



Vulnerability and Participant Targeting in the Context of COVID-19

Background Paper



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Introduction

In the wake of the novel coronavirus global pandemic (COVID-19), humanitarian and development actors face a new reality in terms of implementing on-going – and future – food security and resilience strengthening interventions. Efforts to reduce the spread of the virus, including travel restrictions and stay-at-home orders, make it difficult if not impossible for implementing activities to address the resilience, food security, livelihoods, nutrition, and other needs of vulnerable or affected populations.¹

A key consideration with direct and immediate bearing on food security and resilience programs in the context of COVID-19 is vulnerability, in particular, the newly vulnerable. While the more than 821 million people who regularly go to bed hungry are suddenly that much more vulnerable,² the economic and logistical consequences of the pandemic and measures implemented to slow its spread have resulted in a “new class” of vulnerability. Disruptions in movement of people and goods, closures of markets, restrictions on cross-border trade, stay-at-home orders, and quarantine requirements have resulted in a staggering loss of income and livelihoods, and put at risk the food security for millions of previously food secure populations as well as placing millions of the already food insecure that much closer to starvation. According to WFP, the economic consequences stemming from the pandemic “will be more devastating than the disease itself,” especially in poor countries.³

Huge increases in the number of people vulnerable to food insecurity will dramatically increase the need for humanitarian assistance and require development initiatives to adapt their program targeting and approaches. The development and humanitarian sectors will be stretched thin. Key questions for implementing partners include: 1) what do we mean by vulnerability in an era of COVID-19, 2) which modality is most appropriate for different vulnerable populations, 3) will sufficient resources be available to respond to increased need, and 4) will organizations be able to manage the increased need if it becomes more severe over time (e.g., smaller rations)? A clear definition of vulnerability in the context of COVID-19, as well as a strong conceptual framework for participant targeting, is needed for humanitarian and development implementing partners and donors.

As part of a series of virtual expert consultations to explore guidance and operationalization strategies important for food security and resilience programming in the face of COVID-19, this background paper summarizes the issues around new forms of vulnerability as a result of COVID-19 and implications for targeting in current and future humanitarian and development activities.

¹ Global Food Security Cluster. 2020.

² WFP. 2020.

³ Ibid.

Vulnerability and COVID-19

Targeting of development activities – as well as humanitarian response – typically relies on identifying vulnerable populations based on data produced through the Integrated Food Security Phase Classification (IPC) process. In general, vulnerability is defined as those populations classified in Phase 3 (i.e., Crisis) or above (i.e., Emergency, Famine) on the IPC Acute Food Insecurity Scale. While humanitarian and development initiatives often target specific vulnerable groups (e.g., women, PLW, C<5, youth) within their operational areas, general targeting criteria focuses on acutely food insecure populations (IPC 3+).

In 2019, 135 million people were considered in Crisis or worse (IPC Phase 3 or above).⁴ An additional 183 million were classified as Stressed (IPC Phase 2). Though not considered “acutely food insecure” per se, they are nonetheless at risk of slipping into Crisis levels of food insecurity, or worse, if confronted with a shock or stressor. According to FAO, there were 27 million acutely food insecure people across 35 countries at the beginning of 2020 “who could be pushed into famine due to the direct and indirect impact of the COVID-19 pandemic.”⁵ For example, those who were previously just above the poverty threshold or otherwise not previously targeted through development programs or humanitarian assistance but have lost their income – or livelihood – as a direct result of COVID-19 (e.g., they fell ill) or from containment measures designed to reduce its spread (e.g., market closures, restrictions to movement of goods and people, social distancing).⁶ According to some estimates, 265 million people could be acutely food insecure at the end of 2020 due largely to a loss of income and remittances as a result of the pandemic, nearly doubling from 135 million people prior to the crisis.⁷

Though the ramifications of the pandemic on development and humanitarian activities will likely change over time, it is important to develop guidance and protocols now for operating in the context of COVID-19. For example, how does short-term vulnerability due to the pandemic and its response differ from pre-COVID vulnerability, should they be addressed separately, and if so, how? As a first step, it is important to understand “vulnerability” in the context of COVID-19 and the implications of an expanded definition on development and humanitarian activities over the next several years, and perhaps longer.

WHO IS VULNERABLE AND WHY?

From a health perspective, some people are more vulnerable to COVID-19 than others; older people with co-morbidities such as diabetes, obesity, heart disease, etc. are generally at higher risk than younger people without co-morbidities. Some people are

⁴ FAO. 2020a.

⁵ FAO. 2020b.

⁶ CaLP. 2020.

⁷ World Bank. 2020a.

also more vulnerable to the negative economic impacts and resulting food insecurity due to COVID-19 than others. Urban workers and consumers, informal sector workers, refugees and internally displaced persons (IDPs), women, and farmers are at the forefront of those groups most affected by COVID-19 and are at increased risk of food insecurity. Fragile contexts, such as conflict and war, or countries with weak social protection systems exacerbate such inequalities.⁸ Below we describe key groups whose economic and food security vulnerability has increased as a result of COVID-19 containment measures and briefly discuss the contextual factors underlying that vulnerability.

Urban workers and consumers. Urban areas have been hard hit by measures to contain COVID-19. Government curfews and stay-at-home orders have dramatically reduced incomes for urban workers, both in the formal and informal sectors. In Ethiopia, the government estimates that 1.4 million jobs will be threatened over the next three months and the urban self-employed will lose approximately \$256 million, mostly in manufacturing, construction and the service industry.⁹ In India, 107 million people are urban workers, including 41 million self-employed, 16 million casual workers, and 50 million salaried employees.¹⁰ Over 80 percent of India's urban work force was expected to experience reduced income as a result of their lockdown. Job loss, reduced income, increased food prices, and a food system under pressure from containment measures (e.g., from closed markets, increased transport costs, labor shortages) mean food insecurity will increase, especially among the urban poor.

In many urban areas, consumers depend on food supplies from rural areas. Containment and lockdown actions prevent easy movement of rurally-produced farm goods to urban markets, which will have a negative impact on food supplies and prices in urban areas (as well as income losses in rural areas). Price increases for food staples have already been reported in some places (e.g., Kinshasa, Rwanda).¹¹ Closed borders and barriers to trade will disproportionately affect countries who rely heavily on imports of food staples. Assessments of the 2007-2008 global food price crisis showed that urban households – particularly in low-income countries – tended to be more negatively impacted than rural households, likely due to their heavier reliance on markets for food and “a more direct link between urban-area traders and importers leading to higher price increases.”¹² The global food price crisis resulted in urban unrest in a number of countries, particularly in Africa, which could occur again if prolonged market closures, closed borders, and other impediments to trade result in dramatically increased food prices.¹³

⁸ Mercy Corps. 2020.

