



‘Some got married, others don’t want to attend school as they are involved in income-generation’:

Adolescent experiences following covid-19
lockdowns in low- and middle-income countries

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April 2021

Acknowledgements

The authors are grateful to UK aid and to the Ford Foundation for funding to carry out this virtual research. The authors wish to acknowledge the contributions to data collection and data management from the following colleagues in Bangladesh: Sabina Rashid, Alvira Farheen Ria, Samira Ahmed Raha, Sajib Rana, Prantik Roy, Taslima Aktar, Saklain Al Mamun, Mehedi Hasan Anik; and the Mindset team in Jordan. Thank you also to Erin Oakley, Sarah Baird, Mohammad Ashraful Haque, Shabib Raihan and Jennifer Seager for their input. Heartfelt thanks also to Nihal Said for her collaboration throughout various stages of the research, and for her input into previous drafts along with Miriam Temin, Pooja Singh, Kathleen Sherwin, Mariama Kabia and Divya Mathew and colleagues from the AGIP Evidence Committee. The authors also wish to thank Kathryn O'Neill and Anna Andreoli for their editorial support and Cheikh Sy and Ottavia Pasta for layout and design.

This research has been conducted on behalf of the Adolescent Girls Investment Plan (AGIP) coalition. AGIP is a global partnership co-chaired by Plan International and Girls Not Brides and includes International Planned Parenthood Federation (IPPF), Gender and Adolescence: Global Evidence (GAGE/ODI), Population Council, International Center for Research on Women (ICRW), Malala Fund, Women Deliver and, Ford Foundation. AGIP aims to stimulate the development of investment frameworks and tools so decision-makers can confidently deliver a comprehensive approach to advance gender equality through girl-centered action.

Suggested citation

Jones, N., Guglielmi, G., Małachowska, A., Abu Hamad, B., Yadete, W. with Abu Hamad, S., Abu Hamra, E., Alam, F., Alheiwidi, S., Alabbadi, T., Al-Redaisy, N., Amaireh, W., Amdeselassie, T., Banioweda, K., Diab, R., Gebeyehu, Y., Gezahegne, K., Iyasu, A., Qandeel, A., Sultan, M., Tilahun, K. and Workneh, F. (2021) *'Some got married, others don't want to attend school as they are involved in income-generation': Adolescent experiences following covid-19 lockdowns in low- and middle-income countries*. Report. London: Gender and Adolescence: Global Evidence

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Abbreviations

FGD	Focus group discussion
IDI	In-depth interview
IDP	Internally displaced person
ITS	Informal tented settlement
LMICs	Low- and middle-income countries
MENA	Middle East and North Africa
NGO	Non-governmental organisation
SDG	Sustainable Development Goal

Executive summary

Overview

This report aims to support timely and context-relevant policy and programming in Bangladesh, Ethiopia, the State of Palestine (Gaza and West Bank) and Jordan by adding to the evidence base on adolescent girls' and boys' experiences during covid-19. Drawing on mixed-methods research it captures the risks and opportunities adolescents face across four low- and middle-income country contexts six to nine months after lockdowns in response to the pandemic were first introduced. Country-specific timelines of the evolution of the pandemic and key policy moments are used to contextualise adolescent voices vis-à-vis evolving pandemic trajectories.

With a focus on the intersectional challenges faced by adolescents including by gender, age, marital status, disability and context, the report covers three key domains: education and learning; violence and bodily integrity; and voice, agency and community participation. This is the companion report to a report published in August 2020, 'I have nothing to feed my family', which focused on the immediate, short-term effects of covid-19 and associated lockdowns on girls and boys across the same contexts. The report concludes with key recommendations for policy and programming actors so that efforts to 'build back better' post-pandemic can be more effectively informed by adolescents' experiences and voices.

Methods

The findings draw on mixed-methods research with adolescent girls and boys and their caregivers in Bangladesh, Ethiopia, Jordan and Palestine. Virtual phone surveys were conducted with almost 7,000 adolescents aged 12–19 at baseline, who were randomly selected from the Gender and Adolescence: Global Evidence (GAGE) longitudinal sample, with the exception of Palestine where a purposely selected sample of vulnerable adolescents aged 12–19 was contacted. Qualitative research was carried out with a sub-set of over 400 respondents including adolescent girls (n=204) and boys (n=163) aged 10–14 and 15–19, and key informants (n=60) with

education, public health and social service expertise. The qualitative sample also included married girls (n=72) and adolescents with disabilities (n=38) to best understand their lived realities during the pandemic. In-depth virtual (either phone or WhatsApp) qualitative interviews were undertaken between September 2020 and January 2021.

Findings

Our findings highlight that many adolescents continue to experience interrupted lives due to covid-19. Pandemic-related risks are often compounded for the most disadvantaged groups of adolescents, including married girls, who emphasised a greater domestic and caring workload, increased tensions at home, and greater risk of violence (including intimate partner violence), with fewer opportunities to participate in community activities.

Education and learning

With the exception of Ethiopia, where adolescents returned to school in late 2020, the mixed-methods findings underscore that adolescent girls and boys in the three other focal countries were still out of education. While participation in distance education is high across the four country samples – particularly for urban adolescents – phone and internet connectivity, limited access to personal devices and expensive credit all pose key barriers to continuity of learning. Adolescent girls face marked disadvantages due to the digital gender gap. While, on average, pressure to participate in paid work plagues boys more than girls and poses opportunity costs to engaging in distance education, unpaid domestic and care work is a cross-cutting challenge faced by girls.

Violence and bodily integrity

The findings indicate that many adolescents face precarious living environments depicted by increased levels of household stress, which can manifest in verbal and physical violence. Across samples, adolescents also reported an increase in community violence. While a minority of girls in Bangladesh, Jordan and Palestine



Adolescent girl in Amhara. ©Nathalie Bertrams / GAGE

reported being concerned about increasing pressures to marry since the pandemic, the majority viewed increased household economic struggles as contributing to a reduction of child marriage risks, due to the unaffordability of weddings and in establishing a household. In rural Ethiopia, however, the opposite held true in our data where girls experienced increased risks of marriage due to economic poverty, discriminatory gender norms that value girls for their marriage potential over their education, and the lack of surveillance and reporting due to an absence of teachers and health extension workers.

Voice, agency and adolescent coping strategies

While adolescent girls and boys have adopted coping strategies as the pandemic ensued, this should not be confused for resilience. The closure of schools and recreational spaces has impaired adolescent girls' ability and freedom to interact with their peers, and exacerbated pre-existing gendered mobility restrictions. While adolescents relied on phones to contact friends, girls' limited access to personal devices often severed their communication beyond the confines of their

homes. While volunteering opportunities for adolescents appeared sparse in general, girls were more precluded from participation than boys.

Conclusions and recommendations

Our findings underscore that for many adolescents the pandemic has been a harbinger of challenges across multiple dimensions, including education, bodily integrity, livelihoods, coping strategies, mobility, voice and agency. While our evidence points to an increase over time in opportunities for young people to be involved in the pandemic response in a volunteer capacity, these remain very limited overall, and especially for girls and adolescents with disabilities. There are some examples of adolescent girls getting involved in NGO outreach activities to support younger children or vulnerable neighbours, and participating in online youth activist work, especially in the MENA country contexts, and it is from these girls that we need to continue to learn so as to better inform programming and policy to support girls' voice and agency.

Overall our findings suggest that investments in adolescent girls need to be significantly scaled up, and delivery and targeting strengthened, if LMICs are to emerge from covid-19 and meet their SDG targets, delivering on the call to 'leave no one behind'. The report concludes with priorities for action, which will require strategic partnerships between governments, development partners and the private sector:

1. Education and learning

- Tackle access barriers to distance education, especially the digital divide experienced by adolescent girls and young people who are economically disadvantaged, and support enhanced online curricula and teacher training.
- As schools reopen, establish a recovery plan for the medium-to-long term to address the educational gaps created by the pandemic through catch-up programmes and outreach to those who do not re-enrol, especially boys at risk of child labour, girls at risk of child marriage and adolescents with disabilities.

2. Protection from age- and gender-based violence

- Invest in community-based as well as online and phone-based reporting mechanisms and helplines to expand opportunities to report age- and gender-based violence, including harmful practices such as child marriage and FGM/C.
- Provide support to parents, including social protection and sensitisation around positive discipline approaches, given heightened household tensions during lockdown.
- Ensure that timely, rigorous research into contextual drivers of child marriage during covid-19 feeds into programming and policy.

3. Adolescent girls' voice and agency

- Ensure that adolescent girls' perspectives and experiences are accorded priority in the development of policy and programming responses to the pandemic, and ensure that girls from diverse backgrounds and social groups are equitably represented and supported in these roles.
- Engage with girl- and youth-led organisations to shape the pandemic emergency and recovery responses.
- Develop low-cost, safe and easily scalable programming – whether socially distanced in-person or virtual options – for young people to connect with peers while schools remain closed.

4. Livelihoods and social protection

- Strengthen gender- and adolescent-responsive social protection, including multi-purpose cash and linkages to complementary adolescent-friendly services, leveraging pre-existing platforms where possible, informed by needs assessments and research about young people who are not being reached by existing social protection responses.
- Urgently monitor social protection investments in terms of design and programme participants, with more tailored approaches so as to effectively support the newly vulnerable and less visible groups of disadvantaged young people, including migrant adolescents, who often have no access to family support.

Introduction

One year on from the official declaration of the covid-19 pandemic, the situation facing countries is highly varied. Many are still experiencing forms of lockdown and closure of services, with an estimated 168 million children experiencing school closure for at least a year (UNICEF, 2021a), as is the case in low- and middle-income countries (LMICs) such as Bangladesh and the Philippines. However, in other contexts, such as Ethiopia, although schools have now reopened, there are often significant differences to pre-pandemic classroom realities, and there are concerns that millions of young people who were enrolled prior to the pandemic will not return, due to poverty, paid work pressures and child marriage.

The economic impacts of the pandemic have been far-reaching and are expected to push 71 million people into extreme poverty (Mahler et al., 2020). This has consequences for food security and nutrition, which is particularly critical for adolescents given that the second decade of life is a key window for physical and cognitive development.

Although adolescents are generally at a lower mortality risk from covid-19, the pandemic is having significant negative impacts on young people's mental health in LMICs, with girls, older adolescents and those with pre-existing vulnerabilities most at risk (Kilngel et al., 2020; Majeed and Ashraf, 2020; Bellerose et al., 2020; Pinchoff et al., 2020; Patel, 2020; Zhou et al., 2020). Heightened household stress as a result of economic and privacy constraints – especially in contexts of crowded living conditions, whether in urban slum communities or refugee camps – are resulting in greater risk of age- and gender-based violence, especially for girls and young women (Marques et al., 2020; Peterman et al., 2020; Mlambo-Ngouka, 2020; CARE, 2020). Moreover, the World Bank and the United Nations Refugee Agency (UNHCR) have reported on growing concerns about deepening vulnerabilities among refugee populations during the pandemic (Malaeb and Wai-Poi, 2020).

Given that the endpoint of the 2030 Agenda for Sustainable Development is now less than a decade away, the importance of improving outcomes for children and adolescents as part of achieving the Sustainable

Development Goals (SDGs) cannot be understated. This is especially the case for SDG 3 targets on adolescent sexual and reproductive health and mental health, SDG 4 on education and learning, SDG 5 on gender equality and the prevention of harmful practices such as child marriage, and SDG 10 on reducing inequalities. Accordingly, understanding how covid-19 is impacting on adolescent girls' lives and opportunities for voice and choice will be critical to inform national post-pandemic response plans.

Objectives of the report

To support timely, context-relevant and gender- and age-responsive policy and programming, the Gender and Adolescence: Global Evidence (GAGE) research programme, together with the Adolescent Girls Investment Plan (AGIP), is leveraging its longitudinal research sample to engage with adolescent girls and boys in four LMICs – Bangladesh, Ethiopia, the State of Palestine (Gaza and West Bank) and Jordan – in real time to explore how their lives are changing as covid-19 evolves. Through quantitative data collection, in-depth interviews (IDIs) conducted by telephone, small focus group discussions (FGDs), participatory photography and audiodiaries, GAGE captures adolescents' insights as to the immediate effects of the crisis in each of the four focal countries to inform the design and implementation of tailored support that will help adolescent girls and boys to emerge from the crisis with resilience.

This is the companion report to a report published in August 2020, 'I have nothing to feed my family', on the short-term effects of covid-19 and associated lockdowns on girls and boys in LMICs. This report focuses on the slower-onset effects of the pandemic six to nine months after lockdowns were first introduced. In this report we focus on the experiences of girls and boys, and how intra-household gender dynamics and community gender norms shape their evolving experiences of the pandemic. We also adopt an intersectional lens to highlight the heterogeneous experiences of girls who are already married, those from refugee communities, and adolescent girls with disabilities, in an effort to underscore the importance of tailored



School in Zaatari camp, Jordan © UNICEF

approaches to supporting adolescent girls in crisis contexts such as the pandemic.

We draw on AGIP's covid-19 risks and opportunities for adolescent girls framework, focusing on four key domains: education and learning; age- and gender-based violence; voice, agency and community participation; and livelihoods and social protection. In each section we summarise the key findings from mixed-methods and participatory research across the four focal countries, then provide a more detailed overview of adolescents' experiences in each

setting. Gender and country differences are highlighted as relevant; where these are not stated, it is because they did not emerge strongly at this point. We conclude by reflecting on both the risks that the pandemic has entailed for girls' full capability development, as well as the opportunities it has presented for strengthening girls' voice and participation in their communities. We also reflect on entry points for strengthening the response so that efforts to 'build back better' post-pandemic are more effectively informed by adolescents' experiences and voices.

Methods

Our findings draw on mixed-methods research with over 7,000 adolescents and their caregivers in Bangladesh, Ethiopia, Jordan and Palestine, including two rounds of phone surveys (carried out between May and June 2020 and September and December 2020) and in-depth virtual (either phone or WhatsApp) qualitative interviews (see Baird et al., 2020a and 2020b for the survey tools, and Małachowska et al., 2020 for our qualitative research tools), as well as key informant interviews with education, public health and social services experts undertaken between

September 2020 and January 2021 (see also Figure 1 and Tables 1 and 2). For more detail on the quantitative findings see Baird et al., 2020cd, Ahmed Raha et al., 2021 and Abu Hamad et al., forthcoming.

Researchers were selected from partner research organisations in the respective countries who had built up prior relationships with participants in the GAGE research. These researchers carried out the telephone interviews in local languages, and interviews were transcribed, translated and coded, before being thematically organised.

