
GD6: 2021	Mumba Women	
	Community Level Interviews	
CI1: 2021	Village Headwoman – Mulendema	
CI2: 2021	Village Headman – Mupona	

Appendix B: Questionnaire

Impact of COVID-19 Pandemic on Livelihoods: Wellbeing, Livelihoods and Gender Relations in Zambia Household Survey Instrument

Introduction

We are carrying out a research project aimed at understanding how COVID-19 has affected livelihoods in agricultural regions in Zambia. We are particularly interested in the impacts of COVID-19 across gender and wellbeing.

Name of the Respondent	
District	
Village	
Date	
Initials of interviewer	

A: Household background information

Respondent and household details

A1	**A2**	**A3**		**A4**		**A5**	
Age	**Marital status**	**Number of children**		**Number of dependants**		**People living in this house**	
		Before COVID-19:		Before COVID-19:		Before COVID-19:	
		After COVID-19:		After COVID-19:		After COVID-19:	
How many female and male members?		Before COVID-19:		Before COVID-19:			
		After COVID-19:		After COVID-19:			
How many of these contribute to household income?		Children		Dependants			
		Male	Female	Male	Female		
Did your marital status change during COVID 19?		Married	Separated	Divorced	Widowed	Remained the same	

A6: Livelihood activities				
Activity	**Before COVID-19`**	**After COVID-19**	**Estimated lost income (scale 1 to 10)**	
1. Agriculture				
2. Business (e.g., petty trading)				
3. On farm employment (formal/informal)				
4. Off-farm employment (formal/informal)				
5. Other (specify)				
A7: Has anyone stopped school since March 2020 due to changing household circumstances?			**Yes**	**No**
At what level did they stop	Primary	Secondary	Tertiary	
Reasons for stopping: 1) Incomes, 2) Loss of breadwinner, 3) Loss of jobs), 4) Others				

B: Crop production, diversification, and asset acquisition

		Before COVID-19		**After COVID-19/ Now**
B1: Crop production (crop diversification)	1. Maize			
	2. Cotton			
	3. Beans			
	4. Pumpkin			
	5.Tomatoes			
	6. Irish potatoes			
	7. Groundnuts			
	8. Cabbages			
	9. Soybean			
	10. Sunflower			
	11. Sweet potatoes			
	12. Cassava			
	13. Other (specify)			
B2: Has land allocation to crop production generally reduced or increased during COVID-19?		Remained the same	Reduced	Increased
B3: Estimate by how much?				

B4: Reasons why land allocation to crops reduced		Yes	No
	1. Land sales		
	2. Lack of inputs		
	3. Poor markets		
	4. Labour shortages		
	5. Land being grabbed		
	6. Other reasons		

B5: What sort of assets did you have? (Tick where applicable)						
Assets	**Before**	**After**	**38.**	**Dining table**	**Before**	**After**
1. Iron sheet roofed house			39.	Wall clock/ watch		
2. Thatched house			40.	Mirror		
3. Bed			41.	Shovel/spade		
4. Refrigerator			42.	Axe		
5. Sofa			43.	Wheelbarrow		
6. Sewing machine			44.	Ox-driven plough		
7. Mattress			45.	Oxen		
8. Radio (audio equipment)			46.	Ducks and geese		
9. TV set			47.	Guinea fowls		
10. DVD/video player			48.	Pigeons		
11. Mobile phone			49.	Turkeys		
12. Stove			50.	Dogs		
13. Electricity (ZESCO grid)			51.	Tractor		
14. Solar panel			52.	Miller (chigayo)		
15. Generator			53.	Kitchen unit		
16. Bicycle			54.	Sprayer		
17. Plough			55.	Toilet		
18. Hoe			56.	Others assets		
19. Scotch cart			57			
20. Cattle			58			
21. Pigs			59			
22. Goat			60			
23. Chickens			61			
24. Water pump/Borehole			62			
25. Water tank			63			
26. Electric/Gas cooker			64			
27. Motorbike			65			
28. Motor vehicle (car, truck)			66			
29. Boat/canoe			67			
30. Fishing net			68			
31. Satellite dish (DSTV etc.)			69			

