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Gender and Socio-Economic Impact Assessments of COVID – 19 Pandemic in Juba Municipality, South Sudan

Prepared by: **University of Juba-** Technical Multidisciplinary Sub-Committee for COVID-19 Prevention and Response

In Partnership with United Nations Development Programme (UNDP)

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Contents

Abbreviations and Acronyms

COVID- 19	Corona Virus Disease 2019
CSOs	Civil Society Organizations
HLTF	High Level Task Force
MGCSW	Ministry of Gender, Child and Social Welfare
MOH	Ministry of Health
POC	Protection of Civilians
TCSS	Transitional Constitution of South Sudan
WHO	World Health Organization

EXECUTIVE SUMMARY

In partnership with UNDP- PaCC Project, the University of Juba Technical Multi-Disciplinary Sub-Committee on COVID-19 pandemic response conducted a rapid assessment to determine the gender and socio-economic impact of the disease on South Sudanese. The novel COVID-19 pandemic has infected over three million people, with over two hundred thousand deaths globally. With a weak and fragile health system, the emergence of COVID-19 pandemic is likely going to inflict heavy social-economics and human pain.

The random sampling technique was used to assess the impact of the disease through interviews with household heads and key informants and through market surveys with retailers in Juba Municipality. Subsequently, data generated were subjected to descriptive statistical analysis. The Assessment took place from 7th to 11th April 2020 the time when the Government of South Sudan had already instituted preventive measures intended to curb the spread of the COVID-19 pandemic. All educational institutions were closed, public gatherings and religious congregations were banned, and people were advised to observe social distancing. Businesses selling non-essential goods were also closed, and public buses operating in the national capital were ordered to carry half their capacity. The only exception to these restrictions were businesses selling food commodities, restaurants, pharmaceuticals and fuel stations. Not only had such measures caused increases in prices of food commodities and transportation fares; but had also impacted negatively on low-income families and increased the burden on women and youth.

Findings from the rapid assessment offers an in-depth understanding of the current situation, risks and important implications for combating the COVID-19 pandemic.

- About 72 percent of the household heads without educational qualification are women. The high level of illiteracy among women is likely to increase their vulnerability to infection by the coronavirus due to limited knowledge and ability comply to preventive measures;
- Women as care givers, heads of households, and fall predominantly in the self-employed/informal category 91 percent and own fewer assets. Generally, women and youth have been affected by COVID -19 measures due to few alternative livelihood opportunities;
- Households are under significant strain due to loss of income. Many people employed with non-essential businesses have not received wages since their businesses closed and they were sent home.
- Most houses in Juba are overcrowded with an average size of 8 and 12 persons. This not only increases burden to the families which are currently not working, but has increased the care burden for children, elderly and sick persons; and is seriously undermining social distancing measure because several people are still sharing sleeping rooms, eat or sit together in a compound
- There is generally high level of awareness about the spread of COVID-19 and clarity on the guidelines put out by the Ministry of Health, in which 68.9 percent of respondents admitted that the measures were appropriate.
- Yet, in the absence of alternative sources of income to the families, there is non-compliance and negligence. Others remain skeptical about their effectiveness and would rather go about

doing their normal economic activities. Staying at home could mean imminent death from hunger, as many, particularly, women and youth who rely on 'hand-to-mouth cash' ought to go out to work sustain their families;

- Number of people who can afford one meal per day has increased from 33.4 percent in February to 64.2 percent in April; Humanitarian and relief services are needed across the country including in Juba where many people employed in formal sectors have not received wages in the past six months;
- Over 69 percent of households have inadequate food as a result of COVID-19 measures.
- There is increased antisocial behavior alongside stigmatization, trauma and fear of isolation. This may limit the number of people reporting cases of diseases or come forward for test and response;
- The impact of COVID-19 measures offers an opportunity for South Sudan to re-examine its fiscal and economic-policy priorities, build stronger health and social sectors.

Key Recommendations

1. Intensify sensitization and awareness raising at national and grassroots levels in response to COVID-19;
2. Prioritize investment on the health sector by ensuring resources (human and financial) are available for the medical response;
3. Balance between COVID-19 policy response measures with livelihood;
4. Implementation of key activities in the peace process should continue, as strengthening social cohesion is essential for the COVID 19 response.
5. Continuing economic reform is vital for the economic stabilization and recovery from the impact of COVID 19.
6. Provide social safety net to alleviate the impact on hard hit and vulnerable populations. Safety net programs should be coordinated to prioritize food and target vulnerable women and youth who are most affected by COVID 19.
7. Alternative livelihood opportunities should be considered for vulnerable populations who have lost livelihoods
8. Maintain a national approach to the COVID 19 response. This entails involvement of the whole of Government, whole of community, academia, private sectors, Donors and other development partners;
9. Active involvement of communities, Donors and other development partners by consulting them when designing COVID-19 prevention measures;
10. Support universities to research and draft clear guidelines on implementation of High-Level Taskforce policies on COVID-19 response;
11. Undertake Gender and Socio-Economic impact assessment in other states to identify the type of interventions needed by vulnerable groups for relief and recovery;
12. Pursue economic reforms for stabilization and recovery; provision of social safety nets and Economic stimulus; and
13. Support Universities to research and draft clear guidelines on implementation of High-Level Taskforce policies on COVID-19 response.

1.0 INTRODUCTION

The Novel Corona Virus Pneumonia (COVID-19) outbreak was reported to have originated from a seafood and wild food wet market in the city of Wuhan – China in December 2019 (WHO Situational Report 2020). Then, it engulfed the whole of China, and in less than three months it spread across all the continents. On March the 11th 2020, World Health Organization (WHO), declared this novel COVID-19 outbreak as a pandemic infectious disease and a global emergency. As of April 30th, 2020, the COVID-19 pandemic had infected over two and a half million people, with over one hundred and eighty thousand deaths and, over seven hundred and twenty-nine thousand recoveries.

COVID-19 affects all people, irrespective of age, race, gender, social status and economic background; and in the absence of vaccine or treatment, COVID-19 is likely to continue claiming more lives unabatedly, while it unleashes devastation on the world economies and human development. Several sources have predicted a fall in global growth and that global economy may enter into a recession in the first half of 2020 due to the COVID-19 pandemic. According to Howell and Mobarak (2020) measures such as Social distancing can save lives in rich countries by flattening the curve of infections and reduce pressure on health systems. Yet, delaying infections is not as useful in countries where the limited number of hospital beds and ventilators are already overwhelmed and not accessible to most.

While the pandemic has already claimed numerous lives, its emergence particularly in Africa where more than 52 countries have now confirmed cases of COVID-19, the epidemic is seen as another wake-up call for improving weak infrastructures and health facilities as well as institutional capacity of education, water and sanitation, power and establishment of national social security and protection system. Similarly, the pandemic calls for urgent need to strengthen data and statistical capacity, notably in relation to health and civil registration.

In terms of economic development, the pandemic's global outreach is already foreseen to have widened inequalities within and between countries, worsen already existing fragilities, and restrict employment and investment prospects (Ravallion 2020; Glassman *et al* 2020). Such situation is likely going to deter the economic growth of Africa and it might take years to recover if judicious measures are not in place.

With a very informal and vulnerable economy, the COVID-19 pandemic could not have come to Republic of South Sudan at the wrong time, where the health system is very weak. Unquestionably, the COVID-19 pandemic has not only imposed heavy human, financial, economic, and social costs as noted elsewhere (Monga 2020), but its impacts has created an opportunity for South Sudan to re-examine its fiscal and economic-policy priorities, build stronger health and social sectors, and establish oil fund to support productive investments, if the country is to recover and thrive.

Like other countries in the region, the Republic of South Sudan, with 45 cases of COVID-19 confirmed 1st May 2020, has already embarked on various measures aimed at preventing infection and transmission of the disease commensurate with the WHO recommendations. Some of these measures include: enforcement of social-distancing, banning of social gatherings

and religious congregations, international flights and freighting restrictions, night curfew, closing of businesses providing non-essential services, and banning of movement -inter and intra state and across international borders. Massive awareness raising through media houses and distribution of hygienic materials among poor and vulnerable communities are some of the campaign activities going on.

In addition to these initiatives and in recognition of the role played by academia conducting research and analysis to inform community outreach programmes and policy-making bodies, the University of Juba –established the High Level and Technical Task Force on COVID-19 prevention and response. The High-level Task Force has two seats in the National High-level Task Force which is chaired by the President of the Republic of South Sudan. As a non-partisan and neutral body, the task force is an important body that is able to link, advise and communicate about the various pro-poor policies and interventions done outside the political arena.

Despite the significance of these precautionary measures taken by various institutions, there are socio-economic, cultural and political consequences that may not only destabilize the economy but may also result in social devastation, food insecurity and malnutrition, as well as create unrest and upheaval, especially now that the country is institutionally less equipped to cope and manage risk and disasters posed by the COVID-19 pandemic. Currently, there is disatisfaction among the communities with respect to social distancing. This is in line with what Howell and Mobarak (2020) observed elsewhere that although Social distancing lowers disease risk by limiting people's economic opportunities, poorer people are reluctant to take such economic sacrifices. The livelihood is given more priority than the risk of contracting coronavirus.

> "If government says stay at home (lockdown), people will obey. But staying at home could also mean dying of hunger instead of dying of Coronavirus disease which at the end will push people to go out" Respondent # 50

It is against that background the University of Juba- Technical- Multi-disciplinary Sub-Committee on prevention and response on COVID-19, with the support of UNDP-PaCC Project, carried out assessment to determine the gender and socio-economic impact of the pandemic on the livelihood of people in South Sudan.

1.1 Overall Objective

The overall goal of the assessment was to conduct gender and socio-economic impact of the COVID-19 pandemic on the livelihoods of South Sudanese with a particular focus on the unique needs, capacities, vulnerabilities and opportunities for women, girls, men and boys.

1.2 Specific Objectives

The specific objectives of the assessment were to:

1- Identify the available information and regulations adopted by the Government for prevention and response to COVID-19 pandemic;

2- Determine the gendered impact of COVID-19 across economic sectors, Water Sanitation and Health (WASH), Food security, and other formal and informal sectors;
3- Identify gender responsive interventions for the livelihood of South Sudanese;
4- Appraise interventions and socioeconomic mechanisms vis-a-vis COVID-19 pandemic emergency and cautionary measures, and to
5- Assess knowledge, attitude and practices (KAP), as well as perception of members of households towards COVID-19 prevention, response and care for the affected households;
6- Provide programmatic and policy recommendations for effective service delivery and recovery across sectors.

1.3 Key Observations

1. Disruption of community and social cohesion (religious gathering, community meetings, burial, funerals and social events);
2. Disruption of general education process, knowledge generation and information sharing;
3. When the COVID-19 containment measures were announced, the government negotiated access for essential items (food, fuel and medicine) with neighbors. The proactive move has ensured the availability of supplies in the market;
4. The impact of COVID-19 measures offers an opportunity for South Sudan to re-examine its fiscal and economic-policy priorities, build stronger health and social sectors, and establish oil fund to support productive investments for it to recover and thrive;
5. COVID-19 measures have increased the transaction cost of getting supplies into the country, resulting in a rise in the cost of commodities in various markets and doubled transportation cost;
6. COVID-19 has increased the number of households (69 percent) with inadequate food compared to a smaller number (31 percent) who have sufficient food
7. Overall, women are disproportionately affected by COVID-19. Women as care givers, heads of households, and fall predominantly in the self-employed/informal category and own fewer assets (commercial and non-commercial);
8. Vulnerable populations most affected by COVID-19 measures (women and youth in general) have few alternative livelihood opportunities;
9. Rise in antisocial behavior alongside stigmatization, trauma and fear of isolation;
10. Households are under significant strain due to loss of income. Many people employed with non-essential businesses have not received wages since their businesses closed and they were sent home. Government, which is the largest employer in the formal sector, is Six months behind (as of April 2020) with salary arrears.
11. Overpopulated institutions, and residential areas, i.e. prison, POC sites, hospital and hostels poses a high-risk area for COVID-19 infection;
12. COVID- 19 spread could increase faster due to internal migration and community practices, such as group living/eating or sleeping together;
13. Communities are relatively informed on COVID-19 but living conditions limit their application of the guidelines on prevention resulting in non-conformity to rules and regulations, and

14. There exist myths and beliefs which may affect containment measures negatively.

1.4 Implications

1. Rising food insecurity is likely to increase reliance on humanitarian and relief assistance;
2. Increase in prices of goods and services (such as transport) have left households vulnerable and exposed without any safety net;
3. Youth unemployment is likely to increase. Young people earn their living mostly in the informal sector (*BodaBoda* riders; day laborers at construction sites, baggage carriers at airport and markets, etc). COVID 19 containment measures have negatively affected the livelihoods of many young people who are daily wage earners. A protracted crisis could see some youth resort to undesirable coping mechanisms including theft, violence and prostitution;
4. Voluntary repatriation of refugees and IDPs will likely be delayed in the absence of resources and interstate and intrastate suspension of movement;
5. Continued and sustained strain on households presents a risk of social unrest; non-compliance to stay at home measure;
6. COVID-19 response measures - quarantine, curfews, and transport restrictions have contributed to a slowdown in economic activity, which is already adversely impacting on a very fragile economy;

2.0 METHODOLOGY

The impact assessment was conducted in April 2020 and data collection held from 7th to 11th April 2020 using the existing sampling frame developed by National Bureau of Statistics. Four main methods were employed that include desk review of policies, regulations and reports; Household surveys, Key Informant Interviews (KIIs) and observation. Face to face interviews were conducted with the household heads in appropriate, safe places while ensuring non-discriminatory participation of any respondents - men and women. This included obtaining free and informed consent and withdrawal.