Figure 1: Participatory research sample and qualitative tools used with adolescents



Table 1: Qualitative and participatory research sample

Country	Younger girls (aged 10-14)	Younger boys (aged 10-14)	Older girls (aged 15-19)	Older boys (aged 15-19)	(Married girls)	(Adolescents with disabilities)	Key informants	Total
JORDAN	16	15	21	16	14	8	20	88
PALESTINE	19	14	29	18	9	15	23	103
ETHIOPIA	46	36	53	54	43	10	13	202
BANGLADESH	3	2	17	8	6	5	4	34
TOTAL	84	67	120	96	72	38	60	427

Table 2: Quantitative virtual sample

Country	Bangladesh – Dhaka	Ethiopia – Urban only	Jordan	Gaza	West Bank	Total
Description	A random sample of adolescents aged 12–14 and 17–19 at baseline from three slums in Dhaka: Duaripara, Mohammadpur and Ershadnagar.	A random sample of adolescents aged 12–14 and 17–19 at baseline from three urban centers in Ethiopia: Adami Tulu, Debre Tabor and Dire Dawa.	A random sample of vulnerable Jordanian, Syrian and Palestinian adolescents aged 12–14 and 17–19 living in camps, host communities, or Informal Tented Settlements (ITS) in five governorates of Jordan: Amman, Mafraq, Irbid, Jerash and Zarqa.	A purposely selected sample of vulnerable adolescents aged 12–19 with refugee and non-refugee status residing in camp and non-camp locations. 14		
Total sample	780	2,053	3,067	505	500	6,905



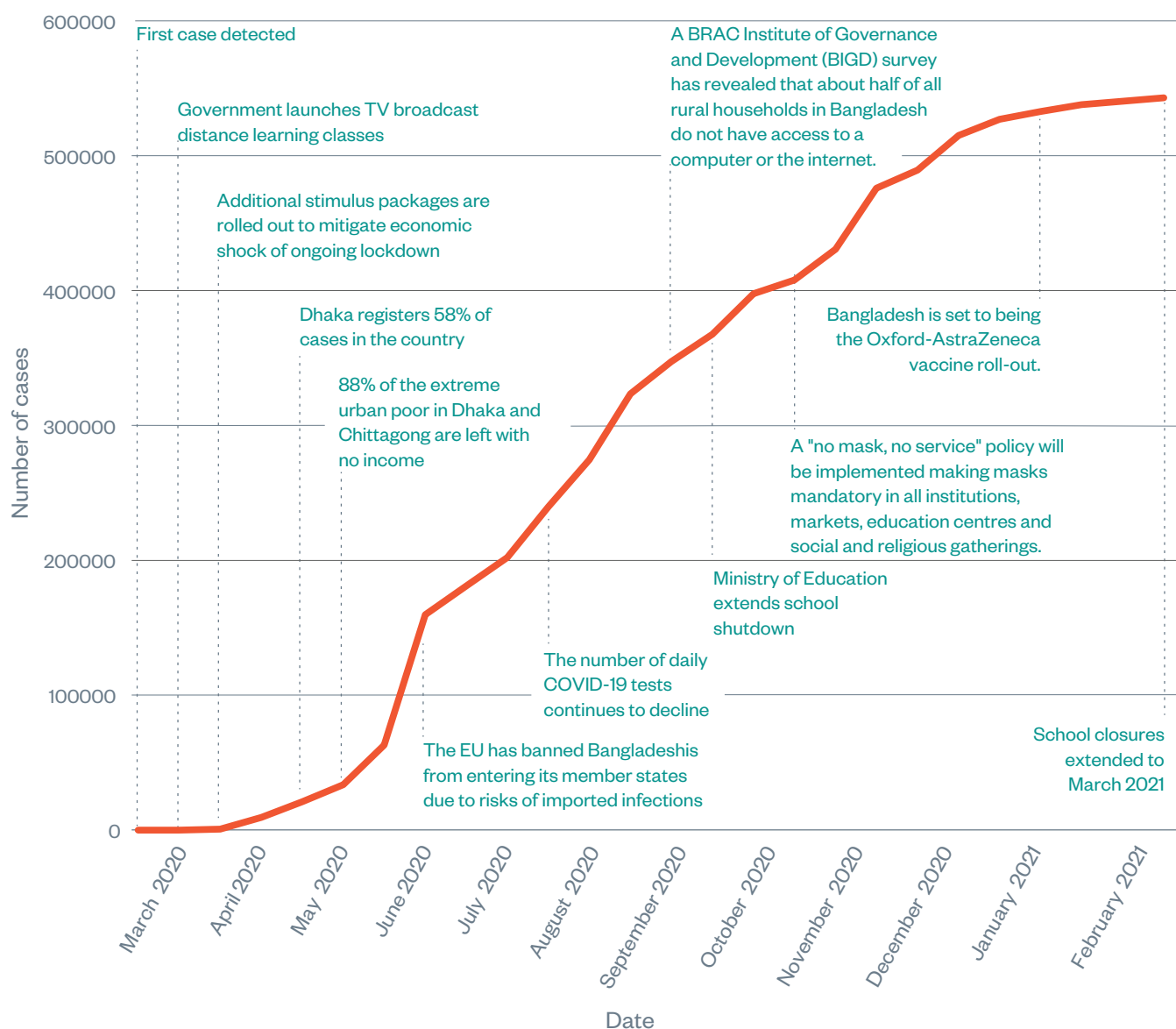
Research contexts

Our four focal countries have experienced diverse trajectories during the pandemic, with high levels of variability in terms of the timing and severity of infection rates and resulting deaths, as well as in government responses, including testing and social protection provision. Here, we provide a graphic timeline of infection and testing rates per country from March 2020 to March 2021, mapped

against key moments in the evolution of the pandemic in each country. For a more extensive overview of each context to further set the scene for our findings, please see **Annex 1: covid-19 country-specific contextual overview.**

Given the importance of social safety nets in mitigating the effects of the pandemic-related lockdowns and service closures on poverty and vulnerability, we also provide a

Figure 2: Covid-19 infection rates and key developments timeline in Bangladesh



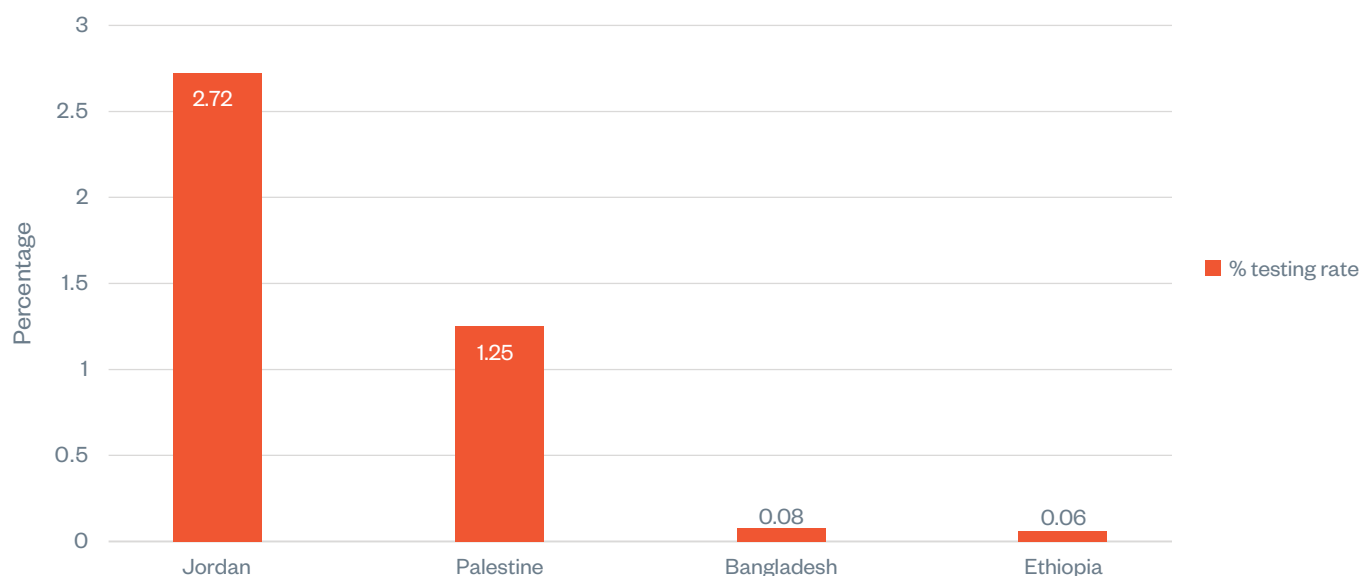
Source: WHO Coronavirus Disease (COVID-19) Dashboard, <https://covid19.who.int/region/searo/country/bd>; Data last updated 2021/02/28



country-by-country overview outlining social protection measures adopted during covid-19. Our findings highlight that while a range of measures have been introduced, the scale and targeting of these measures have had significant limitations in all focal countries, and that attention to the

specific vulnerabilities faced by adolescents and adolescent girls in particular has been largely missing. Please see **Annex 2: Overview of social protection programme responses to the pandemic in GAGE focal countries.**

Figure 3: Daily covid-19 tests per thousand people*



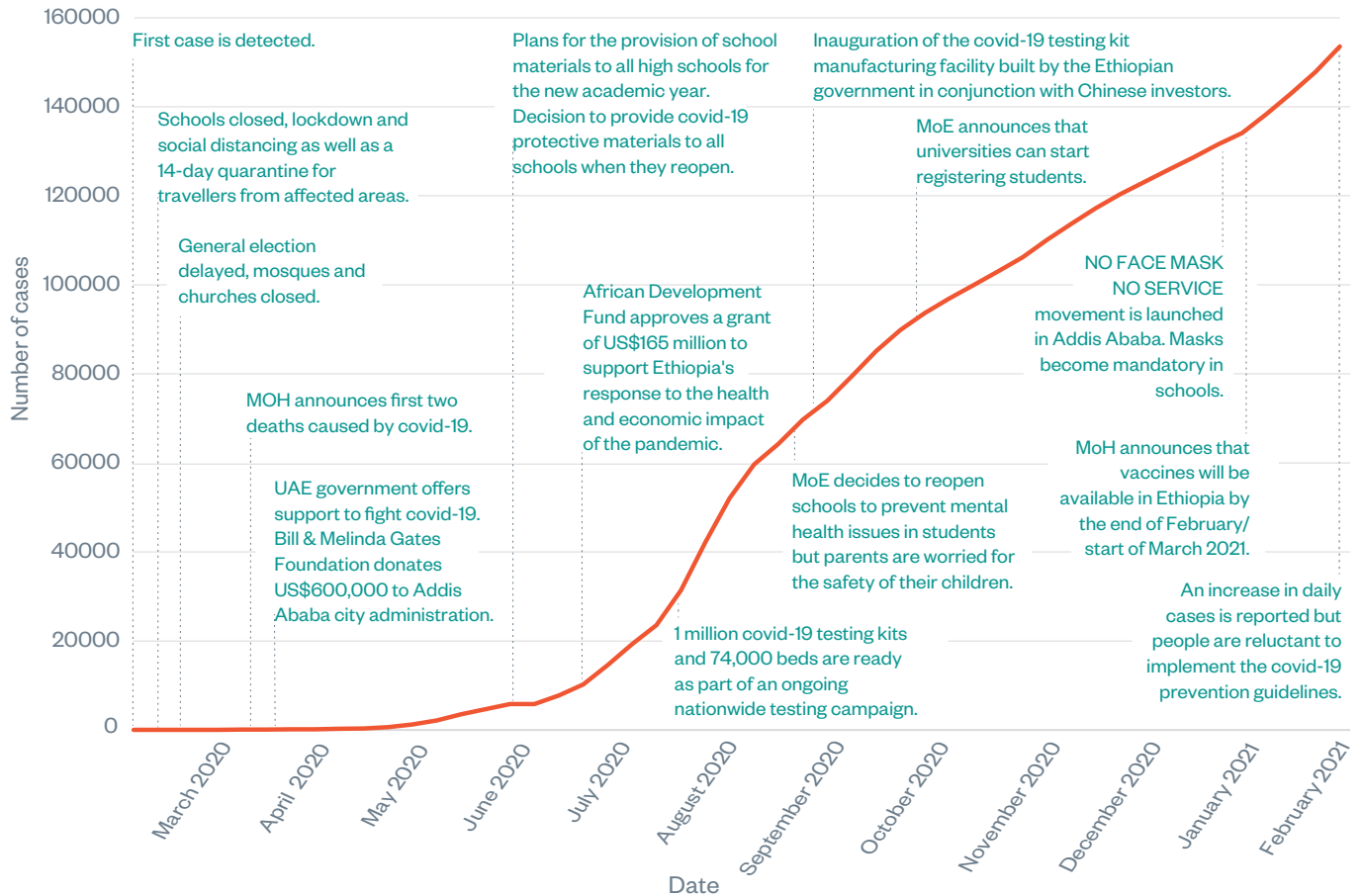
Figures given as a rolling 7-day average*; Data last updated: 2021/02/ 26

Source: <https://ourworldindata.org/coronavirus-testing#source-information-country-by-country>

* These figures show the number of daily tests per thousand people. Because the number of tests is often volatile from day to day, the figures show a seven-day rolling average.

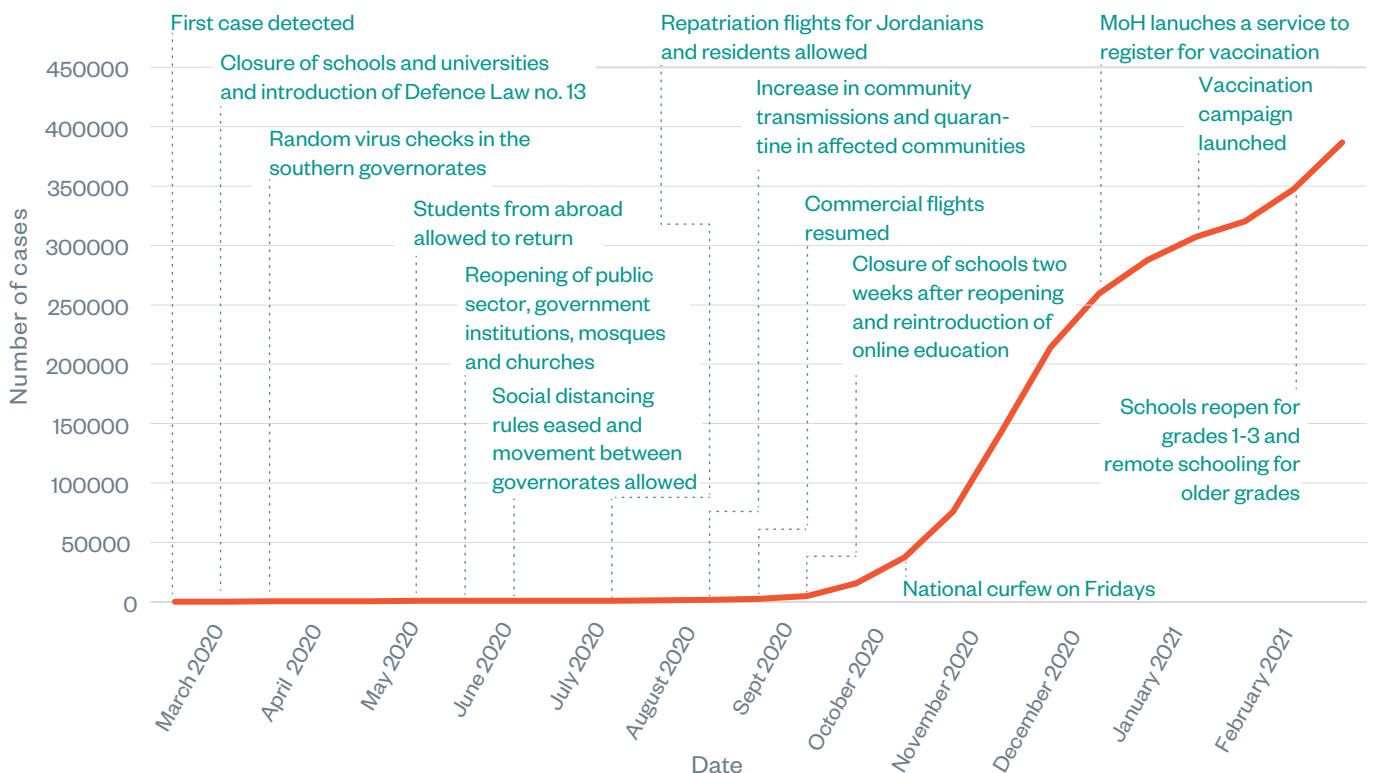
'Some got married, others don't want to attend school as they are involved in income-generation'