⁹ Ibid.

¹⁰ Kishore and Gupta. 2020.

¹¹ Resnick. 2020a.

¹² WFP. 2020.

¹³ Resnick. 2020a.

Local transportation costs within urban areas (e.g., taxis, minibuses, Bajaj) or rural-to-urban deliveries are increasing and putting at risk small traders.¹⁴ Closures of urban businesses is having ripple effects on rural populations, who are already experiencing lack of – or dramatically increased prices for – agricultural inputs and some basic food stuffs.

Many countries are experiencing their worst economic impacts in urban areas, one result of which is increased urban-to-rural migration. Out-of-work urban dwellers (e.g., from Nairobi) are returning to their villages, potentially taking COVID-19 with them. COVID-19 outbreaks in rural Bangladesh have likely resulted from mass migration of people back to their towns and villages as employment opportunities in Dhaka evaporated.¹⁵ It is important to consider such urban-rural linkages and the effects of containment actions on them in terms of the ability of rural communities to absorb an influx of out-of-work people as well as the ability of rural health systems to cope with COVID-19 outbreaks.

Lastly, as a highly contagious respiratory disease, COVID-19 spreads rapidly in dense, overcrowded urban spaces (e.g., New York City); the spread of COVID-19 is currently worse in urban than rural areas. People living in urban slums and settlements (e.g., refugee/IDP) often experience unsanitary conditions and lack access to safe water, sanitation, and health care services.¹⁶ Poor air quality in large urban areas contributes to lung problems and makes dealing with a severe respiratory disease challenging. Poor nutrition from consumption of highly-processed foods combined with a sedentary lifestyle contribute to obesity, diabetes, and other non-communicable diseases that compromise the body's immune system and complicate its ability to ward off disease. While the economic impacts of lockdowns, curfews, and stay-at-home orders are widely acknowledged for urban dwellers, the “urban context” also needs to be considered as governments seek to reduce transmission while minimizing economic damage.

Informal sector workers. Often relegated to the margins of formal economies, informal food traders are the heartbeat of African food systems,¹⁷ including in wet markets and as street vendors. In sub-Saharan Africa, just over 89 percent of the workforce is informal and not only earns income from their own sales of goods and services but relies on other informal sector workers for supplies and household needs.¹⁸ Informal workers often migrate into urban centers using crowded minibuses and other forms of public transportation to conduct daily business and typically work in close proximity to each other.

Lockdowns and social distancing pose particular problems for both informal market workers and consumers. The informal, service, and manufacturing sectors have already experienced significant job losses due to the economic impacts of containment measures

¹⁴ Mercy Corps. 2020.

¹⁵ <https://www.poverty-action.org/recovr-study/contagion-and-migration-south-asia>.

¹⁶ Gillespie and Whiteside. 2020.

¹⁷ Resnick. 2020a.

¹⁸ McCrocklin. 2020.

such as lockdowns. Most of the global work force (94 percent) lives in countries where business and work places have been closed and the International Labor Organization (ILO) has estimated that “the pandemic will have caused a loss of working hours in April, May, and June equivalent to that of 305 million full-time jobs.¹⁹ According to the ILO, “there are already growing reports on the economic losses faced by workers engaging in certain [informal] occupations due to reduced demand, lack of access to markets, and the loss of mobility of people and goods.”²⁰ In China, containment restrictions prevented rural migrant workers from returning to their jobs. While urban-based workers continued to earn their salaries during quarantine, rural workers were not paid if they did not work.²¹

Migrant workers provide significant income in the form of remittances to many national economies (e.g., 34 percent of GDP in South Sudan).²² Families who depend on remittances will be impacted not only by the reduction of income but also by increased pressure on household food and other resources resulting from family members returning home due to a job loss. Communities will experience additional burdens on their limited resources, social services and health care systems. Remittances from migrant workers in countries undergoing their own economic contractions, such as the US, Russia, and Gulf states, will be hard hit.²³ Remittances to Haiti come primarily from the US and make up nearly 37 percent of Haiti’s GDP. In Nepal, 67 percent of remittances derive from migrant workers in Gulf countries. According to the World Bank, remittances to LMICs could decline by nearly 20 percent in 2020.²⁴

Informal workers are typically excluded from traditional safety nets enjoyed by formal sector workers, including sick leave and pensions, and have little recourse but to work even when ill. Most are not well-targeted by assistance programs, particularly those that use means or proxy-testing as criteria for program participation.²⁵ Instead, informal sector workers rely more on neighborhood and rotating credit groups and funeral associations for support in dealing with shocks. However, COVID-19 outbreaks are “massive short-wave shocks that will generate long-wave impacts”²⁶ and will require more than informal or ad-hoc social coping mechanisms to help people protect themselves, their families and communities. Thus, it is critical for governments and humanitarian and development initiatives to find ways to make social protection programs more inclusive of diverse sets of informal sector workers.²⁷

¹⁹ Husain. 2020.

²⁰ McCrocklin. 2020.

²¹ Rozelle et al. 2020.

²² Mercy Corps. 2020.

²³ Husain. 2020.

²⁴ World Bank. 2020b.

²⁵ Resnick. 2020a.

²⁶ Gillespie and Whiteside. 2020.

²⁷ Resnick. 2020a.

Refugees and IDPs. Areas in which people have frequent and close contact with each other will be hot spots for COVID-19 spread, such as refugee and IDP camps and informal settlements.²⁸ Such dense, informal settings often lack appropriate access to water, soap, and separate sanitation facilities (i.e., latrines) for men and women. The risks of transmission are high in these and other densely populated areas where reliance on communal sources of food, water, sanitation, and health care services makes social distancing extremely challenging, if not impossible.

