Social Protection Civil Society Network

Impact of Covid-19 on Social Security Allowance Beneficiaries' Families in Nepal

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ABSTRACT

This study illustrates the impact of the Corona Virus Disease (Covid-19) pandemic on beneficiaries of social security allowance following the adoption of preventive measures like message alerts, imposition of lockdown, restriction in movement, and social distancing. The study covers social security allowance beneficiaries of ten local levels from different parts of Nepal. Telephone survey was conducted with the representative sample population which was randomly selected from the social security allowance beneficiaries' list. Findings show that the majority of respondents had received messages related to Covid-19, and half of the population had knowledge of where to approach in case of health emergency. The income of many households declined due to loss of jobs during the lockdown. About half of the population had received small relief support from the local government and humanitarian agencies. The food stock was low due to lack of sufficient money to purchase and high inflation rate. The social security allowance payment was delayed and one fourth of the beneficiaries were uncertain about the next payment. In overall, the social security allowance beneficiaries including their family members, suffered during the Covid-19 and were at risk of food insecurity.

1. Introduction

The Corona Virus Disease (Covid-19) had a severe impact on the lives and livelihoods of people globally. Nepal is not an exception as people lost their livelihoods and income (Subedi, 2020) and the foo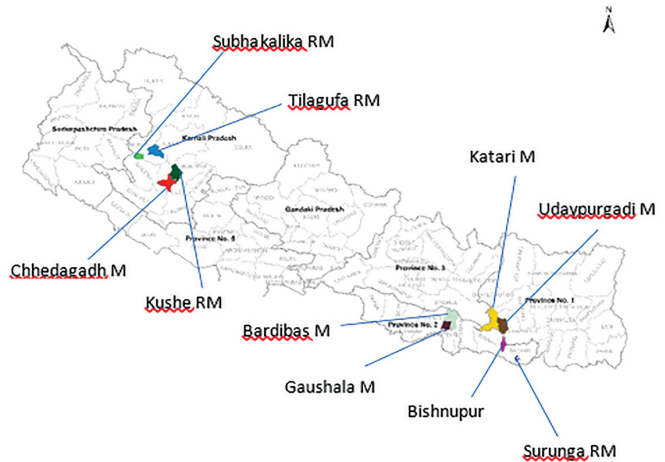d supply chain was disrupted (Adhikari, 2020). Many people faced financial crisis due to reduced income (Ghimire, 2020), lack of steady source of income, and sufficient savings (Pant & Subedi, 2020). The impact was even more severe to the vulnerable population like wage laborers and female headed households (Subedi, 2020), persons with disabilities (Thompson & Rohwerder, 2023), and those

engaged in informal jobs and small and medium enterprises (Spotlight, 2020). Most of the safety net programmes related to Covid 19 were concentrated on urban areas and cities (Adhikari et al., 2021). Consequently, it forced the people to face food insecurity (Ghimire, 2020) and difficulties in accessing health facilities (Thompson & Rohwerder, 2023).

The Social Security Allowance (SSA) programme is federal government's cash transfer programme targeted at specific categories of vulnerable population like elderly, single women, children, persons with disability and the endangered ethnic group of population. The programme is governed by the Social Security Act 2018, Social Security Regulation 2020, and Social Security Allowance Programme Implementation Procedure 2020. Local government is the responsible unit for implementing the programme including registration throughout the year and payments to the beneficiaries every quarter. This situation resulted in diverse impacts on the people during the Covid-19 pandemic. In this context, this paper aims to analyse the income and food security situation among the social security allowance beneficiaries including their household members.

2. Methods and Materials

The study was carried out in 10 municipalities covering five districts and three provinces (Figure 1). The municipalities included were Udaypur and Katari municipality from Udaypur district in Koshi Province; Bishnupur Municipality and Surunga Rural Municipality from Saptari district and Bardibas and Gaushala Municipality from Mahottari district in Madhesh Province; and Chhedagadh Municipality and Kushe Rural Municipality from Jajarkot district and Tilagufa and Subhakalika Rural Municipality from Kalikot district in Karnali Province.

Figure 1: Location of the study municipalities

The total social protection beneficiaries were 46485 in these ten municipalities. Out of them, 273 samples were randomly selected through the list of social protection beneficiaries that was extracted from Vital Event Registration and Social Protection Management Information System. For the sampling purpose, a fixed confidence level of five and interval level 10 per cent was set. It was designed as a short and simple questionnaire for the survey. Using the questionnaire s, a telephone survey was carried out with the individual sample beneficiaries (caregiver in case of child grant) in July-August 2020. The survey data was uploaded in KOBO toolbox. The rule of thumb was applied to explore neighboring beneficiaries in the list in case the sampled beneficiary was not in contact, and this was continued until a respondent was reached.