By using standard statistical sampling techniques for household surveys, a probability random sampling was used to select three blocks for enumeration from Juba Municipality. Subsequently, a total of 900 households were randomly selected, namely: Juba, Kator and Munuki which are old suburbs as illustrated in (Table 1) below. The recently established suburbs that might host most vulnerable people were excluded in the rapid assessment due to time, resource constrains and mobility to reach to those areas at the time when the government had already issued lockdown and stay at home measures[1]. It must also be noted that residents from the new suburbs get their supplies from the 5 main markets.

[1] Note that the most recent suburbs like Gudele, Mia-Saba, New Site, Sherikat-Gumbo, Hai Referendum, Khor William were excluded in the rapid assessment due to restrictive policy measures.

Then, 300 households per each quarter were interviewed. A total of 851 household were reached through household survey, yielding a non-response rate of 5 percent which is statistically acceptable.

Table 1: Juba Municipality, Households by Sampled Blocks

S. No	Blocks	Planned Sample Size	Actual interviews
	Juba	300	297
	a. Juba Nabari East	100	95
	b. Juba Nabari West	100	101
	c. Gabat	100	101
2.	**Kator**	300	301
	a. Kator Centre	100	102
	b. Kator East	100	98
	c. Kator South	100	101
3.	**Munuki**	300	253
	a. Munuki	100	128
	b. Rock City	100	60
	c. Mauna	100	65
Total Samples		**900**	**851***

***** Note that non-response rate was 5%

To assess the current economic situation and the impact of COVID-19 on the informal sectors, a rapid market survey was conducted in 5 major markets within Juba municipality (Table 2). These markets bring together suppliers across the borders and from within Juba Municipality. There are also various categories of businesses taking place both whole sale and retail sale. A total of 292 business working on (cereal and basic food commodity, cooking energy, vegetables and fruits, Transport and ware houses) categories were interviewed, ranging from those registered and with space to those displaying their food communities on the ground.

Table 2: Percentage Distributions of Respondents in Various Markets in Juba Municipality

S. No	Markets	Samples Size (350)	Respondents (292)
1.	**Konyokonyo**	**70**	**69**
	a. Cereal and Basic Food Commodity Retailers	15	14
	b. Cooking Fuel	3	3
	c. Vegetables, Fruits and Tea Vendors, 10 each	30	30
	d. Transport: Bonga, Mini-Bus and Raksha, 3 each	9	9
	e. Warehouse/Store/Wholesales	13	11
2.	**Customs**	**70**	**49**
	a. Cereal and Basic Food Commodity Retailers	15	15
	b. Cooking Fuel	3	3
	c. Vegetables, Fruits and Tea Vendors, 10 each	30	21
	d. Transport: Bonga, Mini-Bus and Raksha, 3 each	9	10
	e. Warehouse/Store/Wholesales	13	0

3.	**Jebel**	**70**	**32**
	a. Cereal and Basic Food Commodity Retailers	15	14
	b. Cooking Fuel	3	3
	c. Vegetables, Fruits and Tea Vendors, 10 each	30	14
	d. Transport: Bonga, Mini-Bus and Raksha, 3 each	9	1
	e. Warehouse/Store/Wholesales	13	
4.	**Munuki**	**70**	**70**
	a. Cereal and Basic Food Commodity Retailers	15	17
	b. Cooking Fuel	3	3
	c. Vegetables, Fruits and Tea Vendors, 10 each	30	30
	d. Transport: Bonga, Mini-Bus and Raksha, 3 each	9	9
	e. Warehouse/Store/Wholesales	13	11
5.	**Gudele**	**70**	**72**
	a. Cereal and Basic Food Commodity Retailers	15	15
	b. Cooking Fuel	3	3
	c. Vegetables, Fruits and Tea Vendors, 10 each	30	25
	d. Transport: Bonga, Mini-Bus and Raksha, 3 each	9	9
	e. Warehouse/Store/Wholesales	13	20

*83 percent of the sample were interviewed. The remaining 17 percent of the business entrepreneurs could not be found in the market due to the restrictions imposed on their operations.

Ten key informant interviews were conducted with key persons in the Ministries of Health, Humanitarian Affairs, Gender Child and Social Welfare, Commerce and Water; CSOs, FBOs, NGOs, Business Entrepreneurs, UN Agencies Agencies- UNDP, WFP and FAO. The policy-makers were selected based on their roles during the pandemic, experience, knowledge and willingness to contribute information (Kothari 2005).

A team of 20 trained enumerators and 2 supervisors were engaged in the process to generate the data using the CAPI/Tablets. The data were then subjected to descriptive statistical analysis using the Statistical Package for Social Sciences (SPSS) and EXCEL soft wares.

3.0 RESULTS AND DISCUSSION

HOUSEHOLD ASSESSMENT

A sample size of 900 households was chosen, out of which 851 responded. Table 1 shows the distribution of selected households by neighbourhood in all the three blocks of Juba Municipality that were covered in the assessment survey.

3.1 Household Demographic Characteristics

The assessments considered basic demographic information about the household heads particularly gender, age, marital status and education level. 47 percent of the household heads interviewed were females while 53 percent were male (Table 3). Kator block offered more responses than the other blocks with an excess of 1 additional respondent. This means that there is a significant number of households managed by women.

Table 3: Distribution of Interviewed Household Heads by Block and Gender.

Block	Respondents distributions by gender		
	Female	**Male**	**Total**
Juba	**155**	**142**	**297**
Gabat	59	42	101
Juba Nabari East	37	58	95
Juba Nabari West	59	42	101
Kator	**140**	**161**	**301**
Kator Centre	44	58	102
Kator East	47	51	98
Kator South	49	52	101
Munuki	**105**	**148**	**253**
Mauna	35	30	65
Munuki	51	77	128
Rock City	19	41	60
Grand Total	**400**	**451**	**851**

Both Table 4 and Figure 1, show the distribution of the household heads by age and gender. In regard to age, 60 percent of the household heads were between 25-45 years old. This in line with the National Bureau of Statistics Data that indicate that the population in South Sudan in very young. The results further show that 35 percent of the household heads in this age group were females and 28 percent were males. Being most vulnerable in the society, this particular group is suffering the most because the lost income and inflation is eating up their already limited purchasing power. Women are feeling this brunt. The least age and gender distributions was seen in the interval of 55-65 years where 11% and 8% of household heads were males and females respectively. In relation to COVID-19 age related factors, it is argued that the young population are more likely going to recover from the disease compared to the elderly from 60 and above.

Table 4: Distribution of the Household Heads by Age and Gender

Age	Age and gender of household heads		
	Females	**Males**	**Total**
< 25 years	12.8	3.8	8.0
25 - 35 years	35.0	27.6	31.1
35 - 45 years	25.3	32.4	29.1
45 - 55 years	15.5	20.4	18.1
55 - 65 years	8.0	10.7	9.4
> 65 years	3.5	5.1	4.4
Total	100	100	100

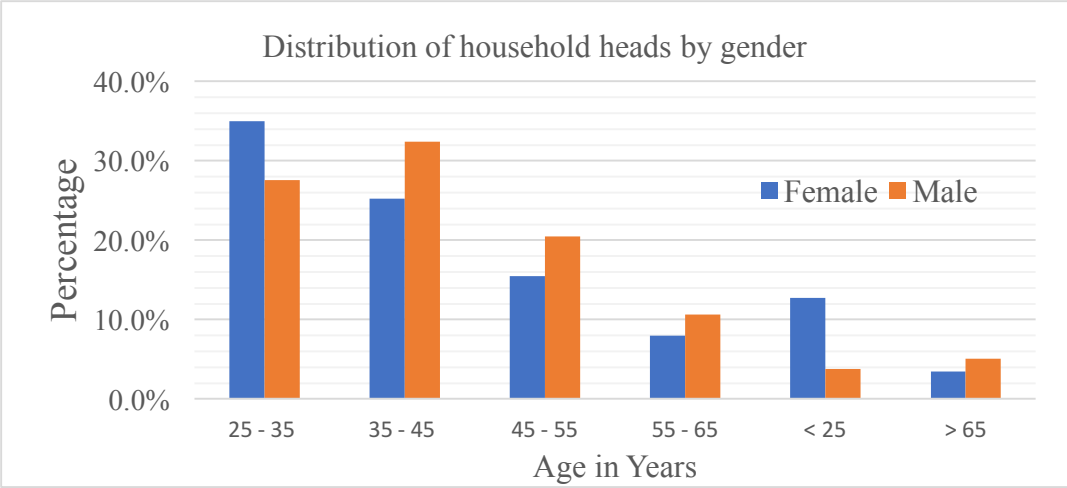


Figure 1: Distribution of the Household Heads by Age and Gender

The percentage distributions of household heads by marital status are presented in Table 5. As far as marital status of the respondents is concerned, the results show that, 83.4 percent of the household heads are married, 16.6 percent are either divorced, separated or widowed and 8 percent are single. Whereas there are more married women, Table 1 indicated that 47 percent of the female were head of households. This suggests that there were only female respondents in the household at the time of survey or females respondents even though they were married, they were the main bread winner supporting the family.

Table 5: Percentage Distributions of Household Heads by Marital Status.

Marital Status	Female	Male	Total	Total
Divorced	33.3	66.7	100	1.1
Married	45.6	54.4	100	83.4
Separated	57.9	42.1	100	2.2
Single	35.3	64.7	100	8.0
Widow	93.9	6.1	100	3.9
Widower	58.3	41.7	100	
Total	47.0		100	

The percentage distributions of household heads by educational level and gender are presented in Table 6. Concerning educational background, the results show that only 14.1 percent of the household heads have no education, whereas 72 and 28 percent of those with no educational qualification are female and male respectively.

The report also shows that the highest proportion of illiterate female household heads indicates that women are at a higher risk of infection by the COVID-19 pandemic due to ignorance and inability to access and understand information about prevention and protection. The education levels of household heads can be advantageous when it comes to dissemination of COVID-19 preventive or precautionary measures as well as ability to make independent decision with regard to negative practices that predispose someone to disease. However, the results reveal

that 85.9 percent of the household heads are educated. This tends to deviate from the documented national literacy status, probably because data was collected from urban areas – national capital where there is higher level of awareness and access to information and education compared to rural areas.

Table 6: Percentage Distributions of Household Heads by Education Level and Gender

Education Level	Females	Males	Total	Total
No Education	71.7	28.3	100	**14.1**
Primary Level	64.2	35.8	100	**23.6**
Secondary School Level	47.9	52.1	100	**31.2**
Technical School Level	14.5	85.5	100	**7.3**
University Level	24.3	75.7	100.	**23.8**
Total	**47.1**	**52.9**	**100**	**100**

The percentage distribution of the households by size and gender of its members, and population density per compound are presented in Tables 7 and 8, respectively, as well as in Figures 2 and 3. The mean density is 8 persons per household and 12 persons per compound. However, finding indicates that the area with highest density in Juba Municipality is Juba Nabari East with about 27 persons per a compound- almost three times the size of the ordinary household compared to other areas. Comparatively, plot sizes in Juba Nabari East are larger (low density) and therefore there several sub-houses/*Tukulus* within the compound. Such densely populated areas could favor spread of Covid-19. The people living in the area with high density population need to be sensitized about the danger of overcrowding in the household as sharing of common facilities as some of the predisposing factors to COVID-19 infection.

