Background to the Research

INTRODUCTION

The COVID-19 pandemic is a significant global health challenge affecting economies, social, educational and religious activities of countries. COVID-19 was confirmed a pandemic on March 11, 2020 by the World Health Organization (WHO). By February 2021, over 105 million cases and more than 2 million deaths had been confirmed globally. Experts have warned that the pandemic could undo significant progress made towards achieving the Sustainable Development Goals in developing countries.

The Government of Ghana imposed restrictions following the first confirmed case with a lockdown of Greater Accra, Kasoa and Kumasi areas, and banning of all social gatherings to control community spread of the pandemic. The strict lockdown lasted 3 weeks but the ease of restrictions on social gatherings including schools was gradual. There were media reports of rising cases of violence against women and girls, increased carework, and inadequate care and social support for the vulnerable. However, evidence supporting these reports were limited.

FUNDING: study was commissioned by Gender Studies and Human Rights Documentation Centre, with funding support from International Network to End Violence against Women and Girls, INEVAGW.

STUDY OBJECTIVES

This study sought to investigate the social and economic impact of the COVID-19 pandemic on women and girls as well as assess the psychological stress imposed by the COVID-19 pandemic and its attendant restrictions on women and girls.

The study highlighted the:

- Social impact of COVID-19 on women and girls
- Economic impact of COVID-19 on women and girls
- Psychological impact of COVID-19 on women
- Impact of COVID-19 on female-owned business

Summary of Key Findings

- **Social Impact:**
  - Women’s stresses in relation to household financing & traditional roles were significantly heightened above pre-COVID-19 levels. These stresses were aggravated in more recent times due to situations surrounding women’s return to work and schools reopening.
  - Mostly negative impact on relationships due to frequent quarrels; the only positive impact felt was family closeness due to the lockdown.
  - Women and girl’s vulnerability to violence was highest during lockdown
  - Impact on adolescents: disruption of education or apprenticeship; increased household chores; unwanted pregnancy; and isolation from peers.

- **Economic Impact:**
  - Worsening financial situations
  - Household food insecurity
  - Loss of jobs and incomes
  - A third of women received some support (food and or cash) from at least two sources during the lockdown. This suggests they were already in some fragile state before the COVID-19 outbreak or experienced a complete income cut-off.

- **Psychological:**
  - Moderate levels of intolerance of uncertainty
  - Evidence of post-traumatic stress disorder (PTSD) following lockdown; more impact in Accra compared to Kumasi
  - Women at risk of clinical depression
  - Psychological impacts of the COVID-19 were attributable to both the disease and the response taken to control the spread

- **Impact on female-owned businesses:**
  - Decreased demand for goods and services
  - Inability to access Government COVID-19 relief
  - Disatisfaction with access to National or Local Government Support (CAP) amounts disbursed
  - Poor recovery or complete closure of businesses
  - Low on mitigation measures (mobile money and digital channels for business)

Research Methods

**Study design:** We used a cross-sectional convergent mixed methods employing both quantitative and qualitative primary data collection methods.

**Study population:** We interviewed a randomly selected sample of adult women engaged in economic activities and or lived in Greater Accra and Kumasi areas of Ghana at least 6 months prior to lockdown in March 2020 (since September 2019) and 6 months after lockdown measures were eased (September 2020). Additionally, adolescent girls aged 15 to 17 years were interviewed. A total of 19 sub-metropolitan areas were involved (Accra=12; Kumasi=7).

**Sampling:** Stratified systematic random sampling techniques were used to recruit female business owners, market women, unemployed women, female employees and self-employed women and adolescents. Some of the women were purposefully sampled for the IDI.

**Data collection:** Data collection spanned 3 weeks in March 2021.

**Quantitative:** The survey involved 564 adult women who reside in or engage in economic activities in Accra and Kumasi which underwent an imposition of strict lockdown in March 2020 to curb community spread of COVID-19. Data was collected with personal digital assistants (PDAs) to address ethical issues and maximize disclosure. Respondents were interviewed by female interviewers. The study followed rigorous international ethical and safety standards for research on violence against women.

**Qualitative:** We conducted in-depth interviews with a sub-population of 29 women representative of the different categories of respondents surveyed: women with children in different age brackets and varied educational level were included. Also, 12 adolescent girls were interviewed.

