BASELINE INSIGHTS & OPPORTUNITIES

A mixed methods study on the impacts of the COVID-19 crisis on low and middle income people in Cote d’Ivoire and opportunities for policy and programmatic intervention

08 Feb, 2021
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1. Introduction

The first confirmed case of COVID-19 in Cote d’Ivoire was announced on 11th March 2020, prompting swift action from the government. On 18th March, flights were temporarily suspended and all schools closed for an initial 30 days. As the cases of COVID-19 continued to rise, the country declared a state of emergency on 23rd March 2020, bringing with it a dusk to dawn curfew, the prohibition of movement of people, vehicles and goods in and out of Abidjan, and temporary closure of public spaces. With many Ivorians already grappling with the negative effects of COVID-19 on the economy, the October 2020 elections served as another avenue for increased tension among people fearing election violence. Investors and business owners shied away from resuming their activities and injecting money into the economy.

As the COVID-19 pandemic has progressed and national lockdowns lifted in places, people have started to see some respite, but many still struggle to cope with the financial and psychological setbacks. Food insecurity is a reality for many, whose mounting debts are still unpaid and income volatility is high. Social relationships have both provided for and become strained due to the toll that the pandemic has taken on individuals, families and communities.

Contested election cycles, closure of international borders, lack of governmental aid and limited support from the international community have further magnified the issues due to COVID-19. As the pandemic continues, the negative impact on sectors like education, mental health, gender equality, access to primary healthcare, security & violence, access to information, food security & agriculture, livelihoods & informal sector, among others has started to become evident.

Most decisions require trade-offs, as delivering on one can mean jeopardising the other, particularly for majority of the population who survive on low incomes and have minimal access to support. Public, private and third-sector responses must navigate these stark choices, recognising if they are unable to help their vulnerable populations survive both the public health and economic crises, progress could be handicapped for a generation.

OSIWA has partnered with Dalberg to conduct a mixed methods study to understand the social, economic, financial and psychological impacts of COVID-19 on low and middle income people in Mali, Niger, Burkina Faso, Côte d’Ivoire, Ghana and Senegal as well as the reach and efficacy of policy and programmatic support targeted at these communities.

Our study builds on and improvises the mixed methods research methodology evolved during similar work in Nigeria and Kenya in April-May 2020. For this study, we conducted the following across all 6 countries:

- In-depth remote Human Centred Design (HCD) interviews with 74 participants
- Macro analysis of existing programmatic and policy responses, reports and surveys on the impacts of COVID-19
- Phone-based survey, to test emerging findings and insights, with a nationally representative sample
- Expert interviews with NGOs/CBOs

Our hope is that by capturing representative human stories backed by data, and identifying unmet needs, we can inform OSIWA’s decision making process and engagement across West Africa and compel a compassionate and effective policy and programmatic response across the national and international community.

We structured our research around four main thematic areas, for which we generated findings, insights, and programmatic policy recommendations:

- Financial health & livelihoods
- Awareness & access to support services
- Attitudes & psychological wellbeing
- Programmatic/policy gaps & best practices

However, we believe there are opportunities and scalable interventions that can support many low and middle income people survive this crisis. We hope the outputs of this study can play a pivotal role in helping ensure that both the response and recovery is anchored on the needs of the many vulnerable in our society.
2. Research methods

**RESEARCH THEMES**

1. **Financial health & livelihoods**
   We explored the impact of COVID-19 on people’s financial health, including changes in peoples financial behaviors and attitudes since the crisis began; the drivers of income loss and impact on livelihoods; and strategies to cope (e.g. borrowing, new income generation, relocation, cost-cutting, risky behavior like theft, gambling).

2. **Awareness & access to support services**
   We mapped awareness of and access to health services and information; economic and financial support programmes; schooling and education programmes; needs, capability, behaviours, and preferences of vulnerable people across different types of support services; and trusted people/channels for disseminating information during the crisis.

3. **Attitudes & psychological wellbeing**
   We assessed pervasive attitudes towards different aspects of the pandemic response; the effect of the crisis on mental health; potential drivers of poor mental health such as time poverty, overcrowding, anxiety, community unrest, and gender-based violence.

4. **Programmatic/policy gaps & best practices**
   We identified public, private and third-sector response and corresponding gaps; local or international best practices that could be scaled; and broader macro-economic trends and sector-specific pressures that are likely to shape the crisis in the months ahead.
3. Côte d’Ivoire

Country overview & insights summary
Côte d’Ivoire overview

COUNTY PROFILE

<table>
<thead>
<tr>
<th>GOVERNMENT FISCAL POLICIES (11)</th>
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</thead>
<tbody>
<tr>
<td>Population size: 25.72 (3)</td>
</tr>
<tr>
<td>% Urban population: 51.24 (2)</td>
</tr>
<tr>
<td>% Rural population: 48.76 (3)</td>
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<tr>
<td>Health spending per capita: 71.88 USD (4)</td>
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<tr>
<td>Physicians per 1000: 0.231 (5)</td>
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<tr>
<td>Labor force: 8.79M (6)</td>
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<tr>
<td>% Unemployment: 3.42 (7)</td>
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<tr>
<td>% Employment in agriculture: 39.27 (8)</td>
</tr>
<tr>
<td>% Employment in industry: 13.45 (9)</td>
</tr>
<tr>
<td>% Employment in service: 47.29 (10)</td>
</tr>
<tr>
<td>1) Adopted an emergency health response plan of 96 billion CFAF (or 0.3 % of GDP).</td>
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<td>2) provide free care for those with the infection and equipping intensive care units</td>
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<tr>
<td>3) Strengthen epidemiological and biological surveillance (virus testing; creation of a free call center, rehabilitating and equipping laboratories)</td>
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<td>4) Reinforce capacities of pharmaceutical industries and financing research on the virus.</td>
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<tr>
<td>5) A package of economic measures to prop the income of the most vulnerable segments of the population through agricultural input support and expanded cash transfers.</td>
</tr>
<tr>
<td>6) Provide relief to hard-hit sectors and firms, and support public entities in the transport and port sectors to ensure continuity in supply chains.</td>
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(12) JHU CSSE COVID-19 Data
Cote d’Ivoire insights summary

**FINANCIAL HEALTH & LIVELIHOODS**

1. **IMPACT OF ELECTIONS**: Financial insecurity brought about by Covid-19 has been exacerbated by the political instability caused by the elections, creating financial and security challenges that significantly affect MSMEs. Business owners cannot advance business plans set in motion before the elections and now seem unattainable due to COVID-19.

2. **FOOD INSECURITY**: Food prices have increased due to the restrictions in people and goods’ movement, limitations placed on market vendors, and other government restrictions due to COVID-19, such as a night-time curfew. These restrictions, coupled with reduced income and depleted savings, results in many families suffering from food insecurity.