Figure 4: Covid-19 infection rates and key developments timeline in Ethiopia



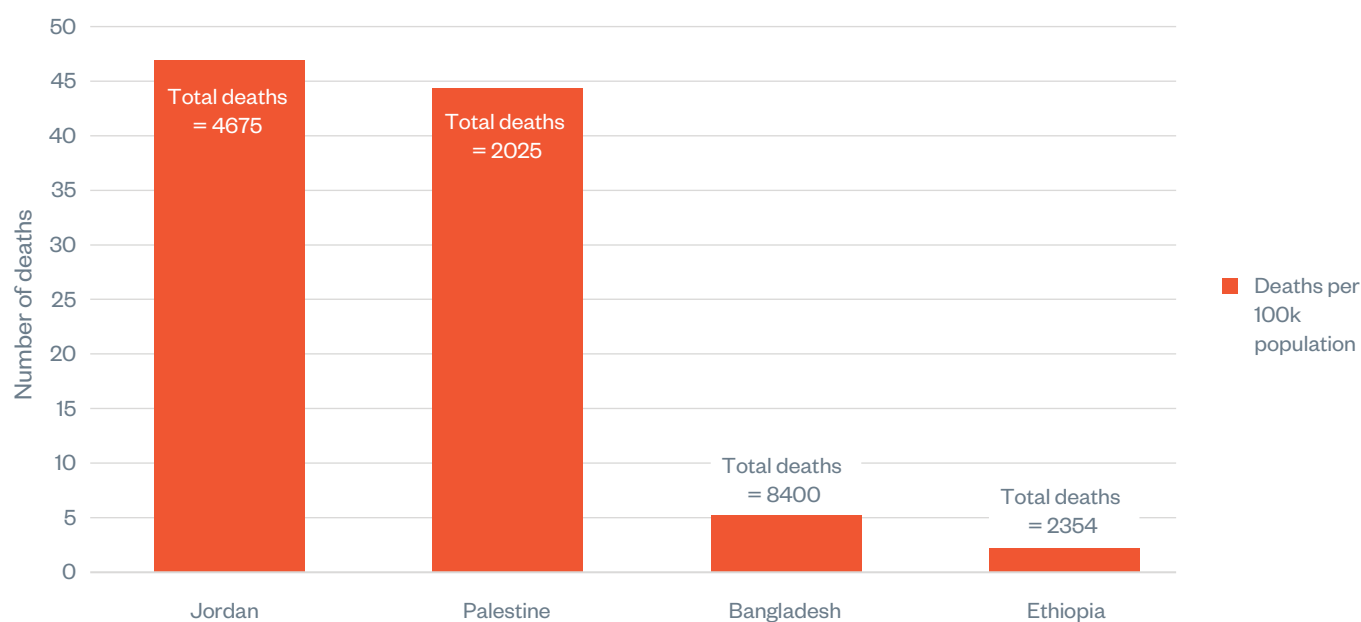
Source: IndexMundi.com/coronavirus cases ethiopia and MoH Ethiopia; Data last updated: 2021/02/28

Figure 5: Covid-19 infection rates and key developments timeline in Jordan



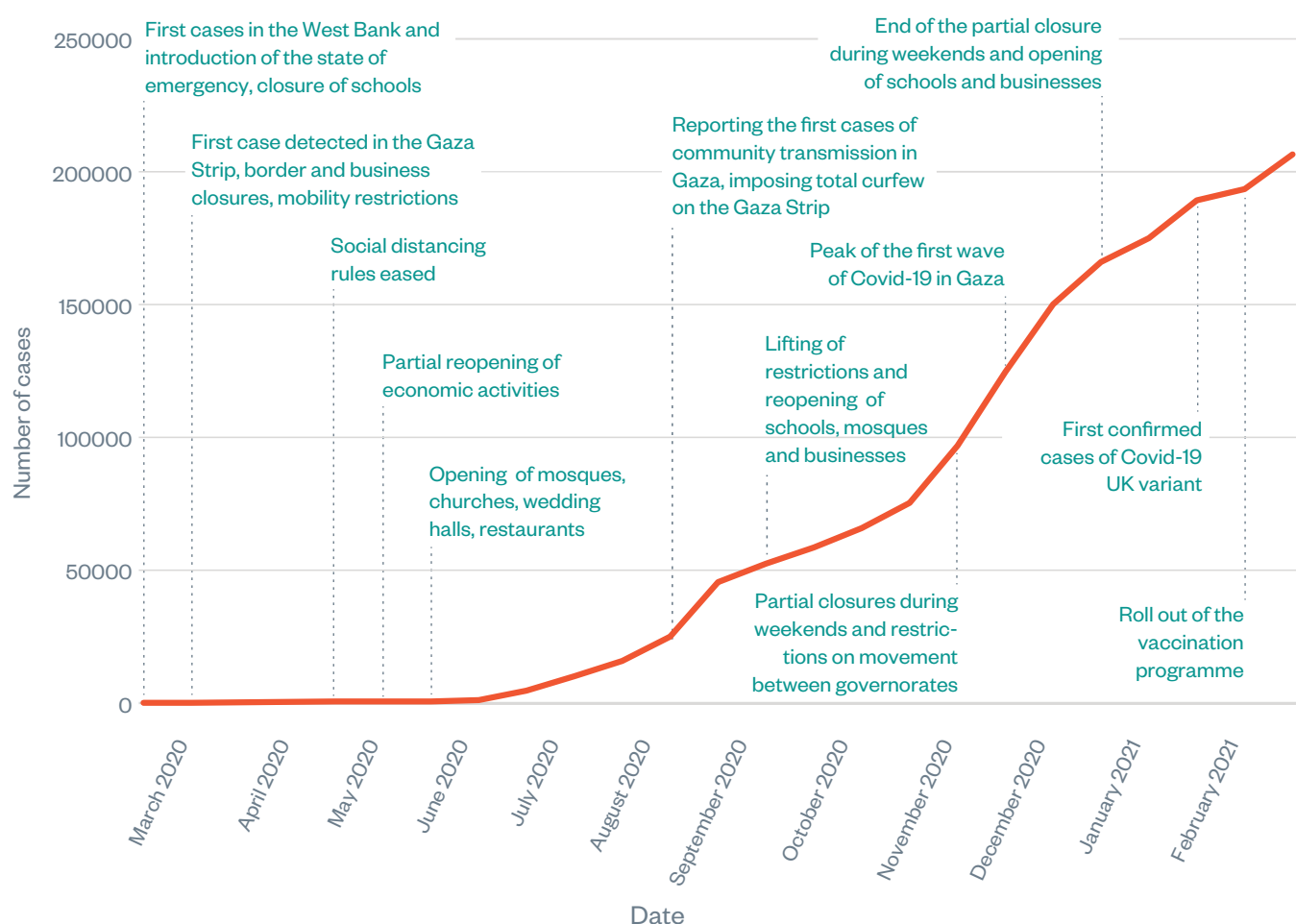
Source: World Health Organization, <https://covid19.who.int/region/emro/country/jo>; Data last updated: 2021/02/28

Figure 6: Covid-19 case fatality rate per 100,000 people



Source: World Health Organization, <https://covid19.who.int/region/emro/country/ps>
Data last updated: 2021/02/26

Figure 7: Covid-19 infection rates and key developments timeline in Palestine



Source: World Health Organization, <https://covid19.who.int/region/emro/country/ps>; Data last updated: 2021/02/28

Findings

I. Education and learning

Summary points: Covid-19 impacts on adolescent girl's education

- Urban adolescent girls' participation in distance education was high overall, and especially compared to rural girls among whom only a small minority were able to access distance education services.
- Phone and internet connectivity, access to personal devices and internet credit, were all key barriers, and overall girls faced significant disadvantages in terms of the digital gender gap.
- Pressures to participate in paid work at the expense of distance education were experienced by more boys than girls, although some rural girls in Ethiopia were pressured to migrate and engage in domestic work during the lockdowns and school closures.
- Unpaid domestic and care work burdens were another key challenge that adolescent girls faced.
- Only students in Ethiopia had returned to school in 2020; those who returned were relieved to be back in school although recognised that a sizeable number of their peers had been less fortunate and forced to drop out due to poverty, pressures to work and/or child marriage during the pandemic.
- Catch-up classes were offered but deemed inadequate in terms of making up for missed educational content, and measures to facilitate social distancing including the construction of additional classrooms and employment of additional teachers appear to have been very unevenly implemented across and within regions.



Bangladesh

Participation in and exclusion from education pre-covid-19

In Bangladesh, 68% of adolescents in our Dhaka sample were enrolled in either formal or informal education before covid-19. While there are no significant differences by gender, educational access appears mediated by age: younger adolescents were 30 percentage points more likely to have been enrolled than older adolescents (81% and 52% respectively). School enrolment pre-covid-19 was also associated with marital and socioeconomic status, with married girls and adolescents from poorer households less likely to be enrolled in education. Among the older female cohort, married girls were much less likely to be enrolled than unmarried girls (17% versus 68%).

Qualitative data echoes these findings, underscoring that both social norms and opportunity costs to learning impact educational access. In our qualitative sample, 6 out of 30 adolescents had already dropped out of school before the pandemic, mostly due to household financial pressures. A 13-year-old out-of-school girl explained:

It hasn't even been a year yet [that I quit school]. My mother wasn't able to go to work, so my father was working alone, and my two other younger sisters are also studying... That's why. I left because of financial crisis... and I started working in garments [factory]. In my free time I sometimes read my sister's textbooks.

Social norms also impact educational access for girls. One 19-year-old girl explained that she had to drop out of school because of early marriage: *'[I stopped going to school] many years ago, after my marriage. I was 12 years old [when I got married] I became pregnant at that time so I didn't continue my education.'* Another reported having to stop going to school due to fear and insecurity caused by 'eve-teasing' or sexual harassment.

Participation in and exclusion from distance education during covid-19

Our mixed-methods findings show that distance education uptake during covid-19 school closures has been varied, but largely perpetuates pre-existing vulnerabilities. While almost all students who were previously enrolled in formal education (97%) were trying to continue learning during the earlier days of lockdown (May–June 2020), with no statistically significant differences by gender or age, the

» I still haven't been able to adapt myself with the online classes. I don't think I can go much further with my studies [through] these classes.

(A 19-year-old girl)

intensity with which they engage with distance education is slowing over time. Home study poses difficulties for many adolescents, who consider distance education an insufficient substitute and appear to be switching off from learning as the months go by. A 19-year-old girl expressed, *'I still haven't been able to adapt myself with the online classes. I don't think I can go much further with my studies [through] these classes.'*

Obstacles to distance learning

By far the most commonly cited way to engage in distance learning is studying with one's own books at home (80%), with boys 10% more likely to cite this modality than girls (85% and 75% respectively). Among married girls, those who were enrolled in school prior to the pandemic (just 17% of married older girls in our sample) all reported continuing to learn at home during the pandemic by relying on their own books.


Qualitative data highlighted that many adolescents reported their schooling being hampered or at risk of discontinuation due to the intrinsic nature of distance learning. Challenges reported include: (1) lack of communication with teachers; (2) poor digital connection and reliable technology (e.g. not having any smartphones in the household, or a single phone shared by multiple siblings, as well as poor internet connectivity or costly internet packages); (3) not having a private space in the household for studying and logging onto online classes; and (4) structural and technical problems with televised classes (e.g. poor audio and video quality, no classes broadcast for college/higher secondary-level students, time management issues). A 17-year-old girl living with a visual impairment crystallised the sentiments of many: *'We used to go to school, then also take breaks and spend time with friends. Now it is not possible and hard to understand everything Sir [teacher] says through phone or online.'*

Overall, just 7% of adolescents reported that the Ministry of Education's distance learning broadcasts

(via television (TV) and radio) were their primary form of learning during the pandemic, with slightly higher rates among girls (11%) than boys (4%). When factoring in age, younger girls were most likely to access these broadcasts, with 13% reporting that this was their primary form of learning. While the government-sanctioned TV and radio broadcasts are not fulfilling students' needs, there is a balance to strike between low-tech modalities (such as TV) and the more high-tech modalities that many families do not have access to. One 17-year-old college-going girl, who had to discontinue her studies during covid-19 for this reason, suggested improving TV classes and making them inclusive to all categories of students, since almost all the households in her community have access to TV. She explained:

There are people who have only one phone in their house, and there are even some people who do not have a phone at all. Those who use button phones [feature phones], how will they do classes online? Everyone has TV in their house... If these online classes were shown on TV, it would have been beneficial for all.

Lack of reliable internet access is common and plays a part in the lack of uptake of online learning. Across the Dhaka sample, less than 1% of adolescents reported that their primary form of learning was through government online programmes or mobile learning apps, and less than 5% reported any form of online learning as their primary method of study during school closures, with no significant differences by gender, age or socioeconomic status. Due to the shortcomings of online teaching classes authorised by their school – both in terms of quality and frequency – as well as the lack of steady internet connection, some younger adolescents mentioned seeking external teaching support from private tuition classes, elder siblings, parents or classmates. However, this was a privilege that many could not afford; nor could they rely on effective family support with their studies. These adolescents were, therefore, lagging behind, as a 17-year-old boy described: *'If we didn't have any financial crisis, I would appoint a private tutor and study. That tutor could have taught me*

 If we didn't have any financial crisis, I would appoint a private tutor and study.

(A 17-year-old boy, Bangladesh)

many subjects.' Some adolescents also reported self-study tactics by reading through guidebooks published by private coaching centres, trawling through online videos when possible, and reading materials from YouTube and Google as complementary learning aids alongside their school's online classes.

Risks of dropping out of education

Irrespective of age, girls seem most at risk of study interruptions (temporary or permanent) compared to boys due to comparatively limited use of technology, as a 14-year-old girl noted: *'I can only use my brother's phone when he is at home. Otherwise I can't use his phone and watch YouTube lessons.'* Expectations that they must help at home (with chores or looking after other family members) are another reason, as a 17-year-old girl explained: *'There are some situations when I have to stop reading and go to do household chores, then there is no more reading for that time... When my father comes back from work [I have to do] other household chores. I have a niece who I have to give some time to as well.'*

Our quantitative data further finds that girls are 11 percentage points less likely to receive help with their schoolwork compared to boys (65% versus 76%), as highlighted by a 12-year-old girl: *'I read from my textbook [at home]. There is no one to help me.'* Girls are also 14 percentage points less likely to enjoy additional space to study at home (50% of girls versus 64% of boys) although qualitative data suggests that this has more to do with poor housing conditions and lack of space than with gender. As a key informant explained: *'In urban slums, the housing pattern is a bit different... They live in a small space, so they don't have a dedicated space for learning. The small houses they live in, you can't stay in those small spaces for too long either.'* (see Box 1 below).

Ethiopia

Participation in and exclusion from education pre-covid-19

In Ethiopia, 75% of adolescents in the GAGE urban sample were enrolled in some type of schooling (formal or informal) before covid-19, with younger adolescents (77%) more likely to be enrolled than older adolescents (70%). In urban areas, younger girls and boys were almost universally likely to be enrolled in school (98%). However, there was a gender divide among the older cohort in boys'

Box 1: A Bangladeshi girl on the verge of dropping out of school due to covid-19: Tuli's story

Tuli (name changed for anonymity) is a 19-year-old girl living in Community B. Before covid-19, she attended college where she followed lessons diligently and participated in group study with her classmates. Since her college closed due to the pandemic, Tuli's studies have been gravely hampered. Despite having textbooks, she struggles to study at home *'I use my books and study when I want to, but it is almost like not studying at all... At home I feel [disengaged] and do not feel like studying.'* Tuli attends her college's online classes when possible and considers these more useful than the government-run TV classes, *'It is easy to attend these [online] classes, because I can interact and ask questions. In the TV classes you cannot do anything, you just have to watch.'*

However, she continues to face difficulties in studying at home due to the lack of direct guidance from teachers. Moreover, Tuli is not always able to attend classes online due to the cost of mobile data and internet recharge fees, which she cannot continue to afford. She now feels upset and lonely studying by herself without the help of her teachers and friends. In addition, Tuli's parents have decided to marry her off as her father is sick and her family is going through a financial crisis due to the pandemic. Tuli understands that she has to drop out of college soon as her parents can no longer afford to finance her studies as well as her younger siblings'. Tuli believes that without covid-19, her parents would not have faced such financial constraints and would not have thought about getting her married so soon.

favour. Of the older urban adolescents in our sample, 86% of boys and only 77% of girls were enrolled.

Participation in and exclusion from distance education during covid-19

Following the closure of schools in late March 2020, the Ministry of Education made some provisioning for remote education via TV, radio and social media (e.g. Telegram), although uptake outside of urban areas was very limited. Key informants and adolescents both emphasised that these channels were not readily accessible due to electricity and internet connectivity challenges, as well as the gender digital divide. As an Education Bureau official in South Gondar (Amhara region) explained:

How many people have TV and radio? How many of the students in grades 11 and 12 have access to laptops and read things by saving on memory sticks? Even for us, while sitting in the woreda [town], for how many days do we have access to electricity and water? This [approach] is useful for larger towns. It is not possible for towns like ours... In such circumstances, 'education on television and radio' is unthinkable.