**Data analysis:** Quantitative analysis was conducted using STATA V. 15. We used charts to graphically present the distribution of categorical variables. Statistics of normally distributed continuous variables were reported using means and standard deviations while that of non-normal data were reported in the form of median with inter-quartile range. ANOVA test was used to compare means between more than two groups. All statistical tests were done at 5% significance level. Qualitative data entry was conducted using NVIVO V. 12. Data analysis was carried out using thematic content analysis. Themes and sub-themes that emerged were presented with supporting quotes.

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<th>RESPONDENT CHARACTERISTICS</th>
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<td>Mean age 36 ± 8.9 years</td>
<td>63% Akum</td>
<td>37% BE/MB school education (&lt;10% primary and no formal education)</td>
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<td>79% married or in a relationship (48% lived with partners)</td>
<td>90% Christian</td>
<td>Mean years lived in current place was 10 years (33% lived &gt;20 years)</td>
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<td>Average number of children = 3</td>
<td>80% employed</td>
<td>26% self-employed; 35% employees; 10% unemployed</td>
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<td>42% of women worked in markets; 26% along roads</td>
<td>28% worked from home or place of work in walking distance</td>
<td>94% of working women received income in last 3 months; 30% receiving remittances</td>
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<td>Meck: income was GHS 500; 81% earn between GHS 100 and 500; 24% earned &gt;GHS 1000</td>
<td>80% made own decisions regarding use of their income</td>
<td>36% of unemployed women were laid off due to COVID</td>
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**RECOMMENDATIONS**

- Women & girls’ vulnerability to stress and exposure to violence are heightened during emergencies that restrict movements and possible access to help. Hotlines and callcenters should be made increasingly available so victims can seek help.
- Food rations may be necessary for women with children
- Coordination of Government’s stimulus packages should specifically target female owned businesses
- Need for business advisory Centre to help women especially on how to adopt technological innovations that will help them to withstand any economic shocks and to expand their businesses.
- Government & relevant stakeholders must take actions to aid the girls who dropped out of school to go back to school
- Government must engage relevant stakeholders to initiate interventions to improve the mental health of the populace as part of COVID19 mitigating measures.
More Results on Social Impact

- Generally, women reported more frequent quarrels during the lockdown but were restored to pre-COVID-19 levels by the time of survey. However, quarrels over childcare/upkeep, living arrangements & finances remained slightly higher at the time of survey compared to pre-COVID-19 levels.
- Qualitative evidence mostly portrayed negative experiences with few but significant positive accounts.
- Experience of both partner and non-partner violence was higher during the lockdown period.
- 31% of women reported partner violence in the past 12 months.

"Yes, it brought togetherness, but it didn’t help because staying at home brought about hunger" (Woman: 33 years, market woman, Kumasi).

"Yes, as for that [household chores] it has really increased. When the children are at home, they can change clothes like 3 times a day and would say I want to eat this and that. …. It has made the house job a little difficult" (Woman: 27 years, provision store owner, Kumasi).

"We were living in peace, no argument, we chat and laugh [during the lockdown]; we pray together… yes it’s really bonded us. But before then, there was no time to do all these things … so the lockdown really helped us to spend quality time together" (Woman: 40 years, married, no child, distributes eggs in Accra).

"My husband beats me because of money issues. The argument became loud, so he beat me up, he slapped my eyes. He said I was loud that why he did that. This happened when COVID-19 came. His work wasn’t going on well ….. so I told him if he gets something small, he should bring it so we can do something with it. Things were difficult for him then. We have quarrels often, but he has not beaten me again after that incident"(Woman: 42 years, unemployed housewife, Accra).
More Results on Economic Impact

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"I wash for people in their homes. Anywhere I am called to, I will honor the invitation... It drastically collapsed because you cannot go to the homes of your customer (clients)... So many hindrances e.g. you cannot go out to do anything" (Woman: 33 years, wage earner, Kumasi).

"It has brought about negative hardship for those of us in the private sector... The moment they announced the lockdown in March 16, schools were asked to close down, they did not pay us until this January [2021], until school reopened. A lot of economic hardship" (Woman: 32 years, private school teacher, Kumasi).

