Young Lives

November 2020

COVID-19 Phone Survey Headlines Report

Listening to Young Lives at Work in Andhra Pradesh and Telangana: Second Call

India began a nationwide lockdown in response to the COVID-19 pandemic at the end of March 2020 which lasted for 75 days, until various restrictions were relaxed under Unlock 1.0 on 8 June 2020. Since our first survey call carried out between June and July 2020, the number of COVID-19 cases has grown exponentially and as of 4 November 2020, India had recorded over 8.3 million confirmed cases.[1] The pandemic has continued to have a disastrous effect on the economy despite measures put in place by the government.

This report investigates the ongoing impact of the COVID-19 pandemic on the well-being, household wealth and income, labour and education trajectories of Young Lives participants in Andhra Pradesh and Telangana, tracked since 2001 and now aged 18 and 25.[2] The results are based on a preliminary version of the data collected during the second call of the Young Lives phone survey.

HEADLINES: SECOND CALL

- **As the pandemic has worsened people have adopted more cautious behaviours.** Poverty diminishes the capacity to self-isolate as it forces people to leave the house to attend to basic needs and for work-related reasons.
- **Misconceptions about effective preventative measures are more widespread than at the beginning of the pandemic**, with 64 per cent of respondents (compared to 11-16 per cent in call 1) having adopted unconventional and ineffective (even if unharmful) measures to prevent infection.
- **The pandemic has reduced income and increased expenses in 8 out of 10 households and exacerbated pre-existing inequalities**. Increased prices of major food items, new health expenses and increased costs of farming/business inputs are the most common economic shocks.
- **The lockdown caused considerable initial job losses, particularly in urban areas. The 42 per cent pre-pandemic employment rate across our sample declined to 33 per cent during lockdown**. Of those who continued to work, most (85 per cent) are in their usual workplace, with only 15 per cent able to work remotely.
- **Job losses due to lockdown appear to be temporary. Post-lockdown, most people went back to work, alongside an increase of 18 year olds (predominately men) entering the labour market compared to pre-lockdown**, possibly to compensate for income losses suffered and as a result of reduced education opportunities, particularly in rural areas where e-learning is less accessible.
- **Post-lockdown there has been an increase in self-employment and a shift towards agriculture from other economic sectors**. The agriculture sector absorbed a considerable proportion of new, mainly self-employed, young workers (likely in low paid and easily accessible occupations).
- Despite significant interruptions in education, **most 18 year olds** (72 per cent women and 62 per cent men) **are still in education or planning to return to education in this academic year. However, 1 in 3 are currently unable to attend due to classes still being suspended**. The suspension of classes had greater impact on students from the poorest households, who do not have access to internet at home, and students from Scheduled Tribes.
- Practically no one is attending classes in person and most students are attending online classes/learning. **Inequalities in learning are exacerbated for students without internet access, and those living in rural areas; students from richer/more educated households have better access to e-learning**.
- **Young people have continued to spend more time on household and caring responsibilities during lockdown, and the burden is greater for young women: at least 67 per cent of women have spent more time taking care of children, compared to 38 per cent of men, and similarly for household responsibilities.**
- **The evolving pandemic is inducing a significant worsening of well-being and increasing levels of anxiety and depression**. A decreasing sense of well-being is more prevalent among young men, those living in rural areas and the poorest households, while increased anxiety is more prevalent among young women.
- **Preliminary results show that a significant proportion of the sample (12 per cent) reported an increase in experiences of domestic violence.**

1 See: www.mohfw.gov.in

2 More information on the Young Lives phone survey, the fieldwork manual and the second call questionnaire, an annex with the full analysis produced for this report and the headlines reports of the First Call are all available on the Young Lives website: https://www.younglives.org.uk/content/young-lives-work-ylaw?tab=3. Background on the Young Lives survey overall (sampling strategy and previous rounds) is available at www.younglives.org.uk. Data will be soon available UK Data Service website. Data from the First Call is available here: https://beta.ukdataservice.ac.uk/datacatalogue/studies/study?id=8678

Methods

The second call of the Young Lives phone survey took place between 11 August and 15 October 2020 and reached a total of 2,754 young people (1,868 Younger Cohort respondents aged 18, and 886 Older Cohort respondents aged 25).[3] This corresponded to 98 per cent of the sample located in the most recent tracking conducted in December 2019, and more than 100 per cent of the first call sample, as a few respondents not interviewed for the first call were subsequently interviewed for the second call.