Similarly, an 18-year-old adolescent girl from a rural community in South Gondar explained that she had no access to any formal education during the six months of school closure:

The school was closed before corona[virus] was widespread. I don't know if it is God's will to eradicate the disease and then we can start school but we did not hear anything about it... There might be things I can do with a calculator but otherwise study is not something you can do on your own. It is something that you need

▶▶ How many people have TV and radio? How many of the students in grades 11 and 12 have access to laptops and read things by saving on memory sticks... This [approach] is useful for larger towns. It is not possible for towns like ours... In such circumstances, 'education on television and radio' is unthinkable.

(An Education Bureau official in South Gondar, Ethiopia)

to work in a group of three or four at school. There are some notes you can read at home but there is not much you can do alone.

Interviews with both adolescents and teachers highlighted that most teachers returned to their hometowns during the pandemic and school closures and thus there was almost no interaction between teachers and pupils.

Obstacles to distance learning

Among students who did participate in distance learning, the most commonly reported method of home study was using their own textbooks (58%), although small numbers of adolescents in urban areas reported that their primary method of learning was tuning in to Ministry of Education TV or radio programming (8%) or working on assignments



Young adolescent girl in Afar © Nathalie Bertrams

provided by their school (7%). Older adolescents in Dire Dawa reported substantially greater access to online learning platforms compared to older adolescents in other locations, probably due to better overall digital connectivity in the city. Even so, our qualitative evidence highlighted that due to ongoing political unrest in the city over the past year, covid-19 had compounded education disruptions. As a 17-year-old girl from Dire Dawa noted:

Even before the disease we were not learning in Dire Dawa because of the unrest. And now this disease came and we are not learning. Imagine, we are labouring on our schooling for a year without result. But aren't the main things [in life] peace and health?

Our survey findings indicate that overall, few formal schools provided learning support during school closures, with just 25% of adolescents indicating such support and only 10% of enrolled adolescents reporting contact with a formal schoolteacher in the week preceding the survey. This was echoed in the in-depth interviews, with students highlighting that they had had no interaction with their teachers, many of whom had moved back to their place of origin during the pandemic. With generally low levels of parental literacy, adolescents had very limited options to access support with their studies at home. As a 16-year-old girl from Dire Dawa noted:

I was studying a little after school was closed. When there is school you study and you attend your school,

but when you study without going to school, you forget things... Teachers don't send us questions or worksheets. There is nothing. We are at a critical time in our studies... This is harming us.

The survey findings indicate that most adolescents in urban areas were getting support from their families to continue studying (58%). Most often, this involved giving the adolescent a space to study (reported by 48% of students who had some family support), reducing chores (39%) and helping with schoolwork (37%). Very few received family support to set up study groups or access mobile phone apps for distance learning (2%). There were significant gender differences in terms of family support for distance education. Adolescent boys were more likely to report

It was very hard for me staying at home in terms of my learning – I was engaged in chores, I cleaned our compound, collected firewood and water (which are very far away) and I cooked food... The boys go to town and play.

(An 13-year-old girl, rural East Hararghe, Ethiopia)

receiving family support of some kind (63% compared to 54% of girls); they were twice as likely as girls to be given space to study (62% versus 35%) and to have sufficient time free of chores to accommodate home study (57% versus 22%).

However, data from the in-depth interviews, especially in rural areas, underscored that support from families for distance education was generally very limited, with girls facing strong family pressure to take on increased domestic and care work responsibilities in the household, leaving no time for study. As a 13-year-old girl from rural East Hararghe noted: *'It was very hard for me staying at home in terms of my learning – I was engaged in chores, I cleaned our compound, collected firewood and water (which are very far away) and I cooked food... The boys go to town and play.'* Others reported that they had been pressured to take on work as domestic workers to support their family, and this precluded any involvement in distance education. As an 18-year-old student in Batu who had migrated from a rural area to attend high school in the city explained: *'I started after the closure of the school... I earned 2000 birr per month... It could have motivated me to quit school as the money helps me a lot but I know that I can earn better income as long as I learn more.'*

The challenges of school closures were especially difficult for young people with disabilities. Among urban adolescents enrolled in education prior to the pandemic, 15% of those with a disability were using internet, TV or radio to continue learning, compared to 22% of adolescents without a disability. While overall, very few adolescents reported using the Ministry of Education's online programming as their primary form of learning during closures (2.5%), the figure was even lower for adolescents with disabilities: less than 1%.

Risks of dropping out of education

Of the urban adolescents enrolled in formal schooling prior to the pandemic, 97% reported that they wanted to return to school, although this contrasted starkly with the views of their primary female caregivers, who were significantly more worried about this being possible: 46% of caregivers were concerned that their adolescent would not return to school, especially caregivers of adolescent daughters (51%) compared to those of sons (41%).

Our qualitative interviews, undertaken following the reopening of schools in November 2020, suggest that for a significant number of young people, these concerns

were justified, especially in rural locales. As a 13-year-old from a community in rural South Gondar noted: *'Some got married, others don't want to attend school as they are involved in income-generation...'* Across both urban and rural research sites, adolescents reported that a number of their classmates had not returned due to work pressures or poverty. For example, a 14-year-old girl from Batu explained that she has not yet returned to school as she is taking care of her sister's children and her family seem to be discouraging her return:

I dropped out of school because of corona[virus] then my parents told me to help my sister with childcare. They said the school is not yet open in the village... I want to go back to school... My sister says she will send me and it is better if her children lack someone to take care of them than I miss school... But how can I go to school in Batu when I am taking care of children? I am at home and taking care of them... My parents say that the community is still concerned about corona[virus] and it is not open... My sister had then told me that I could attend school in night shift but now she has stopped talking about sending me to school.

For others, the challenge in returning to school is related to economic constraints, as rising inflation is making it more difficult for households to purchase basic items, including school materials. As a 14-year-old girl in Debre Tabor, who has been compelled to take up domestic work to support her family's livelihood, explained:

I started working in other people's houses after the school was closed in February [2020] due to corona[virus] and after that there was no one to buy exercise books for me and I was not able to learn and

I dropped out of school because of corona[virus] then my parents told me to help my sister with childcare. They said the school is not yet open in the village... I want to go back to school... But how can I go to school in Batu when I am taking care of children?

(An 14-year-old girl, Batu, Ethiopia)


I was brought to these people's house... After school started again, nobody was there to buy me books and so I had to quit... I am not comfortable. I wanted to continue my education but I am not able to do it... I asked them [my family] but they don't have the capacity to send me to school and they keep silent so I stopped asking... My parents live in a rural village... They had told me to work until school begins but when I went back to start school, they said that they will not be able to buy the books and they sent me back.

Similarly, a 15-year-old girl living in a rural community in East Hararghe noted that economic constraints combined with ongoing security challenges related to political unrest have hampered her ability to return to school after the pandemic:

We have been challenged by corona and the security problems for a long time... School closed for a long time because of corona, students forgot what they learned without going to school. We wanted to go to school but first security then corona stopped us. ... We were not going to places of work. Because of that we lack money and it exacerbates our poverty... I want to attend school and reach a good position. But I do not have materials to go to school. I do not have money. I am staying at home....

Child marriage emerged as another important driver of girls' non-return to school post-lockdown. While our quantitative survey found that among urban adolescents, relatively few (4%) were concerned that they may be pressured into marriage during the national state of emergency, our qualitative findings (especially in rural areas) indicate that adolescent girls tended to identify two or three classmates (on average) who had not returned to school. A 12-year-old girl in rural East Hararghe noted that most of the female students in her year group had dropped out, many due to marriage: 'We were learning in grade 6 [before covid-19]... There were 50 girls and 30 boys learning in my class... but now only 10 [girl] students are coming, many girls dropped out of school.' In other cases, marriage pressures resulting in dropouts seemed to stem from broader community norms that value marriage over education for girls, rather than due to direct family pressure. For example, an 18-year-old girl from Batu noted that:

Many students returned back to school but many also got married... All of the girls who got married are in my

 Many students returned back to school but many also got married... All of the girls who got married are in my age range... Instead of sitting idle without school they decided to get married.

(An 18-year-old girl, Batu, Ethiopia)

age range... Instead of sitting idle without school they decided to get married... I asked one of the girls what is the advantage of getting married and she argued that it is better to establish a household to get more freedom.

Return to school experiences after covid-19 lockdowns

Our findings highlight that adolescents were overwhelmingly relieved to be back in school, especially girls (see Box 2 below), as many had faced additional domestic and care work burdens during the pandemic as discussed above. However, there were mixed views as to the adequacy of the catch up programmes that schools offered after limited distance education provisioning. In some schools, especially in Amhara region, a 45-day catch-up period was implemented, but in other research sites the catch-up sessions were much shorter and students reported that they did not cover the previous grade's content in full but were instead automatically promoted to the next grade. As an 18-year-old girl in Batu city noted:

We have been attending tutorial classes for 15 days... it is insufficient. A revision for the previous lessons were made but were inadequate and then we directly entered into this year's classes... We have had the tutorial classes sitting under the shadow of a tree given the presence of large numbers of students and unavailability of free classrooms.

Many adolescents also noted that while the seating arrangements were less crowded than pre-pandemic with two rather than five students per desk, many schools had not hired additional teachers or built new classrooms to accommodate the physical distancing requirements. A 17-year-old girl also from Batu noted:

There are two students sharing a desk, four or five students were sitting at a desk before corona. There are 100 students in a section. Now we have been learning in a hall. The blackboard is located far away, it is difficult to read sitting down, we stand to read from the blackboard.... We are not learning well. It is not helpful if we continue learning the way we are learning... They are not seriously teaching us.

In terms of other covid-19 prevention measures there were also mixed reports on mask wearing. In some localities masks were distributed to grades taking national exams (i.e. grades 8 and 10) but others were compelled to buy masks to enter the school grounds, especially in Amhara region and urban settings. However, in rural East Hararghe some students noted that there are no hand-washing facilities and no wearing of face masks: *'There is no water, we wash hands at home before we go to school.... They did not give us a mask, we do not use masks at school...Three students are sitting at one desk.'*

Another important post-lockdown challenge facing students is the lack of school meals. Whereas school feeding pre-pandemic was a powerful incentive for school attendance for disadvantaged students, meals are no longer being provided, likely due to health and safety reasons. As a 15-year-old girl in rural Afar noted: *'I don't know why the school meals stopped after the school reopened... Many students who come from remote areas need to eat their breakfast at school and if there is school meals students will come to school early and won't be late.'*

There is no water, we wash hands at home before we go to school.... They did not give us a mask, we do not use masks at school...Three students are sitting at one desk.

(Students, rural East Hararghe, Ethiopia)

Jordan

Participation in and exclusion from education pre-covid-19

Before the pandemic, 75% of adolescents in our Jordan sample were receiving some form of education (whether formal or informal), including 70% in regular schools. Enrolment rates were significantly lower among refugees living in informal tented settlements (ITSs), among whom just 54% were participating in any schooling and 43% were attending formal school. Across age groups, girls were more likely to be enrolled than boys, but there were also significant differences by nationality, in that Jordanian adolescents were more likely to be enrolled in formal education than Syrian adolescents. Of younger boys living in host communities, 98% of Jordanians were enrolled compared to 93% of Syrians. Gaps were even larger among older adolescents, especially among girls: 84% of older Jordanian girls were enrolled compared to just 64% of their Syrian peers.

Box 2: Return to school post-covid-19 lockdowns in rural Ethiopia: Meseret's story

Meseret, a 13-year-old girl in grade 6 from a rural village in South Gondar, Amhara region, wants to be a doctor, so the school closure was very challenging for her. She worries that if the school was to close again – due to covid or political unrest – she will not be able to achieve her goal. *'If education is interrupted again in the future... it will have an impact on my future plans. I want to get a good education and I want to be successful in the future.'* During the months that the school was closed, it had a negative impact on her mental health. *'When the school was closed I was stressed and unhappy. But currently, the school is reopened and I am continuing my education. And that makes me happy.'*

Meseret attempted to study through distance education, so that she would not fall behind, but her family does not have a radio or TV, and she was often busy with chores. She is the eldest, so is responsible for helping her mother with household duties as well as helping her father on their farm. She also looked after her younger brothers, including helping them to watch the cattle. When she had free time, she travelled to her aunt's home in the nearby district town and listened to the educational programmes on the radio. *'I tried to go to my aunt's house [a 5 km walk] every day to listen to the radio programme... I would listen until 9 p.m. in the evening and sleep at her house sometimes, and then return home to do chores in the morning.'*

Although her work burden increased while she was out of school, she feels supported by her parents, especially her father, and does not want to disobey them. *'I managed... when my parents told me to be somewhere, I will be where they want me to be. And also I love to do what my parents tell me... The workload was more when school was closed... Sometimes I would say no but they were telling me to help them and saying they didn't have anyone to help them other than me. My father was also advising me about the importance of helping each other and we were working together during that time.'*

My teacher told me that I have to go to Jaafar Altayar School... I would have to pay for bags, books and a taxi to go there... We can't afford these things. We have to pay rent, for electricity and water, it isn't the right or possible thing for us..

(Older Syrian boy, Jordan)

Our findings identified many barriers at the household level preventing adolescents' access to education in Jordan prior to the pandemic. Financial constraints (especially among refugee families) were a major factor, as families could not afford transportation and school supplies for their children, as an older Syrian boy living in a host community explained: *'My teacher told me that I have to go to Jaafar Altayar School... I would have to pay for bags, books and a taxi to go there... We can't afford these things. We have to pay rent, for electricity and water, it isn't the right or possible thing for us.'*

Some adolescents also mentioned many structural barriers that led to lowered demand for education, such as school violence (especially for boys), poor quality of instruction and low educational outcomes, or distance from schools. An older Syrian girl from Azraq camp mentioned that she dropped out of school because after three years of attending, she still could not read or write: *'This was pointless. I don't see any reason to go if I don't know how to read and write.'* Gender-specific barriers included norms around marriage forcing girls to drop out, or pressure on boys to contribute to household income by leaving school to find work. These challenges have been exacerbated by the pandemic and worsening socioeconomic conditions.

Participation in and exclusion from distance education during covid-19

Jordan's quick launch of online and TV-based learning platforms allowed for a rapid transition to distance learning in the first month of the pandemic. Initially, among adolescents who were enrolled before March 2020, 95% reported doing something to continue learning during school closures (with numbers significantly lower among those in ITSSs), and most following the Ministry of Education

I don't study as hard as before because I can't focus anymore and I cannot ask any questions when I struggle with the class... The situation of my family is also worse and we cannot afford books and notebooks anymore.

(Younger Syrian girl, Azraq Camp, Jordan)

curriculum remotely. However, as the new school year started in September 2020, our qualitative findings suggest that adolescents' enthusiasm for remote education started dwindling, and many stopped participating in online activities. While lessons in the first few months were available both online and through TV, in the new school year the materials were only available online. This meant that adolescents in rural locations and from poorer families were not able to benefit, given that they have less access to the internet and digital devices compared to their peers in urban areas. Of those adolescents determined to continue learning, many expressed feeling frustrated and tired of distance education, as a younger Syrian girl from Azraq camp highlighted: *'I don't study as hard as before because I can't focus anymore and I cannot ask any questions when I struggle with the class... Material is hard and I don't understand, especially math is difficult... The situation of my family is also worse and we cannot afford books and notebooks anymore.'* Respondents who were learning through a hybrid approach that allowed a few days per week in school and some days at home reported being more content, and quite liked this modality.

Our mixed-methods data shows that family support was crucial for continuing adolescents' education. Of those who did continue learning, 87% received some form of support, such as a digital device with internet access (69%), space to study (67%), or allocation of time for studying (56%). Older girls were more likely to be relieved of some household chores to ensure they had enough time to study (64% compared to 45% of older boys). Adolescents emphasised the importance of family support in motivating them to study, especially where families could not afford any private classes, as an older Syrian boy living in a host community explained:



18-year-old Syrian female married with 2 children,
Jordan © Nathalie Bertrams / GAGE

The school didn't provide any studying support. My mother is the one who follows lessons on WhatsApp groups, and she explains the lessons to me. Regarding teachers, they don't care for the groups because each group has 33 students in it, and the student is unable to follow up with all of them. My brother or I would not be able to continue without my mother's help.