Table 7: Percentage Distributions Households by Size of its Members

Household Size (Members)	Females	Males	Total	Total
< 2	33.3	66.7	100	**3.9**
2 – 5	46.9	53.1	100	**20.8**
5 – 7	58.6	41.4	100	**20.4**
7 – 9	46.7	53.3	100	**17.9**
9 – 11	39.8	60.2	100	**12.7**
11 – 13	42.9	57.1	100	**10.7**
> 13	44.0	56.0	100	**13.6**
Total	**47.0**	**53.0**	**100**	**100**

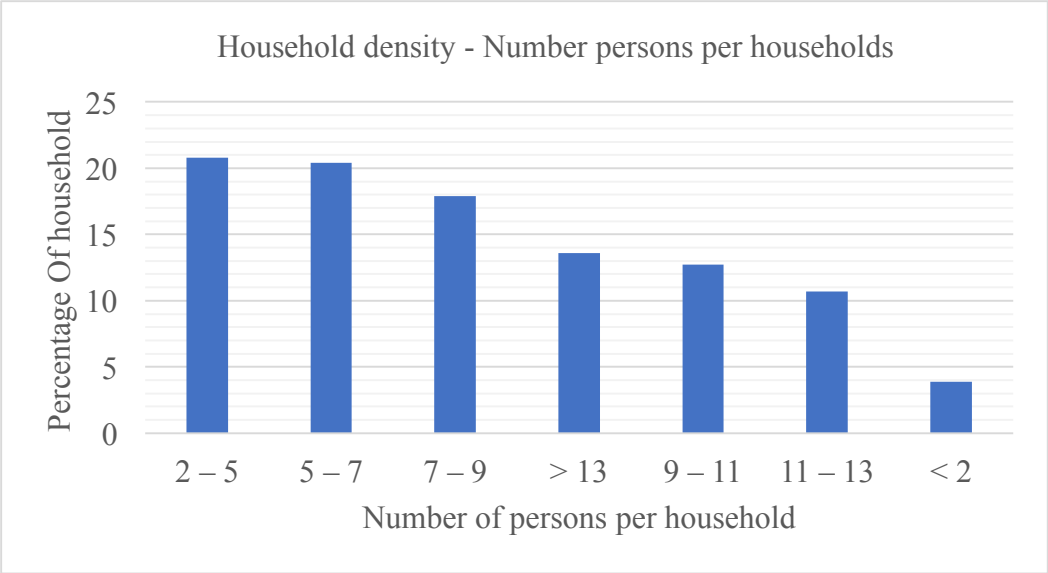


Figure 2: Percentage Distribution of Households by Number of Person in the Household

Table 8: Number of Persons per Area of Household Compound (household density)

Block	Females	Males	persons	Compounds	Household Density		
					Female	Male	Total
Juba	**1874**	**2521**	**4395**	297	6	9	15
Gabat	504	426	930	101	5	4	9
Juba Nabari East	853	1707	2560	95	9	18	27
Juba Nabari West	517	388	905	101	5	4	9
Kator	**1343**	**1616**	**2959**	301	4	5	10
Kator Centre	476	592	1068	102	5	6	10
Kator East	395	496	891	98	4	5	9
Kator South	472	528	1000	101	5	5	10
Munuki	**1027**	**1578**	**2605**	253	4	6	10
Mauna	364	389	753	65	6	6	12
Munuki	429	763	1192	128	3	6	9
Rock City	234	426	660	60	4	7	11
Total	**4244**	**5715**	**9959**	851	5	7	12

Figure 3 shows that Juba Block has the most densely populated compounds in Juba Municipality, with about 15 numbers of persons per compound. This block contains most of the First and Second Class plots which are more spacious and can accommodate more people. While it can be argued that there are several *Tukulus*/small houses in the same compound, facilities such as bathrooms, toilets, sitting rooms/under the tree and eating spaces are always shared.

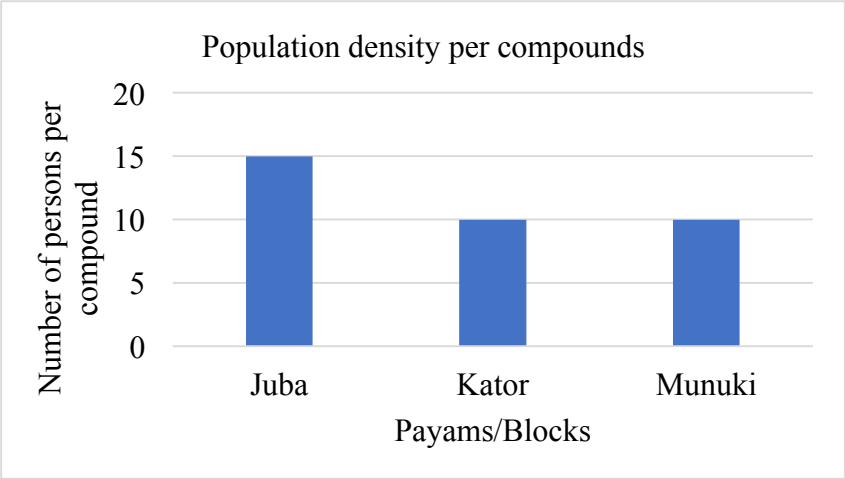


Figure 3: Compound Density of the three Blocks of Juba Municipality

Household's Employment Status, Income and Expenditure

Household Employment Status

The Percentage distribution of household heads by age, gender and employment status are presented in Table 9. In relation to employment, 27 percent of the household heads are unemployed and 73 percent are employed. As for the status of employment of the household heads by gender, working males are 81.4 percent and working females constitute 64.5 percent. There are more unemployed female 35.5 percent than male 18.7 percent probably because of level of education attainment, traditional; practices and household chores which tend to overburden women.

Table 9: Percentage Distribution of the Household Heads by Age, Gender and Status of Employment.

Age	Female			Male			
	Working	Not Working	Total	Working	Not Working	Total	
< 25 years	64.7	35.3	100	76.5	23.5	100	**8.0**
25 - 35 years	70.0	30.0	100	83.9	16.1	100	**31.1**
35 - 45 years	73.3	26.7	100	86.3	13.7	100	**29.1**
45 - 55 years	61.3	38.7	100	87.0	13.0	100	**18.1**
55 - 65 years	31.3	68.8	100	72.9	27.1	100	**9.4**
> 65 years	35.7	64.3	100	34.8	65.2	100	**4.4**
Total	**64.5**	**35.5**	**100**	**81.6**	**18.7**	**100**	**100**

Figure 4 depicts the status of household heads in employment by gender. About 65 percent of the female household heads are working compared to 35.5 percent of those female who are not working. Most of these women work in the informal sector and are mainly self-employed. However, due to outbreak of Coronavirus, most of them are not able to continue with their income generating activities.

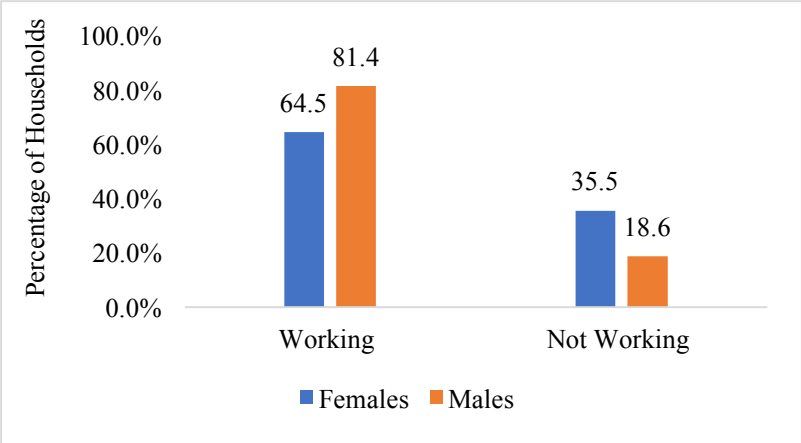


Figure 4: Percentage of Household Heads' Employment Status by Gender.

The percentage distribution of the household heads as per their employment status and sectors are presented in Table 10. With reference to the household heads by sectors, those who are working with the government, business sector and the self-employed constitute 87.8 percent, of which 41.3 percent are females and 58.7 percent are males. This means that almost 88 percent of the household heads could be seriously affected by the measures enforced by the Government to curve the spread of Covid-19. The results revealed that about 24 percent of the household heads are self-employed and about 22 percent work in the business sector. Those who are either self-employed or engaged in the private business sector generate their own income and are not dependent on the government. The current partial lockdown due to COVID-19 is therefore impacting on them negatively.

Table 10: Percentage Distribution of Household Heads by Employment Sector

Sector	Female	Male	Total	Percentage
Business Sector	38.7	61.3	100	22.0
Government	35.8	64.2	100	41.8
National Organization	45.5	54.5	100	5.3
Self-employed	55.7	46.3	100	24.0
UN/International Organization	32.6	67.4	100	6.9
Total	**41.3**	**58.7**	**73.4**	**100**

The proportions of household heads owning property as an alternative source of income are presented in Table 11. The current findings show that about 77 percent of the household do not own any property that can generate income to the household, such as buildings' rents, shop or other business assets. Only about 23 percent own some property that generates income for their household; and among these 39 percent are females who own properties as a source of their household's income. Similarly, 39.5 percent of the household heads live in rented houses. With the government measures put in place, these head of households will not be able to pay their house rents and can be evicted. As such, government should clear the arrears of its employees to enable them meet the challenges of livelihood in the face of COVID-19.

This may also enable those employees renting houses to pay their landlords to avoid being evicted, and for those whose businesses affected by the government measures, the government could consider reopening businesses which are not prone or predispose to COVID-19 transmission and spread.

Table 11: Proportion of Household Heads owning of Properties as a main Source of Income

Property	Females	Males	Total
Not owning rented building(s) or income generating asset	49.5	50.5	77.1
Owning rented building(s) or income generating asset	38.5	61.5	22.9
Total	**47.0**	**53.0**	**100**

The data on household heads involved in the *Bodaboda* business are displayed in Table 12, which shows that 23 percent of the households have at least one or more persons involved in the business of riding *Bodaboda*. Due to the partial lockdown strategy imposed by the government to combat the spread of COVID-19, 2 out of 10 households income will be affected, including 20 percent of households that depend on *Bodaboda* business as a source of income for the family. In this case, the government should allow the *Bodaboda* riders to operate under a strict rule of wearing masks as a preventive measure.

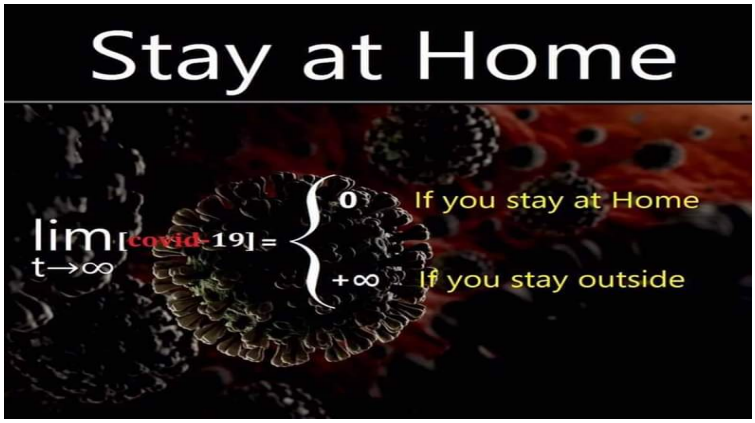
Table 12: Percentage of Households with at least someone Involved in *Bodaboda* Business

Household Size	Percentage of households with *Bodaboda* Riders				
	1	2	3	4	Total
< 2	2.7	0.0	0.0	0.0	**2.1**
2 – 5	11.0	5.6	0.0	0.0	**9.2**
6 – 7	21.9	13.9	9.1	0.0	**19.5**
8 – 9	17.1	16.7	18.2	0.0	**16.9**
10 – 11	16.4	19.4	18.2	0.0	**16.9**
12 – 13	12.3	16.7	9.1	0.0	**12.8**
> 13	18.5	27.8	45.5	100	**22.6**
Total	**100**	**100**	**100**	**100**	**100**

It is observed from the current findings that 33 percent of women or housewives are involved in tea, juice, fruits and vegetable business, subsequently their contribution to the household income will be affected negatively by the lockdown, especially if those informal businesses constitute the main livelihood source for their families.

COVID-19 Control Measures: the impact of these measures, i.e. closure of the borders, 14-days quarantine, stay at home, social-distancing, closure of non-food related businesses, reduction of working hours and stay-at home for non-essential staff, could be represented by the following formula:

COVID – 19 Impact on works



The percentage of household heads who have stopped working due to the COVID-19 measures are presented in Table 13, which indicate that 70 percent of 1,925 persons who were involved in some income-generating activities have stopped working. Household heads who have stopped working constitute 77 percent, of which 42 percent are females. Out of the remaining 30 percent who are working, women constitute the majority 72 percent. This too will have negative impact on the livelihood of the households. Government and partners may have to devise ways of supporting women and young people who people who are out of jobs.

Table 13: Percentage of Household heads that Stopped Working due to the COVID-19 Control Measures

Household Size	Female			Male			Total
	Stopped Working	Working	Total	Stopped Working	Working	Total	
< 2	45.5	54.5	**100**	36.4	63.6	**100**	**3.9**
2 – 5	44.6	55.4	**100**	46.8	53.2	**100**	**20.9**
5 – 7	41.2	58.8	**100**	34.3	65.7	**100**	**20.3**
7 – 9	44.3	55.7	**100**	35.8	64.2	**100**	**17.8**
9 – 11	46.5	53.5	**100**	32.3	67.7	**100**	**12.8**
11 - 13	44.7	55.3	**100**	26.9	73.1	**100**	**10.6**
> 13	31.4	68.6	**100**	26.2	73.8	**100**	**13.7**
Total	**42.2**	**57.8**	**100**	**35.0**	**65.0**	**100**	**100**

Household Income

The distribution of household heads by monthly income are presented in Table 14. The findings of the survey indicate that the estimated average income per household is 16,280 SSP per month. Daily expenditure amounts to 542 SSP, an equivalent of 1.8 USD. Since the average number of persons in the household in Juba Municipality is eight, this means that each individual lives on **22 cents per day**. This by international standards is tantamount to extreme

poverty. Such a dire situation calls for the government and private sectors to review the salary structure for their employees if poverty is to be alleviated.

Table 14: Estimated Households Monthly Income (SSP)

Income Rank (SSP)	Female	Male	Total
0 - 5,000	26.9	25.1	**22.5**
5,000 - 10,000	20.3	15.5	**17.2**
10,000 - 15,000	10.4	11.0	**13.2**
15,000 - 20,000	10.4	7.0	**8.4**
20,000 - 25,000	9.9	7.7	**8.5**
25,000 - 30,000	6.9	10.3	**8.5**
> 30,000	18.1	26.1	**21.7**
Total	**100**	**100**	**100**

Household Expenditure

Table 1: Estimated Daily Household Expenditures (SSP).

