

# The impact of Covid-19 on the poorest

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ENDING  
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WHATEVER  
IT TAKES

## Research Paper 5 - Volume 1 SIERRA LEONE

While knowledge levels about Covid-19, its causes and symptoms remain high, people face a variety of challenges in adopting the guidelines, in particular the ability to afford facemasks. At the same time, the disease is increasingly perceived as being less of a threat by some interviewed. Already challenging economic conditions have been compounded by restriction introduced to address the spread of Covid-19; food prices remain high, partially attributable to increases in transport costs, while the environment for selling goods is weak. When added to regular seasonal challenges earning a livelihood continues to be difficult for the poorest. We see evidence of this leading to reductions in the quantity and quality of food consumed, and subsequently to the nutritional status of children. Initial fear of attending health centres appears to be dissipating and the re-opening of schools for exam grade children has been well received, though the lack of clarity on when the other classes will return is a cause of frustration. Support to the poorest has been *ad hoc*; many have heard of the plans of the National Commission of Social Action, but nobody interviewed had benefitted from this.

Following the rapid escalation of the Coronavirus disease (Covid-19) in early 2020, it was declared a public health emergency of international concern at the end of January, and a Pandemic on 11 March, by the WHO<sup>1</sup>. By 21 August, there were 1,969 confirmed cases in Sierra Leone and 69 deaths<sup>2</sup> even though there is a sense these figures may underestimate the scale of the pandemic. (Figure 1 shows the cumulative cases and deaths since April).

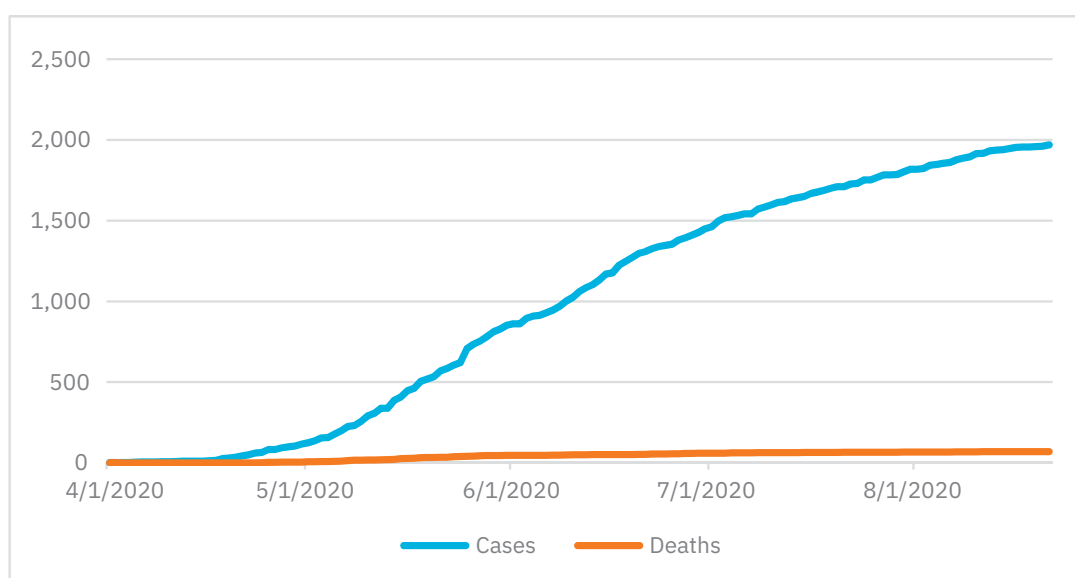


Figure 1 Number of confirmed cases and deaths from Covid-19 in Sierra Leone

The Sierra Leone Government has implemented what is generally perceived as a well-organised national response. Schools were officially closed on 31 March, and other actions included a series of short three-day lockdowns since early April, limitations on inter-district travel (subsequently lifted), a curfew (currently in place from 11 in the evening to six in the morning), and the compulsory wearing of facemasks since 1 June. On 10 July, as part of a partial lifting of restrictions, the president announced that places of worship could reopen and from 13 July, that air travel could resume. Exam classes returned to school on 1 July for four weeks, and schools in general will re-open on 5<sup>th</sup> October 2020.