32. Electric iron			70			
33. Non-electric iron			71			
34. Computer			72			
35. Brazier/Mbaula (charcoal)			73			
36. Dining set			74			
37. Dining chairs			75			

C: COVID-19 and Household production

C1: As a household, what challenges/costs did you face/incur with COVID-19 pandemic?	**Yes**	**No**
1. Loss of land		
2. Land shortages in the areas		
3. Loss of livestock		
4. Loss of other crops (e.g., opportunity to grow other crops)		
5. Poor water access		
6. High costs of renting or buying land		
7. Household conflicts over land		
8. Poor community relations		
9. High costs of services offered by the service provider		
10. Poor commodity prices		
11. Poor information sharing within the scheme		
12. Poor community cooperation		
13. Household disagreements/conflicts		
14. Poor quality land after relocation		
15. Inability to influence decisions in the scheme		
16. High commodity prices		
17. Migration issues (e.g., members of your household moving in or out of the area)		
18. Labour shortages		
19. Poor health in the family		
20. Reduced access to ecosystem services (e.g., firewood)		
21. Other (specify)		

D: Income Losses

D1: How much income was lost from your top three sources of income (Estimates)?			
Crops	2019	2020	2021
1.			
2.			
3.			

D2: Mention three most market related challenges that you face or have faced before during COVID-19?		
	Yes	No
1. High transportation cost		
2. Problems of storage (e.g., inputs)		
3. Low/fluctuating output prices for the harvest		
4. High input prices		
5. Unclear transaction costs (e.g., cost of inputs)		
6. Poor information sharing (e.g., by the scheme, service providers)		
7. Lack of seasonal labour		
8. Poor COVID-19 policy responses		
9. Others		
D3: In terms of household production, what do you think made the impacts of COVID-19 even worse?		
Factors	Yes	No
1. Weak managerial capabilities at household level		
2. Lack of man power (labour) within the household		
3. Limited access to technology		
4. Limited access to information		
5. Lack of adequate financial resources		
6. Low market prices		
7. Stringent farm practices required by the buyer/processor		
8. Competition is restricted by dominant schemes/farmers		
9. High input costs undermine ability to compete		
10. Non-existing and/or incapable business associations/farmer organizations		
11. Poor services from service providers/buyers/processors		
12. Lack of support from local NGOs		
13. Lack of support from government		
14. Poor Infrastructure, e.g., roads		
15. Poor health in the household		
16. Other, kindly state		
G4: During COVID-19, did you receive support/assistance from the following?	**Yes**	**No**
1. Neighbours		
2. Relatives (remittances)		
3. Other members of the community		
4. Organizations you are a member of (e.g., churches)		
5. From community associations (e.g., NGOs/local groups)		
6. Government		
7. Any other (specify)		

D4: What kinds of support did you receive during COVID-19?	Tick	Source	Recipient	
			Man	Woman
1. Inputs				
2. Harvest				
3. Transport				
4. Financial support				
5. Guidance on farm practices				
6. Technology				
7.Training opportunities				
8. Market specific information, e.g., prices				
9. COVID-19 information and training				
10. Other (specify)				

E: Production, land, land-use dynamics and household responses

E1: Did you respond to COVID-19 through the following?	Yes	No
1. Reducing crop production		
2. Reducing number of livestock		
3. Bought extra land around the community		
4. Bought land in town		
5. Rented in		
6. Sharecropping		
7. Relocated/migrated out of the area		
8. Just sitting and allow nature take its course		
9. Other (specify)		

F: Income sources, expenditure and expenditure decisions

F1: Has any of your household member/s worked outside your farm in the past year or conducted business?			**Yes**	**No**
F2: Have you or any of your household engaged in any of the following economic activities in the past three years? Tick where applicable				
1. Worked on smallholder farmer (fellow farmer)		9. Engaged in fishing		
2. Worked on a commercial farm (e.g., estate, scheme)		10. Trading in Forestry products		
3. Worked in a factory		11. Received remittances (e.g., cash from a working relative, child, etc.)		
4. Worked in a mine or any industrial work		11. Renting out property		
5. Worked in government (civil servant)		12. Did not engage in any IGA (e.g., unpaid work, student, too old, etc.)		
6. Engaged in non-agricultural piece work		13. Others (specify)		
7. Engaged in running own business (e.g., shop)		a.		
8. Engaged in own farming within the scheme		b.		
9. Engaged in own farming outside the scheme		c.		
F3: Have you or any of your household members migrated during this period?			**Yes**	**No**
F4: During the COVID-19 period, did you see any family receive new members from outside the community?			**Yes**	**No**
F5: In your opinion, has COVID-19 given you NEW or MORE responsibilities/ obligations in the family or community?			**Yes**	**No**
F6: Who do you think is most affected between men and women (M or W)				

