The Corona virus and the resulting Covid-19 have profoundly changed the landscape for development. The consequences are dramatic and they span over several aspects of life through direct and indirect channels. The purpose of this brief is to highlight the main links between the Corona pandemic on the dimensions of poverty as well as on the four aspects of the context as defined by Sida, and provide guidance on how to revise the multidimensional poverty analysis (MDPA) in light of the crisis.

**ENDING POVERTY IN THE WORLD OF COVID-19**

The spread of the Corona virus has changed the global landscape for development. The response to the global pandemic has affected the lives of people in all parts of the world. In addition to the widespread anxiety and human suffering due to the Covid-19, the political decisions to contain the virus, the socio-economic consequences, and the behavioural responses have been unprecedented in scope and pace in modern history.

How a country is affected by the Covid-19 crisis depends on the characteristics and decisions of the country itself, how the virus spreads, and how the country is connected to other countries and their response to the pandemic. The impact of the crisis on Sida’s different thematic focus areas has been summarised by the Unite of Policy support here.

People living in poverty are impacted by the crisis irrespective of if they contract the disease itself or not. The negative consequences of the pandemic on poverty is no longer a risk, it is a fact. The consequences are likely to persist over a long period of time and might change in character and hit different groups differently over time.

Sida’s conceptual framework for multidimensional poverty recognises four dimensions of poverty, namely resources, opportunities and choice, power and voice, and human security. Especially in the prevailing context of the Corona virus, it is important to understand the links between the different dimensions of deprivation as faced by people living in poverty.

The purpose of this brief is to provide guidance on how to revise the multidimensional poverty analysis (MDPA) in the light of the crisis. The brief will thus not replace the overall guidance for MDPA analysis nor specific thematic analyses, but will complement them with specific considerations of the impact of Covid-19 on poverty. The guidance summarised in a one-page ‘guiding questions’ at the end of this brief can also be used to support dialogue with partners at country level.

THE FOUR DIMENSIONS OF POVERTY:

Being poor in terms of **resources** means not having access to or power over resources that can be used to sustain a decent living standard and improve one’s life. Resources can be both material and nonmaterial – e.g. a decent income, capital, being educated or trained, professional skills, being healthy.

Being poor in terms of **opportunities and choice** concerns what possibility you have to develop and/ or use your resources so as to move out of poverty. Access to e.g. social services, to infrastructure, to capital, to land, or to natural resources affects the opportunities and choices.

Being poor through lack of **power and voice** relates to the ability of people to articulate their concerns, needs and rights in an informed way, and to take part in decision-making that relate to these concerns. Power is a relational concept that allows us to better understand socio-cultural hierarchies and relations of which gender is one, others include age, caste, class, religion, ethnicity and sexual orientation. Reinforcing forms of discrimination based on such socio-cultural relations may increase an individual’s poverty in this sense.

Being poor in terms of **human security** implies that violence and insecurity are constraints to different groups’ and individuals’ possibilities to exercise their human rights and to find paths out of poverty.

According to Sida, a person living in poverty is resource poor and poor in one or several other dimensions.

THE IMPACT OF COVID-19 ON WHO IS POOR AND HOW POVERTY IS EXPERIENCED

Sida’s model for multidimensional poverty analysis helps us to understand **who** is poor (target group), **how** the poverty is experienced in the above-mentioned four dimensions, and **why** this situation has come about.

Who is being most hard hit by the different aspects of the crisis, how the spread of the Corona virus influences the different dimensions of poverty, and what changes can we see in the development context are questions to be answered in a revised MDPA or a more light-touch update of the current country analysis. Not all individuals and households suffer proportionally from the same effects and some individuals and groups might be subject to overlapping deprivations and thus are particularly vulnerable to the ongoing crisis. The situation for people is likely to differ depending on for example sex, age, gender and transgender identity or expression, sexual orientation, disability, ethnicity, and religion or other belief. It is also important to assess those living outside the household structure, in slum areas, refugee camps and in the streets. These groups who are already poor and discriminated against are likely to be severely affected by Covid-19. The Corona pandemic may also bring about a group of ‘new poor’ – households who were not living in poverty before the crisis but who are now pushed temporarily or more permanently into poverty. Some households who were already poor may experience a deterioration in their situation and may fall into destitute poverty due to the pandemic.