3. **MSME COPING STRATEGIES**: Limited avenues for economic support meant businesses had to scale down and cut back on their expenses, resulting in employees losing their jobs or having to take pay cuts.

4. **MIGRATION**: Urban to rural migration has been caused due to loss of economic opportunities, for fear of contracting COVID-19 and the threat of post-election violence in major cities.

**AWARENESS & ACCESS TO SUPPORT SERVICES**

5. **GOVERNMENT SUPPORT**: Government declaration of financial support with little evidence of implementation coupled with a highly bureaucratic application process, with little transparency, left many MSME owners feeling they have little avenues for economic aid, forcing them to scale down or close indefinitely, ultimately limiting their chances of an economic recovery.

6. **ACCESS TO HEALTHCARE**: Due to the fear of contracting COVID-19, coupled with a lack of medical insurance, the loss of income, and high transportation fees, people would preferably seek alternative treatment forms at home, with many viewing hospitals as a last resort.

7. **TRUSTED INFORMATION CHANNELS**: Strong adherence to cultural norms and traditional beliefs in rural communities has led to low compliance with COVID-19 regulations. Rural communities are less receptive to state-funded COVID-19 information passed through TV and news media, preferring communication from community leaders.

**ATTITUDES & PSYCHOLOGICAL WELL-BEING**

8. **GAPS IN EDUCATION**: State-funded educational TV programs proved insufficient to supplement student learning while schools were closed. Instead, it was further perpetuating the educational divide between social-economic classes and rural and urban households.

9. **PSYCHOSOCIAL SUPPORT**: Income loss and self-isolation have left people in a state of despondency, often with very few avenues for mental health and psychosocial support as typical channels for pastoral care churches, mosques, and support groups have been forced to close as a result of the lockdown.

10. **SECURITY**: People’s fear of the potential of violence erupting due to electoral disputes trumps the fear of violence as a result of COVID-19.
Opportunities summary

**FINANCIAL HEALTH & LIVELIHOODS**

How might we grow the variety of economic support channels available to MSMEs to enable them to cope during business downturns?

How might we ensure equal distribution of aid, support, and economic opportunities regardless of geography to accommodate marginalized groups?

How might we support already fragile agricultural value chains to boost business income and increase food security?

- Foster partnerships between MSMEs, business incubator programs, NGOs, and CBOs that provide capacity building through networks, financial support, and training to transition them to remote operations.
- Strengthen the ability of sector groups to identify MSME needs, advocate for their needs, and distribute resources.
- Nurture conducive environments and link supply chain actors to markets via import fee reductions, subsidies, and other concessions.
- Tailor financial products to meet the needs of excluded groups such as women and informal workers and ensure alternative financing tools integrate with existing financial systems.
- Promote local production and prioritize specific value chains following national food priorities to meet import shortages - e.g., food crop producers, manufacturers, wholesalers, and retailers to promote food security and business growth.
- Use trusted, vetted channels in remote areas to ensure people are equally informed, incorporating transparent application processes that provide visibility and are accompanied by accountability mechanisms.

How might we increase economic support channels to protect households’ financial security in rural and urban areas?

How might we stabilize food markets and provide reliable access to food to ensure food security in households?

- Subsidize money transfer costs on frequently used platforms to aid flows of capital between rural and urban areas.
- Scale innovations to facilitate access to credit and credit scoring, especially among excluded groups such as women, subsistence farmers, and informal workers.
- Tailor assistance to households’ needs, considering that while food packages provide immediate meals, cash transfers offer flexibility to meet a broader range of challenges. Where possible, bundle financial and non-financial packages.
- Create transitional pathways that provide temporary economic opportunities to sustain individuals’ livelihoods through short-term income earning activities.
- Co-ordinate food assistance and economic support among actors to avoid surpluses and shortfalls across regions or time periods.
- Support peace-keeping and response efforts in high-risk areas to minimize the likelihood of conflict and build confidence within the community.
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## Opportunities summary

### AWARENESS & ACCESS TO SUPPORT SERVICES

**How might we increase confidence in government institutions and make government assistance more tangible to reach more beneficiaries?**

**How might we lower the cost burden of seeking health care to increase access to quality healthcare for more marginalized communities?**

- Provide affordable access to quality health care at government facilities and subsidize fees at private institutions
- Use alternative means of providing people with decentralized or remote healthcare, such as using telemedicine to overcome the stigma around hospital visits
- Bundle healthcare by offering COVID19-related guidance and education while providing other health services
- Leverage technology to keep people informed through targeted messaging and responsive systems
- Provide and promote alternative sources of assistance outside the government structure as an impartial support

**How might we foster partnerships between communities, NGOs, influencers, and sector actors to boost compliance and awareness of the virus, especially within rural communities?**

- Harness the influence of community leaders and local authorities to sensitize people on COVID-19
- Demystify the notion of partisan government support by using neutral ground and neutral communications - e.g., distributing food kits at non-party affiliated community centers.
- Build on mental models from past epidemics, such as Ebola and HIV/AIDS, to resonate informative messaging to the local context
- Employ the use of community champions, testimonials, and peer to peer networks to better contextualize the dangers associated with COVID-19
- Broaden the reach of organizations that can mobilize at a grassroots level to provide information and distribute health equipment
Opportunities summary

**ATTITUDES & PSYCHOLOGICAL WELL-BEING**

How might we bridge the educational divide that has further widened due to COVID-19 to ensure equal education access?

- Leverage low-technology innovations to promote learning and expand reach, for example, using SMS-based learning.
- Subsidize remote learning costs by lowering internet bundle charges and the prices of digital learning devices.
- Provide socially-distanced childcare options that have learning activities to encourage supervised learning while reducing caregivers’ time poverty.
- Cluster education material with essential COVID-19 support packages offered to families to promote the continuity of learning in households with school-going children.

How might we foster social cohesion in communities to promote and maintain peace during elections?

How might we create safe spaces for people to express mental health issues without fear of judgment or repercussions?

- Offer targeted education to communities, advocating for peace and tolerance during elections through channels that resonate with various groups, e.g., social media for the youth.
- Mediating in relationships between opposing groups such as police and civilians through community forums and roundtable discussions.
- Leverage existing safe and trusted community spaces and build community members’ capacity so that they can facilitate conversations around mental wellbeing.
- Train religious and community leaders on mental health first aid and equip them with references for further support to enable them to be a first-line for mental health support.
3. Côte d’Ivoire

Insights & opportunities
Financial insecurity brought about by Covid-19 has been exacerbated by the political instability caused by the elections, creating financial and security challenges that significantly affect MSMEs. Business owners cannot advance business plans set in motion before the elections and now seem unattainable due to COVID-19.
Political instability due to elections
The presidential elections in Côte d’Ivoire held in October 2020, brought uncertainty and fear among Ivorians, given past incidences of post-election violence. People we spoke to were more afraid of the after-effects of the elections than the COVID-19 virus. The elections’ uncertainty and instability have had a knock-on effect on many MSMEs’ financial stability. These MSME owners felt they were already struggling from the impacts of COVID-19. Many of them have shied away from signing on new contracts as they are not sure how the election results will turn out, who will come into power, and if there will be any post-election disputes.

