

COVID-19 Phone Survey Headlines Report

Listening to Young Lives at Work in Peru: Third Call

Introduction

With one of the highest rates of death from COVID-19 in the world (126 deaths per 100,000 population), and the highest in Latin America,¹ Peru is continuing to suffer some devastating effects as a result of the pandemic. There was an encouraging reduction in the number of new cases reported by the Ministry of Health between September and early December 2020, but the health system remained in a precarious situation. A political crisis in November 2020, which led to the removal of the President by the Congress nine months before the end of his term, further complicated the country's response to the COVID-19 crisis. By early January 2021, Peru has entered a second wave of the pandemic. The crisis is now only expected to end once mass vaccination is achieved.

Peru's initial national lockdown, from 15 March to 30 June 2020, was followed by a series of local lockdowns, at both the regional and provincial levels, up to 30 September 2020. These corresponded closely with the timing of the first two calls in this phone survey: [call 1](#) conducted in June and July and [call 2](#) from August to October. Since October, a number of restrictions have remained in place, including the physical closure of all educational institutions (with the exception of some rural schools) and an evening curfew. Economic activity has gradually recommenced in four phases across May, June, July and October, though some restrictions remain in place (e.g. reduced capacity for restaurants, shopping centres and retail outlets), and firms have had to comply with enhanced cleaning and sanitation protocols. Since the start of the second wave of the pandemic, the new President has introduced a regional four-tier approach; as at 31 January 2021, eight regions were classified as being in tier 4 and entered a 15-day period of lockdown.

HEADLINES: THIRD CALL

- 1. Of those previously engaged in formal education, 18% of 19-year-olds were not enrolled by call 3**, with young men and those from the poorest households affected most. It is unclear whether they will manage to return to education in March 2021, when the new academic year begins.
- 2. There has been no progress in the recovery of employment levels since call 2 (August–October)**, particularly for young women and the Older Cohort (aged 26). The gender employment gap has increased from 16% before the pandemic to 25%.
- 3. Access to remote working remains very limited, with only 7% of those in employment able to work from home**, primarily those from urban areas with internet access.
- 4. The continuing trend of increasing self-employment suggests that the quality of jobs is deteriorating**: self-employment has increased from 19% to 25% since call 2, compared to a level of 14% before the pandemic.
- 5. The shift to agricultural jobs observed in call 2 appears to be declining**: among those in employment, 30% were engaged in agricultural activities, compared to 36% at the time of call 2 (29% pre-pandemic).
- 6. Food insecurity has impacted the poorest households most**: 12% of the poorest households reported running out of food in the past 12 months (compared to 6% among wealthier households). This compares to 9% of the poorest households running out of food in 2016.
- 7. The impact of COVID-19 on the mental health of young people remains high**: 30% of Young Lives respondents reported symptoms of anxiety and 24% reported symptoms of depression. Reported depression has gone down since call 2 (when it stood at 30%) but still remains well above the benchmark of 18% from the 2019 Demographic and Health Survey.

1 As of 29 January 2021, see <https://coronavirus.jhu.edu/data/mortality>

This report investigates the ongoing impact of the COVID-19 pandemic on the labour and education trajectories, food security and the mental health of Young Lives respondents in Peru, tracked since 2001 and now aged 19 and 26.² Our findings are based on a preliminary version of the data collected during the third call of the [Young Lives phone survey](#), conducted between November and December 2020.

Methods

The third call of the Young Lives phone survey took place between 8 November and 15 December 2020. A total of 1,993 young people were interviewed (1,536 Younger Cohort respondents, aged 19, and 457 Older Cohort respondents, aged 26). This corresponded to 90% and 89%, respectively, of each sample located in the most recent tracking, which was completed in December 2019 – a continued improvement on the first call, when 81% and 78% of each sample was located, respectively. The successful reduction in attrition is due in part to the use of social media to assist tracking, which is further explained in our [fieldwork manual](#). Furthermore, splitting our phone survey into three short calls across many months probably helped to minimise fatigue among respondents.

The Young Lives sample has national coverage, covering 20 randomly selected districts (excluding the top 5% wealthiest districts) and includes both urban and rural areas in the three climatic regions (coastal, highlands, and Amazonian rainforest). Our analysis is informed by comprehensive data collected over 15 years of previous ‘regular’ Young Lives surveys, and assesses how COVID-19 is affecting individuals with different socio-economic backgrounds and histories. All results are adjusted to consider the Young Lives sampling design. Differences among sub-groups are reported at the 5% significance level.