In the analysis below, respondents of both the Younger Cohort and the Older Cohort are merged into one sample, unless specified. Our analysis is informed by data collected over 15 years of previous 'regular' Young Lives surveys to assess how the impact of COVID-19 is affecting individuals with different socio-economic backgrounds and histories.

We measured household wealth status in 2002 (Round 1) and 2016 (Round 5) using the Young Lives wealth index, and report results for households in the bottom and top terciles in each period. A household with a wealth index in the bottom tercile has reduced access to public services, housing quality, and/or durable goods. We have assessed the ability of the Young Lives households to comply with the World Health Organization (WHO) recommendations, particularly in relation to self-isolation, through an adapted version of the Home Environment for Protection Index (HEP) developed by Brown et al. (2020). This indicator includes the ability to receive reliable information on local disease incidence and protection measures, and dwelling attributes to implement the social distancing recommendations within the household and hand washing.[4] The likelihood of a home possessing the required characteristics for protection against COVID-19 declines with household wealth status, as measured by the wealth index in survey Rounds 1 and 5.

Results

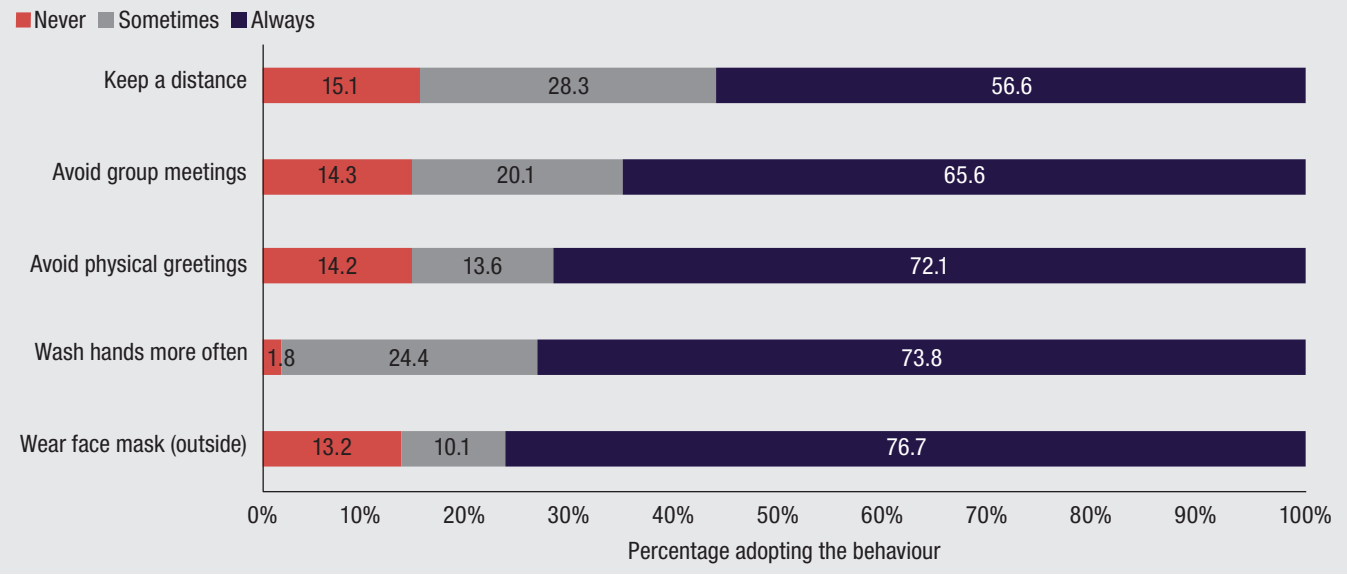
1. Preventative behaviours around COVID-19

Adherence to recommended behaviours to prevent infection

As the pandemic has worsened and fears around being in contact with the virus have increased, people have adopted more cautious behaviours. Nearly 3 per cent of respondents have been infected or demonstrated COVID-19 symptoms and approximately 10 per cent have been tested, a considerable increase compared to the first call survey.