More than 70 million people – half of whom are women – have been forcibly displaced and are sheltering as refugees or IDPs, often in countries where weak WASH services and lack of access to health care increase risks of infection.²⁹ According to some figures, the average population density among the 34 Rohingya refugee camps in Bangladesh is 40,000 people per square kilometer (km²), with a high of 70,000 per km².³⁰ For comparison, the population density in Wuhan, the epicenter of the pandemic, is approximately 6,000 people per km² and was approximately 24,000 people per km² on the Diamond Princess cruise line. Thus, UN, government, or INGO activities in refugee/IDP contexts must be adapted to account for risk associated with COVID-19 transmission and safety net mechanisms strengthened and/or expanded. Negative perceptions among refugees regarding healthcare systems and providers puts at risk the effectiveness of COVID-19 response or messaging in refugee settings. For example, Rohingya refugees in Bangladesh prefer paying for health services outside of their camps, as they have high levels of distrust and skepticism about the quality of health care within camps.³¹ Such perceptions impact their health behavior decisions, including the likelihood of disregarding critically important measures for reducing transmission of the disease in refugee camps.

In addition, government restrictions on refugees or IDPs working outside of camp are likely to increase, along with increased stigmatization and ethnic “blame” for the pandemic, making it even more difficult for them to engage in income-generating activities that contribute to their food security and strengthen their resilience to other shocks and stressors. As host communities often benefit from proximity to refugee camps (e.g., refugees as consumers, producers, and laborers), restrictions to refugee/IDP movement outside of camps will also have a negative effect on income and livelihoods of host communities, potentially exacerbating an already fragile situation.³² Restricting livelihood opportunities for refugees/IDPs will also place an extra burden on the already limited resources flowing to refugee and IDP camps, as well as on the humanitarian organizations and donors who provide them, as resources get stretched thin and/or shifted to global responses to COVID-19.

²⁸ CARE. 2020a.

²⁹ CARE. 2020b.

³⁰ ACAPS. 2020a.

³¹ ACAPS. 2020b.

³² TANGO. 2017.

Finally, people migrate when their living conditions become untenable, whether from armed conflict or war, prolonged crises, climate change (e.g., drought, flooding, salt water intrusion), state fragility, human rights abuses, and food insecurity, among others.³³ High levels of poverty and food insecurity often lead to conflict, which in turn, tends to result in high rates of migrant outflows; people tend to flee areas of extreme or sustained conflict, especially when combined with high levels of food insecurity. Before the pandemic, WFP estimated that refugee outflows increase by 1.9 percent for each percentage increase in acute hunger,³⁴ which is predicted to rise by nearly 50 percent (from 135 million to 265 million) by the end of 2020. This represents a potentially staggering number of migrants on a global level.³⁵

Not everyone migrates during times of conflict, however. Residents who remain are also at increased risk from the pandemic and its containment activities. In Ethiopia, recent evidence suggests that the communities and individual fighters (e.g., farmers with landholdings) involved in on-going border conflicts between the Sidama and Oromia pay little attention to COVID-19 containment measures, such as hand washing, wearing masks, and social distancing due largely to their intent focus on defending their lives and livelihoods from what they consider to be unwarranted attacks.³⁶ According to qualitative interviews, people “don’t focus on coronavirus due to the conflict.”

Women. Although COVID-19 affects everyone to some degree or another, its effects are not equally distributed across the globe or within communities. Its most dire and disproportionate impacts are felt by the poorest countries and by the most vulnerable populations – the poor, disabled, elderly, women and girls. According to a recent analysis by CARE, “COVID-19 outbreaks in development or humanitarian contexts could disproportionately affect women and girls in a number of ways, including adverse effects on their education, food security and nutrition, health, livelihoods, and protection.”³⁷ Many social or cultural norms consider household chores, child care, and caring for sick family members as the responsibility of women and girls. As such, they are exposed to greater health risks, including as health care workers; women make up 70 percent of the global health workforce and more than 75 percent in many countries, including in NGO models for health promotion and messaging (e.g., care groups).

As a public health emergency, COVID-19 is likely to have other specific – and negative – implications for women and girls, including gender-based violence (GBV) and sexual exploitation and abuse (SEA).³⁸ Diversion of program resources for COVID-19 response, for example, from routine health care services may result in even more limited access to reproductive health services, including safe deliveries, contraceptives, and pre- and post-

³³ Ibid.

³⁴ WFP. 2017.

³⁵ Husain. 2020.

³⁶ TANGO International. 2020.

³⁷ CARE. 2020c.

³⁸ CARE. 2020d.

natal care. Women may be hesitant to seek health services out of fear of contracting COVID-19, resulting in increased health risks from other health conditions. During emergencies, intimate partner violence (IPV) may be the most common type of violence experienced by women and girls and can have profound physical and psychosocial impacts.³⁹ Access to reproductive health services and hygiene products may be curtailed by male decision-makers who reallocate diminished household income with little thought to the needs of females in the household, as well as by travel restrictions, disruptions to supply chains, and market closures. Violence against women and girls may surge under lockdown and stay-at-home restrictions or quarantine measures. Evidence from the Ebola Viral Disease (EVD) outbreak in various parts of West Africa suggests that SEA by development and humanitarian program staff increased during that health emergency.⁴⁰ Overall, the spread of COVID-19 could have profound negative impacts on women and girls (including unravelling global gains in gender relations and health) in terms of their exposure to risk, their health seeking behavior, and ultimately their food security.

Farmers and livestock producers. Farmers have been uniquely affected by containment measures to reduce transmission of COVID-19. Closed economies, road blockades, curfews, and rising transportation costs mean farmers and livestock producers are unable to get their products (including livestock) to market for sale. Access to inputs, labor, and financing has also been greatly reduced by such containment measures. Prices of agricultural inputs necessary for crop and livestock production are increasing. Planting season is imminent in many areas of the world, yet for many smallholder farmers, increased prices of inputs (e.g., seed, fertilizer), lack of inputs due to restrictions on movement or trade barriers, lack of wage laborers, and decreased access to financing (especially from remittances) puts at risk their ability to engage in production activities that affect the upcoming agricultural season.⁴¹ Livestock producers, in particular, have been hard hit by border closures, restrictions on movement of goods, and market closures and other restrictions on market operations (e.g., reduced days/hours). Whether farmers plant less or anything at all during the 2020 crop season(s) will have dire consequences on their ability to feed themselves and their families after the next “harvest”, the likely result of which will be increased need for emergency assistance (e.g., food, cash, in-kind). Declining demand and altered food consumption patterns will also influence farmers’ planting decisions.”⁴² Lessons from past pandemics show that crop production by farm households was negatively affected by the incidence of Ebola Virus Disease (EVD) at the community-level and exacerbated food insecurity throughout the country.⁴³

³⁹ Wanqing. 2020.