Results

1. The impact of COVID-19 on education

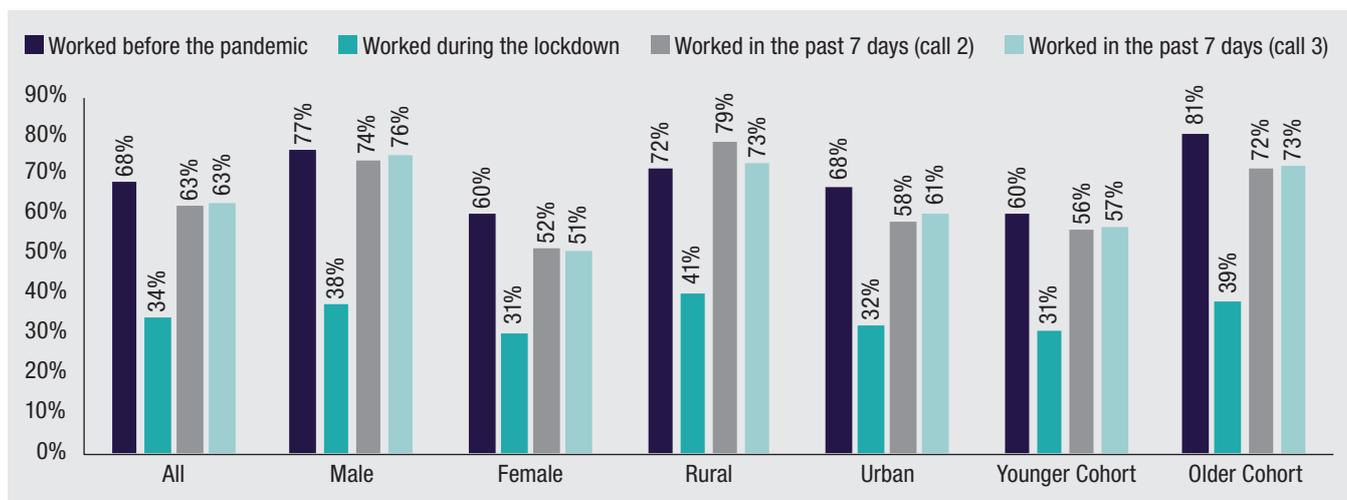
To investigate the impact of COVID-19 on education, we focused on respondents from the Younger Cohort (aged 19) who had been in formal education in 2019 or 2020 and were interviewed in the last two calls. This represents about 51% of the cohort and consists mainly of those engaged in higher education prior to the pandemic (87%, compared to 13% still attending secondary school).

Of those previously engaged in formal education, 18% of 19-year-olds were not enrolled by call 3, compared to 16% in our call 2 findings. As Peru is beginning a second wave of the pandemic, it is unclear how many of these former students will return to formal education in March 2021, when the new academic year begins. Fewer students from poorer households enrolled than those from wealthier households (81% compared to 85%). Of the remaining sample, 81% were able to attend (largely virtual) classes, with 1% continuing to be affected by class suspensions. As in call 2, more women than men have been able to continue their education (86% compared to 75%). The three most common reasons for not continuing education are difficulty paying fees, cancellation of classes, and lack of means to attend virtual classes (including access to the internet and availability of computers/laptops).

2. The impact of COVID-19 on employment

To monitor the impact of COVID-19 on employment, we compared the employment levels of both Young Lives cohorts at four points in time (Figure 1): (1) before the national lockdown (January–February 2020); (2) during the national lockdown (March–June 2020); (3) in the last seven days before the second call (August–October 2020); and (4) in the last seven days before the third call (November–

Figure 1: Employment levels before, during and after national lockdown



Note: Estimates use sampling weights.

² More information on the Young Lives phone survey, the fieldwork manual and the third call questionnaire can be found [here](#). Data will be soon available [here](#). Background on the Young Lives survey overall (sampling strategy and previous rounds) is also available on www.younglives.org.uk.

December 2020). The first two periods were measured retrospectively. Owing to the exceptional nature of the crisis, which made it difficult to search for a job, we do not make a distinction between those within and outside the active labour force; instead, we focus on understanding how the overall proportion of people employed changed over time.