Obstacles to distance learning

Since schools in Jordan largely transitioned to distance learning, most of the challenges reported by adolescents relate to the online modality and access to resources. Having enough internet data and sufficient access to devices continued to be problematic for many adolescents, especially girls, those living in ITSs and in Zaatari and Azraq camps. Less than half of the adolescents in our sample (42%) reported a lack of or unreliable internet connection, and emphasised how challenging connectivity was, which made it difficult to follow classes and submit assignments. This was especially problematic for adolescents who had exams, as an older Syrian girl living in Azraq camp noted: *'I wasn't able to join the last two exams because of lack of internet connection. We couldn't buy credit.'*

As most adolescents use phones for both learning and leisure, they end up spending long hours in front of small screens, leading some to complain of eye problems and trouble with sleeping patterns due to the lack of daily routine. This was more prevalent among boys, as girls tended to be more organised, especially those in higher grades, and their access to phones was more restricted.

Despite online modality, many adolescents were frustrated that schools did not provide additional materials as they could not afford stationery and books they needed, or the materials were not available to buy locally. Adolescents who received support from the UNICEF Makani ('My Space') programme in Zaatari camp were very appreciative of the material assistance it provided, as a younger Syrian girl commented: *'The Makani teacher contacted us and we got notebooks and stationery. My father cannot afford it now, so it was very helpful and we are using all of it now.'*

Adolescents also voiced doubts about the value of remote education and what they were learning, as explained by a younger Syrian girl living in a host community:

We are many in my family and we share two phones between me and my four siblings. When the family are around it is loud and I cannot focus. I also don't understand my lessons and we don't have money for phone credit for everyone, so I cannot send my assignments. I don't feel that I benefit from it, but I don't stop, so that I can go back when the schools reopen.

» The Makani teacher contacted us and we got notebooks and stationery. My father cannot afford it now, so it was very helpful and we are using all of it now.

(Younger Syrian girl, Azraq Camp, Jordan)

These sentiments were shared by many parents, and some boys reported that their families did not consider remote learning as equivalent to regular schooling and preferred for them to stop participating and start working to support household income instead. This aligned with our quantitative findings, which showed that 45% of older boys reported having to spend more time on paid work since the pandemic began (compared to 13% of older girls). On the other hand, older girls tended to spend more time on household chores and caring for siblings, especially married girls and young mothers (89% of older girls compared to 77% of unmarried girls). A young Syrian girl with a disability, living in a host community, said she had been excluded from schooling since the beginning of the pandemic and was expected to work at home instead: *'I feel sad when I hold my phone and my father says "Go and do something useful!" I go and clean and help my mother cook or other do chores...'*

Risks of dropping out of education

Of adolescents who were enrolled in school prior to the pandemic, 95% want to return to school when it reopens. However, many reported concerns that they will not be able to do so, with higher rates among older adolescents (18%) and adolescents in ITSs (24%). This was also evident in our qualitative findings; as time went on, more and more adolescents (especially boys) expressed worries about not being able to go back to school. Older boys were already dropping out early due to pressure to take on paid work, but the pandemic forced more of them to seek employment, and it should be expected that some will not return when schools reopen. An older Jordanian girl recounted her brother's situation: *'My younger brother was in school and didn't work before covid, but he started to work after the first lockdown. He sells face masks to places like restaurants or on the street. All of his friends work the same job, so he started working with them. Now he is not interested to study.'*

Among girls, although the pandemic initially seemed to delay early marriage (both due to uncertainty and to restrictions on movement and large gatherings), our qualitative findings show that in some families the decision to withdraw girls from school and arrange marriages instead has become easier, as girls spend more time at home and parents begin to see less value in distance education. A younger girl living in Zaatari camp explained: *'Most of my friends who were in school dropped out after*

distance learning started and now they got married. Most of them are 15 or 16 years old.'

Palestine

Participation in and exclusion from education pre-covid-19

More than three-quarters of adolescents in our sample (78.4%) were enrolled in school prior to the pandemic, although this masks important differences by age cohort. Younger adolescents (those aged 10–14 years) were much more likely to be enrolled in education (94.5%) compared to older adolescents (15–19 years) (67.8%), most likely reflecting increasing pressures to be involved in paid work for boys (of whom only 63% were enrolled), and for girls (of whom 72.1% were enrolled), increased pressure to marry. We found no geographical differences in pre-pandemic enrolment rates, either between respondents in Gaza and the West Bank or between those in camp versus non-camp settings. Our survey also revealed no significant differences between adolescents with disabilities and those without disabilities. There was, however, a stark gap between married and unmarried girls: of the 311 older girls in the sample, less than a quarter of those who had ever been married were enrolled in education pre-pandemic, compared to 93.9% of unmarried girls.

Participation in and exclusion from distance education during covid-19

Most Palestinian adolescents (90%) who were enrolled prior to the pandemic were able to continue learning in some way. There were significant gender differences, though, with girls experiencing a substantial advantage: 94.7% of older girls and 95.5% of younger girls continued to learn from home, compared to only 83.2% of older boys and 86% of younger boys. There were no significant differences between Gaza and the West Bank, but there were contrasting realities between camp and non-camp settings, with non-camp adolescents advantaged (92.6%) over those in camps (83.5%) – again, most likely due to higher rates of poverty and family pressure on boys to work to contribute to household income.

Obstacles to distance learning

Adolescents' ability to access distance education during the pandemic was hampered by a combination of connectivity challenges, resource deficits and time poverty.

More than a fifth of adolescents (20.4%) identified either a lack of internet connectivity or unreliable connectivity as a major challenge, 5.2% cited unreliable electricity, and 4.9% reported not having enough devices for all family members to participate in online schooling. For instance, a 14-year-old Gazan girl in a refugee camp noted:

I do not have a phone but we have a laptop. I and my three siblings use it... Sometimes we take turns on the laptop so we can at least access some lessons... Each time, one of us breaks something – sometimes the battery, other times the charger... and it costs money. And sometimes the electricity cuts when a lesson is about to start.

Some adolescents, especially girls, also highlighted that digital literacy was a concern, both for students and for some teachers.

Now that our studies are online we feel a lot of pressure and we are really significantly affected... Some of the teachers were not qualified in IT [information technology], for the technology part of the classes... Their computer skills were very weak, which also affected us. Some of the students didn't have a laptop and some didn't understand as they are only familiar with studying face-to-face... As students, we created a Facebook group to help each other – both with the academic content and also the technology.

Increased time poverty was another major barrier to effective engagement with distance education. More than half of adolescents (56.6%) noted that they were having to spend more time on household chores and taking care of siblings since the pandemic with adverse effects on their time to study. This was particularly the case for girls, with significantly more older girls (71.4%) and younger girls (67.6%) identifying domestic responsibilities as a major challenge, compared with 43.5% of boys (older and younger). An 18-year-old refugee girl in a camp in Gaza explained her situation and compared it to her brothers' experiences of the pandemic:


These family dynamics are tiring for me and this affects me psychologically while I'm staying at home... I spend my time doing the house chores and no one helps me... I feel physically tired from all the work too. Boys and men differ from the women and girls... women and girls do the house chores and are exhausted. Men and boys used to work outside the house to bring money, while now they stay at home and they don't have any work

and they don't do any tasks. I have been more impacted because of the family dynamics than my brothers. They just feel bored.

In terms of differences by geographical location, pressures on adolescent girls to support the family with household chores and childcare were greater in Gaza (71.7%) than in the West Bank (41.1%), and in non-camp (60.3%) compared with camp (47.4%) settings. Adolescents without disabilities also reported greater time poverty (59.5%) compared to those with disabilities (43.8%) on account of increased domestic and care work pressures, as did married girls (88.8%) compared with unmarried girls (63.2%).

Risks of dropping out of education

Adolescents reported that they were highly motivated to return to education after school closures, with 91.8% planning to return, although there were significant geographical differences, with adolescents in the West Bank less likely to want to return to school (86.7%) than their counterparts in Gaza (96.7%). A small minority (6%) reported having concerns that they may not be able to return to school when covid-related restrictions end (8.1% in the West Bank compared with 4% in Gaza), and 15.2% of adolescents living in camps fear they will not be able to return to school compared with just 2.3% of those in non-camp settings, most likely due to the higher poverty rates in camps.

 Now that our studies are online we feel a lot of pressure and we are really significantly affected... Some of the teachers were not qualified in IT [information technology], for the technology part of the classes... Their computer skills were very weak, which also affected us. As students, we created a Facebook group to help each other – both with the academic content and also the technology

(Younger Syrian girl, Azraq Camp, Jordan)

II. Violence and bodily integrity

Summary points: Covid-19 impacts on adolescent girls' freedom from violence and bodily integrity

- Adolescents highlighted that household stress had increased since the pandemic and that this at times translated into elevated levels of verbal and sometimes physical violence.
- The findings on child marriage risks varied. Only a small minority of girls in Bangladesh, Jordan and Palestine noted that they were concerned about increasing pressures to marry, and more viewed the pandemic as contributing to a decreased risk of marriage given the economic downturn and the general challenges of covering the costs of a wedding and establishing a new household.
- However, in rural Ethiopia, girls highlighted that the risks of marriage had increased, especially during the traditional wedding seasons. This was due to a combination of reasons: economic poverty, discriminatory gender norms that value girls for their marriage potential over their education, and the lack of surveillance and reporting due to an absence of teachers and health extension workers in the community in many locales during the pandemic. In Jordan, some research participants noted that the costs associated with getting married were decreasing as the pandemic evolved as it is becoming more acceptable for weddings to be modest due to covid-19 restrictions, hence marriages became easier to organise.
- Adolescents' sense of community violence risks appeared to have increased, with reports of growing theft and sexual violence cases as a result of rising unemployment rates, as well as of police violence under the guise of enforcing physical distancing guidance against the spread of covid-19.



Bangladesh

Household violence

A high proportion (87%) of surveyed adolescents agreed that household stress had increased since the onset of covid-19, with higher rates among older adolescents compared to their younger counterparts (92% versus 82%). Qualitative data highlights that household tensions and arguments have increased, with monetary issues being the most common cause (especially for arguments between parents):

My dad gets paid on a weekly basis. With whatever my dad gets, we do the weekly grocery shopping. He has a lot of disagreements [bhejal] with my mom about monetary issues... My dad doesn't want to understand that during lockdown, every single person is at home, that's why we're consuming more food. (17-year-old girl.)

My father doesn't behave nicely with my mother... Yes, they quarrel sometimes about money issues... It has increased because of the virus. Just the day before yesterday, there was a quarrel in our house. (11-year-old girl.)

In general, adolescents mentioned a more tense and negative home atmosphere that has become more pronounced as the pandemic continues. For some adolescents, violence in the household has also increased. Not only are their parents yelling and husbands beating their wives, but in some cases, respondents themselves are also experiencing violence at the hands of parents or siblings.

However, in a few cases, adolescents reported that relationships within the family had improved, with male family members taking more financial responsibility as a result of covid-19, which has benefited the family atmosphere. Also, for some adolescents, spending more time at home was reported to have brought about a family closeness. Interestingly, none of the married girls in our

My father doesn't behave nicely with my mother... Yes, they quarrel sometimes about money issues... It has increased because of the virus.

(A 11-year-old girl)

My best friend had to get married because of financial issues. Her parents were separated and her mother was facing difficulties to maintain the family. So she arranged her marriage.

(A 19-year-old girl)

qualitative sample discussed an increase in arguments or violence in their household due to covid-19.

Child marriage

Our data presents a mixed picture as to whether pressure to marry has intensified since the pandemic. Around 1 in 10 adolescents in our sample (9%) worry that the pandemic would cause them to marry earlier, with much higher rates among older girls (16%) than older boys (4%). This notwithstanding, 50% of older girls (and 19% of older boys) and 37% of younger girls who are not yet married reported that they felt decreased pressure to marry.

Through qualitative interviews, adolescents mentioned incidences of child marriage due to household financial crises caused by the pandemic, as a 19-year-old girl reported: *'My best friend had to get married because of financial issues. Her parents were separated and her mother was facing difficulties to maintain the family. So she arranged her marriage.'* Only one female respondent argued that it is better to get married at an early age instead of living a tough life in poverty and being a burden on one's parents. According to other adolescents, however, covid-19 does not have a bearing on rates of child marriage, and the drivers pushing parents to marry their daughters early – preserving family honour, fear of sexual harassment, and the shame brought upon the household if daughters get into romantic relationships – have remained the same. A 17-year-old girl commented: *'The community I live in is a slum area. A lot of boys gather here. The boys harm the girls, they dishonour girls a lot. That's why girls in this community are married off earlier.'* And a 17-year-old boy reported that, *'There are adolescents who get into more than one relationship at a time. Older people see them together. Then parents get their daughter married to save their honour.'*

Community violence

Adolescents' experiences of violence seem to have intensified since the pandemic. Community violence has increased, with the police and military enforcing covid-19-related restrictions, particularly during the early days of lockdown. During lockdown, rates of perceived increase in violence were much higher among boys (28%) than girls (11%), with the highest rates reported by older male adolescents (30%). Our qualitative data shows

that not only has community violence increased, but 'a social distance among people, alongside covid-related physical distancing, has grown – and has led to a loosening of the social fabric. Most adolescents mentioned the deterioration of community relationships, and an increase in fighting and quarrelling within their community. A 19-year-old girl explained: *'Distance has increased among people, not necessarily conflict, but distance has increased. Love and care for each other has become less than before.'*

My father disappeared from home before covid outbreak. My brother has also left home due to lack of food at home. I am so stressed because if the pandemic continues like this, we may face serious starvation and my mother and I may die of hunger.

(A 14-year-old boy from Batu, Ethiopia)

Ethiopia

Household violence

Two-thirds (66%) of urban adolescents reported that the pandemic had augmented stress in their households, particularly older adolescents, boys and married adolescents. More than a quarter reported that members of the household were getting angry more quickly and/or arguing more often than before the pandemic, with similar findings across age and gender cohorts. Our qualitative findings also confirm that economic stress in the household has contributed to increased psychological stress on adolescents and young people. A 14-year-old



Young adolescent girl in Afar © Nathalie Bertrams

adolescent boy from Batu highlighted his household's declining food security situation and the psychological toll it was taking on household relationships:

My mother stopped baking and selling injera [flat Ethiopian bread] because the hotels and individuals stopped buying from her due to corona virus outbreak. She created serious food shortage at home. My older brother who was a secondary school student could not agree with my mother. My father disappeared from home before covid outbreak. My brother has also left home due to lack of food at home. I am so stressed because if the pandemic continues like this, we may face serious starvation and my mother and I may die of hunger.

Physical punishment from parents and older siblings were also more common in some areas since the pandemic: *'When I tried to go out to play with neighbouring children, my older brother beats me. My parents allow my older brother to visit his friends, but they do not allow me even to meet children in the neighbourhood. I just see my neighbour friends from a distance when they play football'* (15-year-old boy, Batu).

Community violence

Our survey findings show that a fifth of adolescents reported increased violence against peers of their gender in their local community (with no difference by gender or age group), and 35% of boys (16% of girls) reported increased violence perpetrated by the police or members of the local militia, military or security services. This was echoed in the qualitative interviews, with some reports of increased violence as a result of growing economic malaise and youth unemployment, especially in urban areas. An 18-year-old girl from Batu noted:

I have heard that women and children are being raped during their stay at home during covid – I've heard about it on TV but also from neighbours. And neighbours say there have been repeated thefts during the pandemic.

Similarly, a 15-year-old girl in Debre Tabor noted: *'Due to covid-19 there has been a rise in the number of unemployed, and theft and robbery are raging... People are being robbed in the evening time, so they go home early, no one is moving alone at night... Not after 8 p.m. After that, it is too risky to move alone, both for men and women.'*

Vulnerabilities due to physical and sexual violence, including threats by the police forces, have increased during the pandemic. This was particularly common in areas with high pre-existing ethnic tensions and political unrest. As an 18-year-old boy from East Hararghe said:

We [young people] were demonstrating along a road when we were encircled by the regional special police forces. They forced us to sit down on the ground and they brutally beat us with a stick. One police officer hit me on my shoulder three times, and I fainted. It took me three days to recover from the illness and my wounds.