Expenditure (SSP)	Female	Male	**Total**
< 300	2.3	2.2	**2.2**
300 - 500	11.0	5.8	**8.2**
500 - 700	10.0	8.0	**9.0**
700 - 900	11.3	8.4	**9.8**
900 - 1,100	12.3	13.8	**13.1**
1,100 - 1,300	6.8	8.9	**7.9**
1,300 - 1,500	6.0	10.0	**8.1**
>1,500	40.4	42.9	**41.7**
Total	**100**	**100**	**100**

The estimated percentage of daily household expenditures in South Sudan Pounds are presented in Table 15. It demonstrates that 42 percent of the households spent more than 1,500 SSP on their daily household expenditure. This means in effect that they spend more than they earn. The monthly household expenditure could be more than 45,000 SSP and that the additional income might be coming from other income-generating activities which may be impacted by the Covid-19 measures of the government.

3.2 Household Alternative Sources of Livelihood

Based on the current findings, it is observed that 25.95 percent of the households have no alternative sources of income as they observe stay at home measures imposed by the government to mitigate the spread of Covid-19. This partial lockdown has impacted negatively on their incomes and livelihood. Those who seek support from relatives and friends, borrowing and relief assistance constitute 74.05 percent (Table 16). This situation may necessitate the

Ministry of Humanitarian Affairs to work in collaboration with other Humanitarian Organizations to support the affected populations, especially the vulnerable. The Ministry could also develop/review and implement a policy of food distribution to reach to more household since the pandemic has brought crisis to the whole population.

Table 16: Distributions of Households by Gender and Alternative Sources of Income

Alternative Sources	Male	Female	Total	Total
Borrowing	49.3	50.7	100	**8.01**
Remittances from Relatives overseas	100.0	0.0	100	**2.30**
Just Stay at home	51.2	48.8	100	**25.95**
Doing some income activities	53.4	46.6	100	**20.40**
Seek Relief Assistances	45.9	54.1	100	**20.02**
Support from friends	47.2	52.8	100	**9.40**
Support from other relatives	31.4	68.6	100	**13.93**
Total				**100**

3.3 Basic Needs and Availability of Food at Household Level

The rapid assessment considered basic needs for the households; the needs assessed being mainly food stuff items with higher weight in the consumption basket, cooking energy and sources of water. The main objective was to assess the availability of food stuffs in the households and to ascertain their vulnerability to the threat of COVID-19.

Percentage distribution of households by food availability are presented in Table 17. Findings indicate that the emergence of COVID-19 measures have increased the number of households with food insufficient to about 69 percent compared to (31 percent) who say that they have sufficient food. In such a situation, the government is expected to ensure that the borders remain open to allow continuous supplies of basic food items and other essential commodities such as fuel and drugs in the country.

Table 17: Food Availability at Household Level for April 2020

Food Availability	Female	Male		Total
No Sufficient food	49.5	50.5	100	**68.9**
There is sufficient food	18.8	26.3	100	**31.1**
Total				**100**

The distribution of household heads by the duration of the food in their stores is presented in Table 18; showing that 82 percent of the household do not have food to sustain them for a week in case of a lockdown. Since 93.5 percent of the households purchase foods from the market on daily basis, the government may have to come up with strategic food reserve policy for at least 6 months.

Table 18: Percentage Distribution of Household Heads by Duration of Food in their Stores.

How long will the current food stuff in the store last

Duration	Female	Male	Total	Total
1 week	44.5	55.5	100	81.8
2 weeks	5.1	6.2	100	9.3
3 weeks	2.6	2.8	100	4.5
4 weeks	2.1	2.3	100	3.5
More than 4 weeks	0.6	0.6	100	0.9
Total				**100**

Figure 5 below shows the percentage of changes in the number of meals taken by households per day. The findings of the rapid assessment revealed that the proportion of households taking two meals per day decreased from 57.6 percent in February to 33.5 percent in April 2020. This shows that the percentage of households that transitioned from two meals to one meal a day increased from 33.4 percent to 64.2 percent between February and April.

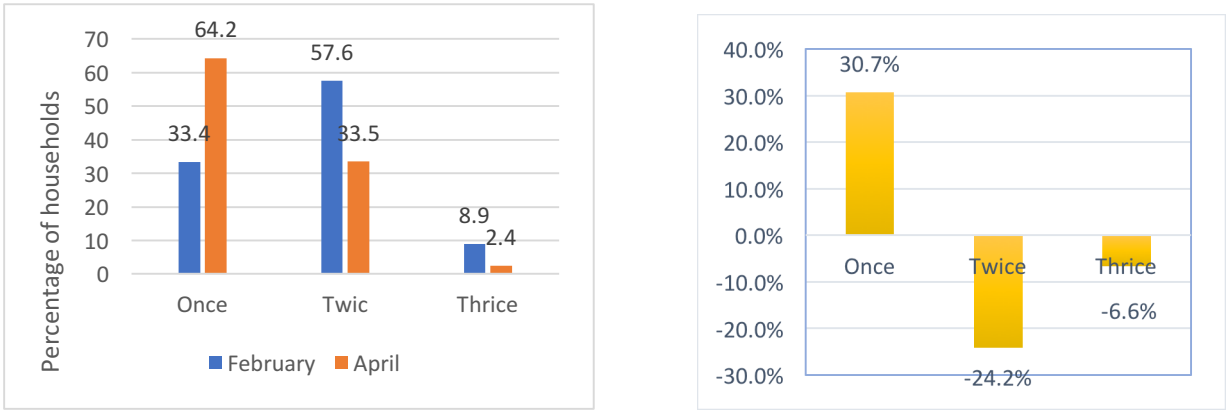


Figure 5: Changes in the number of meals taken by households per day between February and April 2020

The main sources of meal acquisition and purchases are presented in Table 19, which shows that 93.5 percent of the households depends on direct daily purchases from the market; while 3.6 percent depends on stocks in their own stores. About 2.6 percent borrows their food, and 0.2 and 01 percent of households surveyed are relying on food aid and donation, respectively.

Figure 6 shows the frequency of meals taken over the last 7 days, while type meals taken are presented in Table 19. The results show that at least for a day in a week, 58 percent of the household sleeps without a meal. Since better nutrition improves the function of the immune system, poor culture of feeding could put the population at high risk of succumbing to COVID-19, and this could be exacerbated by the fact that 62 percent of the households feed on beans (Figure 7).

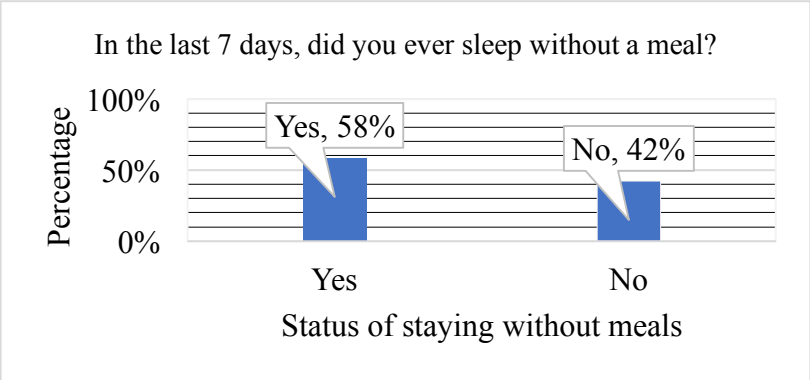


Figure 6: Percentage Availability of Meals over the Last 7 days.

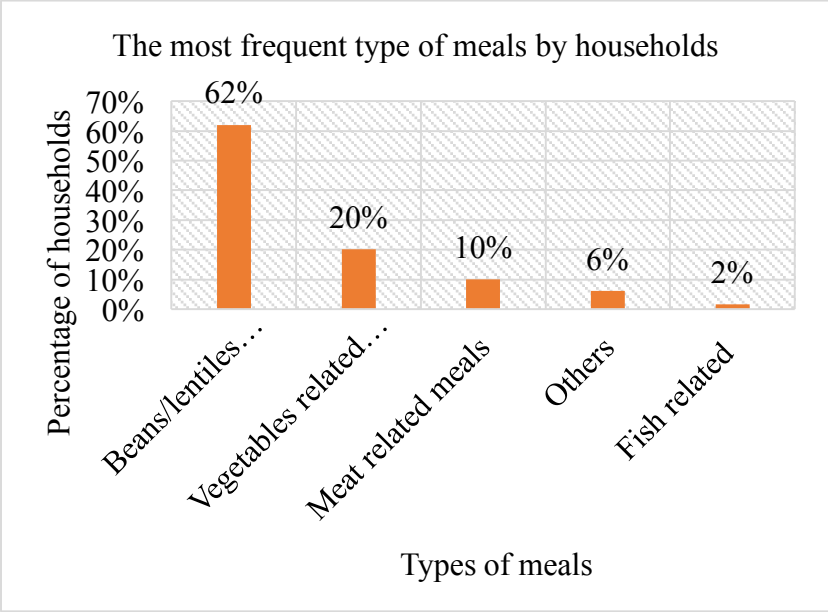


Figure 7: Percentage of the most Frequent Meals Eaten.

Main Sources of Water and Cooking Fuel

In general, majority of the households in Juba Municipality depend on mobile water tanks (water tankers) as their main source of water supply. Water plays a vital role in the fight against the COVID-19 pandemic. The ideas of washing hands frequently as a main protective measure against infection by COVID-19 could be compromised through inadequate or lack of enough water supply if the water-tankers owners fail to deliver water due to fear of the pandemic. This can pose a very serious problem for the residents of Juba.

Nearly 100 percent of the households in Juba uses charcoals as their main source of cooking fuel. If charcoal supply chain is disrupted due to COVID-19 preventive measures most of the households will be faced with the challenge of cooking and food preparation.

The distributions of households as per the main sources of water and cooking fuel are presented in Table 19 which shows that 87.7 percent of the households depends on water tankers for water

supplies. But poor hygienic condition associated with water tankers (suppliers) could lead to spread of Covid-19 if tank-water suppliers are not orientated about the threat of Covid-19. Moreover, since water plays a vital role in the fight against Covid-19, the preventive measures introduced by the government could disrupt water supply due to closure of some essential businesses such as those selling spare.

Table 19: Percentage Distributions of Households as per Water and Cooking Energy Sources

Water Sources	%	Cooking Fuel Sources	%
Water Tank	87.9	Charcoal	94.2
Borehole	6.7	Firewood	3.1
Tape Water	3.1	Gas	1.5
Pump water	1.5	Others	0.9
River	0.8	Electricity	0.2
Total	**100**	**Total**	**100**

The percentage distribution of the households by their type of shelter are presented in Table 20, which shows that about 40 percent of the households lives in the rented houses whereas 54 percent lives in their own houses. It was observed that majority of the households will not be able to pay their rents due to COVID-19 preventive measures. Drastic measures have to be taken to prevent the Land Lords from evicting the tenants from the houses.

Table 20: Percentage Distribution of the Households according to Shelter Type

Shelter type	%
Own house	53.8
Rented house	39.5
Relative or Friend's house	4.9
House provided as part of work	0.9
Free House	0.8
Total	**100**

3.4 Impact of COVID-19 on Education

Following the onset of the COVID-19 outbreak, many governments closed down all institutions of learning. Similarly, South Sudan followed suit and in March 2020, all institutions of learning were closed as a measure to curb the spread of COVID-19 pandemic. Many pupils and students found themselves out of learning and at home, creating a sad situation to all parents who wanted their children to be busy with the learning activities. The question for us now is what the children are doing at home while their normal schooling activities have been disrupted.

Table 21 shows percentage distribution of boys and girls by activities following the closure of all schools by the government. It shows that closure of learning institutions as a measure taken to control the spread of COVID-19 has led to 28 percent of girls and 38 percent of boys staying idle at home. This can lead to upsurge of bad cultural practices such as early marriage and teenage pregnancy which in turn can lead to drop out from school. When it comes to studying

at home, only 10 percent of the girls are doing some studies whereas 17 percent of the boys are doing some studies. Girls are involved in helping their parents with most of the household chores and this limits their time for study, while most of the boys stay idle and have more time to study, watch TV and visit their friends. The ministry of education may come up with distant learning programs over radio and TV or any other means to engage the pupils and students in learning programs.

Table 21: Percentage Distribution of Boys and Girls by Activities after Closure of Schools.

What girls/boys are doing	Girls	Boys
Cooking in the household	33.8	0.2
Stay idle	27.8	38.0
Do other household work	18.3	25.1
Study	10.2	17.1
Play games	4.4	12.5
Visit other places, friend and relatives	2.2	2.6
Watch TV	1.9	2.9
Do some work outside the household	1.5	1.7
Total	**100**	**100**

3.5 Health and Public Awareness about COVID-19

The COVID-19 outbreak has found South Sudan health systems fragile and in a very bad shape. There is serious lack of access to health services due to poor income at the household level. Concerning health, the results of the survey show that 23.4 percent of people who fell sick prior to the study did not visit a clinic or hospital due to various reasons such as lack of money, not considering the sickness to be serious, fear of visiting a clinic or hospital due to Covid-19. About 59 percent say that the main reasons for not visiting a clinic or hospital is lack of money. Such lack of checkup at heath facilities (Figure 8) could have contributed to the inability to identify or detect people who may be suffering from Covid-19 and its spread among the population. The government should open specific centers for Covid-19 testing, quarantining and treatment.