Periods of self-isolation have been adopted as a protective measure by considerably higher numbers of people compared to the first call survey. However, as previously found, poverty diminishes the capacity to self-isolate as it forces people to leave the house for work-related reasons and to attend to basic needs. Nearly 22 per cent of respondents (compared to only 7 per cent in call 1) reported having not left the house in the previous week. In most cases, people left their homes to attend to basic needs such as buying food (73 per cent), and for work-related reasons (56 per cent) but also to meet friends and family (59 per cent). Wearing face masks, washing hands more often than usual and avoiding physical greetings are the other three most frequently adopted behaviours (Figure 1).

Figure 1: *The five most adopted recommended behaviours to prevent infection*



Note: Younger Cohort and Older Cohort samples shown together.

3 In June 2020, when the phone survey started, the Older Cohort were between 25.5 to 26.5 years old and the Younger Cohort between 18.5 to 19.5 years old.

4 More information on how the HEP has been computed using the Young Lives data is provided here: www.younglives.org.uk/sites/www.younglives.org.uk/files/YL-HEP-Index%20Aug%205.pdf.

Misconceptions about effective preventative measures are more widespread than at the beginning of the pandemic. About 64 per cent of respondents (compared to 11-16 per cent in call 1) adopted unconventional and ineffective (even if unharmful) measures that they believed might help in preventing the infection, including eating garlic/ginger/turmeric, adding hot pepper to food and drinking lemon.

2. The impact of COVID-19 on household wealth and income

Economic shocks associated with COVID-19

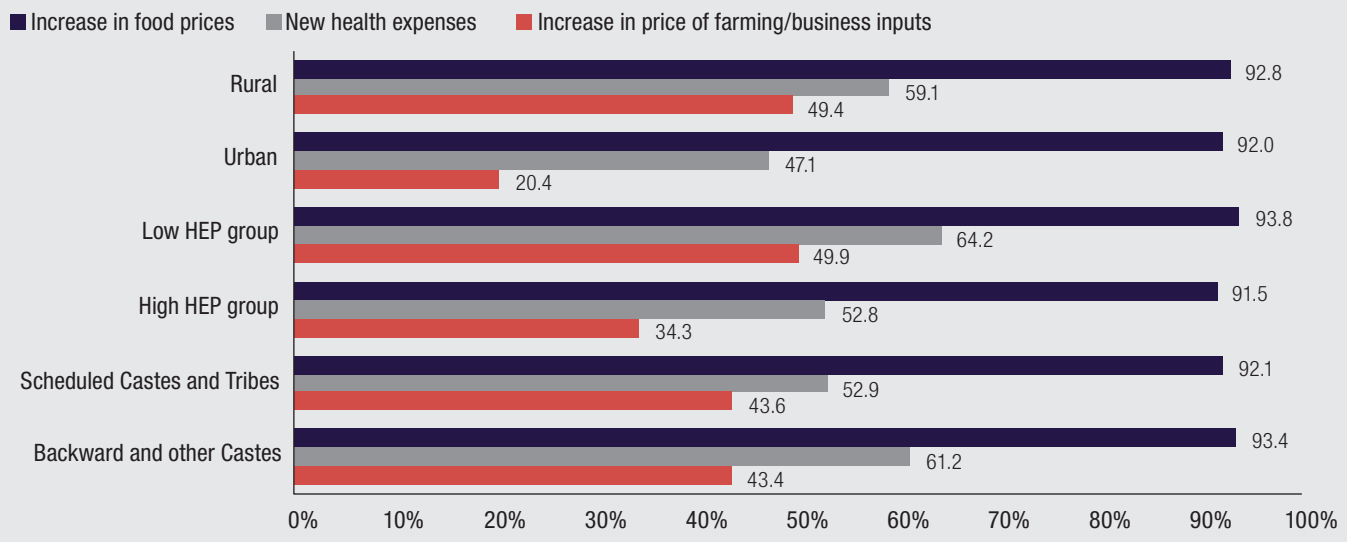
The pandemic has reduced income and increased expenses in 8 out of 10 households and exacerbated pre-existing inequalities. This impact affected relatively more of the poorest households (as measured by both HEP and wealth index indicators), particularly those belonging to Scheduled Castes and Scheduled Tribes. Furthermore, the decrease in income affected more rural than urban households.

Increased prices of major food items, new health expenses and increased costs of farming/business inputs are the three most common economic shocks reported. Increases in food prices were reported by nearly all respondents (Figure 2). The poorest households (as measured by both HEP and wealth index indicators) and rural households are relatively more affected by an increase in health expenses and increasing prices of farming/business inputs.