A huge reduction in employment occurred during the national lockdown, followed by a substantial but incomplete recovery by call 2 (August–October). **Unfortunately, there has been no subsequent progress in the recovery of employment levels, especially among young women.**

By our third call (November–December), only 63% of respondents had worked in the previous seven days (virtually the same proportion as in call 2) compared to 68% before the pandemic. Job losses during the lockdown and subsequent incomplete recovery of employment have been particularly marked for young women, the Older Cohort, aged 26, (the Younger Cohort has a higher proportion of full-time students), and those living in urban areas. The gender employment gap has continued to increase, rising from 16% before the pandemic to 25% by call 3: while employment levels for males have returned to pre-pandemic level, this has not yet been the case for females.

The continuing trend of increasing self-employment suggests that the quality of jobs is deteriorating. Self-employment increased from 19% to 25% among those in employment between call 2 and call 3, which is significantly above pre-pandemic levels (14%). This trend was observed across all sub-groups but has affected young women and those in rural areas most. Self-employment for young women increased from 18% to 27% between call 2 and call 3 (8% pre-pandemic) and from 27% to 41% for respondents in rural areas (13% pre-pandemic).

Among those in employment, 15% were not actually working at the time of the interview (11% of the Older Cohort and 17% of the Younger Cohort). Reasons for this varied with age: for 26-year-olds, illness and a reduction in the number of working hours available were common reasons, followed by being ‘temporarily absent’ (which includes the possibility that payments to workers are stopped

when firms are unable to operate); for 19-year-olds, more time spent studying was the most common reason, followed by illness.

Access to remote working remains very limited, with only 7% of those in employment able to work remotely or combine remote working with being in the workplace.

Access to remote working was greatest for those living in urban areas and with access to internet.

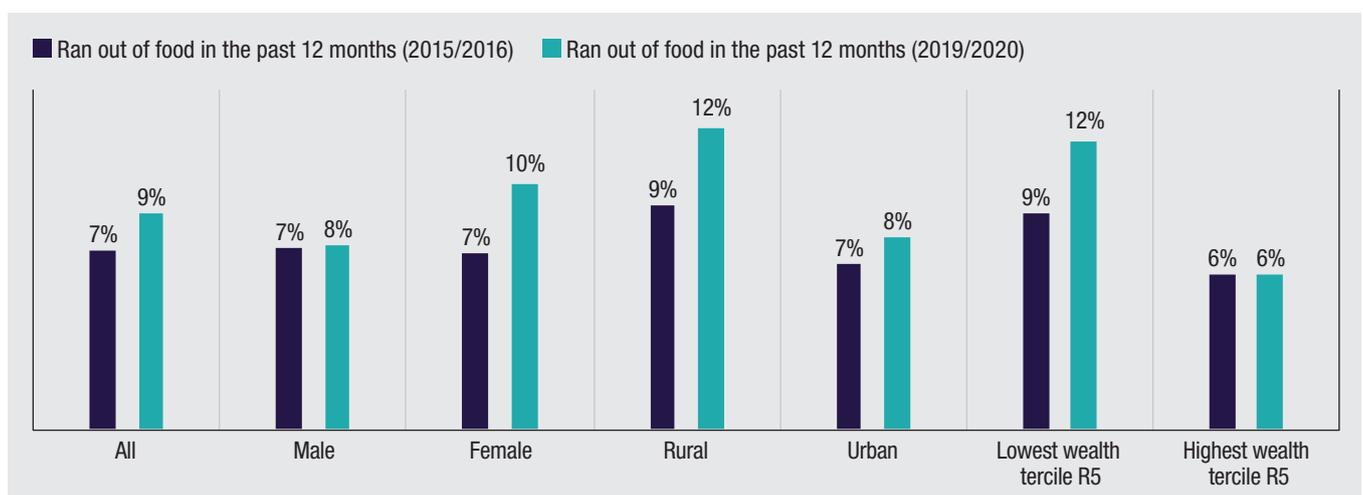
The shift to agricultural jobs observed in August–October appears to be declining. Among those in employment, 30% were engaged in agricultural activities, compared to 36% in call 2 (29% pre-pandemic). This suggests that a sizable proportion of young people moved temporarily to agricultural activities because of the lockdown but have since begun to resume work in other sectors, though part of this result might also be explained by job seasonality. The transition to agricultural work and the subsequent reduction, was observed among all sub-groups: male and female respondents, in urban and rural areas, and for both cohorts. For the Older Cohort, the proportion working in agriculture is still above pre-pandemic levels (23% compared to 17% pre-pandemic).