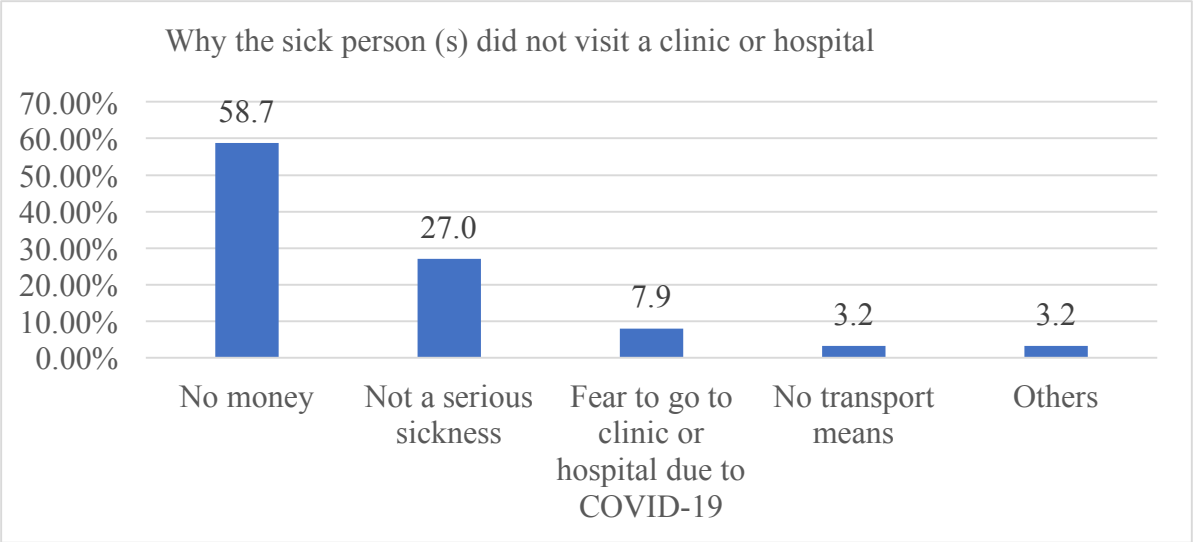


Figure 8: Reasons for not checking into Hospital or Clinic

Regarding awareness about Covid-19, about 99.5 percent of the household heads are aware of the signs and symptoms of the COVID-19 pandemic (Table 22), as well as about protection measures. Despite the knowledge, people continue with the same life styles, practices, behavior and attitudes such as playing Domino, drinking coffee by the roadside and eating together/sharing same big tray '*Sinia'* while eating etc. About 98 percent of the household heads are well aware of the signs and symptoms such as dry cough, while the least number of respondents (48 percent) confined the symptoms of tiredness (Table 22).

Table 2: Percentage of the level of awareness about COVID – 19 signs and symptoms

Symptoms	**Level of Awareness (%)**
Dry Cough	97.9
Sneezing	96.0
Fever	91.1
Difficulty in breathing	80.7
Tiredness	48.0
Total	**100**

The percentage of responses on the prevention measures are presented in Table 23. The results show that 94.4 percent of the household were aware of frequent washing of hands with soap; no hand shake accounts for about 90.3 percent, avoiding close contact with anyone with the idea of social distancing was about 86 percent. However, stay at home scored the least (73 percent). This may be so because people do not want to stay at home, or because they necessarily have to work to earn something for their livelihood. The survey results show that 32 percent feel that prayer is the only solution to the problem of Covid-19. Indeed God is powerful, but if prayer means doing things in the usual ways, disregarding health guidelines issued by the Ministry of Health, could lead to widespread of COVID-19 in the population.

Faith based Organizations have an obligation to actively engage in COVID-19 awareness campaign. The law enforcement agents have to ensure that the COVID-19 preventive measures declared by the government are strictly observed by all.

Table 23: Percentage of Household Heads Response to COVID-19 Preventive Measures

What can you do to protect yourself against COVID-19	Percent
Frequent washing hands with soap	94.4
No hand shakes	90.3
Avoid close contact with anyone (social distancing)	85.6
Cover mouth and nose with tissue or cough or sneeze into your flexed elbow	80.7
Stay home and avoid travel when you have flu like symptoms	72.5
Pray	31.8
Total	**100**

Percentage distribution of the household heads washing hands with soap per day are presented in Table 24. The results show that about 59 percent of the household heads are washing their hands with soap more than 6 times per days. Only about 0.6 percent washes their hands once a day, showing that most of the people are much aware about COVID-19 preventive measures.

Table 3: Percentage Distribution of Household Heads Washing Hands with Soap per Day.

Hand washing frequency/day	Percent
More than 6 times	59.2
6 times	15.0
Five times	12.3
Four times	6.7
Thrice	5.4
Twice	0.7
Once	0.6
Total	**100**

Concerning the government stay at home directive (Figure 9), the results of the assessment survey show that 42.2 percent of the household heads resorted to staying at home between 6 to 8 hours a day. About 22 percent stays at home for 9 to 11 hours. These are people who hardly go out of their homes at all. The average time the household heads stay at home is about 6 hours a day and that is between 8:00 am to 6:00 pm. This indicates that many household heads are staying at home most of the time and that they normally go to work out of house for only 2 hours.

Staying at home is one of the measures that is deemed fundamental to curb the spread of Covid-19. However, if those staying at home do not observe social distancing, it could still lead to the spread of Covid-19. Change of behavior, practice and attitude can drastically reverse the trend of Coronavirus spread in the communities. This may demand that awareness campaign be directed at the households to ensure that the health guidelines are observed.

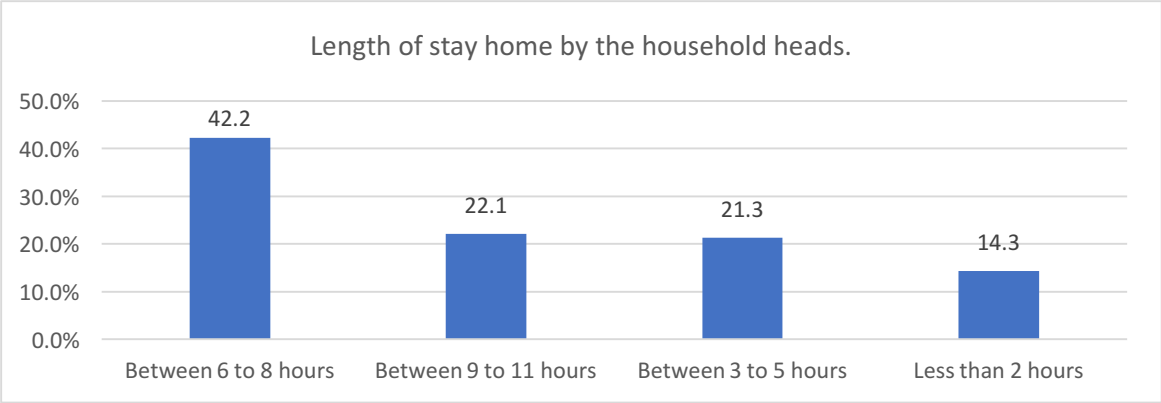


Figure 9: Percentage of the household as per Length of Staying at Home.

3.6 Public Opinion about Government Preventive Measures

The percentage of the public opinion about the government measures against the spread of COVID-19 are represented by Figure 10, which reveals that 68.9 percent of the public approved of the appropriateness of the measures taken by the government against the spread of Covid-19 and only 23 percent sees the government intervention as not appropriate. Some respondents claimed that *"if government says stay at home (lockdown), people will obey. But staying at home could also mean dying of hunger instead of dying of Coronavirus disease which at the end will push people to go out"*. In such situation, the government could consider balancing the measures against survival of the people.

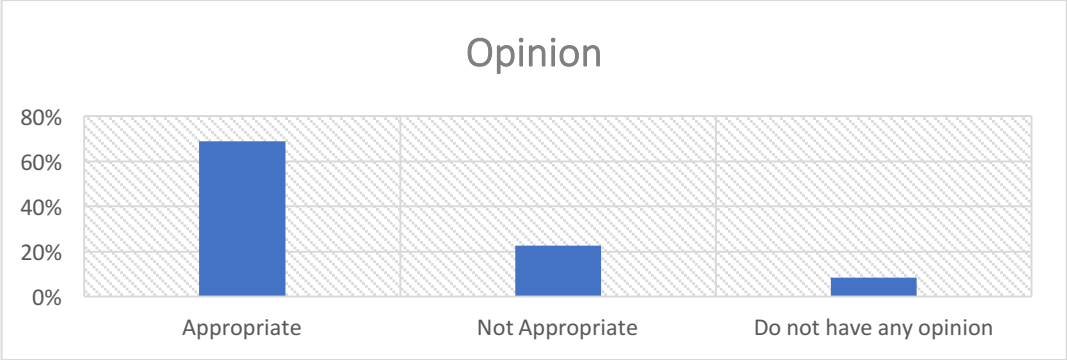


Figure 10: Perception of Public Opinion about Government Measures against COVID-19

3.7 Public Perception, Norms and Practices that Could Increase Spread of COVID-19

Regarding the perception of people on COVID-19 pandemic, 76.7 percent of the household heads think that coronavirus is a real global disease (pandemic) and about 37.9 percent still believe that the virus is a foreign disease. About 25.5 percent said it is a normal flu or cough; and 10.4 percent are of the opinion that this disease cannot come to South Sudan due to the weather. About 9.0 percent have no idea about the COVID-19 pandemic. Such a situation may require intensifying the awareness campaign to sensitize the general public to change their perception and attitudes.

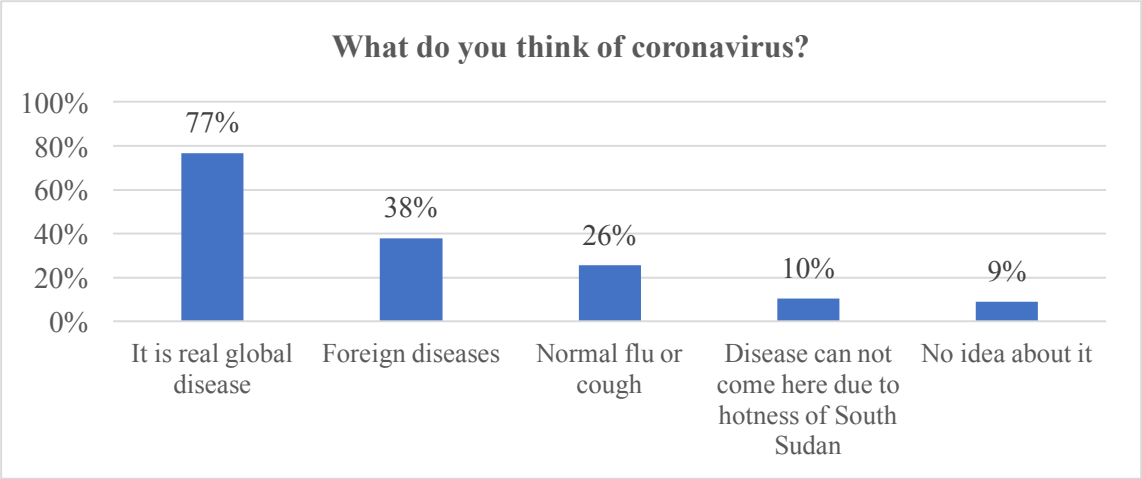


Figure 11: Percentage Distribution of the Household heads Perception about COVID-19

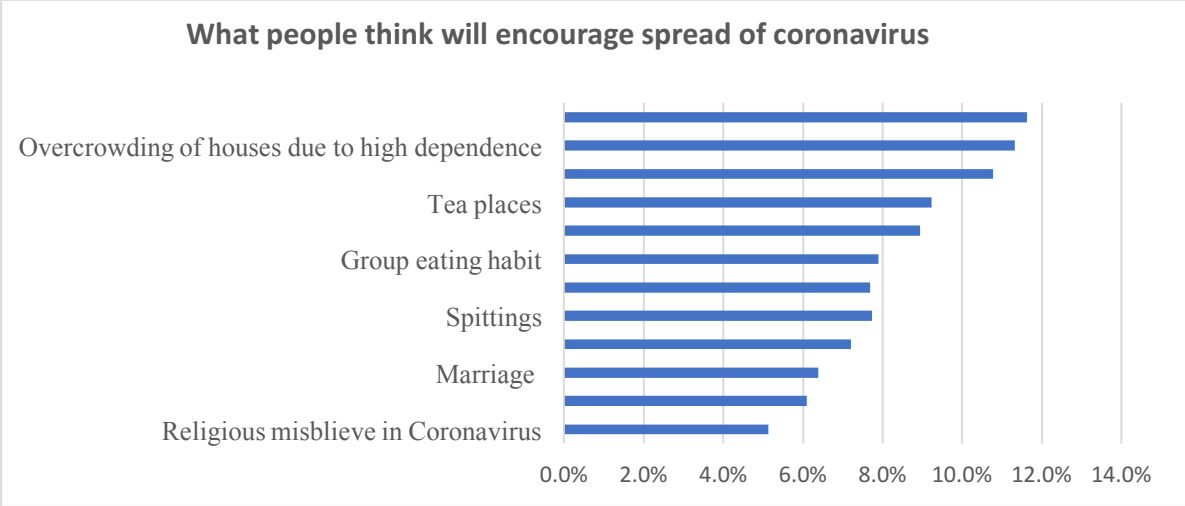


Figure 12: Perceptions of Household Heads about the Social Norms and Practice that can lead to the Spread of COVID-19.