However, the pandemic is considered to be compounding an economic situation already severely affected by currency depreciation and rampant inflation, with a drop in external and internal demand curtailing economic activity, and containment measures disrupting domestic supply chains and leading to bottlenecks in the transportation of agricultural products. Prices of major food commodities have risen well above their long-term average, and a potential reduction in domestic agricultural production, given a below-average rainfall forecast, in the coming season could lead to further food price increases<sup>3</sup>.

**In this Brief, we examine how the response to Covid-19 in Sierra Leone has affected some of the poorest households in terms of their food security, livelihoods, access to basic health services and the longer-term impacts on children’s education in locations where Concern Worldwide works.**

## Methodology

Face to face interviews were conducted with seven Concern Worldwide programme participants (three men and four women) across three locations – the predominantly rural areas of Tonkolili and Port Loko and the urban area of Freetown. A first round of data was collected between 29 June and 13 July, with a second round of interviews undertaken between the 13 and 17 July and a third between the third and 18 August. A fourth and final round of data collection is planned in late August / early September. This will help to identify any changes respondents are experiencing because of the Covid-19 pandemic and the measures put in place to contain its spread. This data is supplemented with price information on foodstuff collected from five markets in Tonkolili. Respondents were aged between 30 and ‘over 50’. Household composition has remained consistent across the three rounds of data collection in five households; in one of the urban households three relatives have joined, while in one of the households in Port Loko the respondent’s husband had recently travelled to another district to find employment.

## Findings

Amongst the people we spoke to there was a reasonably good understanding of the symptoms of Covid-19 and how it is transmitted, even if there was less clarity on whether it can be cured<sup>4</sup>. A number of respondents attributed their knowledge to information campaigns run by Concern and other agencies, whether through community sensitisation meetings or megaphone messaging in the community, along with radio jingles.

By the third round of data collection in August, it was less clear that all respondents still perceived Covid-19 as a threat. While one woman in Port Loko identified how she had heard on the radio *“that Covid-19 is not yet over”* another in Tonkolili observed that *“the number of Covid-19 cases are reducing that is why they lifted the inter district lock down and now we*

*have access to go to the luma [periodic] market". A general feeling amongst respondents that Covid-19 is reducing in its likely impact has had a more positive effect, in that it is also reducing the levels of fear associated with the restrictions. One man in Tonkolili explained how "[previously] there was this fear in us where they checked our temperature at the checkpoint during the lockdown which stopped us travelling, but now at the checkpoint they no longer check our temperature and people are moving freely".*

We also asked whether people were able to follow the guidelines that they had been provided. Most were able to do so; many have installed hand-washing stations at the household, while others had these as part of the response to the Ebola outbreak (2014-16), and were practising social distancing and avoiding large-scale gathering. In some cases, Concern has provided basic materials, such as Jerry Cans for water and face masks that are helping people to follow the guidelines. One woman from Port Loko described how she has changed her routine and has been *"washing my hands regularly as well as my children. I do not allow my children to mingle or go outside in the public and I use face mask"*. Of slightly more concern is the understanding of one man in Tonkolili that you should *"visit the hospital when you are sick"* rather than quarantine, a point re-emphasised by another respondent who said *"if you are not feeling well we should go to the hospital"*.

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***"Even when watching movies we ensure social distancing, the social distancing is part of us now and sometimes we joke over it "***

*(Female Respondent, Freetown, July 2020)*

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However, where material such as face masks have not been provided, people are forced to make choices in terms of what they will spend their money on, as one older woman in Port Loko highlighted she has to *"prioritize her daily sustenance rather than buying a face mask"*. A further challenge noted in the third round of data collection, in August, was a degree of frustration creeping in to responses, one woman in Port Loko identified how the restrictions and behaviour changes were *"becoming boring"*.