Protecting women, men, boys, girls and non-binary people from falling into (or deeper into) poverty during the different stages of the crisis – both during the acute prevention phase when focus is on containing the virus from spreading, as well as the longer-term stimulation phase when the focus is on rebuilding economies and job-creation – will characterise the work on poverty alleviation in times of Covid-19. Thus, revising the analysis on **who** is poor and **how** is of central importance for understanding the impact the pandemic has on people living in (or who are vulnerable to) poverty.

RESOURCES – ESCAPING EXTREME POVERTY AND BUILDING CAPABILITIES

Extreme poverty will rise as a result of the pandemic both in term of monetary and non-monetary measures of poverty – however, the channels and level will vary depending on the context and the household. The most direct channel for increased poverty is the lack of income due to shrinking supply (people cannot go to work due to Corona restrictions) and demand of labour (there are no jobs to go to due to economic slow-down). Women and men in formal employment can be subject to collective layoff or
downsizing as firms struggle to survive. Also, health insurance and other benefits tied to the contract may be lost leaving the households with no formal safety nets, such as unemployment benefits. How temporary these effects are depends on the sector and the kind of contract. Different regions and different economic sectors have been hit differently by the pandemic, while the informal workers are usually hit the hardest.1

Many people living in (or close to) poverty have informal jobs and temporary contracts with little or no security of employment. They may work as day-traders or in the gig-economy. As many countries have introduced bans on mobility, the job opportunities in the service sector have reduced drastically, and in some contexts simply leaving the house for work is prohibited. As working from home is a privilege of few, the sudden efforts to contain the virus will quickly turn into poverty traps. The economic impacts of Covid-19 may impact men and women differently, as more women work in low-paying, insecure and informal jobs. Disruptions, including movement restrictions, are likely to compromise women’s ability to make a living and meet their families’ basic needs. Thus, the crisis poses a serious threat to women’s engagement in economic activities, especially in informal sectors, and can increase gender gaps in livelihoods.

Also access to natural resources and safety-nets such as homegrown crops, firewood, and water may be limited due to mobility restrictions. Many households may need to resort to negative coping strategies such as sexual exploitation or begging to compensate for the lost income or may be forced to sell assets or resort to unsustainable use of natural resources, while other households might be more resilient by being self-sufficient.

Also, other sources of income become under stress during the crisis. Households who have benefitted from remittances sent by migrant workers may see their incomes diminish as the migrant workers may lose their job due to economic downturn and restrictions in the host country. Migrants may also get stranded due to travel restrictions, or they may not be welcome back in their home communities due to fear of them spreading the virus.

The pandemic puts also more pressure on social protection and delivery mechanisms that are unlikely to cope with the increased demand from ‘new-poor’ households leaving some eligible households without support.

Even if a household would have sufficient income in ordinary circumstances, making the ends meet in times of crisis may become challenging. Many countries have adopted restrictive policy measures and closed parts of the economy to contain the virus2. These measures have sometimes had a direct impact on the markets and distribution mechanisms driving up the price of food and other necessities. Poorly functioning markets have direct effect on food security especially among the urban population who is dependent on food produced elsewhere, while the farmers see the markets for their products disappear. In times of restrictions, incentives to circumvent the barriers through corruption and opportunities for economic abuse taking advantage of people’s desperate situation are difficult to control, which may exacerbate the problems of unaffordable cost of living.

Sida’s resource dimension covers also immaterial assets, such as education and health. Most countries have chosen to close schools during the outbreak of Covid-19. While middle-income countries and urban middle-class families may have the opportunity for home schooling and/or distance online learning, these opportunities are not available for poorer families. Children who were already struggling with the national curriculum will be badly hit by lack of schooling as they fall even further behind. In some cases, school feeding

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2 For further reference and information about country-specific measures, please see ODI policy tracker here: https://set.odi.org/coronavirus-economic-vulnerability-
programs have been a fundamental part of ensuring the nutritional wellbeing of many children, and these programs have often come to a halt due to school closure. There is also a risk that the achievements in universal school enrolment will be lost as many children (especially girls) may not return to school even once opened either due to fear of Corona or because they are needed at home. Boys may be forced to contribute to the family’s income through child labour while girls risk sexual exploitation.