In regard to social norms and practices, the results show that about 11.6 percent of the household heads said cultural gathering by the road side is the most problematic behavior that can result in the spread of COVID-19. Some respondents said that people are well aware that social norms and practices could lead to spreading coronavirus. Yet, many tend to continue with the business as usual mentality and do not shy away or stop from such practices as hanging out in overcrowded places, handshaking habit, group eating, sleeping together, attending funerals, hugging and kissing (Fig. 11). This means that awareness raising has to go along with strict enforcement measures. In event, people are tested positive, such person should be made aware and isolated from the family members and community until recovered.

3.8 Results of the Rapid Market Assessment

3.8.1 Market Operations and Employment

Percentage distribution of businesses by opening hours across all the surveyed markets in Juba Municipality are presented in Table 25. The results reveal that 99 percent of food items markets open more than 4 hours a day except for the Customs Market. The relaxation of the market rules vis a vis lock down measures has allowed continuous availability and supply of food and other necessary commodity.

Table 25: Percentage Distribution of Businesses by Opening hours in Juba Municipality Markets

Market	Less than 4 hours	More than 4 hours	Total
Customs Market	8	92	100
Gudele Market	0	100	100
Jebel Market	0	100	100
Konyokonyo Market	0	100	100
Munuki Market	0	100	100
Percentage Total	**1**	**99**	**100**

Table 26: Percentage Distributions of Employees in Various Markets- Juba Municipality

Business Category	Customs Market	Gudele Market	Jebel Market	Konyokonyo Market	Munuki Market	Total
Cereal and food commodities retail	63.5	23.2	53.3	23.9	26.7	32.2
Cooking Fuel	5.8	3.5	6.7	4.4	3.3	4.3
Transport Service	25.0	13.4	6.7	13.3	10.8	13.1
Vegetables, Fruits and Tea vendors	5.8	23.9	33.3	26.6	39.2	27.5
Warehouses,	0.0	35.9	0.0	31.9	20.0	22.8
Total	**100**	**100**	**100**	**100**	**100**	**100**

Out of the total employees of 487 sampled businesses, 5.4 percent were temporarily sent home for economic reasons and social distancing, and 43 percent are suspended without pay (Table 27). This will affect those individuals contributing to the livelihood of their families. Nevertheless, although COVID-19 has caused a lot fear and panic globally and locally, it has a much more negative effect on market operations. While the markets in Juba are doing their best in supporting consumers to access basic needs, a strategy needs to be developed to support those workers who were sent home without livelihood support package. This could include provision of cash for at least 6 months or injection of economic stimulus to enable them start up income generating activities or sustain themselves as they wait for the government to re-open their businesses.

Table 27: Percentage of Employees Temporarily Sent Home Across Various Markets in Juba Municipality

Business Category	Customs Market	Gudele Market	Jebel Market	Konyok. Market	Munuki Market	Paid	Not Paid	Total
Cereal, basic commodities	66.7	37.5	81.8	0.0	33.3	43.8	75.0	57.1
Cooking Energy	33.3	0.0	9.1	0.0	0.0	6.3	8.3	7.1
Transport	0.0	25.0	0.0	0.0	16.7	12.5	8.3	10.7
Vegetables, Fruit and Tea vendors	0.0	12.5	9.1	0.0	50.0	25.0	8.3	17.9
Warehouse/Store	0.0	25.0	0.0	0.0	0.0	12.5	0.0	7.1
Total	**100**	**100**	**100**	**000**	**100**	**100**	**100**	**100**

In assessing the impact of the COVID-19 pandemic on the informal market, and particularly on the women who predominantly operate on the roadside selling tea, fruits, juices and vegetable, it was found that women will be adversely affected by the partial lockdown, since most of them do not have alternative sources of income or livelihood. It was found out that 91 percent of women are the main source of livelihood in their households (Figure 13). As such women will be disproportionally affected by the preventive measures taken by the government to combat the spread of COVID-19.

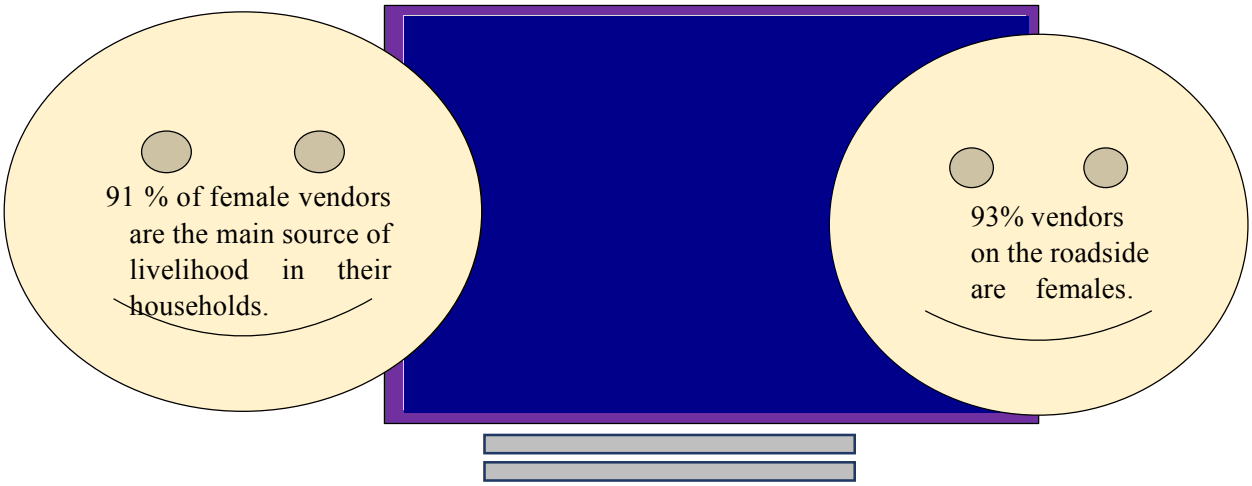


Figure 13: Distribution of the Roadside Vendors by Gender (Percentage)

3.8.2 The Market Prices

Previous findings point to the fact that market prices in South Sudan have been prevailing under very high inflation for a long period of time. In the month February 2019, the monthly and annually inflation figures where 15.1 percent and 58.7 percent respectively. Currently, the monthly inflation for the month of February 2020 is a negative 13.1 percent whereas the annually inflation for the same month was 3.0 percent. The current findings show that 95.5 percent of the basic food commodities are imported from Uganda. The outbreak of COVID-19

and the government measures have impacted negatively on market prices of basic food commodities. From the month of February, the prices of basic food items have risen sharply (Figures 14 and 15).

Comparatively, the current findings show a wide variation in the prices of basic food commodities in the 5 markets chosen for the survey. The highest prices were observed in Konyokonyo Market, while the lowest prices were recorded in the Customs Market (Table 28). For example, a 50 Kg. bag of sorghum at Konyokonyo Market was costing 13,100 SSP at the time of the survey, while a 50 Kg. bag of sorghum at Customs Market was costing 10,300 SSP, making a difference of 2,800 SSP. Due to the absence of market information system, buyers may not be able to discover which market have lower prices. Whatever the case maybe, the difference in prices in the different markets is too big and should not be used unjustifiably to exploit the vulnerability of the people.

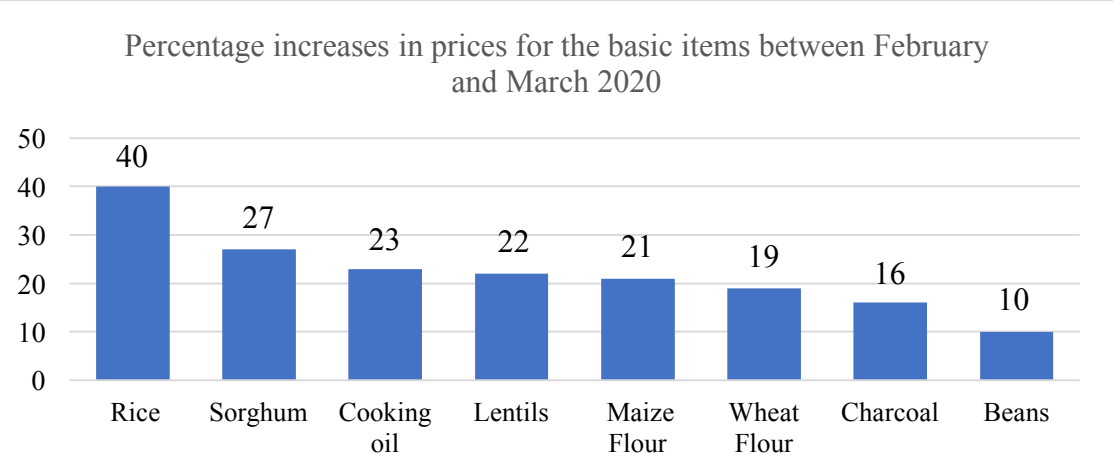


Figure 14: Prices (SSP) of Basic Commodities Charcoal in April 2020 in Juba

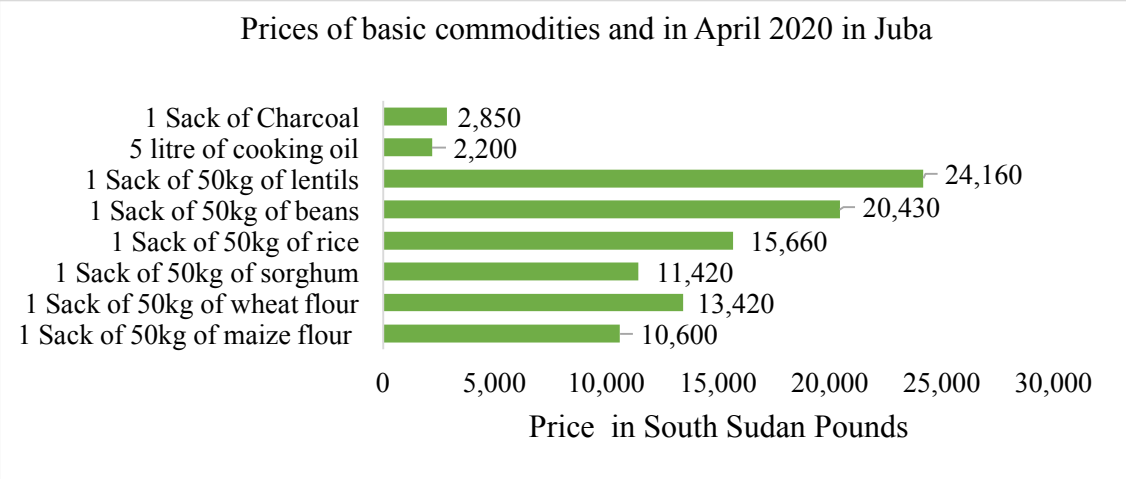


Figure 15: Prices (SSP) of Basic Commodities in April 2020 in Juba

Table 28: Market Prices of Basic Food commodities and Charcoal in Juba (April 2020

Business Category	Custom Market	Gudele Market	Jebel Market	Konyokonyo Market	Munuki Market	Average Price
1 Sack of 50kg of maize	10,300	10,600	9,600	11,000	11,500	10,600
1 Sack of 50kg of wheat	10,500	16,100	10,400	18,900	11,200	13,420
1 Sack of 50kg of sorghum	10,300	11,400	11,800	13,100	10,500	11,420
1 Sack of 50kg of rice	15,100	14,000	15,600	17,500	16,100	15,660
1 Sack of 50kg of beans	18,750	21,000	21,100	19,800	21,500	20,430
1 Sack of 50kg of lentils	26,200	24,400	21,800	26,400	22,000	24,160
5 Litre of cooking oil	2,100	2,600	2,100	2,000	2,300	2,200
1 Sack of Charcoal	2,750	3,000	2,900	2,700	2,900	2,850

3.8.3 The Supply Chain

The outbreak of the COVID-19 pandemic has led to the closer of borders for many countries. South Sudan has closed it border but continues to keep it open for the supply of goods. About 62.2 percent of the wholesalers reported to have adequate food commodities for the market and 95.5 percent of the wholesales in Juba say they received supply of their goods from Uganda. However, the percentage of the food adequacy may not guarantee food security in this difficult moment of Covid-19. Nearly 57 percent of the wholesalers were expecting to supply goods soon.

3.8.4 Transport Services

South Sudan public transport is still weak but vital in facilitating access to the markets. The findings of the rapid assessment survey show that transport fares of various transport routes within Juba Municipality have increased by 100 percent (Table 29) from the month of February to April, 2020 due to the government measure requiring social distancing. Minibus fare from *Konyokonyo* to Customs has increased from 50 SSP to100 SSP. The same applies to all other routes in the Municipality. Although fuel prices have slightly decreased in some petrol stations, buses are still using the same amount of fuel and therefore charge the clients double to compensate the empty chairs.