⁴⁰ CARE. 2020c.

⁴¹ RAFLearning. 2020.

⁴² Kumar and Sekhara Rao. 2020.

⁴³ Hall et al. 2020.

Generally, governments do take a number of steps to meet the immediate food needs of their populations, including ensuring markets and domestic supply chains are functional and supporting smallholder farmers and livestock producers to increase food production. In essence, government responses need to get money into people's pockets and equipment into farmers hands, including through cash transfers, seed and fodder packages and other social safety nets. Curfews, border closures, and time-consuming border-crossing procedures should be reconsidered as they hurt transport of perishable food products.⁴⁴ Import taxes on agricultural and food products could be reduced to help compensate for higher transport costs and export bans suspended, at least temporarily.

Youth (aged 15-24) and primary school-aged children. Measures to contain the spread of COVID-19 have led to enormous disruptions for students – of all ages. High-school and university level graduates have had their futures upended. Lack of available jobs, limited future job opportunities, restricted social life, social distancing, etc. leave them idle and with great uncertainty about the future. Prior to the pandemic, 126 million young workers worldwide lived in extreme or moderate poverty – despite having a job – and are three times more likely than adults to be unemployed.⁴⁵ In particular, youth tend to be precariously employed; nearly 77 percent of the world's youth work in the informal sector.⁴⁶

As a result of school closures, teens and adolescents are suddenly at home with family members rather than with their friends and peers. At this time in their lives they are typically separating from their parents, learning social skills and how to navigate among their peers.⁴⁷ In many LMICs, the potential is high for idle youths, especially young unemployed men, to be recruited as fighters in local or regional conflicts (e.g., northern Kenya, southern Ethiopia). Younger school-aged children are also vulnerable to the negative impacts of the pandemic. They may not fully understand the pandemic and its implications, for example on their parents and other family members and well as on their own futures. For many school-aged children, schools provided their main – or only – meal of the day. Youth and younger school-aged children need meaningful activities and other support for a viable and productive future.

How context affects vulnerability in the time of COVID-19

The impacts of most global crises are multifaceted and their effects differentially experienced based on broader contextual factors – strong or weak governance structures, basic services and infrastructure, national policies, sociocultural norms, geography and geology, conflict, and so forth. The COVID-19 pandemic has already had significant impact at the global level, including the loss of thousands of lives, a global

⁴⁴ Bouet and Laborde. 2020.

⁴⁵ ILO. 2020.

⁴⁶ United Nations. 2020.

⁴⁷ Volken. 2020.

economic recession, devaluation of national currencies, etc. As discussed above, certain individuals and groups of people are more vulnerable than others. A number of key higher-level contextual factors that help explain why are discussed in more detail below.

Food security and nutrition. Since early March, a plethora of blogs, reports, studies, guidance notes, briefs, and recommendations regarding COVID-19 and its impacts on food security and nutrition have been made available – predominantly online – by UN agencies (e.g., FAO, WFP, UNICEF, WHO), research institutes (e.g., IFPRI), international NGOs (e.g., CARE, Mercy Corps, GAIN, IFRC), donors (e.g., USAID), partnerships (CaLP), working groups (e.g., IPC, RRCE), standing committees (e.g., IASC) and many others. There is little disagreement among them that COVID-19 and measures to contain its spread will lead to reductions in food consumption and nutrition status and ultimately put millions at risk of acute food insecurity (including those not previously food insecure) and potential starvation, particularly among the poor. People will have less real income – either from rising food prices, decreasing income, or both – to pay for food.⁴⁸ For every percentage point of global economic slowdown, global models predict that the number of people living in poverty will increase by 2-3 percent, or about 14-23 million, worldwide.⁴⁹

Impacts on food and nutrition security will be worse in LMICs, where hunger and poverty are already challenges. According to the WFP, in Zimbabwe – a country crippled by climate crises and economic instability – 3.6 million people faced acute hunger in December 2019, prior to the pandemic.⁵⁰ By March 2020, the number had more than doubled, reaching 8.9 million. The official rate of unemployment in Zimbabwe rose from 11 percent in December 2019 to 90 percent after their lockdown.

Reduced incomes resulting from the impacts of COVID-19 and measures to contain it underlie changes in consumer purchases and food consumption, both of which ultimately increase the likelihood of food insecurity. By mid-May, over 5.5 million people in Zimbabwe reported reducing the portion size of – or skipping – their meals.⁵¹ A recent study conducted by GeoPoll in 10 countries across sub-Saharan Africa found high levels of concern over food availability; 81 percent of study respondents were concerned about having enough food to eat.⁵² According to the study, one of the effects of the pandemic has been a shift in people’s food purchasing habits; compared to earlier in the pandemic, people were shopping slightly more frequently for food as markets began reopening and adjusting the quantity of food they purchased. In particular, people had shifted from buying larger to smaller food quantities and to less expensive brands over time. Thus, people may have been hoarding earlier in the pandemic and/or can no longer afford to

⁴⁸ Swinnen. 2020.

⁴⁹ Vos et al. 2020.

⁵⁰ Husain. 2020.

⁵¹ Ibid.

⁵² Elliott. 2020.

purchase larger quantities or more expensive brands of food as the economic impacts of the pandemic unfolds.

In Ethiopia, households in Addis Ababa had reduced their food expenditures by shifting from more nutrient-dense foods (e.g., meat, dairy, fruits) to cheaper, less nutrient-dense foods.⁵³ Rural households in China lost more than \$100 billion in household income, the result of which was to reduce their spending on food, shifting from more expensive foods like meat and fresh produce to less expensive grains and staples purchased in bulk. Such findings suggest that increases in malnutrition may be exacerbated in groups considered vulnerable prior to the pandemic (e.g., women, children) as well as among groups who were not notably nutritionally vulnerable prior to the pandemic. Nutritional status of children, particularly school-aged children, is likely to suffer dramatically as a result of school closures enacted to contain the pandemic, with potentially devastating long-term effects on their productivity as adults. For many school-aged children, school feeding programs provide their only meal of the day.