Corona virus can have direct impact on health if one contracts Covid-19. The disease is oftentimes mild but can lead to severe health complications or even death often in combination with underlying conditions especially among elderly. While men are disproportionately hit by the virus, taking care of a sick family member is most often a task for women. Women are also frontline health and social workers\(^3\) putting themselves and their families at health risk and risk of losing their income due to illness. Most of them are also parents and care givers to family members and the high burden of care is likely to increase during the Corona crises. Covering out-of-pocket health expenses for sick family members can drive households into poverty. Furthermore, other health concerns may not get treated as the public health care resources are redirected towards treating Covid-19 patients. Experience from the Ebola outbreak imply that the indirect health effects and deaths can be even more damaging as the outbreak itself\(^4\). The Covid-19 crisis strike societies where many do not have full coverage of essential health services and millions of people are being pushed into extreme poverty because of out-of-pocket health care costs.

Analysing exposure of the poor population to risk factors provides an idea of vulnerable groups. Poverty indicators such as lack of access to safe drinking water, undernutrition that weakens the immune system, and deprivation in clean cooking fuel associated with indoor air pollution and acute respiratory infection increase the risk to contract Covid-19.\(^5\)

**OPPORTUNITIES AND CHOICE – REBUILDING THE RESOURCE BASE**

Opportunities and choice to use and build the resource base are severely restricted during the acute phase of the crisis: jobs are lost, schools are closed, and access to basic services such as health services and health commodities (contraceptives etc) is limited. Households’ ability to build or capitalise on social capital is constrained during the general call for social distancing.

Beyond these immediate effects, the opportunities for a society to recover depends on its initial stage of development. Access to financial services can help to bridge the gap in income both for households and for firms, in which case the loss of income and job opportunities will be temporary. In case of protracted crisis many employment opportunities will be lost for good and firms will need to file for bankruptcy, which leads to human suffering for individuals concerned, and might also have systemic consequences if this influences the stability of the financing institutions.

Access to education and health will be severely restricted during the crisis, which may lead to long-term effects on health and learning, impacting employability and human capabilities also long after the pandemic. Limited access to preventive health care such as vaccination campaigns that are put on hold, and provision of and information about mental health services as well as SRHR and contraceptives may also turn into negative welfare outcomes that become visible first some time after the crisis. As more countries and areas enact closure of schools and childcare facilities to contain the spread of Covid-19, women’s ability to engage in paid work faces extra barriers.

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\(^3\)See e.g. OPHI (2020) “Multidimensional Poverty and COVID-19 Risk Factors: A rapid overview of interlinked deprivations across 5.7 billion people” for a tool to analyse overlapping deprivations and to identify groups vulnerable to Covid-19.

\(^4\)See e.g. Sochas et al (2017) in Health Policy and Planning, Vol 32.

The main difference between resources (what you have) and opportunities (what you can do) is your opportunity to build up your resource-base and make use of your resources. Thus, limited opportunities today will lead to limited resources tomorrow. This is likely to enforce existing inequalities as those who were disadvantaged before the crisis will fall even further behind.

POWER AND VOICE – DEMOCRATIC PARTICIPATION AND VOICE AT STAKE

Many people have seen their human rights being limited in an unprecedented manner during the Corona pandemic also in democratically governed societies. The restrictive measures taken by governments have direct effects on fundamental human rights, such as the right to freedom of movement, expression and assembly, as well as the right to privacy. Governments have introduced temporary limitations on travel, mobility, and gatherings that in many cases are overseen by the police or military. Many countries have revoked special legislation to be used in a ‘state of emergency’ allowing the government far greater powers than what is customary during peacetime. These limitations have made it more difficult for people to participate in decision-making and promote their rights.

In many cases the limitations on human rights have been perceived as legitimate and necessary over a limited period of time. However, any emergency response or other restriction on human rights must be lawful, necessary, proportionate and non-discriminatory, as well as of limited time. In some instances the limitations have had very little to do with fighting the spread of the virus and have been imposed for political reasons.