F7: Who participated in the following activities	**Women before COVID-19**	**Women after COVID-19**	**Men before**	**Men after COVID-19**
Working on family farm				
Agricultural labourer				
(e.g., on large farms)				
Charcoal business				
Fishing				
Shop-keeping				
Food/drink				
Preparation/processing				
Selling foodstuff at the markets				

G: Wellbeing and Impacts of COVID-19

G1: Considering all the resources at your disposal, how has COVID-19 affected the following?		Yes	No
1.	Food availability and sufficiency		
2.	To have improved household nutrition		
3.	Incomes		
4.	Access to land and other natural resources (e.g., firewood, forest, food stuff)		
5.	Housing security		
6.	Education access (ability to send children to school, school fees)		
7.	Access to health services (e.g., hospital/clinics)		
8.	Relationships within families		
9.	Relationships in the community		
10.	Access to clean water		
11.	Household assets		
11.	Ability to make investments		
12.	Livelihood diversification (e.g., food sources, income generating activities)		
13.	Livelihood resilience (i.e., ability to withstand crisis or shocks, e.g., COVID-19)		

G2: What has made coping with COVID-19 difficult?			
1.	Lack of good incomes that meets your demands		
2.	Lack of good market opportunities (e.g., prices)		
3.	Weak community associations		
4.	Inadequate information sharing on COVID-19		
5.	Poor cooperation among smallholders		
6.	Reducing access to land		
7.	Poor social networks within the community		
8.	Lack of support from government		
9.	Other (specify)		
10.			
G3: During COVID-19 period, household decision making became:			
	More shared		
	Centralized by men		
	Centralized by women		
	The same		

H: Household coping strategies

H1: Did you do the following as a way to cope with COVID-19?		Yes	No
1.	Cutting number of meals		
2.	Choosing to give the little food to children only		
3.	Choosing to give the little food to the head of the household only		
4.	Borrowing food		
5.	Informal borrowing money in order to buy food (from friends)		
6.	Formal borrowing (e.g. from the bank, association, employers etc.)		
7.	Receive assistance from neighbours and friends		
8.	Receive assistance from relatives		
9.	Remittances from someone (e.g., child) working in town/ elsewhere		
10.	Do piece-works (involvement in off-farm activities)		
11.	Do piece works (involvement in non-farm activities)		
12.	Migrate to urban areas to seek new pathways		
13.	Migrating to other areas within the district		
14.	Migrating to other areas outside the district		
15.	Praying and hoping the situation changes		
16.	Sale of household assets (e.g., fridge) in order to buy food		
17.	Sale of livestock (chickens, cattle, goats)		
18.	Sale of land		
19.	Food aid (e.g., government, NGO, church)		
20.	Surviving on fruits and other edible products from the forest		
21.	Other (specify)		
H2: In this COVID-19 period, sale of land parcels in the community has? (Circle accordingly)		Increased	Decreased
		Remain the same	Don't know
Please give reasons to H2 above (e.g., to pay school/health bills, to buy food etc.:			

H3: Apart of COVID-19, what other household/livelihood shocks have you experienced during COVID-19?		Yes	No
1.	Death of bread winner or in the family		
2.	Bereavements		
3.	Being stolen from/theft		
4.	Loss of crops		
5.	Loss of animals (e.g., cattle)		
6.	Economic shocks (e.g., prices)		
7.	Loss of business		
8.	Natural disasters (e.g., flooding, droughts)		
9.	Loss of land (sales, land-grabbing)		
10.	Other (specify)		