### **Impact on Livelihoods**

As most of our respondents live in rural areas, unsurprisingly farming is the main livelihood source (for four people), albeit often working as labourers for others rather than farming their own land. One person who identified as a farmer also earns an income as a teacher. The other major source of livelihood is petty trading (for three people). However, nobody does only one activity, and those who are farmers sell their produce in the market, with earlier restrictions having an impact on them.

In the first round of interviews, people highlighted how they faced challenges in terms of inter-district movement and being able to buy and sell food, with produce being left to rot, and traders who came to the area previously no longer doing so. One man in Tonkolili highlighted that *"business people used to come to our community but now this is not allowed"*. This situation had improved through July, with one respondent in Tonkolili highlighting how he is now able to *"transport our crops (sweet potatoes and Corn) harvested and our palm nut that has being processed into palm oil to other communities (Freetown) for good sale price"*.

By the time of our third round of data collection in August, some respondents were able to identify further improvements, with one man in Tonkolili describing how *“now the traders do come to our community to sell, they bring plenty of 50kg bags of rice to sell. Before we used to buy a cup of rice in the community at le 2,000 but now because these traders are coming to our community to sell rice we buy 3 cups of rice at le 5,000”*. However, some had not seen changes from when we first spoke to them, and in our August interviews, we also heard how regular seasonal hardships, have been compounded by the Covid-19 restrictions. One woman in Tonkolili told how *“Things are not getting better, they are becoming worse at this time of the year, and even during normal circumstances it is always difficult for us, especially during the rainy seasons . [In dry season]...I make my way [prepare] for this difficult time but the unfortunate part of it was this time we had the Covid-19 in our country.”* Others were more hopeful, with one man saying he was *“hoping for the better as restrictions are being eased up”*.

Those involved as sellers faced similar restrictions in terms of movement and being able to transport goods between districts, while the curfew has meant that those who sell foodstuffs in the urban areas, where the peak time for business is in the two hours before midnight, have been forced to cease trading. Again, some respondents highlighted a small improvement through July and August, though as one trader reported there is *“still a low turnout of customers”*. Another challenge for those who sell is that they have been increasingly forced to provide credit to their customers, as one woman described she *“produces this soap which I give on credit to neighbours and other persons around. With the bad creditors, I barely use the income to buy garri and other condiments to sustain the household.”* This woman, further explained that the best she can hope for is to receive payment after two weeks

Employment opportunities, most often in the form of casual work remain quite limited.

### Changing Prices and Access to Food

All of those we spoke to said that their access to food had decreased over the previous months and was generally described in terms of a reduction in the amount of rice cooked. Respondents clearly attributed this to increases in price – in June, one woman in Tonkolili said the increase for 50kg of rice was from Le150,000 to Le200,000 (though others spoke of it being as high as Le270,000). Other key foodstuffs, such as fish (from Le 10,000 per pile to Le 15,000 per pile), palm oil (from Le 1,000 to Le 2,500) and pepper (from Le 1,500 per cup to Le 3,000 – though one woman in Freetown said it had risen as high as Le8,000) have also increased in price. In some instance, people also highlighted how certain goods, such as fish in Port Loko, were not available in the local market.

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**“ Normally life is difficult during the rainy season, but some commodities like pepper are plentiful in supply, but this time it is worse”**

(Female Respondent, Freetown, August 2020)

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Respondents clearly blamed the inter-district travel restrictions, which made it costly to transport goods, with price increases passed on to the end consumer. In our first round of interviews, respondents also highlighted that where goods were available they were old stocks and not fresh. While the inter district travel restrictions have been lifted, this has not automatically translated into a reversal of price increases. As one respondent in Port

Loko highlighted in mid July when discussing the price of pepper “*sellers said that, they too have been buying it at a very high cost from the producers in addition to moving the commodities through restrictions and checks from security officers coupled with the higher transportation cost*”. Some respondents are hopeful that as “*traders dealing with rice can now move with their goods from one community to the other for sale*” prices will start to fall, though evidence of this is scant, with only one person mentioning that the price of rice had improved by the time of our third round of data collection. In August, we also heard how the quantities people are able to purchase for their money had reduced, while regular seasonal challenges in accessing food have started to affect consumption.