"At first, we used to eat three times a day but when COVID-19 came we ate twice. We ate morning and evenings. We no longer ate what we wanted or how we wanted to eat; we eat what we get" (Woman: 32 years, mother of two young children, second-hand clothes seller, Accra).

"I worked at the casino for 3 years and I stopped working there in March 2020. I started working at the pharmacy in the middle of January [2021]. So, from March to January my only source of income was from the hair I was braiding..." (Woman: 26 years, pharmacy attendant, Kumasi).
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"Our capital was gone, and it rendered us bankrupt... Because of the lockdown and the ban on social gatherings and events, all my drinks in stock got expired and because I took a loan facility, it brought a lot of pressure on me and I'm still managing" (Woman: 27 years, sells provisions).

"Yes, for the COVID-19 fund, we applied for it but did not get it the first time, so we reapplied. This time, it [funds] came but we did not get the money requested for... Look at the nature of my work and the machines I use, and if you give me 2,000gh what can I do with that money? I felt it's just a compensation for not giving us the initial funds... I bought sewing accessories with it. Now the bundle of the white [fabric] lining is going for 75gh and with the zip you have to get varieties, thread, tape measure; after buying all these and they calculate [the cost] for you, you would be shocked. When I saw the money alert on my phone, I was disappointed, but I will take it like that; half a loaf is better than none" (Woman: 38 years, seamstress, Accra).
More Results on Psychological Impact

- Women recorded an average intolerance of uncertainty (mean score 29±8.4).
- Women are at risk of clinical depression (based on overall mean depression score of 29.9±9.7).
- There is evidence of Post-Traumatic Stress Disorder (PTSD) of clinical concern (mean impact of event score (IESR score was 24.1±15.1). Women especially in Accra who do not have full PTSD will have partial PTSD or at least some of the symptoms.
- Qualitative evidence suggests that the psychological impacts of the COVID-19 was accounted for moderately by the fear of the unknown regarding the course of the pandemic, and much more towards the direct and indirect impacts of the disease and response measures taken by Government to curb the spread.

“‘The only thing people are experiencing now is sadness...See, they are even saying it can make someone impotent, you see, and if you are a woman, you cannot give birth, and also, you will have difficulties in breathing, I called my cousin on zoom when she was at the hospital, oh .... It was difficult for her to even talk; she couldn’t even breathe. So, it [COVID-19] is not good, not helpful to humanity...are dying because of this COVID, it is not a good thing” (Woman: 39 years, married, bookshop owner, Accra).

“My mom is the one who went through all the stress, my mom is a single parent, and my sisters were also asked to stay in the house. My mom was stressing because sales was not good, and she needs to take care of the family. My sister used to work at Shell [fuel attendant] but she stopped and is now selling drinks. My mom sells drinks, water, hand kerchiefs, nose masks, and roasted groundnuts” (Adolescent girl: 15 years, JHS 2, Kumasi).

“‘Yes, I think so much! I cry and sometimes when I sit, I quietly cry within me... But, those times, things were difficult for me and I had nothing to take care of the two children I had. It was all about money issues. I was overthinking, but after thinking for a while then let go so, I can be fine for a while’” (Woman:42 years, unemployed housewife, Accra).

“During the quarantine many of my friends have given birth. Even if you go to church, they sing but there is no happiness. My church was 75 years, but we could not celebrate it. It has really disturbed us. Some of my friends have given birth” (Adolescent girl: 15 years, JHS 1, Kumasi).

“I have ended up on drugs to stabilize my blood pressure. Every situation was frightening. The children got fed up living at home. My husband ended up abusing alcohol to cover up his worries. Each time he came home drunk, we fought. He is very violent” (Woman: 36 years, domestic help, Accra).

“In the house, at first, we used to come together and tell stories. Now, when we come back from town, we go to our rooms directly, so we are not really happy” (Adolescent girl:15 years, JHS1, Kumasi).

“Yes. I get stressed out. I was not happy about the way I was treated by my employers. I felt less of a human. I felt like I had Covid-19 and was going to infect them with it… I sometimes get nervous when I think I may not be able to afford something worth one (1) Ghana cedi. And there is no help coming from anywhere. How will I survive?” (Woman: 27 years, domestic help, Accra).

REFERENCES:

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