H4: What sort of relationships were/are important to your household in terms of livelihoods and welfare?	Tick	Who participants the most in these relationships?		What benefits are associated with these relationships?
		Men	**Women**	
1. Household				
2. Community (e.g., neighbours/friends				
3. Wider community (community/religious/ traditional leaders)				
4. Organizational/institutions (e.g., churches, NGOs, government, schools)				
H5: Have there been changes to the following relationships due to COVID-19?	**Yes**	**No**	**Perceived changes**	
Household				
Community (e.g., neighbours/friends				
Wider community (community/religious/ traditional leaders)				
Organizational/institutions (e.g., churches, NGOs, government, schools)				
Others (specify)				

I: Views, perceptions, and opinions about COVID-19 policy responses

I1 Respond according to five possible options:	Strongly agree	Slightly agree	Don't know / undecided	Slightly agree	Strongly disagree
1. We received adequate training and information about COVID-19					
2. I have adequate knowledge on COVID-19 prevention					
3. Terms and conditions for producing and selling agricultural products to service providers/buyers/ processors remain the same with COVID-19					
4. Given COVID-19, agricultural production remains the only feasible crop available					
5. COVID-19 negatively changed household access to land for other economic activities					
6. Participation in agricultural production has not changed household access to ecosystem services than before					
7. COVID-19 led to unplanned expenditure decisions than before					

8. COVID-19 has increased household responsibilities than before (e.g., increased demands from relatives or community)					
9. COVID-19 has affected relations and support in the community					
10. COVID-19 has affected social relations and support in the family					
11. COVID-19 has affected economic opportunities (e.g., employment) in agricultural production schemes					
12. COVID-19 has affected women more than men (e.g., more labour demands for women)					
13. COVID-19 has affected intra-household shared decision-making					

Comments:

Appendix C: Focus Group Discussion Guide[8]

Background Questions

1. Type of crops cultivated in this area. What crops do you grow? (cash crops vs food secure).
2. How much was used for household consumption and how much went to the markets? (which markets? local, regional, urban/national or export?).
3. How is the market access? (individual, collective, or through agents?).
4. Sources of inputs (seeds, agricultural tools, chemical inputs such as fertilisers, pesticides etc.). Have sourcing strategies changed due to COVID-19? How?
5. Do you think that time spent in the fields per day changed during COVID-19? Probe how? State factors that may have led to the changes across men and women.
6. Division of labour. Do you work on the fields with other women? Do you work with men too? How do you share tasks with other people, women, and men? Do you think these work allocations changed due to COVID-19? Probe how and why?
7. Do you do other types of work/activity? If yes, what? Are these paid or unpaid works? Did these changes have impacts across gender? Who were most affected and who benefited between men and women?
8. Did COVID-19 alter market access for food? (market purchases as opposed to own production) Who are engaged in these between women and men? If both, who are mostly involved and why?

Inventory of what is possible (individual, household, community)

9. What were women able to do in the COVID-19 period? (e.g., did they continue to work? Did they lose employment? Did they lose social networks in the community?).
10. What were men able to do? What was continued? What was stopped? Why?
11. What was the community able to do or not during COVID-19? What activities were sustained or stopped?
12. Why were some of these activities difficult during COVID-19? (Who has been affected or benefited most? Disaggregation across gender/Sex)

Material changes (individual and household levels)

13. How have material conditions for wellbeing generally changed due to COVID-19 (probe markets and labour engagement).
14. What difference did COVID-19 make to the resources of local people?

a. Were there changes on production? (which ones exactly?).
b. Was there a general increased on land sales? (sale of household possessions?).
c. Were there changes to access to markets? (including market remunerations?).
d. Were there changes in food availability? Food diversity?

15. How did the people cope with COVID-19 related challenges? Were these response ways different between men and women?

Relationships and social networks

16. How have relationships changed due to COVID-19? (intra-household; inter-household; within the community; and engagement with social institutions in the community or district)
17. In what ways have relational circumstances changed due to COVID-19? (at individual, community level; new institutions?)
18. Were changes in the number of household members being taken care of during COVID-19?
19. Was there a general in-ward migration in the community due to COVID-19?
20. Was there a feeling that during COVID-19 women worked a lot than men? (probe in which areas? How they approached this work? Was this paid or unpaid work?)
21. In what ways have labour allocation dynamics as well as caring burdens changed due to COVID-19?
22. Were there changes in the way people helped each other during COVID-19? (e.g., men helping women, women helping men). Were people able to maintain social relationship in this period?
23. Do you think responsibilities for food provision and preparation have increased due to COVID-19? Who are generally responsible for these activities between men and women? If both, who are mostly involved? How long does it take you to prepare food? Does the time spent differ across gender? Why?
24. Did eating habits generally change due to COVID-19? Probe how? Intra-household sharing mechanism? Who eats first and why?
25. During COVID-19, which months were particularly the most difficult ones? What happened? Probe case studies of what happened and how people reacted