This is consistent with data collected from five markets in Tonkolili (see Figure 2) which shows large price increases over the course of the year, but in particular between May and June<sup>5</sup>.

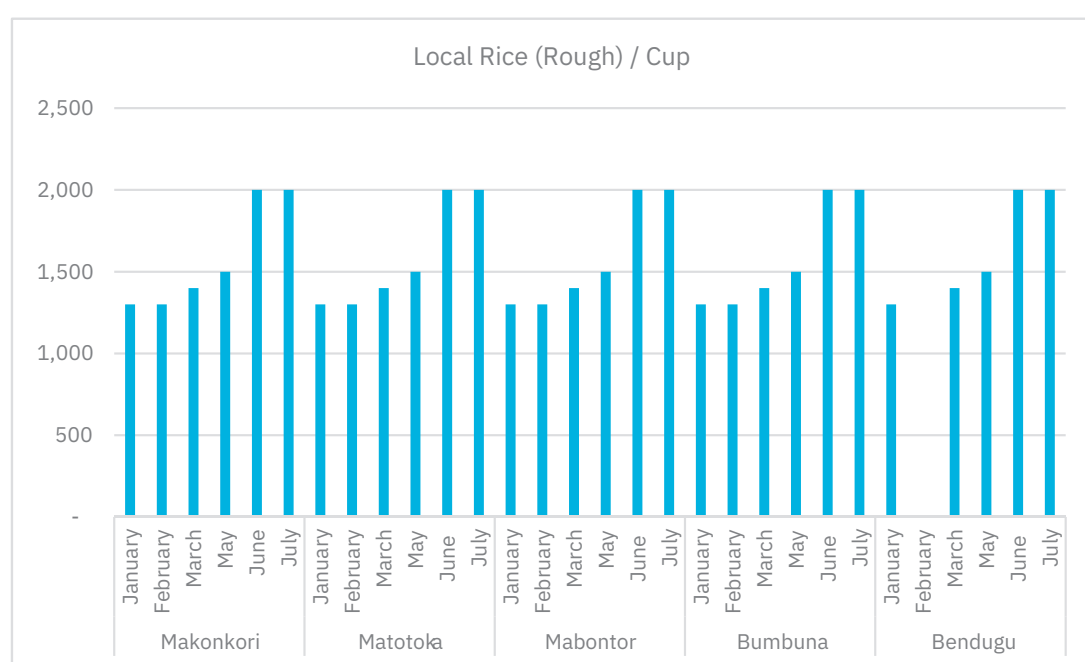


Figure 2 Price of Local Rice (Rough) per cup in five markets in Tonkolili, Sierra Leone (January to July)

These changes in food availability have the potential to translate into changes in nutritional status over time. One woman in Port Loko explained how her “*children are fast losing weight due to insufficient food to eat*”. To a certain extent, this is already being seen in terms of the number of admissions of children with Severe Acute Malnutrition (SAM) recorded by the HMIS in the four district where Concern works (Port Loko, Tonkolili, Western Area Rural (WAR) and Western Area Urban (WAU)). Here there been a 7% increase in April compared to the average for that time of year in 2018 and 2019.

### Accessing health Care

We asked whether the Coronavirus and the lockdown was affecting people’s decision to attend health facilities. Initial responses to this were mixed, with some people quite comfortable attending, though others highlighted how they had seen that “*In the community, the majority are afraid to visit the facility for fear of catching the Covid-19*”. This has had some tragic consequences, with a number of respondents in Tonkolili identifying how people have lost their lives because of not seeking medical assistance. By August, due in part to a reaction to the death of community members from not attending health facilities and a reduction in the levels of fear we could identify a greater sense of comfort in attending health services.