Markets. COVID-19 has had a marked impact on markets, supply chains and logistics both for producers and consumers at local, national, and global levels; borders have been closed, countries locked-down, and global air traffic dramatically reduced.⁵⁴ According to some sources, global economic growth could be reduced by 50 percent in 2020, falling from a forecast of 3 percent to 1.5 percent.⁵⁵ This will have an adverse effect on national and local markets, which in turn will have an adverse impact on food and nutrition security, particularly in the global south and among the poor. Although some early economic projections suggest that global food prices may not increase dramatically as a result of COVID-19 due to relatively high food stocks, good harvests, low oil prices and diminished demand,⁵⁶ local food prices are going up in some areas.⁵⁷ Food prices in China increased more than 20 percent over prices in 2019, the highest since the global economic crisis of 2008.⁵⁸ Food price increases typically lead to changes in consumer behavior – none of which promote healthy diets and good nutrition. Contractions in the supply of food lead to contractions in demand, which contributes to the global recession and has a negative impact on nutrition and food security outcomes at the household level.

According to a market study by Mercy Corps, formal market sector actors are better able to deal with many of the more deleterious economic impacts of COVID-19 containment measures.⁵⁹ Larger, more formal and better networked businesses tend to have the resources to acquire permits or exemptions to continue working, to find alternate

⁵³ Hirvonen et al. 2020.

⁵⁴ Gillespie and Whiteside. 2020.

⁵⁵ Vos et al. 2020.

⁵⁶ Swinnen. 2020.

⁵⁷ Hall et al. 2020.

⁵⁸ Ibid.

⁵⁹ Mercy Corps. 2020.

suppliers, and to access capital that allows them to absorb risk. In Nigeria, for example, large agribusinesses are helping their value chain suppliers (e.g., vendors, aggregators) get permits that would exempt them from travel restrictions imposed in response to the pandemic. In Indonesia, contract farmers are reporting better access to markets than farmers without prearranged contracts with buyers.

In LMICs, value chains tend to be labor-intensive, in contrast to the capital-intensive value chains in richer countries.⁶⁰ Thus, economic shut-downs and restrictions to people's movement are having significant negative impacts on the labor-intensive value chains in many LMICs. A recent study by GAIN shows that informal sector small- and medium-sized enterprises (SME) in 17 LMICs report negative impacts on their production, processing, and value chain businesses, primarily decreased sales, difficulty accessing inputs, and difficulty paying staff.⁶¹ Most anticipate continuing shortages of inputs and supplies, and disruptions in transportation and distribution. Their response is to decrease production and reduce prices, but are still in urgent need of financing.

Restrictions on trade. Across the globe, many governments enacted strict measures to curb people – and goods – crossing their borders in an attempt to contain the spread of COVID-19. While freight (e.g., agricultural and food products) is usually still allowed to pass, new border controls (e.g., sanitation) have made movement of food and livestock particularly onerous.⁶² For example, fresh meats, produce and other perishable foods are typically transported at night in West Africa, where daytime temperatures are high.⁶³ Curfews and increased border health checks – especially without added personnel – can cause significant waste of time and loss of product. Losses of perishable produce and livestock among West African traders have been as much as 30 percent after health restrictions were implemented, which disrupted transportation and closed markets.⁶⁴

Border closures also stop informal trade, a widely practiced income-generating strategy used throughout Africa. In Uganda, such trade accounts for 15-30 percent of official exports. Interruptions to informal trade – particularly when enacted with little advance notice – have left many people without income and little opportunity to find alternative livelihoods. Even a few days of income loss can have devastating effects on household food security for many people. Border restrictions or closures are particularly costly for transhumance livestock producers, who rely on moving livestock between grazing grounds often situated in neighboring countries (e.g., between Kenya and Uganda). Abuses of power, in terms of bribes collected at checkpoints in some countries in West

⁶⁰ Swinnen. 2020.

⁶¹ GAIN. 2020.

⁶² Ross. 2020.

⁶³ Bouet and Laborde. 2020.

⁶⁴ Ross. 2020.

Africa have reportedly increased by 30 percent per truck since March⁶⁵ and illegal tax collection by 50 percent.⁶⁶

Reliance on imports/exports, balance of payments, and fiscal solvency. At a global level, trade is critical for food security in food-deficit countries, where gaps in national production are filled through imports of staples such as maize, rice, and wheat. According to WFP, enough maize, wheat, rice and soybean moves through the world's transportation system to feed 2.8 billion people each year.⁶⁷ Disruptions to air, sea, and land-based transport put food-importing countries at risk of food price volatility, inflation, and currency fluctuation, which disproportionately affect the poor.

Countries that depend on crude oil exports (e.g., Venezuela, Nigeria, Angola) will be particularly hard hit from the global recession due to the collapse of oil prices.⁶⁸ Reductions in air and road travel have resulted in a 10 percent reduction in oil consumption from 2019 and oil prices are not expected to reach \$40 per barrel again until the end of 2022, suggesting a slow recovery.⁶⁹ Lower oil prices will directly hurt exporters and indirectly affect importers through reduced foreign investment, remittances, and tourism. Tourism is a critical source of revenue in many countries, particularly international tourism; millions of people are employed in the tourism industry in Ethiopia, Kenya, and Tanzania.⁷⁰ Beyond oil, the auto export industry in South Africa, agribusiness and apparel industries in Ethiopia and Kenya, manufacturing in Tanzania, and mineral mining in DRC and Zambia are also at risk from collapsing demand due to COVID-19.⁷¹ Collapsing oil prices result in reduced revenue from exports, remittances, and tourism among others, and ultimately reduce government treasuries. This terms-of-trade shock can also lead to increased debt in the absence of fiscal consolidation.

According to the World Bank, international financial institutions will be critical in helping developing countries with balance of payments or fiscal challenges while fighting COVID-19 by offering zero- to low-interest financing and long maturities.⁷² Previous experience suggests the benefits of action grossly outweigh the costs; the benefit-cost ratio for action aimed at eradicating smallpox exceeded 400:1.⁷³

Protracted crises, conflict, and human rights. The number of countries around the world that are experiencing protracted crises has been on the rise over the last decade, resulting in record numbers of people forcibly displaced from their homes,⁷⁴ much of it

⁶⁵ Bouet and Laborde. 2020.

⁶⁶ Ross. 2020.

⁶⁷ WFP. 2020.