In most cases, planned elections are disrupted due to Covid-19. Mobility restrictions limit the possibilities for campaigning by political parties, and thus the preconditions for free and fair elections. To date, more than 50 countries have postponed their elections due to the pandemic. Electing political leadership during a time of crises may cement the temporary legislation and provide undue ascendancy for the incumbent.

Also, at the personal level, surveillance of individual movement has become more common. Monitoring movement using data from mobile phones might provide valuable information to contain the spread of the virus but should always be weighed against the danger of violating personal integrity and misuse of data for other purposes. Discrimination, and persecution of dissidents under the cover of Corona pandemic may become more common, limiting people’s ability to exercise their rights and influence decisions of fundamental importance to them.

The Corona pandemic has triggered a surge of misinformation and propaganda for different purposes, by both state and non-state actors. Disinformation leads to increased fear, lack of trust towards the authorities, and risks undermining efforts to combat the pandemic. “Fake news spread more easily than the virus, and can be just as dangerous”, according to the Director General of the WHO (UN Covid-19 Response). Yet, efforts to curb misinformation by limiting access to internet hinders also access to correct information.

HUMAN SECURITY – VIOLENCE INCREASES IN TIMES OF STRESS

Physical, psychological and sexual violence, or threat of such violence, violates basic human rights and integrity. During the Corona pandemic, there has been a surge in domestic violence triggered by increased time spent in lockdowns, increased economic insecurity, and school closures. Interventions against sexual and gender-based violence (GBV) may be hampered as mobility is restricted and police resources are directed at withholding limitations. Different groups are influenced differently by the increase in violence, and groups

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vulnerable to falling into poverty may see their situation deteriorate. Stigma and discrimination increase especially against already vulnerable and stigmatised groups such as people living with HIV. An additional risk during the Covid 19 crisis is that life-saving care and support to GBV survivors (i.e. clinical management of rape and mental health and psycho-social support) may be disrupted when health service providers are overburdened and preoccupied with handling Covid 19 cases.

The impact of the Covid-19 on conflict and human security has been mixed. In some contexts, violent groups have increased their control over their territory, some using public health campaigns and quarantines as a pretext, while in others the crisis has been used as a recruitment opportunity, “better to die a martyr (…) than at home from a virus”. On the other hand, in some conflict areas armed groups have answered to the UN call for a global ceasefire to enable necessary health interventions during “a humanitarian pause”. Yet, this answer has been selective. For instance, in Afghanistan the Taliban agreed to cease-fires in areas under their control, allowing for health-care response and thereby consolidating power, but continuing fighting in contested areas. Such changes in the conflict dynamics have a direct impact on violence, or threat of violence experienced by people living in the communities, and may limit their freedom of mobility or access to services, such as hospitals.

One lesson learned from previous crises is that countries and societies affected by conflict and fragility will have more difficulty handling the crisis than stable countries, leaving the most vulnerable populations in even more difficult situations, especially refugees and internally displaced by conflict. Thus, the COVID-19 pandemic could be seen as a “conflict-multiplier”. People who have had to flee from their homes due to violence or environmental or climate induced threats find themselves in a vulnerable position due to the Corona virus. Refugees in overcrowded camps without access to proper sanitation may be hard hit if Covid 19 starts spreading.

ANALYSING THE IMPACT OF COVID-19 ON DEVELOPMENT CONTEXT

The pandemic is also changing the landscape at the systemic level through its impact on the institutions and the environment in which development takes place. The dynamics of Covid-19 in relation to the context analysis should complement the overall analysis of the country context rather than be seen as a comprehensive poverty analysis.

ECONOMIC AND SOCIAL CONTEXT

The economic landscape is expected to change quite drastically during the crisis with long-term consequences in the future. Most of the leading economies are showing negative short-term growth figures that are likely to spill over to other economies as well. Yet, while the financial crisis hit the Global North hard, many countries in the Global South have in the initial phase been relatively spared from drastic effects as they are less connected to the global financial

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7  https://carnegieendowment.org/2020/04/14/yemen-and-coronavirus-pub-81534
8  https://carnegieendowment.org/2020/04/14/afghanistan-and-coronavirus-pub-81523
markets. The Covid-19 crisis, on the other hand, is likely to have notable effects also in Sida’s partner countries through several channels.