In addition, a 14-year-old boy from Batu added: *'I observed when many young people engaged in attacking other people in the local places. They also burned hotels, offices and residence houses. They had big sticks in their hands, and they did not use face masks at all.'*

Jordan

Household violence

More than half of the adolescents in our sample (53%) agreed that they had observed increased intra-household stress during the pandemic, and 49% reported that family members are getting angry more quickly and arguing more often. When asked about challenges their peers might be experiencing, 16% said that parents' yelling at adolescents had increased. These rates were especially high among adolescents with disabilities (24%). The survey results align with our qualitative findings, which show that household tensions are exacerbated by difficult economic conditions and male family members spending more time at home. A health worker working with Syrian and Jordanian populations in host communities explained things thus:

Some family relationships were enhanced as a result of the curfew and lockdown. This could be 50%, but the other 50% of families suffered from increased stress and conflicts intensified. Men are not used to staying

 I am angry all the time. I beat my son when I am mad or sad. I only have him in front of me and I beat him even if he does nothing wrong...

(A married Syrian girl, Zaatar Camp, Jordan)

Box 3: Increased household tensions and violence experienced by married girls: Layan's story

Layan is living in one of the ITSs in Jordan in a tent on a farm with her husband and five children, next to her in-laws. She is now 20 years old and was married at 12 to her cousin. As her mother-in-law died a few months ago, Layan is now responsible for caring for the whole family, including three children with mental and physical impairments. She feels exhausted but she cannot ask anyone for help: *'When I asked my husband to help me bath one of his brothers, he got mad and beat me with an electrical wire he keeps under our mattress.'* Layan said that her husband has been violent with her ever since they got married, but that it had recently got worse. She is punished for talking loudly or when she does not do something to his liking. Sometimes he beats her for nothing at all, also in front of her children. Her husband also gets angry because of the lack of privacy and children crying when he wants to have sex. Layan is scared that she will get pregnant again. Before the pandemic she took contraceptives, but now due to the worsening financial situation, she cannot afford it. She misses her family in Lebanon, especially now that her husband restricts and supervises their conversations, and she sometimes wishes she could escape to them: *'If the border was open I would not spend one minute here and I would go back to my family in Lebanon.'* She then dismisses the idea as she says she could not leave her children behind. Layan's father-in-law knows that her husband can be violent and tried to intervene, but Layan says that this did not change anything.*

* The GAGE programme established a Child Protection Policy and referral protocols in case researchers encounter a case where an adolescent discloses experiences of gender- or age-based violence.

at home, feel frustrated, and during the curfew the stressful relationships between parents were projected onto children and adolescents. Adolescents with disabilities suffered even more as they were not able to leave their homes or to go to the community centres.


Our mixed-methods findings also indicate that heightened stress levels may be manifesting in other forms of violence, either physical or sexual. Many adolescents reported having more fights with siblings since the start of the pandemic, as a younger Jordanian girl living in a host community noted: *'Because of covid everyone is sad and upset and nervous. Before, I didn't fight with my brothers and sisters. Now, we always fight.'* Married girls were particularly affected. When asked about challenges facing other girls in similar situations during the pandemic, 25% reported an increase in yelling in the household, and 6% reported husbands forcing intercourse with their adolescent wives as an increasing challenge at this time. Some adolescent mothers also reported an increase in use of physical punishment against their children, as a married Syrian girl living in Zaatari camp said: *'I am angry all the time. I beat my son when I am mad or sad. I only have him in front of me and I beat him even if he does nothing wrong...'*

Child marriage

Our qualitative interviews show that the impacts of covid-19 on the socio-economic situation of vulnerable families started to translate into more pressure to marry girls early. Increased poverty results in families aiming to reduce the number of family members they need to feed, and child marriage is one of the ways to achieve that. Also,

the expenses associated with getting married decreased since the pandemic begun, as beauty salons and wedding halls were not operational and it became more acceptable for weddings to be modest and small in scale, making marriage easier and more affordable to organise.

Girls who were already married at the time of the pandemic reported increasing tensions and conflicts in the households, with many husbands out of work and frustrated with the situation (see Box 3). Girls who lived with their in-laws mentioned that their household responsibilities increased dramatically due to more family members staying at home and girls being expected to cater to their needs. Adolescent mothers also expressed severe stress and worries about meeting basic needs of their children. Access to contraceptives was impeded in the first months after covid-19 started, as explained by an adolescent mother living in ITS: *'I used to take contraceptives 6 months ago to not get pregnant. Now I know I need another injection and I should have taken it 10 days ago, but I couldn't. I asked my husband, but he doesn't have money for it now.'* We also saw an increase in

 I used to take contraceptives 6 months ago to not get pregnant. Now I know I need another injection and I should have taken it 10 days ago, but I couldn't. I asked my husband, but he doesn't have money for it now'.

(An adolescent mother, ITS, Jordan)

adolescent pregnancies – almost all married adolescents in our qualitative sample were pregnant at some point in the last year, which was not the case in previous years.

Community violence

Across all respondents, 12% reported increased levels of physical violence against adolescents of their gender in the community, with boys reporting higher levels of violence from military and law enforcement sources (18%) compared to girls (7%). For girls, this is especially evident in Gaza camp, where girls expressed concerns about street violence, theft in the community and bullying in the streets. Our qualitative findings show that while most adolescents did not report experiencing any form of street violence themselves, the incidents presented in the media reinforce

People fight in the camp over water. It's very weak and people fight over it more after we got the first cases in the camp, and there are no permits to go out [to get water].

(An younger girl in Azraq camp, Jordan)

feelings of danger and the perception that streets are less safe (especially after dark) since the pandemic started. In Syrian refugee camps, adolescents reported fights over access to water resources, which have become more scarce now, as a younger girl in Azraq camp noted: *'People fight in the camp over water. It's very weak and people fight over it more after we got the first cases in the camp, and there are no permits to go out [to get water].'*


Palestine

Household stress and violence

Although some young people noted that the pandemic had facilitated more quality family time and better communication, almost half of the adolescents in our sample (48.7%) believed that household stress had increased since the onset of the pandemic. Key reasons cited were increased financial stress, including inability to afford non-food items (41.3% of unmarried adolescents and 59.4% of married adolescents identified this as an increasing challenge since the pandemic) and lack of soap and water to adhere to covid-related hygiene measures (17.1% of unmarried adolescents and 24.2% of married adolescents said this had increased as a challenge since the pandemic). More than double the number of young people in Gaza (66.7%) reported elevated household



Gaza, Palestine © Jeffrey

 My older brother shouts at me – he doesn't hit me but he shouts – I can't voice any opinions. I'm really affected by this. I cannot bear anyone shouting at me anymore.

(A 14-year-old refugee girl living in a camp in Gaza, Jordan)

stress levels compared to the West Bank (30.4%), most likely due to much higher rates of pre-pandemic poverty and vulnerability in the Gaza Strip.

Elevated stress levels appear to be reflected in increased experiences of age- and gender-based violence within the household – whether physical, verbal or sexual. More than half of all respondents (59.8%) reported that family members are more prone to anger and arguments, with almost a quarter (24.7%) of unmarried adolescents saying that parents were more likely to yell at them. In terms of physical violence, 13.6% of unmarried adolescents reported that fathers' physical abuse of their mothers had increased, while 15% said that parents' hitting their adolescent children had increased. A 16-year-old refugee girl from Gaza, for example, noted that, *'My father is not nervous but my mother shouts at me and insults me whenever she feels nervous. My mother beats my younger brother [aged 12 years] but not me. It's very stressful now.'* A 14-year-old girl, also from Gaza, who was beaten by her father even before the pandemic, explained that the situation had become worse:

Before corona[virus], my father used to beat us and now it has increased. All of us get beaten – my sister, me, my brothers... For them it is worse, but still the beatings are hard. It affects us... but we have gotten used to it... He has a very bad temper. He also beats my mother at times.

More than a quarter of adolescents (25.4%) also reported that bullying by siblings was more common now. A 14-year-old refugee girl living in a camp in Gaza explained that in her case, her brothers were always fighting and yelling at her, which was having an adverse effect on her psycho-emotional well-being:

My brothers fight all the time due to their stress about the corona[virus] situation – there is no work at the port

so they are sitting at home and stressing about money. My older brother shouts at me – he doesn't hit me but he shouts – I can't voice any opinions. I'm really affected by this. I cannot bear anyone shouting at me anymore.

When married girls were asked about challenges facing other adolescents similar to themselves during the pandemic, 31.6% reported an increase in yelling in the household, 19.4% identified husbands hitting their adolescent wives as an increasing challenge, and 7.8% reported husbands forcing intercourse with their adolescent wives.

In terms of location differences, all forms of violence were identified as increasing disproportionately in Gaza compared to the West Bank, especially parents hitting adolescents (23.7% compared with 5.2%) and husbands forcing intercourse (14.9% compared with 0%). There were also significant differences between camp and non-camp settings, with adolescents outside of camp settings more likely to report parents hitting adolescents as an increasing challenge than those in camp settings (16.7% compared with 10.1%).

Child marriage

Somewhat surprisingly, only a small minority of adolescents (2.9%) reported that they were concerned about being pressured to marry earlier because of the pandemic. Indeed, while still a minority, more adolescents noted that pressure to marry as children had decreased (7.7%), most likely as a result of higher rates of poverty and more conservative gender norms, with slightly more adolescents in Gaza (4.2%) concerned about their families pressuring them to marry than in the West Bank (1.6%). However, our qualitative findings suggest that these quantitative findings may reflect a degree of under-reporting. For example, a key informant working for a non-governmental organisation (NGO) in the West Bank explained that child marriage had been increasing during the pandemic as families want to be free of the responsibility, and a marriage during lockdown requires fewer financial outlays:

Regarding our villages, girls are getting engaged... One girl is in the 9th grade and she is now engaged... This was happening before but now it has increased due to corona[virus]. Now they say 'Let's get her married during corona[virus] and get rid of this responsibility as one doesn't need to spend anything and it will be a relief'.

III. Voice, agency and adolescent coping strategies

Summary points: Covid-19 impacts on adolescent girls' voice, agency and coping strategies

- The pandemic-related lockdowns and closure of schools and recreational spaces exacerbated adolescent girls' mobility restrictions. In all contexts girls had more limited in-person interactions with peers, but in urban contexts older adolescents, including girls, were able to rely on phone and internet contact to a degree.
- Girls faced a gender digital disadvantage compared to boys, with significantly fewer having access to their own personal devices.
- Girls were less likely to turn to negative coping strategies such as substance abuse and many relied on creative coping mechanisms such as diary writing, art and taking up new hobbies. Many adolescents also turned to religion as a source of emotional solace.
- Overall only a minority of adolescents reported participating in community volunteer activities largely due to a dearth of adolescent-friendly opportunities. In all contexts, boys were more likely to engage, mostly due to conservative gender norms and mobility restrictions affecting girls.




Bangladesh


Adolescent mobility, voice and agency

Overall adolescents reported that the pandemic had negatively impacted their mobility, voice and agency.¹ Between May and June 2020, when our survey was administered, most adolescents (85%) reported a decline in their mobility and 47% reported staying at home all day. While restrictions affect both genders, unsurprisingly, restrictions on movement appear to be even more severe for adolescent girls, who remain shut off from their peer networks to a greater extent than boys. Only 26% of girls had interacted with a friend in the week preceding the survey, compared to 38% of boys, and boys have more freedom of movement to attend religious services in person (19% of boys had done so in the week preceding the survey, compared to less than 1% of girls).

Qualitative interviews conducted a few months after the survey (November–December 2020) overwhelmingly confirm the findings from the quantitative data. Although strongly enforced government restrictions have eased since spring/summer 2020, adolescents nonetheless feel their movements are limited by their parents. A 19-year-old girl explained, *'You can't leave the house. You can't walk with people. You can't go to the market. You can't go here, you can't go there. You have to stay at home all day.'* A few adolescent girls mentioned their parents not allowing them to go out to work despite their wish to do so in order to support their family or bear their own expenses. Norms mandating that girls stay home to avoid danger and harassment on the streets seem to have reinforced covid-19 restrictions, serving to further confine girls indoors and limit their agency. Only one girl recounted her parents being supportive of her decision to work as a domestic cleaner, provided that the job took place in close proximity to their home.

 You can't leave the house.
You can't walk with people.
You can't go to the market. You
have to stay at home all day.

(A 19-year-old girl, Bangladesh)

 Both males and females have
to do household chores now...
girls do the most but boys
are also doing works... [in my
house, I do it all and] I get all the
scolding. I don't have any sister.

(A 18-year-old boy, Bangladesh)

As well as being more restricted to the home, adolescents also report spending more time on household chores or taking care of children or elderly family members than before the pandemic (92%), with older girls reporting the highest rates, at 97%. Qualitative data underscores that for school-going adolescent girls, covid-related school closures have augmented their role as a 'helping hand' for their mothers, as an 18-year-old girl noted: *'I do most of the work. Household work is usually handled by girls.'* School-going girls mentioned that they have started learning how to cook and managing more household work during the pandemic, while married girls and out-of-school girls saw less marked change in their household duties. In households without daughters, some boys were helping with domestic work, but somewhat unwillingly: *'Both males and females have to do household chores now... girls do the most but boys are also doing works... [in my house, I do it all and] I get all the scolding. I don't have any sister.'* (18-year-old boy). When asked whether male family members being home more often as a result of the pandemic meant that girls had to alter their behaviour at home, 52% of girls identified at least one gender-based restriction on behaviour. These included changing the type of clothing they wore while at home (22%), not being able to watch TV shows or listen to radio programmes they usually enjoyed (25%), and restrictions on being able to speak with friends (29%) or (for married girls) speak with family over the phone or online (23%).

Adolescent coping strategies

With restrictions to mobility in place, some adolescents (39%) have increased their technology uptake to pass the time, and more so among older adolescents compared to younger cohorts (54% vs 26% respectively). However,

¹ We recognise that adolescent voice and agency can include a wider array of dimensions; we are reporting on those domains for which GAGE data during COVID-19 is available across contexts.

qualitative data highlights that most adolescents do not own their own mobile device, and most use their parents' device when possible, although these tend to be feature phones rather than smartphones and use is regimented. An 11-year-old girl explained, *'Only my father has a phone, no one else... I don't use my father's phone. I only talk using the phone whenever you [researcher] call and if my class teacher calls, then I talk... I don't have their [my friends'] numbers.'*

Most respondents talked about their family's economic condition worsening the longer the pandemic goes on. During the spring/summer 2020 lockdown, some parents had taken out loans to get by and were now in debt, as quotes from two adolescent girls illustrate:

Now our [economic] position has worsened. Because after going through the corona[virus] crisis for so many months, survival has become an obligation. (20-year-old girl)

Now our [economic condition] has become a little bad... compared to [the first few weeks of the pandemic]... Even a few days ago my parents had a fight because we are in a lot of debt, then they took a loan again. The situation worsened because of the virus, the virus came and my father couldn't work properly, so he started to take loans. (11-year-old girl)

To cope with dwindling income, adolescents mentioned their households cutting down on expenses and eating less than before. A few mentioned their parents trying to take up a different profession, but with limited job opportunities and a shrinking market, this was not really a viable option. An 18-year-old boy explained his family struggles with limited work: *'We have been facing problems since before corona[virus]. In the beginning, we could manage somehow, but now it is worse. Work is very scarce now. Brother has no work, mother gets less work... There is no work.'* Policies targeting adolescents appear limited and are more catered to household/adult salaries rather than a package of adolescent-tailored interventions to help them cope. As a key informant explained, *'Basically at this age... there is no help or activities... Mostly people with financial crises or the head of the family get the help... Adolescents aren't getting any help... The government and other organisations are trying to help the family head, not the adolescents.'*

As covid-19 continues, adolescents are trying to adjust to their new lifestyles with mixed degrees of success and help with their problems. Survey data reports that 40% of adolescents were receiving less support from friends and family during the pandemic, and only 15% reported receiving more support. While some adolescents – boys




Adolescent girl with a physical impairment in Dhaka, Bangladesh © Marcella Pasotti

primarily – seem to have adapted to the 'new normal' and are less apprehensive, stressed and bored than in the initial days of the pandemic, others are struggling to cope. Overall, for school-going adolescents, education emerges as the insurmountable divide between their lives pre-covid-19 and their lives now. An 11-year-old girl described this feeling: *'Now I don't feel good to play games every day anymore. Now I just feel like going to school... When I go to school, time passes by talking to my teachers and studying.'* Similarly, a 17-year-old girl commented, *'You know how school was closed at the beginning of the lockdown? I was very happy then, thinking, okay, school is closed so I can visit a few places. But at the end of the lockdown, it's still not reopening... The entire year is over and I haven't even gone near my studies.'*

With regard to substance abuse, adolescent boys and girls alike noted a reduction of substance abuse in their communities. Reports from qualitative data correlate the reduction to limitations on social gatherings and general *'hanging out'* on the streets and at tea stalls, which resulted in a decline in substance abuse.