Loss of employment/income

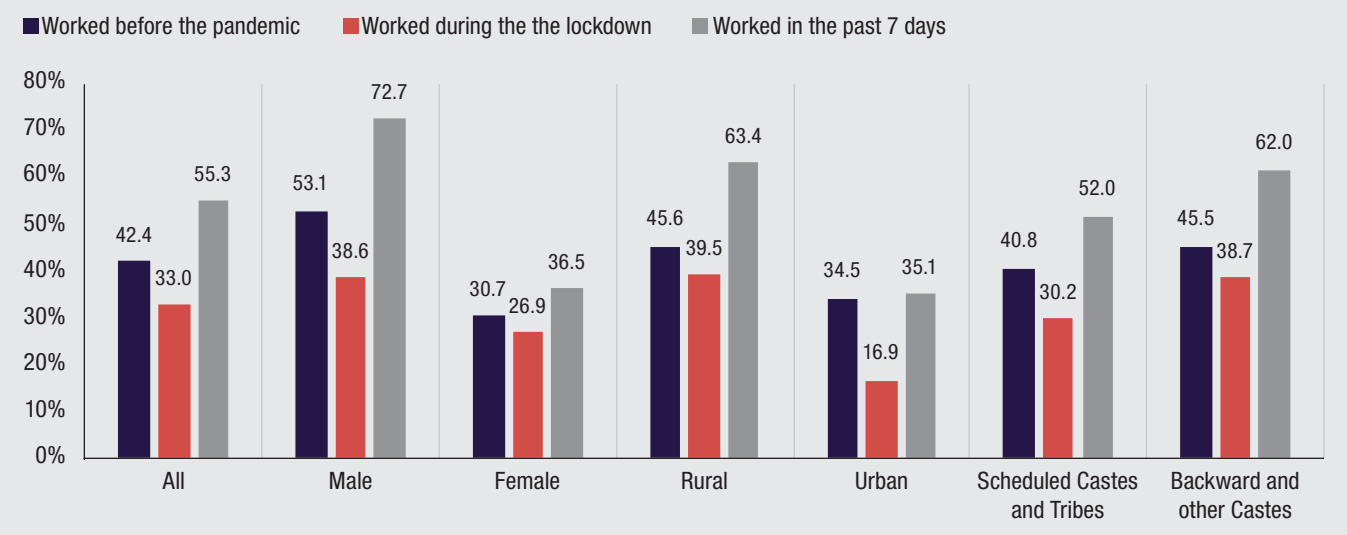
The lockdown caused considerable initial job losses, particularly in urban areas. In the months preceding the pandemic (December 2019 to February 2020), 42 per cent of respondents were working. During lockdown, the number of respondents working decreased by nearly 10 percentage points to 33 per cent, with the greatest impact felt in urban areas where almost half of workers were affected (Figure 3). The loss of jobs affected relatively

Figure 2: *Economic shocks since the COVID-19 outbreak*



Note: Younger Cohort and Older Cohort samples shown together. The urban/rural variable and HEP index are defined based on call 2 data.

Figure 3: *Employment before the pandemic, during and post-lockdown*



Note: Younger Cohort and Older Cohort samples shown together. The urban/rural variable is defined based on call 2 data.

more men (53 per cent working pre-pandemic compared to 39 per cent during lockdown) than women (31 per cent working pre-pandemic compared to 27 per cent during lockdown). **The impact of lockdown on employment is more dramatic when restricting the sample to the Older Cohort. Pre-lockdown, 63 per cent of 25 year olds were working compared to only 41 per cent during lockdown.**

Of those who continued to work during lockdown, most (85 per cent) were in their usual workplace with only 15 per cent able to work remotely. Access to remote working was greatest for people living in urban areas, in wealthier households and with access to internet at home. Only about 5 per cent of those who continued to work had their hours reduced.

Post-lockdown, most people went back to work and new young workers entered the labour market, possibly as a result of the reduced education opportunities, particularly in rural areas where e-learning is less accessible. The increase of employment post-lockdown is relatively higher in rural areas and among the poorest households, possibly to compensate for income losses suffered. This finding is consistent with the post-lockdown increase of agricultural employment. Notably, while the post-lockdown proportion of 25 year olds working went exactly back to the pre-lockdown level (63 per cent), more 18-year-old respondents entered the labour market post-lockdown: about 32 per cent were working pre-lockdown and this has increased to 51 per cent post-lockdown.