Table 29: Public Transport Fares - Juba (January - April 2020)

Buses	Routes	Fare			
		01/2020	02/2020	03/2020	04/2020
Bogo Bus	Konyokonyo - Sherikat	50.00	50.00	100.00	100.00
	Konyokonyo - Customs	50.00	50.00	100.00	100.00
	Konyokonyo - Jebel	50.00	50.00	100.00	100.00
	Konyokonyo - Lologo 2	50.00	50.00	100.00	100.00
	Gudele - Customs	40.00	40.00	80.00	100.00
	Jebel - Juba	50.00	50.00	100.00	100.00
	Juba - Customs	50.00	50.00	50.00	100.00
	Munuki - Customs	40.00	40.00	80.00	100.00
Mini - Bus	Konyokonyo - Sherikat	50.00	70.00	100.00	150.00
	Konyokonyo - Customs	50.00	50.00	100.00	100.00
	Konyokonyo - Jebel	70.00	100.00	100.00	100.00
	Konyokonyo - Lologo 2	100.00	100.00	200.00	200.00
	Gudele - Customs	50.00	50.00	100.00	150.00
	Jebel - Juba	50.00	50.00	100.00	150.00
	Juba - Customs	50.00	50.00	100.00	100.00
	Munuki - Customs	70.00	70.00	70.00	100.00
Raksha	Konyokonyo - Sherikat	100.00	150.00	200.00	300.00
	Konyokonyo - Customs	50.00	70.00	100.00	200.00
	Konyokonyo - Jebel	100.00	150.00	200.00	500.00
	Konyokonyo - Lologo 2	300.00	400.00	500.00	500.00
	Gudele - Customs	200.00	200.00	300.00	500.00
	Jebel - Juba	150.00	150.00	150.00	250.00
	Juba - Customs	100.00	100.00	100.00	200.00
	Munuki - Customs	200.00	200.00	300.00	300.00

The increase in bus fares has shifted the burden to commuters, and this might have contributed to the inflation in market prices. It is worth noting here that the government does not appear to have put measures in place to counteract the hiking prices.

4.0 GENDER ANALYSIS OF THE MPACT OF COVID-19

Findings from the assessment show that gender gaps appear in the access to education, training, professional development, assets ownership, benefits and access to resources for self-employment for men and women; these are all linked to poverty, instability and negative practices among others. The gender analysis in this section considers the relevant gaps in the status of males and females, including by age, education, employment, social status, etc., that could undermine the programme outcomes aimed at improving their lives. The analysis addresses the following questions:

a. What is the status of women and men and their differential access to/control over assets, resources, opportunities and services relevant to the prevention and response intervention for COVID-19?
b. What are male and female roles, responsibilities and time use have been affected by COVID-19 measures and that could prevent or facilitate participation in the prevention and response interventions for COVID-19?
c. Are there laws, policies, and institutional practices that may contain implicit or explicit gender biases and that may need to be addressed by this assessment and future project established in response to COVID-19 measures?
d. What gender norms exist that may affect female's ability to assume the role of prevention and response with regard to COVID-19 interventions as well as to participate in the labor market?
e. What are the potential impacts of the COVID-19 prevention and response interventions on men and women, including unintended or negative consequences such as increasing the risk unemployment, gender-based violence or increasing women's unpaid work at home?

Access to services and opportunities

To begin with, there are disproportionately more female-headed households living below the poverty line than male-headed households. This in effect means that children in these homes are more prone to low educational accomplishment. Table 6 shows that the majority of females (72%) are illiterate compared to males (28.3%). Most of those educated have completed primary schools and a few have either secondary school or University education.

Table 6: Percentage Distributions of Household Heads by Education Level and Gender

Education Level	Females	Males	Total	Total
No Education	71.7	28.3	100	**14.1**
Primary Level	64.2	35.8	100	**23.6**
Secondary School Level	47.9	52.1	100	**31.2**
Technical School Level	14.5	85.5	100	**7.3**
University Level	24.3	75.7	100.	**23.8**
Total	**47.1**	**52.9**	**100**	**100**

The small number of females who have graduated from technical schools indicates that many women who operate in informal sectors for instance, have not undergone rigorous training for

upgrading along value chains or acquire skills needed to compete in a range of market opportunities for self-employment or enter male-dominated fields/sectors as shown in Table 10. Poverty, instability, and obligations impose financial burdens and household demands. Also, although young men may be pushed to find employment; most young women are expected to stay at home and look after younger siblings, or children of their own in view of early marriages which are prevalent in South Sudan. Such obligations compete with school time and may lead to repetition and school dropout. With the outbreak of COVID-19, there is increased burden of unpaid care works and domestic chores compared to men because women and girls are the primary caregivers at home for patients and children following the closure of schools. For example, findings of the rapid assessment survey indicate that 32 % of the households had at least a person who was sick at the time the assessment was carried out. While there is a sound knowledge and awareness about the prevalent of COVID-19, about 23.4 percent of the sick persons did not visit clinic or hospital for check-up.

Some respondents said that they did not have money, others did not take the sickness seriously and some feared to be diagnosed with COVID-19. This might have increased workload to the caregivers in the respective households as justified by the 33.8 and 18.3 percent of the girls who are at home after the closure of schools due to the partial lockdown imposed by the government. Likewise, school closures impact the capacity of many girls and boys in vulnerable homes/situations to receive sufficient nutritional intake, undermining both their health and human capital. This is justified by the decreased number of meals taken per day in most households. Those who took meals once per day (33.4 and 64.2 percent) in February and April respectively, while those who afforded two meals per day were (57.6 and 33.5 percent) in February and April respectively. In some cases, a number of households (58%) indicated that they literally went to bed without a single meal. Beans, lentils and vegetables are ostensibly the main course of the meals as very few households can afford to eat meat or fish dishes regularly.

4.1 Competing Domestic Duties

Both young men and women are faced with various household stresses that range from financial to domestic demands. It is evident that young women are more burdened with household and childcare responsibilities than young men, so the time that young women have available to participate in education and training may be significantly limited. It is also worth underscoring that girls are often disproportionately represented in less visible forms of child labor such as domestic service in a third-party household which can be missed in household surveys. The share of girls performing chores is greater than that of boys at most ages, but responsibility for chores is by no means limited to girls in South Sudan.

Whereas this could have happened elsewhere, girls attending school in most part of South Sudan may never return once the school reopen as increased family obligations, financial constrains compelling decision that favour boys over girls during school enrollment, negative cultures like forced/early marriages may interrupt their schooling.

In terms of time spent at home, the partial lockdown and quarantine measures have increased the number of hours to an average of 8 the head of households spend together with spouses and children. In the context of gender-based violence and domestic abuse, chances are there that abuse may have increased- be it physically or economically due to the tension experienced.

Further research in this area needs to be done. Moreover, the idleness among girls (27.8 percent) and boys (38 percent) as shown in Table 21, some of whom might be adolescent at a tender age group are likely to be involved in informal sectors to support family livelihoods. Even though child labour and gender based violence are prohibited by the laws - National Child Act (2013) and Gender Policy (2013), absence of enforcement mechanisms suggests that the precarious employment combined with fragile social protection systems might expose children and migrants women working in the market to the risk of violence, xenophobia and discrimination.

In the labor sector, males have a more diverse occupational structure than females; in all categories of labor/ formal sectors other than agricultural and clerical support work, the proportion of males was higher (64.2%) than the proportion of females (35.8%). Among male youth, there is a shift away from non-wage family employment and towards other occupational categories as they grow older (Figure: 1). Female youth move from non-wage family work and occasional work into self-employment (55.7%) as they enter early adulthood (between 25-35 years old); unlike their male counterparts. However, the presence of female youth in formal waged employment does not increase with age.

Overall, the findings of the rapid assessment survey indicate that there are more females and males engaged in business sectors and self-employments compared to those in formal institutions. In relation to COVID-19, measures that require total lockdown and complete closure of business enterprises are likely to negatively impact the majority of the citizens. Specifically, female who are self-employed as small/micro-entrepreneurs engaged in fruits and vegetables selling within and outside the markets by the roadsides will completely loose income that sustain their families.

The Survey findings also indicate that although there have been some significant changes in where young men and women participate in the labor sector, certain sectors and job functions continue to be influenced by cultural norms that impact gender roles and employers' expectations. Socio-cultural norms shape young men's and women's definitions of masculinity and femininity, influencing behaviors and self-perceptions in ways that ultimately contribute to alienation in the labor market. For example, traditionally male-dominated jobs, like auto driving, mechanics, carpentry, construction, electrician, and welding are being pursued by more men more than women. On the other hand, women tend to seek employment in the hairdressing, shop keeping food vending or hotel operations among others.

These small businesses have been closed down temporarily due to COVID-19 pandemic. Whereas male dominated jobs like fixing of cars can be done anywhere or by the roadside, most of the businesses undertaken by women are not operating. Subsequently, the decreasing resources and movement restriction have hampered women ability to carry out their market activities to obtaining essential resources for their families (including water, charcoal/ firewood etc.) putting both their well-being and that of their families at risk due to malnutrition, increased poverty, dependence and the temptation of venturing into commercial sex work particularly for young women.

In terms of formal sectors, the proportion of males who were employees in business sectors and government 61.3 and 64.2 percent respectively (Figure: 1) are almost twice as high as the

corresponding figure for females (38.7 and 35.8 percent respectively), while the proportion of women contributing to family work/ self-employed was more (55.7 percent) than that of men (46.3 percent). The results show that more males than females are employed in NGOs and UN agencies, suggesting that the level of educational attainment, technical skills and availability of men compared to women offer more opportunities in the job market.

This finding is in line with the Integrated Business Establishments Survey (IBES 2019) which indicates that there are 145,666 employees across the country, out of which 72.8 percent are based in Juba. The IBES report furthermore, states that 90 percent of those employed are not engaged in income generating activities. Bearing in mind that salaries in government sectors have not been paid for the past six months, some formal business sectors paying on daily/weekly basis may have been shut down partially due to COVID-19 pandemic. It is also likely that the burden of caring for the family has been shifted to women who undertake medium to small businesses such as vegetables, fruits and tea vendors (27.5 percent) and cereals (32.2 percent) among others (Table 10). This is in line with the market survey of 292 businesses in five markets which shows that a total of 487 employees were still undertaking their daily activities. In fact, the majority of female respondents (91 percent) said that they are currently the main bread earners and source of livelihoods for their families; and therefore, it is difficult to stop business and stay at home. However, some of those working in shops or restaurants have been sent home temporarily or discontinued working in the absence of business and income generation to pay their salaries. Women in this case are feeling this brunt.

4.2 Property Ownership and Access to Credit Services

Both men and women hold the benefit of being legally protected against discrimination on the basis of gender or marital status in regards to access to resources and microfinance institutions. Although married women cannot be legally considered as "heads of household," they share in the burden of legally maintaining their family's expenses (Figure: 13). In assessing this familial responsibility in the context of the Transitional Constitutional of South Sudan (TCSS 2011) it may be possible to gather insights into gender dynamics that influence attitudes derived from perceptions and their impact amongst women in regards to their abilities to acquire and control assets. Although 49.5% of female respondents indicated that they did not own any assets/building or business that generate income, there was limited perception and experience of inadequacy in ownership of assets, suggesting that assets can be obtained by both men and women.

This in itself demonstrates a sense of empowerment and is reflective of the national gender policy (2013) and TCSS 2011 which gives right of ownership to both men and women. Those owning assets (38.5%), although they are less than their male counterparts (61.5%), did not feel that the assets they possessed could assist them in the midst of the current crisis as these cannot be used to access credit or loan from the financial institutions. This is probably because of the notion that the achievements as a result of asset ownership and control does not necessarily reach the same level of satisfaction as it pertains to a woman's interaction with financial institutions. In the context of financial capital control, Micro-finance institutions' difficult conditions such a need for collateral or property title which cannot be afforded by many women who are small entrepreneurs. Similarly, financial decision-making is done in consultation with

the head of household, something which brings into question the equality in decision-making ability when it comes to familial and household asset control.

In order to target women-owned businesses or areas of the economy where women tend to be employed, detailed knowledge of business ownership is needed to allow for more responsive support to the particular needs. Further research on the contextual dynamics involved in the disparity in property ownership and credit as well as business ownership by women is worth conducting.

4.3 The Gendered Impact of COVID-19 on women and men

Many women are at the front lines of COVID-19 response, including the health care workers, flights attendants and services industry workers, playing a key role in ensuring the well- being and resilience of their families and communities. These women are more exposed to the virus and increasing their risk of infection and also face the risk of exhaustion to burn out.

Globally women make up 70% of the workers in health and social sector, especially as nurses. This increases their risk of exposure to the virus from potentially infected patients, as well as some related socioeconomic consequences. In addition to this, women are overrepresented in sectors highly affected by the crisis in terms of economy such as tourism, air transport, entertainment, cleaning and remunerated domestic service.

The global pandemic risks an increase in socio-economic inequalities. The Evidence from the past epidemics shows that gender-based inequalities determine how women´s and men´s health, economic status and challenges, security and safety will be affected. Understanding the gender-differentiated impacts of disease outbreaks is fundamental to creating effective, equitable policies and interventions that leave no-one behind. Increase in gender-based violence and weaker support to survivors due to lockdown/quarantine measures is another issue deserving attention.

Women's burden significantly increases as they perform unpaid work in caring for children, the sick and the elderly, in addition to other household tasks. They are the primary caregivers at home and in general have more domestic chores and responsibilities compared to men. Worldwide, women and girls do 2.5 times as much unpaid care and domestic work as men. With the outbreak of COVID-19, the need to care for patients at home and care for children following school closures, this burden on women has increased significantly.

With COVID-19 women can face gender gap in employment because of the nature of their jobs, which are predominantly found in informal sector and part-time work. Because of the pandemic, they might encounter the risk of losing their jobs and / or returning to the labor force at lower wages than before.

Another challenge related to health that women might face is the limited access to, reduced quality of maternity health, and family planning services due to interruption brought about by the current crisis. There is the possibility, for instance, that funding of reproductive health services may be diverted to emergency response to the COVID-19 outbreak.