Wider processes

26. How satisfied are COVID-19 affected groups with pandemic responses and why?
27. How does quality of life of recipients change due to COVID-19?
28. Was there any support given to individuals or the community during COVID-19? (government support; NGO support; private sector support; and other forms of support)
29. What did people have to do in order to access this support? (Probe criteria for inclusion and whether this differed between men and women?
30. What sort of support does this community need in order to ensure sustainable COVID-19 recovery (mention as many as possible)
    a. Rank the top THREE most important forms of support considered important for ensuring sustainable COVID-19 recovery as a community.
31. Do you have any comment or question?

END

Appendix D: Community Level Interview Guide

Background Questions

1. Type of crops cultivated in this area. What crops do you grow? (cash crops vs food secure).
2. How much was used for household consumption and how much went to the markets? (which markets? local, regional, urban/national or export?).
3. How is the market access? (individual, collective, or through agents?).
4. Sources of inputs (seeds, agricultural tools, chemical inputs such as fertilisers, pesticides, etc.). Have sourcing strategies changed due to COVID-19? How?
5. What sort of production is common in this community? (probe crops, businesses)
6. Who are these activities common to? Men or women?
7. Are there any changes in intra-household work allocation due to COVID-19? Probe: changes to division of labour between different household actors.
8. What other works go unpaid in households and who does them?
9. Did COVID-19 increase the market access for food? (market purchases as opposed to own production).
10. What were women able to do in the COVID-19 period? (e.g., did they continue to work? Did they lose employment? Did they lose social networks in the community?).
11. What were men able to do? What was continued? What was stopped? Why?
12. What was the community able to do or not during COVID-19? What activities were sustained or stopped?
13. Why were some of these activities difficult during COVID-19?

Material changes (individual and household levels).

14. How have material conditions for wellbeing generally changed due to COVID-19? (probe markets and labour engagement).

15. What difference did COVID-19 make to the resources of local people?
16. Were there changes on production? (which ones exactly?).
17. Was there a general increased land sales? (sale of household possessions?).
18. Were there changes to access to markets? (including market remunerations?).
19. Were there changes in food availability? Food diversity?
20. How did the people cope with COVID-19 related challenges? Were these response ways different between men and women?

Relationships and social networks

21. How have relationships changed due to COVID-19? (intra-household; inter-household; within the community; and engagement with social institutions in the community or district).
22. In what ways have relational circumstances changed due to COVID-19? (at individual, community level; new institutions?).
23. Were changes in the number of household members being taken care of during COVID-19?
24. Was there a general inward migration in the community due to COVID-19?
25. Was there a feeling that during COVID-19 women worked a lot more than men? (probe in which areas? How they approached this work? Was this paid or unpaid work?).
26. In what ways have labour allocation dynamics as well as caring burdens changed due to COVID-
27. 19?
28. Were there changes in the way people helped each other during COVID-19? (Probe: were people able to maintain social relationship in this period?)
29. Do you think responsibilities for food provision and preparation have increased due to COVID-19? Between women and men, who is generally more responsible for these activities? How long does it take you to prepare food?
30. Did eating habits generally change due to COVID-19? Probe how? Intra-household sharing mechanism? Who eats first and why?
31. During COVID-19, which months were particularly the most difficult ones? What happened? Probe case studies of what happened and how people reacted.

Wider processes

32. How satisfied are COVID-19 affected groups with pandemic responses and why?
33. How does quality of life of recipients change due to COVID-19?
34. Was there any support given to individuals or the community during COVID-19? (government support; NGO support; private sector support; and other forms of support).
35. What did people have to do in order to access this support? (probe criteria for inclusion and whether this differed between men and women?
36. What sort of support does this community need in order to ensure sustainable COVID-19 recovery (mention as many as possible).