The Food Consumption Score (FCS) was analysed, which is a proxy indicator for food security that measured food diversity (the types of food consumed), food frequency (the number of days each food group consumed over a reference period of seven days), and the relative nutritional importance of different food groups by

assigning weights to each food group method was used as defined by World Food Programme (WFP, 20008). The score (FCS) was calculated based on the past 7-days' reference period and classified households into three categories: poor consumption (FCS=1.0 to 28); borderline (FCS=28.1 to 42); and acceptable consumption (FCS=>42.0). During the calculation, due to high consumption of oil and fat, raised threshold for food consumption groups was used. Poor food consumption corresponds to less than 1500 kilocalories (kcal) eaten per person per day. Borderline food consumption corresponds to energy intake of 1500-1800 kcal per person per day. In comparison, an average recommended energy intake is around 2100 kcal per person per day.
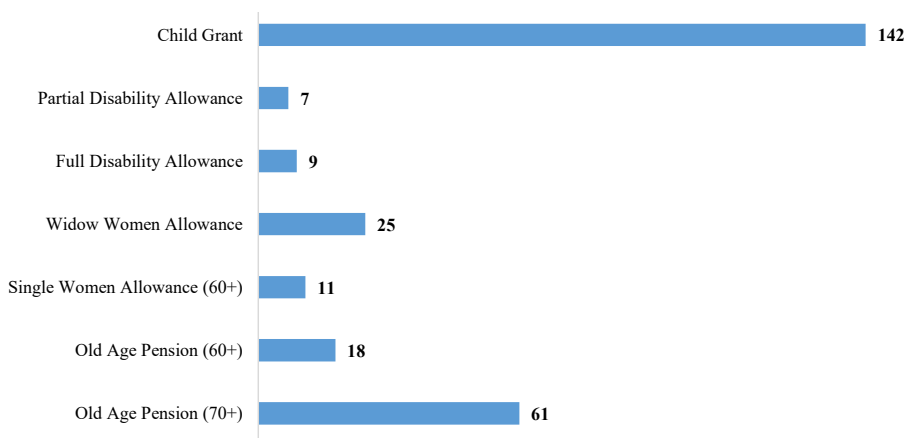
3. Results and Discussion

3.1 Characteristics of the respondents

Out of the total 273 respondents, majority were child grant beneficiaries followed by elderly people, widows, and people with disabilities (Figure 2). Out of the total respondents, there were 57 per cenr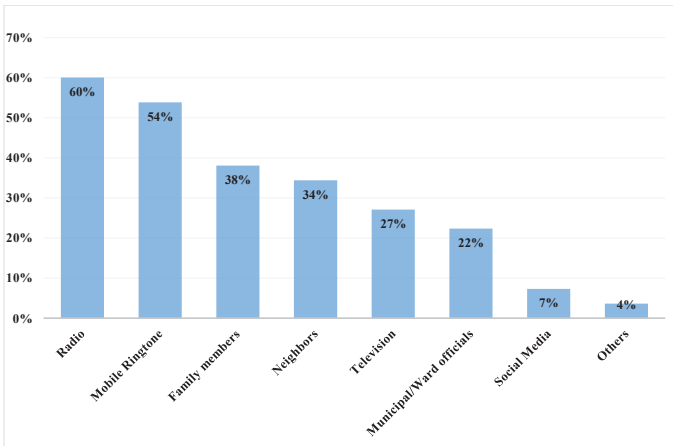t female and 43 per cent male. The average age of the respondents was 40 where the minimum was 18 and maximum was 92. The average household size of the respondents was seven where maximum family members were found to be up to 18 people.

3.2 Access and understanding of Covid-19 related messages and information

Almost all the population responded that they had received Covid-19 related messages and information. Of the total recipients, 77 per cent had received messages from multiple sources. Radio messaging was found to be the most effective means followed by mobile ringtone. The family members and neighbours as information sources was also remarkable. One fourth of the population had received messages from television and municipal/ward offices (Figure 3). About 70 per cent of the population had understood the messages delivered by multiple means. Almost all the respondents had replied that they had washed their hands as suggested in the Covid-19 messages. Half of the respondents had knowledge on how to access the health services for Covid-19 treatment if in case they require it and, around 30 per cent had idea about the phone number in case they need to ask something about Covid-19.
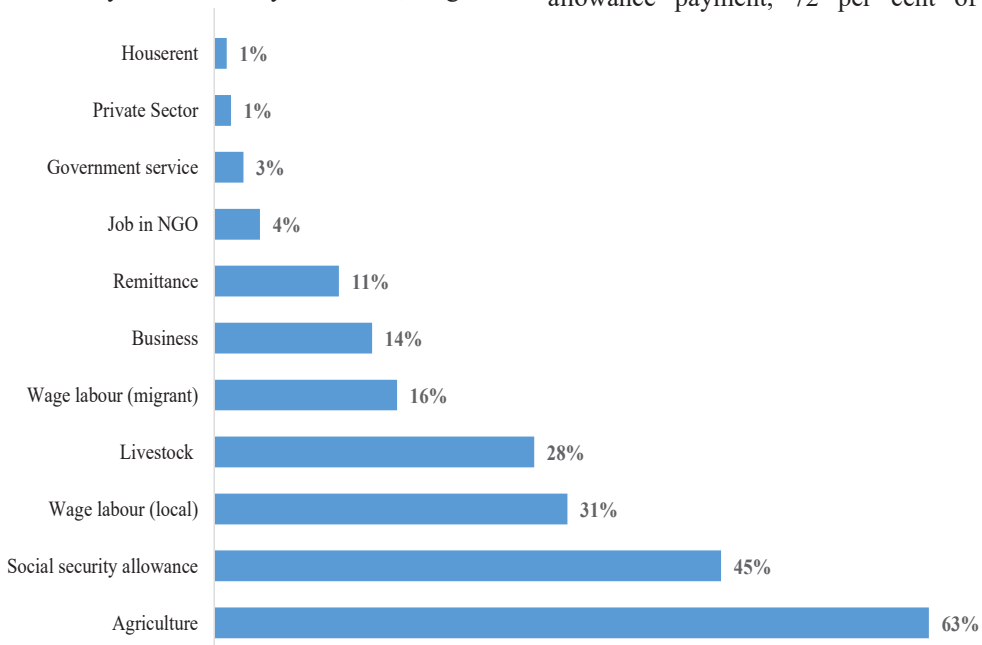