Avenues of support declining
This uncertainty has further limited access to credit for individuals and businesses as no investor - not banks, not insurers - wants to take the risk at this time. Due to this being an election year, there was also a perception among people that government aid was partisan. For this reason, some people have not applied for any assistance because they are not affiliated with certain political parties, and those who have applied and not received funding or feedback have assumed it was because they had no affiliation with the right political parties.

Many people stated that the elections are bound to affect a return to normalcy as they will be the ones to pay the price of whoever wins or loses, the contracts they have lost out on, and the opportunity cost will be tough to recoup even with the lifting of COVID-19 regulations.
“Elections made it harder... then mixed with the pandemic. If you’re starting a business, then there’s post-election violence that can really disrupt your work... It was too risky.”

Cherif, 27 years old, Male | Production Manager | Rural, Yamoussokro, Cote d’Ivoire

LOSS OF ECONOMIC OPPORTUNITIES

35% of respondents are in professional roles such as doctors and teachers, while 20% are business owners. COVID-19 restrictions such as the closure of markets and imposition of curfew, compounded with the fear surrounding election activities, impacted people’s economic activities, especially those in salaried employment and business owners. 38% of rural respondents and 30% of urban respondents reported that they were in professional jobs, while 26% of urban respondents and 22% of rural respondents are business owners.
“I think it will take long to recover because of the political situation in the country, I would get help from a company but I know they won't support me because they are also scared of the political situation.”

Toma, 34 years old, Female | Food Vendor | Rural, Yamoussoukro, Cote d’Ivoire

“I can't decide which is worse. During the pandemic I had malaria and was scared of getting covid, but with elections, I was afraid I wouldn't have money to eat because I couldn't open my restaurant business.”

Marlene, 23 years old, Female | Food Seller | Rural, Yamoussoukro, Cote d’Ivoire
Food prices have increased due to the restrictions in people and goods' movement, limitations placed on market vendors, and other government restrictions due to COVID-19, such as a night-time curfew. These restrictions, coupled with reduced income and depleted savings, results in many families suffering from food insecurity.
Closure of borders
Ivorian authorities took various measures to curb the spread of COVID-19, including the closing of international borders, restriction of movement in and out of Abidjan, a nationwide curfew, and a ban on mass gatherings. While many people perceived these measures to be useful initially, they have led to an increase in food prices. The closure of international borders means less importation of produce, which has led to the rise in imported produce prices. Many MSMEs primarily affected by COVID-19 in Cote d’Ivoire were those involved with imports due to the closed borders.[1]

Increase in transportation fees
With so many rural farmers depending on Abidjan’s trade, the hike in transportation fees due to the travel ban has proved to be a crippling blow. Despite the use of illegal transportation, many still imposed a limit to the number of passengers that can board vehicles and increased the price to make up the difference, ultimately resulting in fewer goods being transported to the markets as farmers and traders did not want to incur the higher cost.

Coping strategies
This increase in food cost left many people interviewed in Cote d’Ivoire, stating that they had to use their savings or borrow from friends and relatives to meet basic household needs. If people have no social safety net to fall back on, they must ration their meals, making products that would typically last for a few days extend for a week.

People employed various strategies to help them cope during the pandemic. **50% of men and 43% of women reported having noticed either a drastic decrease or a slight decrease in their food consumption since the pandemic began.**

42% of urban respondents and 41% of rural respondents reported no change in food consumption in their household due to the COVID-19. **43% of women reported no change in food consumption in their homes due to the COVID-19, compared to 39% of men.**

“The cost of food went up drastically. For example, rice prices have gone up by 2050 CFAF. I feel like this is because all the markets were closed, so those that could sell could raise the price as they wished.”

Kokou, 44 years old, Male | Security Agent | Rurban, Betie, Cote d’Ivoire
FARMING AND A RURAL PERSPECTIVE

36% of urban respondents and 33% of rural respondents reported that their families’ overall financial situation had stayed the same. 52% of urban respondents and 54% of rural respondents said that the general economic situation has gotten slightly worse or much worse since the pandemic began. Farming has become a more critical activity and source of food for many respondents, with 40% of urban respondents and 52% of rural respondents reporting that it had become an essential food source since the first case was announced.

“I think the price of food went up. I think this is because of the increase in the price of transportation going up. The products that came from other countries became more expensive because of the border closure.”

Sarah, 47 years old, Female | Cleaning lady | Urban, Abidjan, Côte d’Ivoire

“There are people who have to go out daily to work to get food. If they don’t, they will not have anything to eat. I was complaining about measures taken by authorities because they didn’t think about such people.”

Toma, 34 years old, Female | Food Vendor | Rural, Yamoussoukro, Côte d’Ivoire
Limited avenues for economic support meant businesses had to scale down and cut back on their expenses, resulting in employees losing their jobs or having to take pay cuts.
Declining sales and revenue
Since the pandemic began, 42.6% of formal sector businesses in Cote d’Ivoire said they have had to suspend their activity temporarily. Almost 2 out of 3 modern companies saw their activity reduced, and economic variables such as turnover, production, investment, and employment recorded an overall decline for the whole formal sector.\(^3\) Reduced revenue and cash flow have forced many of these companies to adjust their expenditure and limit their spending.

Government interventions
On 31st March, the government announced a package of economic measures to prop up the income of the most vulnerable segments of the population through agricultural input support and expanded cash transfers to provide relief to hard-hit sectors and firms.\(^4\) In this regard, the authorities created four special funds to be spent over two years,\(^5\) with 2 out of the four targeting MSMEs, including the National Solidarity Fund of 170 billion CFAF (0.5 % of GDP), the Support Fund for the informal sector of 100 billion CFAF (0.3 % of GDP), the Support Fund for the small and medium enterprises of 150 billion CFAF (0.4 % of GDP)\(^6\).

Coping strategies
However, very few MSME owners claimed to have received or seen the impact of these fiscal policies forcing them to permanently close down their businesses or lay off staff, with UNDP projecting Cote d’Ivoire to lose 131,678 jobs by the end of December 2020\(^7\). Other MSMEs owners claimed to have opted to retain their employees on a reduced wage as a coping strategy.