⁶⁸ Husain. 2020.

⁶⁹ Arezki and Nguyen. 2020.

⁷⁰ WFP. 2020.

⁷¹ McCrocklin. 2020.

⁷² Arezki and Nguyen. 2020.

⁷³ Barret. 2007.

⁷⁴ UNHCR. 2017.

occurring between 2012 and 2015 as a result of the conflict in Syria. Although protracted crises vary, they share certain characteristics, including food insecurity, conflict, human rights abuses, and unsustainable livelihood systems (often exacerbated by climate change).⁷⁵ People experiencing – or fleeing from – protracted crises are more likely to be food insecure and undernourished.

Most of the world’s protracted crisis-related displacements – particularly from natural disasters – occur in LMICs, in part because their economies depend heavily on climate-sensitive sectors such as agriculture and livestock,⁷⁶ which are easily disrupted by most types of crises. Eighty percent of South Sudan’s population depends on livestock as their key livelihood strategy.⁷⁷ The combination of conflict and climate-related disasters has devastated South Sudan’s economy, disrupting markets and value chains, transportation systems, delivery of veterinary services and pastoral mobility, and reducing people’s ability to produce or purchase food.⁷⁸ And this is prior to COVID-19.

Although not new challenges, the COVID-19 pandemic has exposed long-standing inequities, discrimination, and human rights violations around the globe,⁷⁹ which tend to be exacerbated in protracted crises contexts. Even under non-crisis contexts, the impacts of the virus disproportionately affect poorer and marginalized groups and ethnic minorities, laying bare weaknesses in delivery of public services and structural inequalities that impede their access, which are, again, highly exacerbated in protracted crises contexts. Though well-intentioned, many measures enacted to contain risks of transmission have, in fact, exacerbated inequalities and have had huge negative effects on the most vulnerable groups around the world. Existing international human rights mechanisms and national human rights institutions can help guide immediate crisis response and longer-term recovery strategies that build fair, resilient and sustainable societies. Lessons learned from the HIV pandemic support – and can guide – national and international efforts to place human rights at the core of global responses to COVID-19.⁸⁰

Conceptual Framework

Figure 1 presents a conceptual framework of vulnerability due to COVID-19, including contextual factors that contribute to vulnerability and key response strategies. Until a vaccine and/or cure are available and widely deployed, traditional ways of targeting vulnerable groups for food security and resilience program activities will need to be expanded in response to both the health and economic impacts of COVID-19. It is critical that development and humanitarian implementing partners, donors, and other stakeholders adapt and expand their targeting strategies in light of who is vulnerable and

⁷⁵ TANGO. 2017.

⁷⁶ IOM. 2008.

⁷⁷ FAO. 2016b.

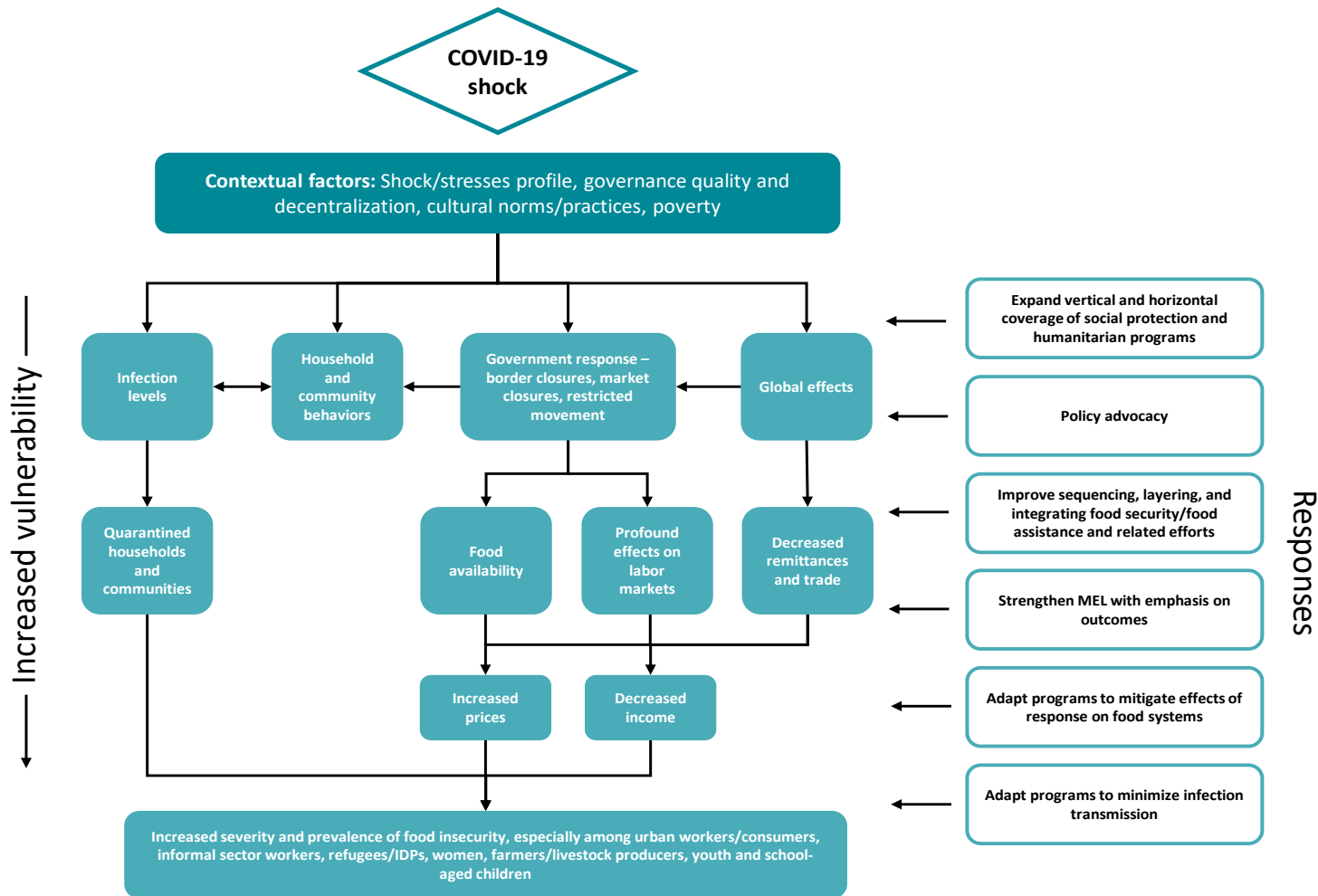
⁷⁸ TANGO. 2017.