Interestingly, the increase in employment is more marked among 18-year-old men than women. Pre-lockdown, 4 out of 10 of the 18-year-old men (compared to 2 out of 10 women) were working, which increased substantially to 7 out 10 men (compared to 3 out of 10 women) in the post-lockdown period.

Notably, while migration for work-related reasons was fairly low (about 6 per cent), the lockdown caused an increase in self-employment and a shift towards agriculture from other economic sectors. The agriculture sector absorbed a considerable proportion of the new young workers (women and men) accessing the labour market post-lockdown, mainly as self-employed and possibly in low paid (and easily accessible) occupations. Nearly 32 per cent of the 25-year-old respondents and 46 per cent of the 18-year-old respondents were self-employed pre-pandemic, which increased to 40 per cent and 61 per cent, respectively, post-lockdown. Similarly, the proportion of 25 year olds and 18 year olds working in agriculture increased by 11 per cent and 17 per cent, respectively, when the lockdown ceased (compared to 28 per cent to 39 per cent for 25 year olds and 47 per cent to 64 per cent for 18 year olds pre-lockdown).

Food security

In our first call (June-July 2020), we found that around 1 in 6 respondents had run out of food since the beginning of the pandemic. In the second call, we measured food insecurity using the Food and Agricultural Organisation of the United Nations (FAO) Food Insecurity Experience Scale (FIES), which asks eight yes/no questions regarding people's ability to access food since the outbreak. Answering yes to a question signifies difficulties in accessing food due to resource constraints.[5] We are working with FAO to validate our new data to create a robust measure of food insecurity severity that can then be compared to the Sustainable Development Goals' food security indicator. Our initial findings show that individuals responded yes to several of the FIES questions, in percentages that were higher for the less severe conditions, such as 'unable to eat healthy and nutritious food', and lower for the more extreme ones such as 'had to skip a meal' or 'felt hungry but could not eat', consistently with the theory behind the FIES measurement scale. Further analysis on the impact on food insecurity is ongoing.

3. The impact of COVID-19 on mental health and subjective well-being

The evolving pandemic is inducing a considerable degree of fear, worry and concern across the population, resulting in a worsening of well-being and a range of emotional reactions. In the first call, 89 per cent of respondents reported that they felt nervous about the current circumstances relating to COVID-19. In the second call, we further investigated the impact of the pandemic on mental health and subjective well-being.[6] We have measured anxiety using the Generalised Anxiety Disorder Assessment (GAD-7) and depression using the Personal Health Questionnaire (PHQ-8).[7] Subjective well-being was measured using the Cantril Self-anchoring Striving Scale (also known as the Cantril Ladder).[8] While we have information on life-satisfaction from previous Young Lives survey rounds, we unfortunately do not have information about the pre-pandemic prevalence of anxiety and depression.

5 Full details on the FIES and the FIES raw score are www.fao.org/3/a-i7835e.pdf.

6 The fieldwork team provided anecdotal information on respondents experiencing symptoms of mental health disorders. The consultation guide that was made available to the respondents is available on the Young Lives India website: https://www.younglives-india.org/node/1292

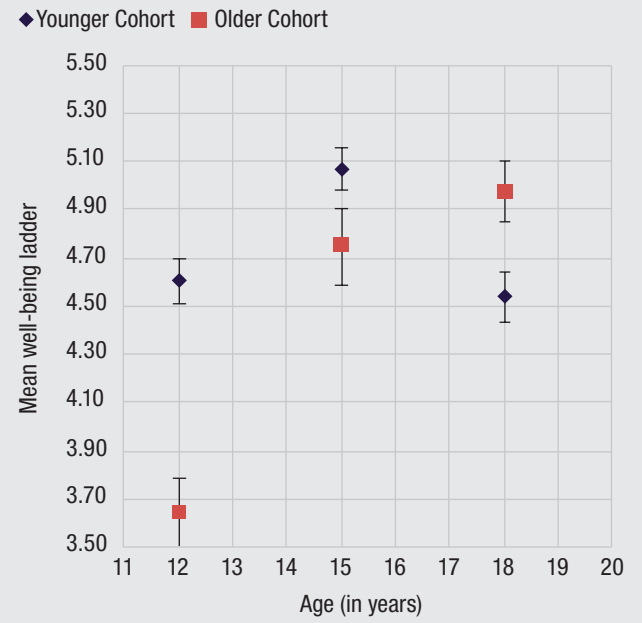
7 GAD-7 and PHQ-8 consist of seven and eight statements respectively reporting if the respondents had experienced any of the anxiety and depression symptoms listed and how often. To calculate the GAD-7 and PHQ-8 scores, values of 0, 1, 2, and 3 are assigned to frequency of symptoms reported ('not at all', 'several days', 'more than half the days', and 'nearly every day' respectively) and added together. Mild, moderate and severe anxiety are defined using the 5, 10, 15 cut-off points (Spitzer et al. 2006), with ≥ 5 for mild depression and ≥ 10 for either moderate to severe depression (Kroenke 2009).