In July, one man in Tonkolili highlighted how his *“wife’s elder brother was seriously sick we wanted to go with him to the hospital but he refused he said if we go with him to the hospital he will contract the Covid-19 in the hospital”*. In late June one woman had described how in Tonkolili *“the lockdown affected my ANC Visit I was supposed to visit the hospital at that time but because of the lockdown I was unable to go”*, further probing revealed that this was because the town chief had asked everyone to stay at home. However, by August this situation had improved for the woman and that now *“every month I go to the hospital for my ANC”*.

Trust in those working in the health facilities emerged as one of the reasons people have attended. One woman described how she was comfortable allowing their family members attend the health facilities, but that this was because she knew the staff in the facility, and that *“she would refuse any vaccination campaign from medical staff that she is not familiar with”*.

The qualitative responses are in line with earlier analysis undertaken on data from Sierra Leone’s HMIS (Health Management Information System) in Concern’s four programme areas. This showed attendance at health facilities for a variety of services in March and April to be considerably below the average for the same months in the previous two years, this is despite the January and February figures being above the average for 2018 and 2019. For Ante Natal Care (ANC1), this figure was 8% below last years, for facility deliveries it was 12% lower, for Post Natal Care (PNC1) it was 21% lower and for measles vaccinations it was 30% lower in April, and 14% lower in March.

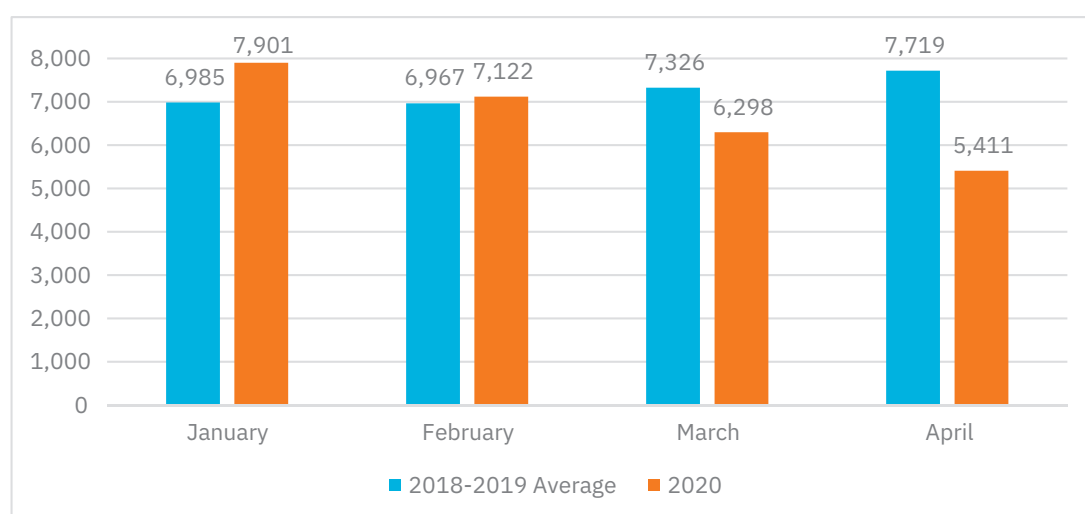


Figure 3 Measles 1 Vaccinations, 2020 Vs average for 2018 and 2019

Source: HMIS Data, Port Loko, Tonkolili, WAR and WAU

## Education and Children

One of the biggest changes between the first two rounds of data collection was the reopening of schools for children who were scheduled to take exams. While this was generally welcomed as a means of allowing children progress to their next level of education, those we spoke to did not identify whether they expected the gap in their access to schooling would have a negative impact on their ability to perform in the exams. The following statement from one of the men interviewed in Tonkolili in August was illustrative of the responses we did receive *“The reopening of school has impacted our kids positively as they are all getting to engage with school work and they are more occupied with preparing for the exams.”* Another man identified how *“my children have started going to school again and I am no longer worried because I know where they are now”*.



However, respondents did identify that the impact of school closures has been deep and potentially long lasting. One woman in Port Loko highlighted how her *“children are just seated at home without having someone to take them for lessons which means they are losing their ideas”*, another man in Tonkolili highlighted how the closure of school has *“affected their education and the opportunity for them to learn new things”*.