⁷⁹ Danish Institute for Human Rights. 2020.

⁸⁰ UNAIDS. 2020.

why, but also in terms of contextual factors that may limit the ability of communities to protect themselves – and their livelihoods – from the virus while maintaining (or strengthening) their resilience to other shocks.

Figure 1. Conceptual framework of vulnerability due to COVID-19.



Addressing vulnerability in the time of COVID-19

Countries around the globe have rolled out various measures to try and contain the spread of COVID-19, the impacts of which have disproportionately negative effects on the poor. Richer countries and wealthier households are less likely to feel many of the adverse effects – or to the same degree – felt by poorer countries and households. The likelihood of a global food crisis is high, but not for lack of food per se, rather from people’s lack of access to it – both physically and economically – as a result of many national containment measures.⁸¹ Although this pandemic is still in its early stages and much remains unknown regarding its spread, effective treatments, and preventive measures, lessons learned from past pandemics provide some guidance on potential “best practices” that prevent, or at least minimize, more people from becoming vulnerable to food insecurity as a result of COVID-19. In addition to the obvious of expanding testing, isolating those who are infected, and contact tracing, it is imperative to keep food supply chains and markets functioning in order to prevent food shortages and avert a global food crisis. At the same time, governments must ensure the needs of the most vulnerable are met through expanded social protection mechanisms while the pandemic and its economic impacts play out. The recent – and on-going – plethora of briefs, blogs, policy papers, webinars, etc. on addressing vulnerability to COVID-19 provide suggestions for specific actions by governments, communities, and humanitarian and development implementing partners, some of which are presented below.

Health and nutrition services. Good hygiene, particularly hand washing with soap and water, is key to helping stem the spread of COVID-19.⁸² Inadequate access to basic water, sanitation and health (WASH) services increases the risk of COVID-19 transmission, particularly for women and girls.⁸³

- Provide cash transfers to food-insecure households with children under the age of 2 to protect children’s health.
- Support local water service providers (WSPs), including those in the informal sector (e.g., vendors), with time-bound cash transfers to make up for lost income from reductions in user fees or sales.
- Provide subsidies for fuel and/or electricity for municipal water service providers.
- Promote handwashing, masks, and social distancing at public spaces, such as markets and public latrines, and in refugee/IDP camps and settlements through combined cash,

⁸¹ Husain. 2020.

⁸² https://www.who.int/docs/default-source/coronaviruse/who-hh-community-campaign-finalv3.pdf?sfvrsn=5f3731ef_2#:~:text=Hand%20Hygiene%20is%20one%20of,incluing%20the%20COVID%2D19%20virus.&text=Communit%20members%20can%20play%20a,day%2Dto%2Dday%20practices.

⁸³ CARE. 2020a.

in-kind, and social behavior change messaging and awareness raising on nutrition and COVID-19 prevention. Ensure provision of soap and touch-free handwashing stations.

- Develop high-intensity and centralized public health messaging, including via radio, SMS, WhatsApp groups, etc. to minimize negative stereotyping and likelihood of stigmatization.
- Mental and psychosocial support (including for youths, adolescents, and school-aged children) should be incorporated into humanitarian and development initiatives to protect mental health and prevent negative behavior change that undermines people's ability to effectively deal with the pandemic and its impacts.⁸⁴
- Build trust with affected communities (e.g., refugees/IDPs) by addressing their fears and misconceptions through clear, honest and targeted messaging that engages communities, builds understanding, and combats rumors harmful to positive health-seeking behavior decisions.⁸⁵ Ensure health providers do not reinforce negative perceptions, thereby jeopardizing the effectiveness of preventive measures.

Expand emergency food assistance and social protection programs. Governments should expand emergency food assistance and social protection programs to ensure families' basic food needs are met. Assistance should be provided early and through delivery mechanisms that minimize person-to-person contact.

- Ensure continuity of and/or scale up humanitarian livelihood assistance to the most vulnerable, based on country context and local risk factors, including to smallholder farmers, women and youth, refugees/IDPs, nomadic and semi-nomadic pastoralists, marginalized minorities/ethnic groups, value chain workers, informal sector workers, the elderly, disabled and chronically ill, etc.⁸⁶
- Social protection programs must be COVID-proofed, as they were AIDS-proofed in the early 2000's,⁸⁷ to reduce transmission, address the health and economic impacts of the disease, reduce stigma, promote positive health messaging, and reduce COVID-19-related barriers to accessing social and medical services.
- Programs should target assistance based on the needs of different vulnerable groups: i) rent/utility subsidies or grace periods for urban dwellers; ii) unemployment programs or wage support for formal and informal sector workers; iii) cash transfers in areas with functional markets and in-kind food transfers when markets are closed or otherwise non-functional (e.g., high/fluctuating prices); iv) input vouchers or subsidies for agricultural inputs for farmers; vi) direct payments to farmers that are uncoupled to production decisions (e.g., how much or what to plant), etc.
- Conditionality of transfers – including work requirements – should be temporarily eliminated across all recipient groups.

⁸⁴ IASC. 2020.

⁸⁵ ACAPS. 2020b.

⁸⁶ FAO. 2020b.

⁸⁷ Gillespie and Whiteside. 2020.

- Targeting of expanded social protection programs must ensure inclusion of workers in the informal sector (e.g., traders, vendors, wage laborers, domestic workers, restaurant workers, etc.) and consider the specific vulnerabilities and roles of women as well as youths, the elderly, disabled people, refugees/IDPs, returning migrants, etc.
- Maximize use of mobile technology for cash transfers and reduce barriers and improve efficiency through regulations to protect consumers – especially the informal sector and women – from risks and limitations (e.g., fraud, corruption).⁸⁸

Support for contactless payments. To reduce person-to-person contact, transfer programs should promote distributions through digital means. Mobile payment systems ensure quick delivery and minimize direct contact from waiting in long lines.⁸⁹

- Contactless forms of payment and food sourcing are especially relevant for traders – both formal and informal – as they reduce the need to deal with a lot of cash on a daily basis.⁹⁰
- Fees for mobile money exchanges can be reduced or eliminated, increasing allowable transaction amounts. In Senegal, the Ministry of Trade has launched an initiative which allows customers to order bread via an online platform and get free delivery during the month of Ramadan in order to limit people lining up outside bakeries.⁹¹ Such strategies may be particularly beneficial for women and children by reducing the time burden associated with getting food.