Community participation

Adolescent participation in volunteering schemes also appears low overall, and gender and age differences are stark. In our sample, just over 11% of older boys reported engaging in volunteer work in their community (defined as provision of unpaid help for a charitable/good cause), compared to just under 1% of older girls. Community participation via volunteering appears low for older adolescent girls due to rigid gender norms limiting their social interaction and mobility beyond the household. A 19-year-old girl explains, *'I just did not [participate in volunteering schemes]... I am a girl, Apu [Miss], you understand.'* While volunteering was more common among older cohort adolescent boys, our qualitative data underscores that these are ad-hoc initiatives rather than well-advertised, adolescent-wide opportunities in the community. An 18-year-old boy explained that he often volunteers in his community, spurred on by his uncle's various campaigns that he is motivated to join.

 I just did not [participate in volunteering schemes]... I am a girl, Apu [Miss], you understand.

(A 19-year-old girl, Bangladesh)

Volunteering for boys takes a multitude of forms including spreading covid-19 prevention information and assisting the elderly in the community.

Ethiopia

Adolescent mobility, voice and agency

While 60% of adolescents report restricted mobility since the pandemic began, there are important differences in the extent of restrictions across age cohorts, as well as by residential location. Younger adolescents are more likely to report staying at home without any visitors for the past seven days (13% vs. 9% of older adolescents), and report staying at home more days on average out of the past seven (2.8 vs. 2.3).

Almost a third of adolescents (32%) reported a decrease in self-reported changes in privacy since the pandemic began, with younger adolescents having less remote access to the outside world compared to their older counterparts, as they are less likely to own a personal device such as a phone, tablet or laptop (15% vs. 60%), and especially devices with internet access (10% vs. 46% for older adolescents). Younger adolescents also reported that they were less likely to have interacted with their friends in the past seven days (34% vs. 41%).

Not surprisingly, girls were less likely to have interacted with a friend in the past seven days (28% vs. 48% for boys), and were significantly more likely to report increases in mobility restrictions since the pandemic began (68% compared to 51%); they also have less access to a personal device with internet access (36% vs. 41%). Our qualitative evidence highlighted that girls felt very keenly the effects of limited opportunities to interact with peers. As an 18-year-old girl from Dire Dawa explained:

It was a very tough time. I don't have words to tell you about that... People in Dire Dawa have a communal life. We socialise with people very much. It is not like Addis Ababa. So it was very tough for me to stay at home and not to meet others. I cannot go out of the house. I used to stay at home. I didn't want my family to worry about me so I preferred to stay home... but we are used to hugging each other and showing our concern to each other... I haven't met my friends during corona[virus].

While married girls did not report substantially different changes in mobility since the pandemic began, the survey findings indicate that they are much less likely to have

It was a very tough time. I don't have words to tell you about that... People in Dire Dawa have a communal life. We socialise with people very much. So it was very tough for me to stay at home and not to meet others.

(A 18-year-old girl, Dire Dawa, Ethiopia)

remote access to the outside world; 21% of married girls have a personal device with internet access versus 47% of unmarried girls, and only 26% of married girls report an increase in access to technology since the onset of the pandemic (versus 43% of unmarried girls). Their limited social connectedness during the pandemic was echoed in our qualitative findings, although it appears to have dissipated over time (especially in rural areas) as communities start to return to normal life, in part due to a growing belief that the virus is no longer a threat. As an 18-year-old married girl in Afar described:

I was worried and also I was stressed about hearing about the coronavirus all the time. And I felt demotivated since I stopped interacting and playing with my friends... However, currently, my feeling has changed, since people stopped worrying and thinking about the virus. No one is talking about it in our locality and they began living as normal. I am interacting with friends when I get time... and I am not worrying as much since people say that coronavirus has been eliminated.

Adolescent coping strategies

Our survey findings did not reflect significant rates of mental ill-health among urban adolescents during the pandemic. Fewer than 3% of adolescents surveyed score 10 or higher on the Primary Health Questionnaire-8 (PHQ-8), a score that would indicate moderate-to-severe depression; and 88% showed minimal-to-no depression. Rates of moderate/severe depression are significantly higher among older adolescents than their younger counterparts (2.5% versus fewer than 1%), and higher among girls than boys (4% versus 1%). However, our qualitative findings paint a more mixed picture. Many young people reported that they were worried about the pandemic but that they turned to religion for solace. A

I relied on Allah and I was praying to him to protect us from this disease. I was only praying to Allah five times a day and begging Allah to eliminate this virus... He is the being that can save us from such disease.

(A 19-year-old married girl, rural Afar, Ethiopia)

19-year-old married girl from rural Afar explained: *'I relied on Allah and I was praying to him to protect us from this disease. I was only praying to Allah five times a day and begging Allah to eliminate this virus... He is the being that can save us from such disease.'* Many girls also highlighted the importance of talking to their family to cope with the psychological challenges of the pandemic. A 17-year-old widowed girl from Afar commented: *'I am a mother of three children whose father has died and so I spend most of my time with my children. To cope with my worries I pray to Allah day and night and I talk to my parents since I live near their home. I discuss with them about my worries and also what would happen to us in the future.'*

A number of girls also emphasised that while many of their male age contemporaries are turning to substances such as alcohol and *khat* [leaves which are chewed as a stimulant] to deal with their stress, girls are less likely to do so, and instead are more likely to talk to others or become introspective. A 19-year-old girl from Batu explained her approach:

When males get angry they might get involved in addictions like drinking, smoking, or chewing khat, which gives them short-term relief, and there are also some females who do the same as a coping mechanism. In my view this would appear to be an absence of listening to one's inner feelings... You need to think critically before taking such actions... and then you can share with someone. It is helpful to identify the good and bad options to decide about your future.

Adolescent community participation

Before the outbreak of covid-19, in some areas young people engaged in humanitarian activities and community development activities, although our findings underscored that there was more participation by boys rather than

■ We wanted to express our dissatisfaction to the illegal imprisonments of Oromo opposition political leaders, but the police forces took harsh actions against us. Many young people faced police brutality over the past months for the simple reason that they were demonstrating against the government.

(An 18-year-old boy, East Hararghe, Ethiopia)

girls due to greater mobility and less fear about safety. They also played an important role in helping internally displaced persons in areas where there were large IDP populations. In other areas, young people have actively engaged in politics by supporting and sometimes opposing the political reform that began three years ago. However, just before the covid-19 outbreak, community relations

were splintered along ethnic and religious lines, and ethnic-based opposition political parties and political activities contributed to the tensions. The economic fallout of covid-19 and the political unrest that erupted following the murder of a famous musician from Oromia region only exacerbated the friction. In East Hararghe, young people – especially adolescent boys – engaged in strikes boycotting the opening of shops and schools but they faced brutal beatings and harassment from the police forces. An 18-year-old boy from East Hararghe said, *'We wanted to express our dissatisfaction to the illegal imprisonments of Oromo opposition political leaders, but the police forces took harsh actions against us. Many young people faced police brutality over the past months for the simple reason that they were demonstrating against the government.'*

In South Gondar, increased criminal activity was observed due to the absence of courts and security forces during the covid-19 state of emergency, as a 17-year-old boy from Debre Tabor explained: *'During the first few months after the outbreak of corona virus, criminal activities happened everywhere and lawlessness has led to a serious security situation in many places. However, now the special police forces have been deployed and things are better than before.'*



Youth volunteers in Ethiopia © Nahom Tesfaye / UNICEF Ethiopia

Jordan

Adolescent mobility, and voice and agency

Despite a decrease in covid-19 mobility restrictions after Jordan's initial strict lockdown, many adolescents in our sample (and especially girls) reported that their movements continue to be very limited. The continuation of distance learning in September 2020 resulted in girls losing any pretext to leave their homes. This was especially evident in ITSs, and in Syrian and Palestinian refugee camps, as reported by an older Palestinian girl living in Gaza camp: *'Before covid, I was able to move more... My brothers used to take me out. Now I can't leave home at all. I don't go to school anymore... When I'm sad, I stay home and that is it. I don't communicate with friends or talk to them.'* The mean number of days that girls reported staying at home was 5 days (older girls) and 4.8 days (younger girls), compared to 2.9 days for older boys and 3.4 days for younger boys. Many girls expressed their resentment at facing stronger restrictions than their male siblings. A younger Syrian adolescent living in Zaatari camp said: *'My brothers – yes, no problem, they go and play outside when there is no lockdown, but I can't. There is no one to play with and us girls don't go out to the street now.'*

While spending most of their time in the household with an increased number of males at home, 70% of girls also reported an increase in gender-based constraints on their behaviour, including restrictions on how often they can speak with friends and family on the phone (27%), what clothing they wear (51%) and what entertainment they are permitted to watch or listen to (37%).

Adolescent coping strategies

Overall, adolescents in Jordan seem to have normalised the changes in their lives caused by the pandemic. They spend more time than before watching TV series, playing

▮▮ My brothers – yes, no problem, they go and play outside when there is no lockdown, but I can't. There is no one to play with and us girls don't go out to the street now.

(Younger Syrian adolescent living in Zaatari camp, Jordan)

games, praying or reading on their phones. While during interviews in May–June 2020 they reported many fears and some emotional shock, now they are more accepting of their new realities, with community-level restrictions becoming part of their everyday lives. Adolescent boys have found it easier to adapt, as their lives have not changed so dramatically (with the exception of boys forced to work as a result of the pandemic), while girls express more signs of resignation and even depression due to greater restrictions on their movement and even more limited contact with peers. Adolescents with disabilities who were previously enrolled in school now demonstrate signs of desperation and some even mentioned suicidal thoughts. One girl with a visual impairment living in a host community emphasised her feelings of isolation: *'My life is now boring and depressing... I'm not happy with my life. The life in general is miserable... If only could I go outside the house, the depression would go...'* This time is also stressful for boys, with some reporting feeling overwhelmed by expectations to support their families financially.

Most adolescents mentioned the worsening economic situation of their families, with many parents resorting to borrowing money to meet their daily needs, as a younger Syrian girl from Zaatari camp noted: *'Debt is now common among our community, even my family borrows money for food and vegetables... and sanitisers as well. The financial situation is much harder than at the beginning of the pandemic.'* Girls often said that their brothers' needs are prioritised, and despite the family having less income, boys are still allowed to receive some pocket money for eating out or playing with friends. Adolescents living in particularly vulnerable families, or those who receive state social protection support, also mentioned that the assistance is not enough to meet their basic needs, as this younger Jordanian boy from a host community explained:

The financial situation of my family is very difficult. My father lost his work and my brothers also struggle. We

▮▮ My life is now boring and depressing... I'm not happy with my life. The life in general is miserable... If only could I go outside the house, the depression would go...

(A girl with a visual impairment living in a host community, Jordan)

are seven at home and we receive money from the National Aid Fund in the amount of 200 dinars [200 GBP], which is not enough and we spend it in a few days. We are left with reading the Qur'an every day.


Despite the difficult financial situation, adolescents also mentioned an increase in substance use, especially smoking shisha and cigarettes. More than a third (33.9%) of older boys reported ever having smoked cigarettes. Among boys who were regular smokers, 36.1% reported an increase in smoking during the pandemic due to stress. A younger Syrian boy living in a host community confirmed: *'Since the corona[virus] started, we smoke more hashish among my friends and family and the cost of a hashish cigarette increased to 5 dinars. Everyone smokes more now.'*

Adolescent community participation

When asked about volunteering opportunities during the pandemic, 11% of all adolescents in our sample reported having participated in some sort of volunteer activity, with girls volunteering less than boys, and Jordanians having more opportunities to engage compared to non-Jordanians (16.4% vs. 10.3%). Qualitative interviews showed that adolescents rarely have opportunities to engage in any community or online activities and adolescents mentioned that although they would be interested, volunteer engagement is not available or offered. However, many expressed willingness to get involved, and girls especially were enthusiastic about doing something constructive with their time that would help their communities. As an older Syrian girl living in a host community stated: *'I would very much like to participate to benefit others. Some people don't wear face mask or use hygiene products and I would like to help them.'*

Palestine

Our findings on adolescent girls' voice and agency and coping repertoires paint a mixed picture. On the one hand,

 I would very much like to participate to benefit others. Some people don't wear face mask or use hygiene products and I would like to help them.

(An older Syrian girl living in a host community, Jordan)

girls face significant mobility restrictions, which reduce their opportunities to interact with peers and participate in volunteer community activities. They also have limited decision-making power within the household. On the other hand, this lack of mobility and peer interaction means that girls appear less likely to engage in negative coping strategies such as substance abuse. According to our qualitative findings, girls display a range of creative coping strategies and express relatively high levels of resilience.

Adolescent mobility, voice and agency

Our survey findings underscore that adolescent girls have had very limited mobility outside the home during lockdowns and closure of services. In the week preceding the survey, the mean number of days that adolescents reported staying at home was 4.2 days, with significantly higher rates among girls (5.2 days for older girls and 5.0 days for younger girls) than boys (3.1 days and 3.5 days respectively). Almost two-fifths of older girls (38.5%) had stayed home without leaving and without receiving visitors for the past seven days, compared to only 15% of older boys. As a 15-year-old girl from Gaza emphasised:

We have stopped going to school, we haven't seen our friends, we haven't gone out of the house, we have been prevented from many things. I feel suffocated!... I have stayed at home doing nothing. I used to play football or guitar with friends, but now... I just help my family with the domestic work.

Young people with disabilities were also less mobile, staying home an average of 4.8 days in the week preceding the survey compared to 4.1 days for those without disabilities. Our qualitative findings indicate that this is due to fewer disability-friendly public spaces and accessible transport, as well as community stigma – all of which existed pre-pandemic.


Many young people have, however, been able to overcome these mobility restrictions and stay in touch with friends through phone and internet-based platforms. Approximately three-quarters of adolescents (75.4%) had interacted with friends in the week preceding the survey. While only 28.1% of adolescents reported hanging out or playing with friends in person – with boys significantly more likely to have done so (48.8% among older boys, 44.0% among younger boys) than girls (7.4% and 11.4% respectively) – more than half (55.3%) had interacted with friends virtually in the past week. This included messaging

by phone, connecting over social media or playing online games. Older girls were significantly more likely to rely on these virtual communication methods to connect with friends than older boys (65.1% versus 52.9%).

Several young people (and especially girls, given their social isolation in the home) emphasised the important sense of security that online connectivity provided them, particularly because it gave them confidence that they could continue pursuing their educational ambitions, which they see as critical to their future well-being. As a 14-year-old girl in the West Bank explained:

What made me cope with the situation... I mean, I started to feel safer about my educational life when I started to revise the old curriculum. This made me feel a little safer. The second thing that made me feel safe is e-learning and distance learning... I worried otherwise that I would start to forget and this would affect my educational future, but when I could study online and revise the previous curriculum, my psyche started to feel better somehow and I felt safer.

Even so, almost a quarter of adolescents (24.6%) had had no interaction with friends in the week preceding the survey, either in person or online, despite the importance of peer interactions to adolescent development. This appears to be particularly affecting younger adolescent girls, who were significantly more likely to have had no contact with friends (37.0%) than younger boys (20.8%). Our qualitative findings suggest that this is due to a combination of limited mobility on account of discriminatory gender norms and less access to a personal device with internet access – only 30.8% of younger adolescents had their own internet-

 I started to feel safer about my educational life when I started to revise the old curriculum. The second thing that made me feel safe is e-learning and distance learning... I worried otherwise that I would start to forget and this would affect my educational future.