3. The impact of COVID-19 on food security

Overall we found that **9% of respondents reported that their household had run out of food at some point in the past 12 months.** Food insecurity impacted the poorest households most (12% were affected, compared to 6% among wealthier households), as well as those living in rural areas (12% compared to 8% in urban areas). No significant differences were observed between young women and men, or by economic sector.

Young Lives data collected for the Younger Cohort (only in 2016, provide a comparative pre-pandemic measure of food security. Figure 2 shows that the proportion of Younger Cohort households that ran out of food during the past 12 months in 2020 was broadly similar to that observed in 2016, though the poorest households and those living in rural areas had been more affected (12%, compared to 9% in 2016).

Figure 2: Proportion of households that ran out of food in the previous 12 months (compared to 2016)



Note: Only Younger Cohort sample is shown. Estimates use sampling weights.

4. The impact of COVID-19 on mental health

The impact of COVID-19 on mental health remains high, though there has been a reduction in levels of anxiety and depression reported since call 2 (August–October).³ In the third call, we found that 30% of respondents reported symptoms of anxiety and 24% reported symptoms of depression (compared to 40% and 30% respectively in call 2).⁴

As a benchmark, using data from the 2019 Demographic and Health Survey, the population aged 18 to 27 in Peru reported a prevalence of depression of about 18%. Therefore, our results suggest the burden of poor mental health is likely to have increased during the crisis.

Concluding remarks

This brief provides new insights into the ongoing impact of the COVID-19 pandemic on the lives of Young Lives respondents in Peru. While the national and local lockdowns and some restrictions had been lifted by the time of our third call, the impact of the crisis on higher education and labour market outcomes for young people remains

substantial. As levels of self-employment increase, there are worrying signs that the quality of jobs is deteriorating, and only a fraction of young people are able to work from home. The mental health of young people remains a serious concern, with reported levels of anxiety and depression remaining very high. Further analysis of the impact on mental health and food insecurity is ongoing.

Young Lives is planning to go 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 across our four study countries (Ethiopia, India, Peru and Vietnam).

References

- Kroenke, K., T.W. Strine, R.L. Spitzer, J.B. Williams, J.T. Berry and A.H. Mokdad (2009) 'The PHQ-8 as a Measure of Current Depression in the General Population', *Journal of Affective Disorders* 114.1–3: 163–73.
- Spitzer, R.L., K. Kroenke, J.B. Williams and B. Löwe (2006) 'A Brief Measure for Assessing Generalized Anxiety Disorder: the GAD-7', *Archives of Internal Medicine* 166.10: 1092–97.

3 We have measured anxiety using the Generalised Anxiety Disorder Assessment (GAD-7) and depression using the Patient Health Questionnaire (PHQ-8). GAD-7 and PHQ-8 consist of seven and eight statements respectively reporting if the respondents experienced any of the anxiety and depression symptoms listed and how often. To calculate the GAD-7 and PHQ-8 score, 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 summed together. Mild, moderate and severe anxiety are defined using 5, 10, 15-point cut-offs (Spitzer et al. 2006) and 5, 10, 15 and 20 cut-off points are used to define mild, moderate, moderately severe and severe depressive symptoms (Kroenke et al. 2009).

4 The fieldwork team provided information on support for respondents that mentioned experiencing symptoms of mental health disorders. The consultation guide that was made available to respondents is available at the Niños del Milenio website here: <https://ninosdelmilenio.org/2020/11/11/guia-para-consultas/>.

Acknowledgements

This report is part of a series providing headline findings from the third call of the 'Listening to Young Lives at Work Phone Survey', conducted in Ethiopia, India (in Andhra Pradesh and Telangana), Peru and Vietnam between November and December 2020.

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Young Lives, Oxford Department of International Development (ODID)
University of Oxford, 3 Mansfield Road, Oxford OX1 3TB, UK

www.younglives.org.uk • www.ninosdelmilenio.org
Tel: +44 (0)1865 281751 • Email: younglives@qeh.ox.ac.uk • Twitter: [@yloxford](https://twitter.com/yloxford)