How the domestic economy will respond to the new situation will depend on how diversified the economy is, how integrated it is with other economies, and how the main sectors are affected by the pandemic. While tourism-based economies are likely to suffer, more subsistence farming-based economies may be less affected.

**Trade** will be impacted due to diminished supply as production units shut down, the demand decreases, and transport possibilities are constrained. While closing markets for domestic trade will have direct consequences for people’s lives, slow-down in international trade and global value chains will impact the prices and availability of many necessities, such as food. Thus far, the reduced price of oil has hit the oil producing countries while oil-importers have benefitted from the sudden reduction in their import bill. Yet, lower world market prices on minerals as well as agricultural goods (especially coffee and horticulture) have been very negative for the economies in partner countries through their direct impact on farm incomes. Changes in trade patterns and market prices will also impact the demand for local currencies, and the exchanges rates in many partner countries are expected to deteriorate against stronger currencies as large players tend to prefer ‘safer currencies’ in times of turmoil.

**Tourism and hospitality services**, and by extension the service industry at large, have been heavily hit by the travel ban and closed boarders. Tourism is unlikely to resume in the coming months, which will tax the employment opportunities and inflows of foreign currency in many tourism destinations.

The landscape for **financial flows** to fund development goals has also changed and the inflow of resources is likely to decrease across the board. Incoming remittances will slow down as the employment opportunities in host countries dry out, the overall very volatile flows of foreign direct investments are likely to diminish as capital leaves more risky markets for safer options, and grant financing through **ODA** may go down as the economies in sending countries are squeezed. How each of these flows impact a given country depends on their initial composition of external financial flows, and how the economies they mostly interact with respond to the crisis. Borrowing ones way out of the crisis will also become more difficult as the cost of financing is likely to increase. Countries who are already in high debt-distress may find themselves caught between a rock and a hard place when facing the increased pressure on expansive fiscal policy due to Corona.

The options for governments to replace the decreasing external flows with **domestic resource mobilisation** are slim. In many partner countries the tax base is very narrow, and possibilities to increase tax revenues have only deteriorated due to the ongoing pandemic. As unemployment rates are rising and firms are going bankrupt, the ability to raise more financing from domestic sources becomes more difficult. Low domestic resource mobilisation, decreasing external flows, and restrained fiscal liquidity will also diminish the possibilities for the central government to protect firms and stimulate the economy to kick-start growth after the acute phase of the crisis is over, which may prolong the economic meltdown.

The government structures for **social safety nets** are under heavy pressure during the pandemic. In many countries the coverage of the safety nets and the level of grants were low already pre-Corona and the demand for social assistance is now rapidly increasing. Some governments have introduced other ways to alleviate the situation at the household level by fixing the price of staple food or distributing food for free for the most vulnerable groups (See e.g. early evidence from Rwanda through ODI Country Analyses and Policy Tracker).

Measures taken to protect the poorest groups and the ‘new-poor’ vary from country to another, and the available structures for assistance will form the context for poverty alleviation. Targeting of the economic stimulus packages or social assistance to the poor and vulnerable groups (or lack of thereof) will shape the possibilities to find pathways out of poverty in the new situation.
In many countries, delays due to school closure will need to be caught up at a later stage which requires coordinated measures to revise the curriculum and provide education services possibly over school breaks. The health care systems in many countries are weak and have operated at maximum capacity even prior to the Corona outbreak, which implies that ‘flattening the curve’ to match the capacity of the health care apparatus will not be a realistic option for less-developed countries. Even scarce resources are likely to be transferred to treatment of Covid-19, which weakens the provision of health services overall. For instance, resources for sexual and reproductive health services may be diverted to deal with the outbreak, contributing to a rise in maternal and newborn mortality, increased unmet need for contraception, and increased number of unsafe abortions and sexually transmitted infections. However, extra measures and resources channelled to target specifically the Corona outbreak might provide an opportunity to strengthen parts of the health care provision, as some contra-Corona measures, such as hand-washing and social distancing, are beneficial for a wide range of diseases.

