



# COVID-19, Livelihoods and Inequality: Poor Female-Headed Families Fare Worse in Kenya and Ethiopia

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## Key messages

- The COVID-19 pandemic has had a disproportionately larger impact on food insecurity, lost incomes, and greater degree of inequity in access to health services and necessities among female-headed families in Kenya and Ethiopia.
- Pre-existing differences in socioeconomic status has exacerbated the impact of the pandemic on livelihoods and inequality in Kenya and Ethiopia.

- To improve social protection and reduce the vulnerability of female-headed families, governments must purposefully construct fiscal policy initiatives that incorporate a gender lens to minimize pre-existing inequalities and maximize social protection.

## Introduction

The COVID-19 pandemic has affected men and women differently in Kenya and Ethiopia, both at the household level and within the workplace. Like in many countries, this pandemic is being experienced against the backdrop of existing social and economic disparities. Over the last few decades, there has been tremendous progress and commitment by the governments of Kenya and Ethiopia in tackling poverty through crafting policies that promote economic opportunities and encourage inclusive growth for everyone. However, this progress has not been shared equally across the board as inequalities in social and economic dimensions persist (Kenya National Bureau of Statistics, 2020; World Bank, 2020).

The same policy strategies aimed at reducing poverty and increasing urbanization and rural development could increase inequalities. With the emergence of the COVID-19 pandemic, poverty is thought to be on the rise again, with women, children, the elderly and other vulnerable groups of the population bearing the bigger brunt. The growing evidence on the impact of the pandemic across countries points to rising inequality levels, mostly precipitated by the subsequent lockdown measures. While the COVID-19 pandemic and the public health measures implemented to minimize its spread have affected every citizen in Kenya and Ethiopia, individuals living in female-headed families, with children and those living in rural areas are thought to have suffered the most. The implementation of containment measures such as lockdowns and curfews made it difficult for people especially those living in rural areas to move around make a living. With many of these people relying on mobility, seasonal and migrant work, and remittances to make ends meet, the COVID-19 pandemic presented a huge negative shock to their livelihoods. In other countries including Kenya and Ethiopia, there has been a massive return of migrants to rural areas, mostly due to loss of employment in urban areas. Disruptions to seasonal migration and remittance flows to rural areas represents a shortfall in crucial financing lifeline for many poor people living in rural communities (Ochieng, 2020).

This policy brief provides a summary of the impact of the pandemic on livelihoods and inequity of access to health services and other necessities during the COVID-19 pandemic in Kenya and Ethiopia. It illustrates that families where the head of the household was female had a disproportionately greater risk of food insecurity, reduced incomes, and higher degree of inequality in access to health services and necessities during the pandemic. These disruptions were significantly exacerbated

among families classified as being of low asset wealth prior to the pandemic, and among those with children. The brief then provides a summary of the results followed by a discussion of the implications for policy in Kenya and Ethiopia considering the findings.

## **The COVID-19 pandemic takes a heavy toll on female-headed families**

### ***Increased risk of food insecurity among female-headed families***

The analyses of the high-frequency phone surveys data used in this research revealed that, among female-headed families:

- The probability that a Kenyan adult would go for the entire day without eating because of a lack of money or resources for food in the last 30 days was about 10% higher if she lived in a family where the head of the household was female, it was 24.35% in Ethiopia. The risk was even greater among families with children, those from low socioeconomic status, and where a member had lost a job due to COVID-19.
- The prospect of skipping a meal during the pandemic was about 9.9% higher if the respondent lived in a female-headed family in Kenya, and 18.9% in Ethiopia.
- In Kenya, anxiety over the possibility of not having enough food during COVID-19 was 6.4% higher among female-headed families, and 17.8% among female-head families in Ethiopia.

### ***Greater income losses among female-headed families***

- There were greater income losses among female-headed families in Kenya and Ethiopia during the pandemic.
- The probability of taking out a loan or borrowing from a friend was, respectively, 1.2 and 2.5 percentage points (pp) higher among female-headed families in Kenya.
- The prospect of closing a business, having credit purchases, and reducing food consumption was, respectively, 6.5pp, 3.8pp, and 3pp higher among female-headed families in Kenya.
- In Ethiopia, the probability of losing household income, business income, and remittances was, respectively, 2.7pp, 1.3pp, and 1.4pp higher among female-headed families.

## ***Increased inequality in access to health services and necessities***

- The results also point towards a greater degree in the level of inequality in access to health services and necessities during the pandemic, which was to the disadvantage of relatively poor female-headed families.
- In Ethiopia, individuals living in relatively poor families where the head of household was female had greater difficulty accessing general health services, buying enough medicine, buying enough Teff/Injera, and buying enough edible oil.
- In Kenya, individuals living in relatively poor families where the head of the family was female had greater difficulty accessing health services or medical treatment and paying for rent due to lost incomes.

## **Implications for policy makers**

The results point towards the vulnerability of female-headed families during the pandemic, especially among those with children. More so, pre-existing vulnerability exacerbates the effect of the pandemic on livelihood outcomes and inequity of access to health services and other necessities among female-headed families. The governments of Kenya and Ethiopia have taken several measures to contain and mitigate the effect of the pandemic on their respective population. However, these actions must be accompanied by deliberate actions that ensure an equitable and gender-sensitive response to the pandemic.

***Design pandemic response policies that deliberately target female-headed families or women:*** To improve social protection and reduce the vulnerability of female-headed families, governments must purposefully construct fiscal policy initiatives with a gender lens to promote equality and maximize social protection during pandemics like the COVID-19.

***Prioritize policies that promote rural development:*** Given that pre-existing vulnerability due to low socioeconomic status exacerbates the impact of the pandemic, it is critical for the governments to prioritize increasing investments in strategies that promote growth and development in low-income regions in order to reduce poverty and, as a result, inequalities over time, and thus build resilience to future pandemics.

## References

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