37. Rank the top THREE most important forms of support considered important for ensuring sustainable COVID-19 recovery as a community
38. Do you have any comments or questions?

END

Appendix E: District Level Interview Guide

1. District social economic background: population; economic activities; markets, etc.
2. How can you describe trends of COVID-19 in the district?
3. Who do you think were the most affected between men/boys and women/girls? (Probe how and why).
4. Who were the key actors in the fight against the COVID-19 pandemic in this district? What did they do? (Probe their role and importance).

a. What sorts of collaboration were key in this district in terms of fight against COVID-19?

5. What do you think were the impacts in rural areas and across the agricultural sector? (Discuss these across gender).
    a. Agricultural production,
    b. Businesses,
    c. Markets,
    d. Unemployment (Probe for statistics),
    e. Other impacts.
6. How can the district ensure sustainable COVID-19 recovery?

a. What sort of support is needed?

7. How satisfied are you with government response to COVID-19? What should have been done differently and why?
8. Any other comments

END

Appendix F: Household In-depth Case Study Interviews

Memberships

1. Organizations you are a member of (probe village banks as well). Who is likely to belong to these clubs/organizations (men or women or both)?
2. Benefits of these organizations (how important are they?).
3. How were these affected by COVID-19? Did they survive during COVID-19? (Probe what they did to make them survive? Did they drop membership or profitability levels?).
4. What was lost or gained from these membership organizations during COVID-19?

Market Dynamics and Economic Activities

1. How did COVID-19 affect markets (e.g., affecting where to sell, how much to sell, or price or where

to buy from)? Markets for what exactly (e.g., crops)?
2. How did you deal with market challenges? (e.g., changing where to sell or stopping or asking men/women only to do the marketing).
3. During COVID-19, who was more involved in marketing than before COVID-19? (probe how).
4. Did COVID-19 make you lose some opportunities as a woman (or as a man)? (probe what these opportunities are).
5. What difference has COVID-19 made to your needs as:1) woman and 2) household?
6. What changes have there been in material circumstances of your household because of COVID-19?

Household provisioning and caring responsibilities

1. Were there changes in food consumption during COVID-19? (how? What adjustments did you make as a family or between men or women?).
2. Who provided the most food in the house during COVID-19? Was this the case before COVID-19? (probe for any changes).
3. Have caring responsibilities for your family changed during COVID? How did these responsibilities change? (increased dependants, decreased dependants, increased patients? etc.). Was the situation much better before COVID-19 or not?
4. Were you able to balance your time with different household activities during COVID-19? Why? How? (probe if the situation was the same before COVID-19).
5. How has labour allocation/division changed due to COVID-19?
6. Did COVID-19 increase work for 1) women 2) men 3) youths? (how?).

Relationships and social networks

1. How have relationships changed due to COVID-19? (1) intra-household, 2) between neighbours, 3) in the community).
2. Did women/men develop NEW friendships, networks, or join new arrangements/clubs during COVID-19 to survive? What are these?

Policy responses

1. How do you think the overall quality of life has changed due to COVID-19? (probe the changes).
2. Were there specific programmes aimed at helping women during COVID-19? (probe government or NGOs or churches; what they are, what they offer, and selection criteria of who participates and how).
3. Did COVID-19 affect access to: savings and credit cooperatives; micro-financial institutions, training?
4. What sort of things do you think you should have had before COVID-19 (material, networks/friendships, memberships) that would have helped you to deal with the pandemic?
5. What sort of support would women need to deal with COVID-19 pandemic?

END

Mission

To strengthen local capacity for conducting independent, rigorous inquiry into the problems facing the management of economies in sub-Saharan Africa.

The mission rests on two basic premises: that development is more likely to occur where there is sustained sound management of the economy, and that such management is more likely to happen where there is an active, well-informed group of locally based professional economists to conduct policy-relevant research.

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Contact Us
African Economic Research Consortium
Consortium pour la Recherche Economique en Afrique
Middle East Bank Towers,
3rd Floor, Jakaya Kikwete Road
Nairobi 00200, Kenya
Tel: +254 (0) 20 273 4150
communications@aercafrica.org