Figure 2: Number of respondents by the types of social protection beneficiaries

Figure 3: Percentage of respondents by source of messages

3.3 Income

The survey revealed that there were many sources of household income. Among them the major source of income was agriculture followed by social security allowance, wage labours and livestock. Business and services had a very limited contribution to the household income (Figure 4).

Around 80 per cent respondents reported that their income was sharply reduced due to Covid-19 where none of the respondents mentioned anything about increment in their income. The main reason for decline in the income was due to t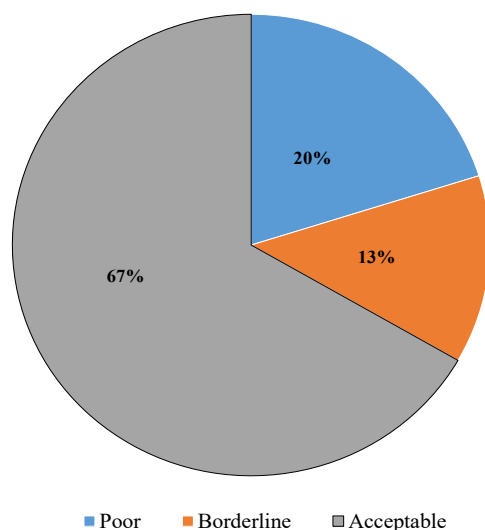he lack of employment opportunities during Covid-19 lockdown. Income from agriculture also decreased due to less demand for agriculture products in the market as agriculture had contributed to one-fourth of the total family income.

Regarding the social security allowance payment, 72 per cent of the

Figure 4: Main sources of household income

existing beneficiaries had received payment by the end of the fiscal year. None of the respondents could answer correctly about the next payment period, though by schedule, it was supposed to be in two months timeframe, from the date of interview, as per the social protection programme implementation procedure. However, the majority of beneficiaries (53%) expected the next instalment to be availed earlier i.e. within a month.

3.4 Food stock and consumption

Availability of food was another concern during the Covid 19 pandemic. Only one-fourth of the respondents had food stock for three months whereas similar portion of the population had no food stock in their house. The reasons for not having any food stock for almost 90 per cent of the population was due mainly to lack of money . They also responded that the market was opened but they could not find the essential items in

required quantity in their locality. Majority of the respondents were found borrowing money either from money lenders as loan or from friends or relatives. Only about 15 per cent of the respondents had access to the formal financial organisations, for example banks or cooperatives and saving credit group. Around 50 per cent of the respondents had received relief packages distributed by municipality/ward where three-fourth had received multiple times. The main items included in the relief package was food and hygeine materials. The study revealed that only 67 per cent of the households had acceptable level of diet consumption (Figure 5) where around one-fourth of respondents replied that they had stopped giving nutritional food to their children due to the impact of Covid-19 in the financial situation of their household.

4. Conclusion

The impact of Covid-19 remained widespread across various sectors. It had a severe impact on the lives and livelihoods of social security allowance beneficiaries, including their family members in Nepal. As revealed by Subedi (2020) and Ghimire (2020), the people in the study area had lost their livelihoods and income as there was scarcity of employment opportunities and fear of Covid-19 effects. In addition, sufficient saving and stable source of income was also one of the major concerns in the study area as claimed by Pant and Subedi (2020). Whereas the findings were contrasting with Adhikari (2020) as almost all the respondents had not faced any market problems to purchase the items they required. Adhikari et al. (2021) claim that the majority of the Covid-19 relief items concentrated in urban areas, however, around 50 per cent of the respondents had accessed Covid-19 related reliefs provided either by the government or humanitarian agencies.

Figure 5: Household level food consumption score (in %)

The percentage of households consuming borderline and poor level of diet remained at 33 per cent. This reflects that they consumed inadequate diets in terms of macro- and micro-nutrient requirements that is referred to inadequate food consumption. The borderline and poor FCS are indicatives of potential deterioration of the overall food security status. This illustrates that the social protection beneficiaries including their household members were food insecure in the absence of income and nutritious food.

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