Ensure markets and food value chains remain open and functional. Functional markets are critical to recovery from the economic impacts of COVID-19 containment measures. While global food stocks of many staple crops are currently in fairly good supply, many containment measures have resulted in significant logistical constraints in moving food where it is needed.

- Governments should classify the food industry as an ‘essential service’ to keep supply chains moving and implement special procedures for food, trade and agricultural inputs to ensure supply chains are kept open and functional.⁹² In China, an e-commerce platform (i.e., Alibaba) is helping farmers find markets for their unsold agricultural products through a “green channel” that moves fresh agricultural products from production hubs to locked down urban and rural areas.⁹³ Similar arrangements are needed for the livestock industry.

⁸⁸ Davidovic et al. 2020.

⁸⁹ Torero. 2020.

⁹⁰ Resnick. 2020b.

⁹¹ Ibid.

⁹² World Bank. 2020a.

⁹³ Torero. 2020.

- Health and safety measures (including WASH) should be incorporated along all segments of the food supply chain, from producer to physical vendor/consumer interfaces (e.g., stores, market stalls).
- Local markets could be open certain days of the week (e.g., alternate days), with cleaning and disinfection occurring during off days, and hours extended to allow for less consumer congestion at peak times. In India, city bylaws were adapted to allow home sales, minimizing the need for small producers or traders to travel to markets.⁹⁴
- Engage local leaders and market cooperatives or associations to help organize and implement actions to keep traders and consumers safe, such as safety supply needs (e.g., masks, gloves, physical barriers), locating hand-washing stations, managing flow of people, and ways to reduce congestion (e.g., scheduling hours).⁹⁵
- Enable safe travel and trade corridors for the free flow of food, fuel, livestock, and agricultural inputs by providing border checkpoints with health checks and screening, along with the personnel required. In East Africa, nine mobile laboratories provide systematic testing, especially along the northern border between Uganda and Kenya.⁹⁶
- Governments should provide advance notice of new border restriction measures to allow businesses and people to adapt as best as possible. This includes working with neighboring countries or regional bodies (e.g., the Economic Community of West African States) to coordinate policies, such as lifting restrictions on free movement of agricultural inputs including fertilizers and pesticides.⁹⁷

Support smallholder farmers to enhance productivity and marketability. Smallholder farming and livestock production are key livelihood strategies in most LMICs and are among the hardest hit livelihoods by the downstream economic effects of COVID-19. Governments and development partners generally should help individual farmers, farmer cooperatives, and small and mid-sized agricultural enterprises expand and improve their operations to meet the needs of local communities during the pandemic.

- Provide time-bound (but unconditional) cash transfers, input vouchers or subsidies for seeds, fuel, fertilizers, feed, etc. to farmers and animal health support to livestock producers. Transfers should include payments for labor for land clearing, plowing, planting, weeding, harvesting, and irrigation scheme maintenance (e.g., cleaning), feed for livestock producers, and poultry packages (e.g., PLW, female-headed households).
- Support food production in refugee/IDP camps and host communities to protect food availability, expand cash-based programs and strengthen social funding mechanisms to support small business enterprises and improve access to food.⁹⁸

⁹⁴ Resnick. 2020a.

⁹⁵ Resnick. 2020b.

⁹⁶ Bouet and Laborde. 2020.

⁹⁷ Ibid.

⁹⁸ FAO. 2020b.

- Support linkages (e.g., rural-rural, rural-urban, and urban-urban) between producer groups – whose access to markets has been disrupted – and extremely vulnerable households (e.g.-urban, female-headed households, children under 2, school-aged children lacking school meals) to supply “household food baskets”.
- Leverage existing digital technologies to transform the delivery of inputs, soil testing, crop insurance, credit, extension advice and market linkages, to enable farmers to overcome temporary constraints related to COVID-19 and to provide better targeting and more effective service delivery.⁹⁹ Governments and/or implementing partners should develop partnerships with agtech, communications, and other companies to develop innovative operational platforms.
- Develop communications campaigns promoting social distancing and personal safety/sanitation during field and value chain activities.

Youth engagement and support for primary school-aged children. Out-of-school students of all ages need structure and support to help them survive – and prevent slipping into crime, conflict, or even depression as a result of global and national measures to contain the disease. Recent evidence from Ethiopia suggests that students, particularly university students returning to their homes due to COVID-19 restrictions, represent a large untapped pool for innovative messaging and behavior change around COVID-19.¹⁰⁰

- Provide work opportunities for students to engage in effective communications campaigns to help communities better understand the risks of COVID-19 and ways to reduce transmission.
- Support youth clubs or organizations that provide online mentoring and activities to help them maintain their social connections and build interpersonal skills.
- Promote student interactions and continued socialization through technology-enabled modalities that replace face-to-face interactions, where possible, while protecting against social media abuses.
- Expand community “safe space” programs for adolescents and youth, especially girls, where they learn life skills, how to make healthy choices (including around COVID-19), etc. from mentors and each other.

⁹⁹ World Bank. 2020a.

¹⁰⁰ TANGO. 2020.

Summary

Generally, development and humanitarian assistance initiatives target food insecure populations. While such populations will be even more vulnerable to the negative impacts of the pandemic on their livelihoods, health, nutrition, and other well-being outcomes, people who were not previously targeted through development programs or humanitarian assistance are now also vulnerable to food insecurity as a result of income loss, market closures, limits to movement and purchase of goods (e.g., agricultural inputs), social distancing, morbidity, and mortality of family and community members. The speed and scale of this rapidly evolving pandemic is unprecedented in modern history and therefore needs to be understood in the context of on-going and future food security and resilience program activities. Rapid learning, adaptive management, and flexibility will be required to prevent currently vulnerable populations from becoming (more) food insecure and to assist those who are newly – and hopefully temporarily – vulnerable to food insecurity as a result of the impacts of COVID-19. Resilience – and other – programming must ensure that food security of vulnerable populations does not deteriorate as a result of the pandemic while continuing to make progress on other development goals (e.g., building resilience, reducing poverty, increasing nutritional status, improving livelihood security).

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