\(^{[3]}\) UNDP, Evaluation of COVID-19 on the formal enterprises in Cote d’Ivoire, 2020
\(^{[5]}\) Dalberg
“I had to spend my own money to pay the salaries of my employees because there was no money. I heard about government support and wrote a letter, but I didn’t get anything, so I had to fire many people who work for me.”

Coty, 35 years old, Male | Industrial Technician | Rural, Yamoussoukro, Cote d’Ivoire

REduced income

There has been a drastic decrease in people’s monthly income, with 45% of respondents interviewed reporting that their monthly income was lower than before the pandemic and 20% of respondents saying that it was much lower than before the pandemic.

There is also a reduction in combined household income for many. 65% of men and 59% of women reported that the household income has very much decreased as a result of COVID-19.
To cope with reduced income, Ivorians have had to make changes in their financial management strategies. 45% of urban respondents and 55% of rural respondents reported having used money that had been saved as a way to cope with the COVID-19 situation. 13% of urban respondents compared to 6% of rural respondents reported having had to borrow money for the first time to cope during the pandemic.

“I had to stop my activity because of covid. I had a major contract to sell vegetables to a company that would bring me a lot of money. Everything was ready and then the pandemic came. All the people and staff who used to work for me couldn't continue to work with me anymore.”

Jacqueline, 64 years old, Female | Trader | Rural, Yamoussoukro, Cote d’Ivoire
“I used to save before the virus, but the pandemic wiped everything out. I was going to the bank every week to get money from the savings account.”
Kokou, 44 years old, Male | Security Agent | Rurban, Betie, Cote d’Ivoire

Mr. Arthur Kokou is a 45-year-old husband and father of 6, who lives in Betie, a peri-urban area in Cote d’Ivoire. He currently works as a security agent at a local firm. Before Covid-19, he and his wife, who works in the industrial zone in Koumassi, were well able to support their family.

When the pandemic hit Cote d’Ivoire, Kokou’s employer had to reduce the number of staff in his company due to business losses. Although Kokou was retained, he had to stay home for three months during the lockdown on a reduced income. He knows several people who have lost jobs in this period and considers himself lucky. He has had to make ends meet on half-pay, which has proved difficult and forced him to wipe out all his savings.

Kokou says that the price of food in the country has increased due to markets being closed, which has made things very difficult for him. Additionally, due to the restriction on the number of people allowed to board public transport vehicles, the cost of transport has risen significantly, forcing him to walk to work. Kokou previously supported extended family members but has been unable to continue doing so despite people still reaching out to him for help.
“I had to stop working and close my restaurant. I had no income and couldn’t sell my things. It was really hard. selling food online is not easy. I was losing money and it was depressing.”

Marlene, 23 years old, Female | Food Seller | Rural, Yamoussoukro, Cote d’Ivoire

“We got a contract worth 20M CFAF, but because of the pandemic we lost it... We were to produce a movie but we were unable to find a team... We needed to travel to the village and that wasn't possible because of the restrictions.”

Cherif, 27 years old, Male | Production Manager | Rural, Yamoussoukro, Cote d’Ivoire
Urban to rural migration has been caused due to loss of economic opportunities, for fear of contracting COVID-19 and the threat of post-election violence in major cities.
Loss of income
When the number of positive COVID-19 cases began to rise steeply in Cote d’Ivoire and various restrictions were set to curb the virus’s spread, people began to move from the urban areas to the rural areas. Whereas some feared that the risk of contracting COVID-19 was higher in the urban cities, others who had lost their income in urban areas were left with no option but to return to their hometowns to get better economic support to tide through the pandemic. The government initially gave a one-week window for people to move across the country and restricted intra-country movement after that. This one week window saw a mass migration of people from rural to urban areas of the country, with people stating that they would return once there was a return to normalcy.

Fear of contracting COVID-19
Abidjan has had the highest number of positive cases, and there’s a misconception brought about by misinformation that the COVID-19 virus is more likely to affect those in urban areas while people in the rural area are more resistant to diseases. People stated that their initial move to Abidjan was to seek a better life in a city with better job prospects, but with a loss of economic opportunities as the virus spreads, people have returned home to more rural parts of the country.
“The government had to take some measures when Covid started, and we saw lots of people moving from the towns and taking their families to the villages because they were scared of the virus.”

Kokou, 44 years old, Male | Security Agent | Rurban, Betie, Cote d’Ivoire

**LOSS OF INCOME**

50% of urban respondents and 43% of rural respondents reported a lower monthly income since the pandemic began. 18% of women reported a lower monthly income since the pandemic started, compared to 22% of men.

The fear is compounded by the lower monthly income that they or their loved ones may also lose their jobs due to the pandemic, with 23% of urban respondents and 25% of rural respondents reporting that loss of jobs/works is what worries them most about Covid-19. People living in urban zones felt the fear of food shortages and the slowdown in economic activity the most, which might have been one of the driving factors behind the migration to rural parts of the country.
“The government had to take some measures when Covid started, and we saw lots of people moving from the towns and taking their families to the villages because they were scared of the virus.”

Kokou, 44 years old, Male | Security Agent | Rurban, Betie, Cote d’Ivoire

“Some of my sisters left town to go to the village because they feared the disease. Life in the village is a lot easier, but I feel like the people that went already had something they could fall back on when they get there.”

Sarah, 47 years old, Female | Cleaning lady | Urban, Abidjan, Cote d’Ivoire

“People in the village were ignorant about the disease. As people are running away to the villages, they were coming to meet the disease in the city, and it was quite funny.”

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- Scale innovations to facilitate access to credit and credit scoring, especially among excluded groups such as women, subsistence farmers, and informal workers.
- Tailor assistance to households’ needs, considering that while food packages provide immediate meals, cash transfers offer flexibility to meet a broader range of challenges. Where possible, bundle financial and non-financial packages.
- Create transitionary pathways that provide temporary economic opportunities to sustain individuals’ livelihoods through short-term income earning activities.
- Co-ordinate food assistance and economic support among actors to avoid surpluses and shortfalls across regions or time periods.
- Support peace-keeping and response efforts in high-risk areas to minimize the likelihood of conflict and build confidence within the community.

BEST PRACTICES

**Village Savings and Loan Association by Care** are groups of about 20 women who come together to save and lend money to one another at low-interest rates. The money is used in investing in a business, agriculture, or education and then repaid to the group at an interest. At the end of the year, the women receive their initial investment and interest. In addition to these savings helping members survive the economic impacts of COVID-19, groups also used their collective savings to purchase items such as food, soap, and handwashing kits and distributed them to their members.

**UNDP and JICA** partnered in the wake of the 2020 elections to provide 80 motorcycles and personal protective equipment to the National Police to help them tackle insecurity during the elections in the context of COVID-19, especially in peripheral areas. The motorcycles would help increase their mobility and response time in the regions that are often not accessible by car.