Women are also victims of nutrition deficiencies in times of crises. In situations of prolonged conflict or disease, malnutrition becomes even more acute, especially among women and

children. Cultural practices in many societies mean that women and girls eat last and least. In South Sudan, the vulnerabilities of women and girls are amplified and exacerbated by these practices. With the onset of local COVID-19 virus transmission in South Sudan, women and girls may face heightened risks due to social pressure to conform to traditional roles as caregivers. They may therefore face increased risks of infection, vulnerability due to loss of means of livelihoods, lack of access to education for girls (who may be forced to leave school to undertake caregiving duties); and inadequate access to other basic services.

The epidemic COVID -19 has had a huge impact on domestic violence, studies from elsewhere show that 90% of the recently reported cases of violence are related to the epidemic (Wan 2020). Accordingly, fear and anxiety from the extended quarantine, as well as the economic strain put on many families, may have contributed to the increased violence. Further studies in this area is required inorder to assess the magnitude and support systems for survivors of domestic violence in South Sudan.

Based on the above analysis, it is clearly noted that the COVID-19 can affect both men and women, but women and girls are the most affected. As care givers, nurses and mostly engaged in income generating activities will be the most prone to COVID-19, and the most to be impacted negatively, as they are in the front line; and that there is differential impact of COVID-19 among women and men, in terms of economic and development activities. Government restrictions to contain spread of CORONA virus will adversely affect most of the households; but more specifically those who are already vulnerable and are living in the margins. Being the majority employed by informal sectors the increase in prices of goods and services (such as transport fare) have left households vulnerable and exposed without any safety net. Thus, programmes and policies crafted should:

- Promote the possibility for women and young women to enter male-dominated fields/sectors. Include motivational or information sessions with positive role models, including men and women in non-traditional careers;
- Train women in leadership to take charge on matters affecting their lives;
- Consider young women's accessibility to various services including health prevention and response towards COVID-19 which predisposes women to risk factors;
- Advocate for tax exemption for sectors hardest hit by the crisis (Hospitality, tourism, transport, entertainment). Establishment of special insurance scheme or provision of economic stimulus can be very supportive;
- Provide vouchers for food and essentials purchase for families as part of resilience and recovery programmes;
- Extend the coverage and institute a time bound suspension of payment of essential services such as water, electricity and gas to the most vulnerable families and groups.

5.0 CONCLUSIONS AND RECOMMENDATIONS

Social and Economic Impact of COVID-19

The socioeconomic effect of COVID-19 on people, formal and informal economy are devastating, its impact is harder on weak and fragile economies. Global growth in 2019 was already the slowest since the global financial crisis of 2008/2009. COVID-19 has plunged the world economy into a recession with the potential of deep consequences and historical levels of unemployment and deprivation. Necessary measures to contain the spread of the disease through quarantines, travel restrictions and lockdown of cities have resulted in a significant reduction in demand and supply.

The impacts are complex and affect us all tragically. The COVID-19 crisis risks reversing decades of progress in the fight against poverty and exacerbating already high levels of inequality within and between countries and within countries. It is starting to impact the prices of food, with deleterious effects on nutrition of the most vulnerable. Unless measures are promptly put in place, the disruptions imposed by the pandemic and the measures adopted to suppress the virus will dramatically worsen the situation. This is especially important in large least developed countries, where the degree of complexity of the crisis is likely to be further compounded by the significant size of the vulnerable population and the extent of the informal sector.

The Economic Impact of COVID-19

The COVID-19 pandemic will have far-reaching impacts on labor market outcomes. Beyond the urgent concerns about the health of workers and their families, the virus and the subsequent economic shocks will impact the world of work across three key dimensions. First, both the quantity of jobs (both unemployment and underemployment) and the quality of work (e.g. wages and access to social protection) will suffer. Secondly, there will be negative and lasting effects on specific groups who are more vulnerable to adverse labor market outcomes.

Underemployment is also expected to increase on a large scale. As witnessed in previous crises, the shock to labor demand is likely to translate into significant downward adjustments of wages and working hours. The informal sector employment tends to increase during crises. However, with the COVID-19 and the current limitations on the movement of people and goods, this type of coping mechanism may be severely constrained.

With the observed decline in economic activity and restrictions on people's movements, both manufacturing and services are likely to be impacted negatively. The services sector, like tourism, travel and retail is especially vulnerable during crisis. An initial assessment by the World Trade and Tourism Council forecasts a decline in international arrivals of up to 25 per cent in 2020, which would place millions of jobs at risk. The vulnerable categories during Epidemics and economic crises can have a disproportionate impact on certain segments of the population. Based on past experience and current information on the COVID-19 pandemic and insights from previous crises, a number of groups can be identified:

- People with underlying health conditions and older people are most at risk of developing serious health complications.
- Young persons, already facing higher rates of unemployment and underemployment, are more vulnerable to declining demand for labor, older workers can also suffer from economic vulnerabilities.
- Women are over-represented in more affected sectors (such as services) or in occupations that are at the front line in dealing with the pandemic (e.g. nurses, hospitality industry, tourism, street vendors etc). Also women have less access to social protection, and are likely to bear a disproportionate burden in the care economy in the event of closure of schools or care systems (ILO, 2018).
- Unprotected workers, including the self-employed and casual workers are more likely to be disproportionately hit by the virus as they do not have access to pay or sick leave mechanisms. These group of people are less protected by conventional social protection mechanisms and other forms of income smoothing.
- Migrant workers are particularly vulnerable to the impact of the COVID-19 crisis, which will constrain both their ability to access places of work in destination countries and force them to return to their families.

However, the economic impact of COVID-19 can be seen locally, in the context of the following:

- South Sudan lacks a clear food security policy and strategic plan. In the event of border closure, there will be hunger and famine in the country;
- Rising unemployment;
- Increase in crime rates and insecurity;
- Loss of sources and means of livelihood;
- Women and young people, and particularly those who are in informal business will be impacted negatively;
- Prices of food items, medicines and other essential commodities have skyrocketed;
- More than 100% increase in public transport fares have been observed, with the burden shifted to commuters;
- Panic may be generated among the population;
- Civil servants who are in five or six months in arrears of unpaid salaried are the hardest impacted, as this situation deprives them of food purchases and stocking in case of a lockdown. This situation of hardship mat play out negatively in the effort to contain COVID-19;
- The current drop in oil price will negatively affect the economy;
- Flow of oil may be disrupted, subsequently a main source of national income will be seriously affected;
- Loss of revenue and taxes;
- Disruption of the academic calendar and learning process; and
- Food security of the entire country could be severely affected by the COVID-19 leading to health crisis and the suffering of the most vulnerable (children, women, people with disabilities and the elderly.

Social and Cultural Impact

Parenting in times of crisis such as the COVID-19 is not an easy task. According to the United Nations Educational, Scientific and Cultural Organization (UNESCO) estimates, 1.38 billion children are out of school or child care, and without access to group activities, team sports, or playgrounds. Parents and caregivers are attempting to work remotely or unable to work, while caring for children, with no clarity on how long the situation will last. For many people, just keeping children busy and safe at home is a daunting responsibility. For those living in low-income and crowded households, these challenges are exacerbated by poverty and can have serious consequences. Evidence shows that violence against children increased their vulnerability during periods of school closures associated with health emergencies as it gives rise to child abuse. In such situations, parents may experience increased stress. But for many, times of hardship can also allow for creative opportunity to build stronger relationships between parents, children and adolescents at home.

For older people in low and middle income countries, many aspects of this new infection remain uncertain. But one thing is already clear. The risk of dying from COVID-19 increases with age, and most of the deaths observed are among the elderly, especially those with chronic conditions such as cardiovascular disease and diabetes. This has important implications for the way in which public health and clinical responses should be developed.

In the settings of the developing world, the changing of family dynamics and increasing opportunities for labor mobility mean that in many low income countries, one or sometimes both parents live and work distantly, and their children are brought up by grandparents. Moreover, these caregiving roles provide an added risk of exposure for older people as it makes it impossible for them to self-quarantine. This risk may also be high for older people living at homes where conditions are often cramped and overcrowded.

There are issues related to the inclusion of older people in developing responses which social distancing policies must consider. The already precarious existence of many older people, particularly those living alone or dependent on others for care and support means that many may face barriers to obtaining food and other essential supplies if quarantine conditions become more widespread.

In the African context, religion also plays a crucial role in the nonchalance of people towards taking precautions. A good instance is the example of the Tanzanian president who, in his speech to a church congregation, likened the pandemic to Satan needing divine intervention to be quelled. He further stated that churches and mosques will remain open because that is where “there is true salvation” (Ng’wanakilala 2020). Islam and Christianity have a stronghold in Africa, and heavily influence the way people think, so much so that, in most cases, religious leaders have more legitimacy than political leaders. Even with the government ban, this tendency to obey religious leaders more explains the indifference towards COVID-19 measures and poses a threat to their implementation.

Psychological Impact

Regardless of exposure, people may experience fear and anxiety of falling sick or dying, helplessness, or blame of other people who are ill, potentially triggering off a mental breakdown. For those grieving from the traumatic and sudden loss of loved ones from the outbreak, the inability to gain closure can result in anger and resentment. As for those who are sick or quarantined, they may experience shame, guilt, or stigma. Studies have reported a high prevalence of psychological distress with longer duration of quarantine associated with an increased prevalence of posttraumatic stress disorder symptoms that were correlated with depressive symptoms.

The Political Impact

Disasters like the outbreak of disease are political and economic problems, as they affect decisions of government in these sectors. Regardless of how the CODVID-19 outbreak unfolds in Africa, its countries are bound to suffer political and economic repercussions. As they direct resources to the COVID-19 response, leaders have cut down on routine government business – especially that requiring in-person contact. Some legislatures continue sitting but mainly to consider emergency bills.

It is observed from the current findings that the political and institutional impact of COVID-19 could be summarised into the following;

- It may lead to anarchy and insecurity;
- Increase in incidences of theft and robberies;
- Peace implementation may be impeded;
- It may interfere with geopolitics, and
- Closure of government institutions
- Community Transmission: People may get infected but stay at home because they lack means or fear stigma;
- Though the Government is the main employer, delay in the release of salaries has left households vulnerable and without safety net;

RECOMMENDATIONS

1. Massive awareness campaign need to be undertaken to highlight the effect of population density as a predisposing factor, including myths and public perceptions and attitudes toward the pandemic (e.g. weather conditions cannot allow spread of COVID-19 In South Sudan);
2. City Council needs to enforce and maintain COVID-19 hygienic measures to save guard water supplies. It should as well, consider prices control;
3. Ensure pro-poor and vulnerable shutdown strategies balancing lockdown and livelihood, including a financial stimulus package;
4. Continue to implement Peace agreement, social cohesion and reconciliation;
5. Promote accountability and fiscal discipline- Embrace opportunities to re-set foundations of accountable governance service delivery;
6. COVID -19 information campaign on prevention and response focus on behavior change;

7. Strengthen partnership and development cooperation - Active donors' involvement in the campaign against COVID-19 be encouraged
8. Develop a people oriented economic stabilization and recovery plan. Reforms measures can start early to help communities and citizens bounce back and reinvigorate the economy, sustain peace;
9. Public servants' salaries which are in arrears of up to six months be promptly paid to enable them meet the challenges of livelihood and other essential needs. Furthermore, to alleviate poverty, government and private sectors need to review salary structures of their work force;
10. A clear policy for food distribution be developed and implemented in a fair and transparent manner. Ministries of Humanitarian Affairs and Gender, Child and Social Welfare to identify vulnerability;
11. Government has to come up with strategic food reserve policy that could last at least six months;
12. Intensify testing of truck drivers freighting food and other essential commodities at the borders (alternatively, truck drivers have to drive up to the border and then South Sudanese drivers take over);
13. Government should consider subsidies and tax waiver on strategic commodities (food, medicine and fuel);
14. Government should consider creating 'Emergency COVID-19 Fund, to support the affected population;
15. Government to reconsider reopening of some essential businesses. In addition, it has to improvise alternative sources of livelihood and survival to the informal business sectors. This should include laid-off workers of private sector;
16. Ministry of Education has to come up with distant learning program over radios and TV or any other means to engage the students in learning programs;
17. Government to procure rapid testing kits and PPE for the front line health workers, and to establish COVID-19 testing centres in designated zones. It should also promote voluntary counseling prior to quarantining, as well as anger management and trauma healing;
18. Government law enforcement agents have to ensure that the Government COVID-19 preventive measures are observed. Border policing should be strictly followed and better mechanisms for border trade be improvised to ensure flow of goads;
19. Faith Based Organizations to actively and positively engage in COVID-19 awareness campaign and observe preventive and cautionary measures;
20. Provide non-pharmaceutical materials like hand washing sanitizers and hygienic materials and measures of social distancing with a gender perspective;
21. Explore Budget stimulus to protect the poor and vulnerable during the shutdown period. This can be inform of loan, cash or vouchers for food and essentials purchase for families;
22. Establish emergency lending mechanism for the vulnerable e.g. women whose business are affected due to the Impact of COVID-19;
23. Ensure continuous gender and social economic analysis and monitoring of the pandemic;
24. Strengthen health systems including setting up national nerve centres to bring together crucial leadership skills;
25. Involve communities by consulting them when designing COVID-19 prevention measures

26. Support universities to research and draft clear guidelines on implementation of High Level Taskforce policies on COVID-19 response

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