8 The Cantril Ladder (1965) asks the respondent to visualise a nine-step ladder, with the bottom step representing the worst life and the top step representing the best possible life. Respondents are asked to identify which step they presently stand on.

Overall, results from call 2 indicate that subjective well-being across respondents has worsened in 2020 compared to 2016, particularly for young men, and those living in rural areas and in the poorest households. The longitudinal nature of the Young Lives data allows us to investigate variation in well-being across various rounds of data collection, comparing the Younger Cohort and the Older Cohort's life satisfaction at the same ages, but at different points in time. The Younger Cohort has consistently reported a higher well-being than their Older Cohort counterparts at ages 12 and 15 (Figure 4). However, **when comparing both cohorts at age 18**, using Round 4 (2012) data for the Older Cohort and data from the second call for the Younger Cohort, **the Younger Cohort reported a significant loss of well-being compared to the pre-COVID generation**. Although variation in well-being cannot be directly or exclusively attributed to COVID-19[9] and many factors may contribute to this variation, this finding is consistent with the overall narrative emerging from this research on mental health.

The second call indicated that about 11 per cent of the respondents reported suffering from "at least" mild anxiety symptoms and similarly 10 per cent declared to be suffering symptoms of "at least" mild depression. Unfortunately, we do not have information about the prevalence of depression and anxiety from previous survey rounds so we cannot say whether this is an increase or a decrease.

Figure 4: *Subjective well-being of Young Lives cohorts at ages 12, 15 and 18*



Notes: Subjective well-being is measured using the Cantril Ladder. The figure shows the mean step on the ladder for the Older Cohort with data collected in 2006 (Round 2), 2009 (Round 3) and 2013 (Round 4), compared to the Younger Cohort collected in 2013 (Round 4) and 2016 (Round 5) and in call 2 (2020). Vertical bars represent 99 per cent confidence intervals around mean values.

4. The impact of COVID-19 on education and time use

Education

Because the second call (August 2020 to mid-October 2020) corresponded to the start of the school calendar (starting mid-August/September), some of the 18-year-old respondents were asked about their plans, and others about whether they were already enrolled in education and attending classes at the time of the interview.

Most Younger Cohort respondents are either in education or planning to return to education in the current academic year; however, 1 in 3 of these are currently unable to attend due to classes being suspended. About 70 per cent of the 18 year olds (72 per cent women and 62 per cent men) are still engaged in formal education: they had been attending or planned to attend formal education in 2020/21 (69 per cent in higher education, 25 per cent in secondary school and 6 per cent in vocational education). **The suspension of classes has had greater impact on students living in the poorest households, who do not have access to internet at home, and students from Scheduled Tribes.**

Since the start of the lockdown, the majority of students still engaged in education attended virtual classes with teachers through a laptop, computer, or smartphone (41 per cent), worked remotely on assignments provided by the teacher (10 per cent) and/or engaged with educational TV, radio, or learning apps (7 per cent). There are still practically no in-person classes. Despite the impetus towards online classes through schemes like e-Vidhya, **there exists a huge digital divide that excludes vulnerable populations of students with no or limited internet facilities, most likely living in rural areas, in the poorest households and whose parents are less educated.**