**World Food Programme, UNAIDS and the Magic System Foundation** partnered to transfer $89 and hygiene kits to female-headed households, pregnant and breastfeeding women, young children, the elderly, people with disabilities, and people living with HIV. The cash transfers allow recipients to have a choice over what to buy.

“We think the actions to be taken are to help vulnerable people by giving them food-stuffs to keep them alive and healthy... We need to go into partnerships with large food distribution companies.”

Jean, President, Action Environnement Plus | Côte d’Ivoire
How might we grow the variety of economic support channels available to MSMEs to enable them to cope during business downturns?

How might we ensure equal distribution of aid, support, and economic opportunities regardless of geography to accommodate marginalized groups?

How might we support already fragile agricultural value chains to boost business income and increase food security?

- Foster partnerships between MSMEs, business incubator programs, NGOs, and CBOs that provide capacity building through networks, financial support, and training to transition them to remote operations
- Strengthen the ability of sector groups to identify MSME needs, advocate for their needs, and distribute resources
- Nurture conducive environments and link supply chain actors to markets via import fee reductions, subsidies, and other concessions
- Tailor financial products to meet the needs of excluded groups such as women and informal workers and ensure alternative financing tools integrate with existing financial systems
- Promote local production and prioritize specific value chains following national food priorities to meet import shortages - e.g., food crop producers, manufacturers, wholesalers, and retailers to promote food security and business growth.
- Use trusted, vetted channels in remote areas to ensure people are equally informed, incorporating transparent application processes that provide visibility and are accompanied by accountability mechanisms.

**BEST PRACTICES**

**Advans CI** is a microfinance institution in Cote d’Ivoire that has introduced grace periods for its clients with outstanding loans to help them tide through the crisis created by COVID-19. They have also continued to fund their agricultural input campaign, which gives farmers access to fertilizers and phytosanitary products and continues their financial inclusion program for cocoa farmers in Coté d’Ivoire.

**Population Services International (PSI)** in CI identified local private sector actors and entrepreneurs and trained them on how to manufacture handwashing stations and devices, using locally available tools and affordable and readily available materials. The handwashing stations are now available in local markets and has allowed businesses to rake in profits amid a pandemic.

“When the disease came, the markets and selling places were closed. A lot of people have lost, especially those of us who work with businesses. The entrepreneurs have lost a lot; even when they go out in the field, people say they don’t have money. There is a loss.”

Population Services International | Cote d’Ivoire
Government declaration of financial support with little evidence of implementation coupled with a highly bureaucratic application process, with little transparency, left many MSME owners feeling they have little avenues for economic aid, forcing them to scale down or close indefinitely, ultimately limiting their chances of an economic recovery.
Interventions for households
On 30th March, the government announced social measures to support individuals and domestic homes, such as the postponement of deadlines for payment of electricity and water bills from April to July 2020 and from May to August 2020 and the suspension of payment of electricity and water bills for April and May 2020 for underprivileged households. However, many people feel that this created a more significant burden for them as it required them to pay a lump sum they could not afford, leaving many feeling, this was a token gesture that was not in their best interest.

Interventions for businesses
Cote d’Ivoire created 633 million USD funds to support the informal sector, SMEs, and large businesses during the pandemic. The government reported giving envelopes of CFA 600 to each MSME based on a survey they sent to determine who qualified as an SME, although the execution is said to have been poor and not far spread.

Business owners’ perspective
Despite the government having made announcements about providing economic support, there is little evidence of people receiving the funds. Many business owners claimed the application process was bureaucratic, lacked transparency, and had no feedback mechanism. The upcoming elections further complicated the matter; it created a perception among people that the way the government used the available aid has not been sincere and has been used as a token to reward political allegiance, locking out those not allied to their political party.
“The government said they would assist people through newspapers, TVs, social media, and text messages. They claim they shared billions with the population, but no one in my community, not a neighbor, not even a friend of a friend I know, got the money.”

Andrea, 23 years old, Female | Visual Communications | Urban, Abidjan, Cote d’Ivoire

ACCESS TO SUPPORT

50% of urban respondents and 46% of rural respondents reported government provided free food rations/products as the highest source of financial or food-related help received during the COVID-19 pandemic. 53% of women said the government offered free food rations/products as the highest source of financial or food-related assistance received during the COVID-19 pandemic, compared to 42% of men.
“The government may take some measures to help, but they take longer to be implemented. It’s only the same companies that benefit from these funds... Poor people mostly work in the informal sector, and they are not literate, and it’s hard for them to apply because of all the document requirements needed.”

Tidiane, 24 years old, Male | Law Intern | Urban, Abidjan, Cote d’Ivoire.

A GENDER PERSPECTIVE

56% of women reported not knowing how to avail themselves to the government or other help as the main reason they have not received any financial or food-related assistance during the COVID-19 pandemic, compared to 47% of men. 74% of women reported that cash transfer would be the most helpful kind of support to them at this time, compared to 69% of men.
“There were a lot of unmet expenses. The government helped us because they allowed us to pay the bills later, but this proved difficult because we had to pay back our loans in two installments, and this was not easy.”
Sarah, 47 years old, Female | Cleaning lady | Urban, Abidjan, Cote d’Ivoire

“I think it was a group of people who were targeted for this help - like those who are more likely to vote for the party in the upcoming elections. When they went to the village, they would put the political affiliation you have first. You would think it’s a political rally instead of help for the public”
Coty, 35 years old, Male | Industrial Technician | Rural, Yamoussoukro, Cote d’Ivoire

“The process was too long, you have to give many documents, and it was a difficult process, so I did not even try.”
Marlene, 23 years old, Female | Food Seller | Rural, Yamoussoukro, Cote d’Ivoire
“We heard about support from the government and I even applied for it but didn't receive anything, meanwhile the bank is charging me interest on my loan...”

Toma, 34 years old, Female | Food Vendor | Rural, Yamoussoukro, Cote d’Ivoire

Ms. Toma is a 34-year-old serial entrepreneur who owns a restaurant, sells food, and owns a cleaning business. She lives in Yamoussoukro, in rural Cote d’Ivoire, with her two children.

Toma was about to open a new restaurant just before the pandemic began, but with the government ordering restaurants and similar businesses to close down to curb the disease’s spread, she could not do so. She has ended up not being able to recover the money she has invested. She had also completed work for one of her clients, constructing a school, but her client could not pay her for her services.