Opportunities available to better off members of society to provide education for their children are not there for all, as one woman highlighted *“The kids have been forced to sit at home without attending school and not every parent is capable of affording a private teacher to tutor pupils”*. Similarly, a man in Tonkolili described how *“he cannot provide radio or internet for them to learn more.”* While carers encourage them to listen to the radio education programme, children have struggled to maintain their attention, as one woman highlighted they *“quit because they are hungry”*. One respondent in Freetown further identified how *“it is normally difficult to teach children when they are in the classroom with blackboards in front of them Radio learning is less effective”*. Parents have tried to support their children, but face challenges, one woman explained, *“I have been studying them with my little knowledge that I gained in class six as my highest education level”*.

The issue of pregnancy amongst teenage girls, attributed by respondents to them not being in school, was raised frequently by female respondents (men, even when probed, did not identify this as a major issue). One woman described the inequitable power relation between younger girls and older men, and how *“the girl child is vulnerable to [older] men who seek them out”*. Another woman highlighted how *“Parents fear their female daughter to be a victim of early teenage pregnancy ... once the caregiver goes out to make ends meet, the girl child will be persuaded by their male counterpart to engage in sexual activities”*. Another highlighted how she had not seen this yet, but expected it to be exposed over time.

### Other Impacts

In terms of who is feeling the burden of Covid-19 related restrictions the most, women clearly feel it is they; one woman in Port Loko highlighted how men *“try to go out and relax leaving the rest of the household members in a hungry state. Women are left with the children with plenty of questions to answer from the kids such as “grandma, when are we going to cook today”*. Another from the same district highlighted *“Before, my husband was championing the bread winning but since the Covid-19, everything collapsed except me that goes around to find means of survival ... They just leave the house in the morning and come in the evening leaving us with the stress from children”*. One man from Tonkolili claimed that it is the men who suffer the most as *“the burden is heavier as all the family members just depend on him”*. Another man from the same area pointed out that *“the home is no longer peaceful”*, which he attributed to the stress of having no income or food in the house.

Respondents were also able to share some of the additional stories they had heard in connection to Covid-19. One of the women interviewed in Port Loko explained how *“because of the hardship during this Covid-19, somebody committed suicide in Port Loko town”*. Another respondent identified how she had heard that *“the police and soldier men are flogging people around town who do not wear their face masks”*.

The most frequent impact identified at community level was that there were no more meetings or sport gatherings. A number of people also spoke about how traditional community support systems are being put under pressure. One woman spoke about how *“community members do not have enough let alone to support other neighbours. Due to the*

*hard conditions, no one cares about their neighbour as everyone is busy fending for daily survival.” Others spoke of how they “rarely had time to socialise with community people especially during this pandemic”.*

We also asked about whether the pandemic was forcing people to move to or from the area. Initially nobody identified this was the case, though with further probing one man in Tonkolili identified how *“a few people returned from the big town and another district to be with their family to help them sustain their livelihood during this difficult time”*. Another man in Tonkolili identified how they *“still have people in our community that came from Kono District, Kailahun District and Guinea, they were trapped in our community during the lockdown but until now, they found it difficult to return because of transportation.”*

### How are people coping?

We asked people how they were coping with the challenges they faced because of the lockdown. The immediate impact of the loss of income and the increased prices of foodstuff is that many have reduced the amount of food they are consuming. A number have sold household assets, such as solar lights and batteries, radios and traditional garments; however all who have done this complain that the price they received was not a fair one, while others say even if they wanted to sell something there is nobody to buy anything from them in the community. In August, we heard from a number of respondents how people in their community are starting to sell their previously harvested yield, while others have gone so far as to start to divest their capital assets from their small businesses.

Money is being borrowed from Village Savings and Loans Associations (VSLAs), to be repaid once harvests come in; however, this is based on people being able to sell their harvest. Other people are borrowing from their neighbours, in general without any interest, though one woman we spoke to highlighted how she is expected to pay up to 80% in interest.