### POLITICAL AND INSTITUTIONAL CONTEXT

There has been a tendency for many countries to ‘gather around the flag’ to fight the crisis. Temporary laws are imposed that may increase the power of the executive branch of government when parliaments but also the judiciary have difficulties operating. This may in turn increase the power of the ruling party. However, the underlying power structures have not necessarily changed, and the allocation of resources and the decision-making processes are likely to continue to favour the groups in power, possibly more so than before, given the stronger mandate given to the incumbent governments to navigate their countries through the crisis. The risk of elite capture during and in the aftermath of the crisis when resources are distributed can be counteracted if allocation criteria are transparent and non-discriminatory and prioritises people living in poverty. Autocratic decision-making might increase during the crisis as many decisions are taken at a rapid pace and the possibility for the media to check the government and the public and civil society to raise their concerns and hold the government to account have weakened due to restrictions on mobility, gatherings, and increased surveillance.

The strength of the institutional framework will be tested during the pandemic. How well the groups living in poverty were integrated in the existing policy frameworks and political priorities will form the starting point for the analysis. Weak capacity of public institutions and civil servants, poorly structured delivery mechanisms, and corruption in decision-making and service provision will all exacerbate in times of stress and weaken the country’s ability to effectively respond to the spread of the virus. Competent domestic institutions and expertise form the basis for a fit-for-purpose adequate emergency response. Should the public sector fail to coordinate its actions, maintain the rule of law, and ensure delivery of basic services, this may have serious implications leading to civil unrest and aggravated direct and indirect consequences of the pandemic.

Also, informal institutions and norms will have an impact on the wider effects of the pandemic on different groups. Women who often take care of the sick and vulnerable might be especially exposed to the virus. In societies where several generations live together and where grandparents participate actively in child-care, protecting the vulnerable populations might not be possible. Socially distancing the elderly may not be conceivable in the normative context where respect for the elderly is highly valued.

### ENVIRONMENTAL CONTEXT

The Corona pandemic has highlighted the interlinkages between environment (including climate change) and development as there is increasing evidence that...

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humanity’s overexploitation of nature through for instance deforestation and other land use changes is one of the factors behind the spread of new diseases. The better we manage nature, the better we manage human health. With business as usual, similar pandemics can be expected also in the future.

In the short run, the drastic slow-down of the economy has brought some positive effects as many unsustainable production factories have been closed bringing pollution levels down which improves environmental and health outcomes and saves lives. On the other hand, the measures taken to deal with the pandemics has led to an increase in clinical waste and the use of single use items and disposables. Lack of proper waste management of clinical waste may pose further health risks for patients, health workers and the public. The outbreak has also provided cover for illegal activities such as deforestation of the Amazon rainforest and poaching in Africa and hindered environmental diplomacy efforts.

In the longer run, many fear that the response beyond the immediate effects of the crisis will be detrimental to the environment if producers try to catch up at any cost. There is also a risk that planned investments on environmental targets will now be redirected to interventions directly related to the Corona-pandemic.

The actions that countries choose to adopt directly after the most acute phase of the crisis will be decisive of how the environmental context will change over time. The paradigm of ‘build back better’ advocates this as an opportunity to replace environmentally unfriendly production and consumption patterns with sustainable structures. The crisis might provide an opportunity to see how prudent management of nature can be part of an economy that fuels green jobs, green growth and a sustainable future.

Yet, while analysing the environmental context in the current phase, it is important to account for environmental risks (including climate change) and opportunities that existed before the crisis. There are no guarantees that a country with high environmental risk profile would not be hit by a climate change induced landslide or flooding that could form a perfect storm when coinciding with the effects of the Corona pandemic. The safety net provided by a rich biodiversity and ecosystem services might increase in value, while the environmental risks may exacerbate during these extraordinary times.

CONFLICT CONTEXT

The impact of Covid-19 on human security in the private sphere was discussed in the previous section, while the impacts at a societal level are changing the development context overall. Rapid increase in poverty and unemployment that is not met by an adequate response by the duty bearers may be a trigger for social unrest that at times may turn violent. General lawlessness may increase in societies with weak rule of law and limited capacity by the authorities that are burdened by the demands of Corona response, such as policing the lock-down and other mobility restrictions. Also armed groups and terrorist organisations may gain new ground as counter-measures are disrupted.