Toma had taken a loan with a bank to fund her businesses, and with the banks now demanding payment, her avenues for accessing credit are thinning. She has tried to apply for government funding, but this has not been forthcoming. She does not know why but suspects that it is because she is not affiliated with any political parties, and being an election year, funds can easily be used as a reward for allegiance. She also believes that the process of accessing state-funded interventions can be very bureaucratic and often lacks transparency.
Due to the fear of contracting COVID-19, coupled with a lack of medical insurance, the loss of income, and high transportation fees, people would preferably seek alternative treatment forms at home, with many viewing hospitals as a last resort.
High cost of healthcare
There has been a drop in visits to hospitals and people seeking medical attention since the pandemic began. Access to health care in Cote d’Ivoire is already expensive, deters many people from seeking professional medical help. Public hospitals are under-equipped and understaffed, while private hospitals’ fees are perceived to be unattainable by the majority of people. The number of health professionals is also insufficient; there are 2.3 doctors for every 10,000 people (WHO), compared to 35 across OECD countries.[10]

Under-resourced public facilities
This shortage of healthcare professionals and under-equipped public hospitals can be quickly overwhelmed should there be a surge in cases. There is also a perception among people that the treatment in public hospitals is not as good as it is in private hospitals because most doctors prefer to work in private hospitals where there are better pay and equipment.

Decreased hospital visits
When the pandemic began, people were afraid of contracting the disease, and visiting hospitals was seen as one way you could potentially expose yourself to the COVID-19 virus, which kept many people away from these facilities. Coupled with a lack of medical insurance, income loss, and high transportation fees, people would instead seek alternative treatment forms at home when unwell.

“I was very afraid of going to hospital because I was scared of contracting covid. I only went because it was really getting bad. I really waited until I couldn’t handle it anymore.”

Andrea, 23 years old, Female | Visual Communications | Urban, Abidjan, Cote d’Ivoire

20% of women reported fear of contracting covid-19 at the health facility as the reason as to why they were unable to access health services, compared to 30% of men. When split by location, the data shows that 24% of urban respondents and 25% of rural respondents reported fear of contracting covid-19 at the health facility as the reason they were unable to access health services.
“I don't like hospitals but after the pandemic I have an excuse to not go there at all. The costs are high. People don't have enough income. When they have to go, they can only afford public hospitals and those of lack resources, personnel and equipment so the treatment is not good. Doctors would rather work in private hospitals.”

Tidiane, 24 years old, Male | Law Intern | Urban, Abidjan, Cote d'Ivoire

“I think people are scared of hospitals because of Covid and also it is very expensive. They would rather take our traditional medicines or wait till the symptoms get really bad before they go to hospital.”

Sarah, 47 years old, Female | Cleaning lady | Urban, Abidjan, Cote d'Ivoire
Strong adherence to cultural norms and traditional beliefs in rural communities has led to low compliance with COVID-19 regulations. Rural communities are less receptive to state-funded COVID-19 information passed through TV and news media, preferring communication from community leaders.
Multiple sources of information
TV and radio broadcasts are a trusted source of information on COVID-19, and many people perceive the information shared on such media to be already verified and authentic. Other information channels, such as social media, are usually fact-checked against news media for authenticity. The government defined select channels to communicate about COVID-19, including mass media, TV, radio, social media, and posters in public health facilities. While these have been a trusted source of information, people in rural areas feel that sensitization on the COVID-19 virus could have been more effective if it came from well known and respected community members, such as teachers and elders.

Compliance in rural areas
There has been less strictness in adhering to the COVID-19 measures set to minimize the risk of spread of the COVID-19 virus in rural areas as people living in rural regions claim to not have witnessed a high number of positive cases and deaths brought about by COVID-19. Despite the difficulties proving this, it may explain part of the laxity in following the guidelines that have been laid by authorities. They feel that they have contended with worse viruses in the past, such as Ebola and HIV, and therefore COVID-19, which they relate to a common cold, cannot be as bad. There is also misinformation that is spread among community members about how the disease behaves, such as a 'western disease' that cannot affect people living in hotter regions. Cultural practices such as shaking hands and embracing have also taken precedence over measures to maintain social distance.
“It’s all about sensitization. People were not aware of how bad the disease was. When you respect social distancing rules and not touch people they thought you were trying to act fancy.”

Jacqueline, 64 years old, Female | Trader | Rural, Yamoussoukro, Cote d’Ivoire

**MULTIPLE SOURCES OF INFORMATION**

Despite people trusting the rules put in place, they still feel like they were not adequately sensitized at the community level, limiting peoples’ adherence to the restrictions. Most respondents view television as their most trusted source of information (63% of the respondents). When split by location, the data shows that 68% of rural respondents and 62% of urban respondents reported television to be the most trusted, with SMS updates being the least trusted source of information. However, a slightly lower number of women trusted the information received from television in comparison to men.
"When you refuse to shake someone’s hand in the village, they will not be happy, and if you use sanitizer, they think you are behaving like white people and think you’re special."

Elizabeth, 55 years old, Female | Business Owner | Rural, Yamoussoukro, Cote d’Ivoire

"Many people think it’s a political conspiracy. When we heard the WHO is giving money, the numbers went up very quickly, so we think govt was increasing the numbers, and it wasn’t real. I think that’s why we neglected the disease here in the village."

Coty, 35 years old, Male | Industrial Technician | Rural, Yamoussoukro, Cote d’Ivoire

"People were not aware of covid like Ebola and HIV. They don’t know how fast it can kill you. It would have been better to sensitize teachers because they are respected in this area, and we listen to them."

Elizabeth, 55 years old, Female | Business Owner | Rural, Yamoussoukro, Cote d’Ivoire
How might we increase confidence in government institutions and make government assistance more tangible to reach more beneficiaries?

How might we lower the cost burden of seeking health care to increase access to quality healthcare for more marginalized communities?

- Provide affordable access to quality health care at government facilities and subsidize fees at private institutions
- Use alternative means of providing people with decentralized or remote healthcare, such as using telemedicine to overcome the stigma around hospital visits
- Bundle healthcare by offering COVID-19-related guidance and education while providing other health services
- Leverage technology to keep people informed through targeted messaging and responsive systems
- Provide and promote alternative sources of assistance outside the government structure as an impartial support

BEST PRACTICES

Medecins Sans Frontières partnered with the Ministry of Health and a local NGO to pilot a telemedicine project at their Yopougon site. The team of doctors, nurses, and caregivers provided 148 tele-consultations to COVID-19 patients to detect comorbidities such as diabetes and hypertension. The electronic platform connected patients with specialists such as cardiologists who would confirm the diagnosis.

FarmForce is a mobile application by Cargill used by cooperative leaders and farmer leaders for GPS farm mapping and as a cooperative management system. Cargill is now using the app in the wake of COVID-19 to amplify the government’s measures. Cocoa farmers receive messages on best practices to keep themselves and their communities safe.