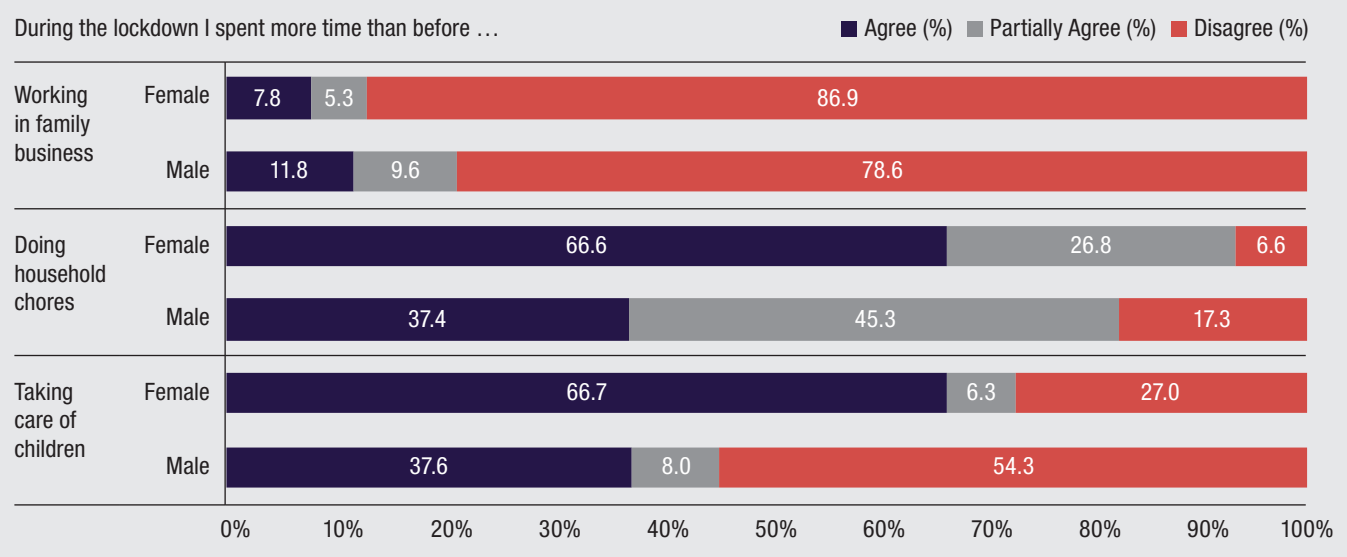
Increases in household and caring responsibilities

Findings from the first call indicated increasing household and caring responsibilities during lockdown, particularly for young women, which has significantly increased in the second call. Overall, **young people have continued to spend more time on household and caring responsibilities during the lockdown, and the burden tends to be greater for young women.** Figure 5 shows that almost 67 per cent of female respondents have spent more time taking care of children, compared to 38 per cent of male respondents, and similarly for household responsibilities.

Additional time spent on household and caring responsibilities increases with age. Of the 25-year-old respondents, 75 per cent agreed they were spending more time taking care of children, compared to only 39 per cent of their 18-year-old counterparts. Household responsibilities also demanded more time from 25 year olds, with 59 per cent spending increased time doing work around the house, compared to 47 per cent of the 18-year-old respondents.

9 It is worth noting that data collected through a face-to-face interview might not be entirely comparable to that collected through a phone survey.

Figure 5: *Changes in time use and redistribution of household and caring responsibilities*



Note: Younger Cohort and Older Cohort samples shown together.

Concluding remarks

This brief provides a further exploration of the current impact of the COVID-19 pandemic and related lockdown policies on the lives of Young Lives respondents in Telangana and Andhra Pradesh. Further analysis on the impact on mental health, food insecurity and labour market is ongoing.

This report does not include analysis of the **domestic violence** data collected during the second call through an innovative indirect methodology, known as 'double list randomisation'. This methodology allows us to assess the prevalence of domestic violence while limiting related discomfort to respondents in reporting their experiences. Preliminary results show that 12 per cent of the young people in the sample experienced an increase in domestic violence during the lockdown. Further analysis of these findings alongside more details on the methodology is also ongoing.

The third call in this COVID-19 phone survey is now in progress in all four Young Lives study countries (Ethiopia, India, Peru and Vietnam), scheduled for completion at the beginning of December 2020. It will follow up on a number of topics including education, labour market and mental health. Young Lives is planning to get back to the field for the next regular round of data collection (Round 6) in 2021 depending on the evolution of the COVID-19 pandemic in the four countries.

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