Most of the support that has been received is in the form of handwashing stations. Only two people highlighted receiving support in the form of food – one from a community philanthropist and one from the national food basket programme. While both described this support as being welcome, they also highlighted it was insufficient. In August, four of our seven interviewees identified the proposed interventions of the National Commission of Social Action, identifying that this is to be given to help *“people to start up business”*. However, nobody we spoke to had benefitted from this and were disgruntled in terms of how the assistance was provided, while another man identified how *“the support has not yet been given to the community people”*.

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**“I have not received any support from anybody including my relatives as they are in fact staying far away from me.”**

(Female Respondent, Port Loko, July 2020)

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In terms of help from extended families and relatives living outside the community, this has stopped entirely. One respondent in Tonkolili highlighted how his *“brother used to send money for us but because of Covid-19, he has being laid off from work “*, another woman from Tonkolili highlighted that *“our relatives that stays in the big towns that used to send support from us are no longer sending because they are out of jobs now”*



While many of those we spoke to looked for assistance in terms of food or cash to help address their immediate needs. Looking to the future, many spoke of the need for assistance to help them rebuild their lives, including support to establish a small business in the form of microcredit or capital, or to provide farming tools and seeds. Other highlighted the need for cash transfers to assist with ensuring children are equipped to go back to school.

## Conclusion and Policy Asks

After five months of disruption, households are beginning to feel the economic impact of Covid-19, compounded by usual seasonal challenges, and while health issues remain important, attention needs to be given to addressing some of the secondary impacts. Based on the interviews conducted in June and July we recommend:

1. Continued awareness raising campaigns relating to transmission and prevention and the need to put knowledge into practice in a language that people can understand. A single campaign is not sufficient to reach all community members and combat misinformation.
2. Even basic interventions, such as mask distributions, need to incorporate means to make sure they reach the poorest, they are the ones who are having to make life altering decisions on whether to spend their meagre resources on protective equipment, like masks, or food.
3. Support to ensure families have the means to feed their children to prevent them from becoming malnourished and to protect their health. Cash assistance to urban and peri-urban communities with no other means of earning a living must be prioritised; in Sierra Leone, cash transfers provide a viable option as the supply market for food, and basic necessities is still functioning.
4. There is going to be a great need to 'catch-up' on certain key services, such as vaccinations (in health) and the loss of four months education. Response plans need to start thinking these through.
5. Beyond the immediate response, ensure a focus on scaling up activities to promote sustainable livelihoods as part of the economic recovery. There is an opportunity now to provide vulnerable groups with support to develop new skills and livelihoods.

## (Endnotes)

1. WHO Timeline – Covid-19 available at <https://www.who.int/news-room/detail/27-04-2020-who-timeline---covid-19>
2. <https://coronavirus.jhu.edu/map.html>
3. FAO and WFP. 2020. FAO-WFP early warning analysis of acute food insecurity hotspots: July 2020. Rome. <https://doi.org/10.4060/cb0258en>
4. This high level of knowledge is consistent with findings from a nationwide survey undertaken in April that showed nearly 98 percent of respondents heard of the virus and 80 percent correctly named coughing as a symptom, though nearly half of respondents (43 percent) didn't know fever is a symptom, and only 15 percent said they would self-isolate if they or a family member caught the virus or showed symptoms. <http://news.mit.edu/2020/informing-covid-19-preparedness-sierra-leone-0513>
5. This is consistent with WFP's national level findings that The price of local rice has increased by 12% from Q1 (Jan-Mar 2020) to Q2 (Apr-Jun 2020) and is 56.7% higher than the same month last year (Jun 2019); imported rice increase by 7% between Q1 and Q2 of 2020, with a 47.5% year-on-year increase by June.

This report has been produced by Isaac Gahungu and Liam Kavanagh of Concern Worldwide Sierra Leone and Chris Pain of Concern's Strategy, Advocacy and Learning Department. It has been produced as part of a series of briefings on the impact of Covid-19, and the responses implemented in a variety of countries, on the world's poorest,.

More information on this programme of research is available at <https://www.concern.net/insights/covid-19-research>

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