Solidarit focuses on raising awareness and promoting prevention measures among people with chronic illnesses, such as HIV/AIDS. Every time they cater to patients, they also inform them on ways they can protect themselves from COVID-19 and take steps to take if they suspect that they are infected. Solidarit Plus received 1 million CFA from Fondation de France, which they used to acquire and distribute masks and sanitizers at several sites in Aboba. They have also mobilized resources from the National AIDS fund, RIB, and Sylla & Frères to distribute food kits.
How might we foster partnerships between communities, NGOs, influencers, and sector actors to boost compliance and awareness of the virus, especially within rural communities?

- Harness the influence of community leaders and local authorities to sensitize people on COVID-19
- Demystify the notion of partisan government support by using neutral ground and neutral communications - e.g., distributing food kits at non-party affiliated community centers.
- Build on mental models from past epidemics, such as Ebola and HIV/AIDS, to resonate informative messaging to the local context
- Employ the use of community champions, testimonials, and peer to peer networks to better contextualize the dangers associated with COVID-19
- Broaden the reach of organizations that can mobilize at a grassroots level to provide information and distribute health equipment

**BEST PRACTICES**

**UNICEF** delivered omnichannel awareness campaigns to engage youth and community leaders on COVID-19 related actions. UNICEF’s online campaign has generated ~2.3 million engagements (likes, comments, shares) on UNICEF and the U-Report information chatbot’s social media platforms by November 2020. This initiative includes young reporters, young bloggers, Voix des jeunes (Voices of Youth), journalists, U-Report communities, religious leaders, and people giving their opinion through U-Report polls and community mobilization. Face-to-face outreach in partnership with implementing partners Red Cross, Caritas, and ASAPSU reached ~360,000 youth. As part of this, UNICEF Côte d’Ivoire goodwill ambassador NASH used her rap contest and festival to reach out to vulnerable youth. More than 1,000 young people living in the most vulnerable communities were exposed to prevention messages.

“When the first wave of the disease passed, people stopped visiting the health centers... When they are asked to go to the hospital, they said that there is no money and that you cannot go to the hospital because of the disease.”
Traore, Program Director, Solidarit_Plus| Cote d’Ivoire
State-funded educational TV programs proved insufficient to supplement student learning while schools were closed. Instead, it was further perpetuating the educational divide between social-economic classes and rural and urban households.
Digital learning
During the school closures, the government provided supplementary educational programs broadcasted on national TV. Although hailed as a success by the government, it is unclear how many students this reached nationally. World Bank reports states that since the political crises of the year 2000s, the rural population has suffered from a combined deterioration in\(^{11}\): (i) the governance structure;\(^{12}\) and (ii) cuts in health and education expenditure under structural adjustment programs that aimed at re-establishing macroeconomic stability.\(^{13}\)
Poor digital infrastructure means there is limited reach into more remote parts of the country, with 16% of households in urban areas having access to the internet compared to only 2% in rural areas.\(^{14}\)
Teachers stated that if the family cannot afford to pay for private tuition for their children, they must take it up. It is clear that homeschooling has increased the time-poverty for many parents; however, many people reported an equal split of duties between men and women.

Education gap widening
In September 2020, upon returning to schools, many teachers have reported differences in the type of students they are now teaching. With some who have had adequate support at home, often from wealthier and more educated families, they can get right back into the curriculum with little difficulty. Others who could not embrace remote learning and lacked adequate support at home have fallen behind. These students have also lost a significant amount of academic ability they had previously attained.

\[^{11}\]Digital Solutions for Sustainable Development, the world bank, 2017
\[^{12,13}\]World Bank, Côte d’Ivoire SCD – From Crisis to Sustained Growth, 2015, p.xvii
\[^{14}\]Gallup Survey, 2015
During the COVID-19 pandemic, children still spent most of their time learning. However, there was a slight decrease of around 8% compared to levels before the pandemic, with 61% of all respondents reporting their children having spent most of their time learning. Most learning is through homeschooling at 49%, followed by online classes at 26% and below 25%. When split by gender, the data shows that 54% of women reported learning being done through homeschooling, compared to 48% of men.
Income loss and self-isolation have left people in a state of despondency, often with very few avenues for mental health and psychosocial support as typical channels for pastoral care churches, mosques, and support groups have been forced to close as a result of the lockdown.
Increased isolation
The measures taken in Cote d’Ivoire to curb the spread of COVID-19 have left many feeling isolated and unable to enjoy the things they once did, which has affected their mental well being. Despite many people admitting that the social distancing measures are working to a certain degree, they feel that there are inadequate mental health and psychosocial support channels in their communities, and their families are often ill-equipped to help. Usual first points of call, such as churches and mosques, have had to close during the lockdown.

Limited support systems
People reported high levels of despondency and anxiety and a sense of withdrawal due to the extended periods without interacting with others in their community, earning a living, or seeking support from institutions. As of 2017,[15] it was estimated that approximately 4% of the population suffer from mental health illnesses such as depression,[16], with some community leaders and local mental health advocates predicting that COVID-19 has prompted a sharp increase in this. Some people also acknowledged an increase in the number of people suffering from adverse psychosocial effects due to COVID-19. However, they worry that much of it will remain unreported as usual channels such as churches, mosques, and support groups have been forced to close due to the lockdown and safety guidelines.

INCREASED ISOLATION

There was an increase in anxiety among people, with 27% of urban respondents and 21% of rural respondents reported feeling slightly anxious in the last three months. When split by gender, 27% of women reported feeling very anxious over the previous three months, compared to 19% of men.

“During the lockdown the churches were closed and I was really sad, I would always call my spiritual father to find out when they would reopen and he would say not yet.”

Sarah, 47 years old, Female | Cleaning lady | Urban, Abidjan, Cote d’Ivoire
“A lot of people were depressed and needed mental support. My best friend lost her job and used to call me all the time to give her a little happiness because she was depressed.”

Tomaa, 34 years old, Female | Food Vendor | Rural, Yamoussoukro, Cote d’Ivoire

“I was terrified about the disease and the way they were talking about it on social media. I have a lot of support from my friends. In the beginning, I was always crying, but they were there for me.”

Marlene, 23 years old, Female | Food Seller | Rural, Yamoussoukro, Cote d’Ivoire

“When you have to go out everyday to work, you know there’s a risk of losing your job, so it’s hard on the mind. Many people left their houses to go and be with family to find comfort.”

Cherif, 27 years old, Male | Production Manager | Rural, Yamoussokro, Cote d’Ivoire
“I was so worried; I almost fell sick because of that. Covid changed my way of seeing things and how to manage. I was despondent at times. I like to walk at night to relax. It was a weight on me, and I was really sad during this period. I tried to form a small group of people to just meet and play some music and have fun while staying within the rules, but even this was difficult to keep up.”