Furthermore, the funding mechanisms and delivery structures that uphold an ongoing conflict may be affected by the overall economic downturn and disruption in financial and material flows. New power structures and shifts may appear as a prolonged effect of the crisis. The restrictions on mobility may also affect refugee populations that now are stuck between a conflict zone and their destination. Consequently, a conflict sensitive approach is imperative in the Covid-19 response.

RESOURCES FOR UNDERSTANDING COVID-19 IN RELATION TO POVERTY

Analysing the situation and development dynamics in a particular country requires context-specific understanding of how the different channels discussed

10 Scientists are though convinced that air pollution is likely worsening COVID-19’s impact, in addition to the wide-ranging health damage it causes on its own

above pan out in the given context. While there is no lack of generic material on Covid-19, not everything is relevant when revising your understanding of the main challenges for poverty reduction. Some resources that might be useful in analysing the impact of Covid-19 for Sida’s partner countries include:

- Thematic overviews of the effect of Covid-19 can be found here.
- A resource library on the economic consequence can be found here.
- Country-specific slides on Covid-19 preparedness and response in Sida’s partner countries can be found here.
- A resource library on the health response can be found here.
- Coordination page for Sida’s work on Covid-19 can be found here.
APPENDIX: GUIDING QUESTIONS ON THE IMPACT OF COVID-19 ON MULTIDIMENSIONAL POVERTY

DIMENSIONS

Resources:
Who has lost their income due to the Corona pandemic either due to lower supply or demand of labor? What sectors have been hit? Differences between formal and informal jobs? Female and male dominated sectors?

How have remittances flows changed due to the pandemic? Who have lost their transfers? Are there stranded migrants in the host/sending community?

Are there new groups of poor, i.e. people who were not poor before the pandemic but have either lost their income or whose income is not enough to cover basic needs due to increase in prices?

Who is covered by social safety nets and/or insurance schemes? Who are not? Are the safety nets sufficient in scope, level, and duration? Who has access to land and ability to farm as a form of safety net?

Whose health has suffered? Who is at risk?

Opportunities and Choice:
Who has access to productive employment?

How has the functioning of the markets been affected? What impact has this had on the prices?

Who has access to health care? How has the provision of health care been affected by the crisis?

How has access to education been affected? Have school feeding programs been discontinued?

Who lacks access to safe water and basic sanitation? Who is more vulnerable for catching the virus due to inadequate provision of basic services?

Who has access to financial services, such as loans?

Power and Voice:
Whose human rights have been violated in the auspices of the crisis? What rights?

Are any groups discriminated with regards to access to health and other services, information, or assistance?

Who has access to information about the pandemic? Is the information unbiased and factually correct?

Who has voice and space to participate in decision-making that affects their lives? Have some groups been restricted due to temporary or new permanent legislation during the crisis?

Who is able to hold the government to account for the response to the pandemic?

Human security:
How has possible lock-downs affected gender-based violence and domestic violence?

How have refugees and IDPs been affected by Covid-19?

Has social, economic and political relationships changed? As a result, could new tensions constitute a risk for violence or conflict??

DEVELOPMENT CONTEXT

What measures is the government employing to contain the virus? Who is affected by these measures and how?

What measures of economic stimulus is the government offering and who is benefitting from these measures? Do the stimulus packages include actions supporting green jobs, green growth and circular economy?

How are the external resources flows (ODA, investments, remittances, trade, and loans) been affected by the crisis?

How has environment and climate related ODA and other financing been affected?

What is the capacity of the health care system to cope with the crisis (including Covid-19 and other diseases)?

What is the structure and capacity of the social safety nets? Are the adequate given the current needs?

How has the political landscape changed due to the pandemic? Have new laws been passed may restrict human rights? How has this affected the power balance?

Are there effective measures to detect and control corruption in the procurement and the provision of health services and stimulus packages?

What are the expected short- and long-term effects of Corona induced policies on environment in the country? Are there possibilities to build back better?

Have the restrictions and economic slow-down caused increased tensions or social upheaval? How has the conflict dynamics changed, if in conflict context?