23 years old, Female | BTS Visual Communication, Web Designer | Abidjan,

Andrea is a 23-year-old single mother living in Abidjan. She has always lived in Abidjan but only started living away from family for the last one year since separating from her child’s father. Andrea’s primary way of generating income is through working as a graphic designer. She works for a firm that had recently asked all staff to take a 50% pay cut to avoid making anyone redundant due to COVID-19 and the slowdown in business before COVID-19 Andrea used to supplement her income by doing freelance contracts and selling coffee in her local area.

Due to COVID-19, all her alternative ways of supplementing her income have dried up, and now Andrea admits she barely has enough to cover her rent and pay for childcare. However, Andrea still considers herself very lucky as she still has some way of making money, and she didn’t completely lose her job. Nonetheless, she feels that COVID-19 has yet had a huge psychological impact on her as someone that lives by herself and quite far from the rest of her family. She thinks that her usual support channels are not as easily accessible and all she can do is pray, with even this being affect due to the closure of religious institutions during the lockdown.
People’s fear of the potential of violence erupting due to electoral disputes trumps the fear of violence as a result of COVID-19.
Police brutality
There have been few incidents in which insecurity has been attributed to COVID-19 within communities. Many felt that the leading cause of tension had been the curfew, which has led to a slight increase in tension between young people and the police, with some people interviewed citing incidents of police using excessive force against them.

Uncertainty around elections
In contrast, many people feel the root cause of their sense of insecurity was not due to COVID-19 but rather due to the recent presidential elections, which has brought a greater sense of fear among people and businesses. Many people feel they can protect themselves from the COVID-19 virus but not from the unrest that could come from election disputes.

Political instability
Some people have begun to feel safer since the elections passed with no significant incidents; however, in certain regions, namely in the southwest of the country, there is prolonged tension due to opposition leaders’ arrest. In these regions where the unrest is yet to seize, The violence has affected their attitude toward the future, lowering their confidence and optimism that things will ever return to normal after COVID-19 as they feel that even when the pandemic impacts have passed, the elections will live with them for much longer.
UNCERTAINTY AROUND ELECTIONS

36% of respondents interviewed reported that security had remained the same as before the pandemic in their neighborhood. 42% of urban respondents and 35% of rural respondents said that security is the same as before in their community since the first case of COVID-19 was reported.

“During elections there were rumors of violence so I decided to hide my 4 children in the village. Nothing happened but my mother and wife were really scared and urged me to send them to the village to be sure.”

Kokou, 44 years old, Male | Security Agent | Rurban, Betie, Cote d’Ivoire

How have the state of security changed in your neighborhood since (first case of COVID-19 was reported)?
POLITICAL STABILITY

According to the world bank for Cote d’Ivoire from 1996 to 2019, the average value of political stability for Coté d’Ivoire during that period was -1.3 points with a minimum of -2.26 points in 2005 and a maximum of 0.03 points in 1996. The latest value from 2019 is -0.96 points. The index of Political Stability and Absence of Violence/Terrorism measures perceptions of the likelihood that the government will be destabilized or overthrown by unconstitutional or violent means, including politically-motivated violence and terrorism. The index is an average of several other indexes from the Economist Intelligence Unit, the World Economic Forum, and the Political Risk Services, among others.

“With the political crisis it’s my life that is in danger. Covid has only affected my income. As an activist, someone might use this opportunity [elections] to harm me and my children.”

Toma, 34 years old, Female| Food Vendor| Rural, Yamoussoukro, Cote d’Ivoire

https://www.theglobaleconomy.com/Ivory-Coast/wb_political_stability/
How might we bridge the educational divide that has further widened due to COVID-19 to ensure equal education access?

- Leverage low-technology innovations to promote learning and expand reach, for example, using SMS-based learning
- Subsidize remote learning costs by lowering internet bundle charges and the prices of digital learning devices
- Provide socially-distanced childcare options that have learning activities to encourage supervised learning while reducing caregivers’ time poverty
- Cluster education material with essential COVID-19 support packages offered to families to promote the continuity of learning in households with school-going children.

**BEST PRACTICES**

**Eneza Education** is a startup that provides SMS-based curriculum-aligned educational content to students at the primary and secondary school level in Kenya, Ghana, and Cote d’Ivoire. During COVID-19, they offered free revision material to children, enabling them to continue their education regardless of location. They also send regular reports and reminders to parents on their children’s performance, encouraging parent participation in their children’s education.

**Cartooning for Democracy and Peaceful Elections** is a project supported by the European Union in Cote d’Ivoire in partnership with Internews, which uses press cartoons to promote and advocate for democracy and peaceful elections in Coté d’Ivoire. The project targets the youth in schools through civic education and media and will teach them critical thinking skills to combat misinformation and hate speech.

“Even if you have caught the virus it is not a fatality either, because today there are measures that are being taken to be cured of this pandemic. It is at this level that I can say in terms of psychological health that we intervene. But in terms of mental health, we don’t have this competence.”

Jean, President, Action Environnement Plus | Cote d’Ivoire
How might we foster social cohesion in communities to promote and maintain peace during elections?

How might we create safe spaces for people to express mental health issues without fear of judgment or repercussions?

- Offer targeted education to communities, advocating for peace and tolerance during elections through channels that resonate with various groups, e.g., social media for the youth.
- Mediating in relationships between opposing groups such as police and civilians through community forums and roundtable discussions.
- Leverage existing safe and trusted community spaces and build community members’ capacity so that they can facilitate conversations around mental wellbeing.
- Train religious and community leaders on mental health first aid and equip them with references for further support to enable them to be a first-line for mental health support.

BEST PRACTICES

Theology institute of the Society of Jesus (ITCJ) in Abidjan in partnership with Bouaké psychiatric hospital opened a 24-hour call center operated by professionals from the Bouaké psychiatric hospital and 25 students from Copac, the Center for professional advice and clinical pastoral care created by ITCJ. They provide psychological support to people who call in looking for psychological assistance.

Observatoire Ivoirien des Droits de l’Homme (OIDH) engages young voters in Cote d’Ivoire through digital campaigns on Facebook, WhatsApp, Twitter, and Instagram to promote non-violence, political tolerance, and civic values. They also train civil society organizations on how to increase public confidence in the verdicts of the electoral boards.

“When we are in the field, we give them advice so as not to get discouraged, but by telling them that the illness is real. That the disease is real and that here are the barrier measures to be respected. We provide them with psychological support, and also, as we work in the health sector, we have doctors who go into the field to raise awareness.”

Population Services International | Cote d’Ivoire
A mixed methods study on the impacts of the COVID-19 crisis on low and middle income people in Coté d’Ivoire and opportunities for policy and programmatic intervention

08 Feb, 2021