(An 14-year-old girl living in the West Bank, Palestine)

enabled device, compared with 61% of older adolescents. As a 14-year-old refugee girl from Gaza noted: *'I don't have a phone or any access to Facebook... I just hear about information or news at my grandfather's house. They have a radio and we don't. It is important to know things... So I ask my grandfather or at times my mother who sometimes looks at Facebook.'*

Even among adolescent girls who do have access to a shared phone, there was a general feeling that maintaining close contact with peers by phone over a sustained period is not easy. As a 16-year-old refugee girl from Gaza explained:

It has changed after corona[virus]. Before corona[virus], I used to use our smartphone to contact my friends and relatives sometimes. And I used to contact my friends more in the beginning, to help each other during quarantine... But after corona[virus] evolved, I don't talk to them as before – it's much less. It's also because I have the phone for less time now... I need to share it with my siblings and for distance education... I don't contact anyone now.

Adolescents with disabilities reported particularly high levels of social isolation, with 46.0% having had no interaction with friends in the week preceding the survey, either online or in person, compared with just 20.4% of adolescents without disabilities. This is at least in part because young people with disabilities are less likely to have their own device with internet access (only 36.3%, compared with 51.3% among those without disabilities).

Adolescent coping strategies

Understanding whether and how young people are coping in the context of a macro-shock like the pandemic is not straightforward to assess, and our findings reflect this, giving a somewhat unclear picture.

In terms of physical exercise, one-fifth (20.1%) of all adolescents reported that they have fewer days in which they are engaged in physical activity for 30 minutes or more than before the pandemic. This is worrying, because in the Middle East and North Africa (MENA) region there were already concerns about limited rates of physical activity pre-pandemic, especially for females, due to mobility restrictions (Donnelly et al., 2018). For boys, the figure was especially high (30.7% for older boys compared with 10.9% of older girls, and 25.9% for younger boys compared with 12% of younger girls), most likely reflecting the greater

mobility boys generally had prior to lockdown than their female counterparts, due to discriminatory gender norms. When asked about how much physical activity they had done in the past week, older girls and older boys both reported a similar number of days of engaging in at least 30 minutes of activity (2.1) and at least 60 minutes of activity (1.6) before and after the onset of the pandemic. However, younger boys were generally more active than younger girls (approximately 1.9 days per week of physical activity lasting at least 60 minutes compared to 1.2 days for younger girls). As a 15-year-old girl from Jenin in the West Bank noted: *'I used to do sports before corona[virus] but during the pandemic I've gained a lot of weight as I can't go anywhere to do any sports or exercise.'*

Differences after the onset of the pandemic were more significant in Gaza, where 31.3% of adolescents reported a reduction in the number of days in which they do physical activity lasting at least 30 minutes, compared with just 9% in the West Bank. This may be partly linked to the curfew that was in place in Gaza (from 6 p.m. until 6 a.m.) at the time of the survey (December 2020). Not surprisingly, given the more cramped living conditions in camps, we also found much lower overall rates of physical exercise among adolescents in camp settings – they reported an average of 0.6 days of physical activity lasting at least 60 minutes in the past week, compared with 2.0 days among those outside of camp settings. Among young people with disabilities, while declines in rates of physical activity during the pandemic did not differ from those without disabilities, the baseline rates for activity among adolescents with disabilities were lower, with 1.6 days spent on exercise lasting at least 30 minutes in the past week, compared with 2.2 days among adolescents without disabilities.

In terms of substance use as a coping mechanism, our findings highlight that almost a quarter of older boys (24.9%) reported ever having smoked cigarettes, compared with just 0.3% of older girls. Among boys who


were regular smokers, 33.3% reported an increase in smoking during the pandemic, most likely due to increased stress. As a 14-year-old refugee girl from Gaza noted:

Some children need a person to advise them so that they can forget the corona[virus] because they become upset due to the situation... This explains why we see more boys smoking... Previously we rarely used to see this, but now, after corona[virus], it has increased... Even my cousins – male cousins – who are a similar age to me, they started smoking, fighting and making problems!


However, more than a quarter of pre-pandemic smokers (26.4%) reported having reduced how much they smoked or quitting altogether, likely due to financial constraints.

Among older adolescents, 11% reported ever having smoked a shisha pipe, including 15.7% of boys and 6.7% of girls. Among regular shisha pipe smokers, 24% had increased the habit during the pandemic, but many more (45.5%) had decreased their use or stopped, probably due to the closure of restaurants and recreational places, and also financial constraints. We did, however, uncover an important gender difference: while there are fewer girls who are regular shisha pipe smokers, those who did smoke were more likely to report increasing shisha pipe use during the pandemic (52.4% compared with just 11.1% of male adolescent smokers). Across locations, there were significant differences in terms of shisha pipe smoking, with significantly higher rates of decline in usage in Gaza (64.3%) compared with the West Bank (31.6%).

Given the importance of social connectedness to adolescent well-being, our survey also explored whether adolescents were able to rely on a relationship with a friend or adult whom they could trust. Less than half (41.2%) reported that they had a friend they could trust, although more than half (64.5%) said they had an adult they could trust. In terms of geographic location, Gazans reported significantly higher rates of having a trusted peer (55.8%) and trusted adult (69.1%) than their counterparts in the West Bank (26.5% and 59.8% respectively), while adolescents living in camps were less likely than those outside camps to report having a trusted peer (33.0% versus 44.7%) or a trusted adult (58.9% versus 66.8%). Our qualitative findings also suggest that there are cultural taboos around discussing mental health concerns, especially for girls. As an 18-year-old refugee girl from Gaza explained: *'The problems which girls face are unlike the problems that boys face. Boys have more space than girls in the Gaza*

 Some children need a person to advise them so that they can forget the corona[virus] because they become upset due to the situation... This explains why we see more boys smoking...

(An 14-year-old refugee girl from Gaza, Palestine)

 The problems which girls face are unlike the problems that boys face. Boys have more space than girls in the Gaza community. Girls feel afraid to take actions or to speak out to others... Regarding boys, the community believes that whatever he does, he is a boy and he has that freedom....

(An 18-year-old refugee girl from Gaza, Palestine)

community. Girls feel afraid to take actions or to speak out to others... Regarding boys, the community believes that whatever he does, he is a boy and he has that freedom.'

The limitations on adolescent mobility and peer interactions notwithstanding, our qualitative findings did also reveal diverse positive coping mechanisms that adolescents have been turning to during the pandemic. A number of girls highlighted that they were using the pandemic lockdown period to further their studies. For example, a 19-year-old girl from Gaza explained:

I had to face myself and say I need to accept the situation and to adjust. So I had some things to study and memorise since I'm beginning my training [medical degree] so I took advantage of the situation. And I search the internet for some medical terminology and sometimes I teach my younger sister the English alphabet.

Others highlighted that they were developing new hobbies such as chess, learning a language or an instrument by following YouTube tutorials. Adolescent girls in particular reported that they were keeping a diary or practising their creative writing and drawing skills.

Participation in the community

Our survey findings show that only a small minority of all adolescents (7.8%) participated in volunteer activities during the pandemic. Volunteering may be hampered by the high rates of pre-existing poverty and vulnerability, which mean that many young people and their households are focused on survival needs first and foremost. As an 18-year-old girl from the West Bank remarked: *'People here don't have money to buy food. How will they do volunteer work?'*

Of the opportunities for adolescent community participation that do exist, these appear to be predominantly organised by NGOs on an ad-hoc basis rather than as part of any broader pandemic-response effort. For example, an NGO coordinator in Ramallah, in the West Bank, noted that some older adolescents were involved in a volunteer capacity in outreach activities with disadvantaged younger children, making them aware of the online recreational activities the NGO was offering during the pandemic: *'We have many groups of volunteers – some are as young as 15 years – and they have the role of spreading the idea of these activities, to check the children's needs and depending on their capacities and needs, we conduct these activities.'* However, these volunteer opportunities were highly gendered: just 3.5%

Box 4: Young volunteer supporting the pandemic response in her community: Marriam's story

Marriam is an 18-year-old refugee girl from Khan Younis camp in the Gaza Strip. With support and encouragement from her family and friends, she volunteers at a local community-based organisation that is responding to those in need. Marriam thinks that *'the covid-19 crisis is a chance to make us all heroes and by staying at home we can save ourselves and also protect one's country'*.

Marriam participates in a community initiative on social media called 'Be positive! The lockdown is for your benefit'. It aims to increase public awareness about the pandemic, and Marriam produces short videos encouraging people to stay home. She also joined another campaign (along with 65 girls her age) to collect money and other donations to help people living in poverty in her area during the pandemic, and took part in programmes aiming to empower youth and strengthen their leadership skills. Recently, she participated in the Youth Summit (autumn 2020), in which she interacted with policy-makers and other stakeholders and challenged them about issues related to young people.

Marriam used her experiences in community initiatives to present a paper at this summit *'I presented a paper about effective strategies to inform young people during this emergency.'* Although youth volunteering has increased a little during covid-19, she believes that youth can play a much more active role. She noted: *'I noticed girls tend to volunteer more than the boys in the programmes I take part in.'* Marriam's passion is to help others and, thanks to participating in these activities, her involvement grows and she wants to do more: *'I want to do more volunteer activities to gain additional experience, to interact with different people, to move away from my comfort zone and to play a more active role in my community.'*

D I try to be active on social media as an active girl who participates in youth groups. I share on social media about key youth issues, what youth are suffering from and how to address these issues.

(An 18-year-old refugee girl from Gaza, Palestine)

of older girls reported participating in volunteer activities, compared to 14% of older boys. This appeared to be largely due to gender norms that hinder girls' mobility outside the home. Several older boys noted that there were a number of volunteer initiatives in their community that involved supporting neighbours, but that these were self-organised and, by implication, would not have the necessary legitimacy and protection that girls would need in order to secure parental consent to get involved. As a 19-year-old boy in Gaza camp noted, *'There are volunteer activities by youth in our community but it's all based on*

individual effort and not through organisations or the government.' Nevertheless, some adolescent girls noted that they are getting involved in online-based volunteer activities (see Box 4 below). An 18-year-old refugee girl from Gaza explained that she has been using her writing skills to support youth activist groups online during the pandemic: *'I try to be active on social media as an active girl who participates in youth groups. I try to have an active role because I am a good writer. I share on social media about key youth issues, what youth are suffering from and how to address these issues.'*

Even so, there were also important geographical differences, with more volunteer activities in the West Bank (10%) compared to Gaza (5.5%), and among adolescents in non-camp locations (10.2%) compared to those in camps (2.0%). Adolescents with disabilities – largely due to mobility constraints and a lack of adapted activities – were also disadvantaged in terms of opportunities to volunteer: 3.1% of young people with disabilities did volunteering compared to 8.6% of those without disabilities. Our qualitative findings also highlight that poverty was a constraint to participation for many adolescents with disabilities, especially those with multiple impairments.



Young adolescent girl in an EU-funded Palestinian school © Peter Biro / European Union

Conclusions and policy and programming implications

As we enter the second year of the covid-19 pandemic, some of the initial effects of the shock induced by pandemic-related lockdowns and closure of services has receded, and adolescents have been able to draw on a range of individual, family and community assets and resources to cope with the far-ranging disruptions to their lives. However, except for Ethiopia (where adolescents returned to school in the final quarter of 2020), our mixed-methods findings underscore that adolescent girls and boys in the three other focal countries are not only still out of education, but that many are also facing precarious living environments and adolescent girls in particular are facing limited mobility, voice and agency.

Notwithstanding attention within the broader AGIP framework to both risks and potential opportunities for adolescent girls arising from the pandemic, our findings – six to nine months after the initial lockdowns – emphasise that for many adolescents, their experiences have been challenging across multiple dimensions. While our evidence points to an increase over time in opportunities for young people to be involved in the pandemic response in a volunteer capacity, these remain very limited overall, and especially for girls and adolescents with disabilities. There are some examples of adolescent girls getting involved in NGO outreach activities to support younger children or vulnerable neighbours, and participating in online youth activist work, especially in the MENA country contexts, and it is from these girls that we need to continue to learn so as to better inform programming and policy to support girls' voice and agency.

Our findings underscore the following risks and opportunities:

- Overall, while a range of social protection responses by national governments, UN agencies, donors and NGOs have materialised as the pandemic has evolved, they have nevertheless been relatively slow to scale up to provide a meaningful safety net, and few appear to be tailored to tackle the specific age- and gender-based vulnerabilities that adolescent girls are facing.
- Rural adolescents are significantly disadvantaged compared to their urban peers during lockdowns in

terms of access to services and digital connectivity, but experience fewer constraints in terms of mobility and interactions with peers.

- Adolescent girls are significantly disadvantaged across a range of domains compared to their male peers, with the important exception of pressures to engage in paid work. At the household level, girls face greater domestic work pressures during school closures, and poorer access to distance learning opportunities, due to their lower levels of access to devices and lack of digital literacy skills. Girls also appear to be at heightened risk of gender-based violence stemming from aggravated household tensions, and face elevated risks of child marriage in some rural contexts.
- Adolescent girls and boys are deploying diverse coping strategies in the face of the pandemic but this should not be confused for resilience, especially given the dearth of adolescent-friendly health, mental health and distance education services in many LMICs.
- Covid-19 risks are often compounded for the most disadvantaged groups of adolescents, including married girls, who emphasised a greater domestic and caring workload, increased tensions at home, and greater risk of violence (including intimate partner violence), with fewer opportunities to participate in community activities.
- For adolescents with disabilities, the pandemic and lockdowns have exacerbated communication and service access barriers, and, in some cases, led to heightened stigma.
- For refugees and internally displaced families, their already very precarious living situations have been rendered even more fragile due to the pandemic, especially those in camp settings in Palestine and in host communities in Jordan.

Notwithstanding significant efforts and allocated funds, the implications of our findings for policy and programming suggest that investments in adolescent girls will need to be significantly scaled up, and delivery and targeting strengthened, if LMICs are to emerge from covid-19 and



meet their SDG targets, delivering on the call to 'leave no one behind'. Here we outline priorities for action, which will require strategic partnerships between governments, development partners, civil society organisations and the private sector. At the end of each set of thematic recommendations we list how these recommended actions align with Generation Equality Action Coalition priorities.

1. Education and learning

- a. **Tackle access barriers to online education** by expanding access to low-cost devices and providing mentoring either in person (socially distanced) or online, through platforms such as WhatsApp. Also improve access to digital connectivity by reducing the cost of data, to ensure that differences in access and use of online resources do not exacerbate existing class and gender divides. Engage with private-sector providers to strengthen access for vulnerable populations to the internet so that they can access online education resources, but also information that could support their broader well-being including health prevention information, mental health first aid services (where they exist) and information about violence reporting and redress.
- b. **Invest in teacher training and investments in adjusting curricula to be suitable for online delivery**, with a particular focus in engaging with adolescents with no or limited digital literacy.
- c. **Provide no-tech distance education options** for students who have limited access to tech modalities. Printed and paper-based solutions remain foundational approaches for delivering effective, low-budget remote learning and can support adolescents who do not have steady access to either the hardware, charging capacities and/or network connections required for low- and high-tech interventions.
- d. **Develop strategies, material and training to continue procuring remote education for low-income and disadvantaged adolescents.** When schools reopen, hybrid systems (with face-to-face and online teaching and learning) will need to be accessible to all adolescents.

- e. Simultaneously ensure that outreach around the pandemic and distance education is communicated through non-digital channels (e.g. door-to-door visits, radio announcements, community meetings) so that the digital divide does not further exacerbate inequalities in access to education and information.
- f. As schools reopen, establish a recovery plan for the medium-to-long term to address the educational gaps created by the pandemic, which are adversely affecting the most vulnerable girls and boys, who may have disengaged from education altogether during lockdown and are at risk of longer-term cumulative education disadvantage. This could include catch-up programmes to revise curriculum content from the previous school grade (rather than automatic grade progression), tailored tutoring for students with specific learning needs, extended classroom hours and/or term times.
- g. Once reopened, schools must also prioritise tracking systems to monitor those adolescents who do not return to school, especially girls at risk of child marriage and adolescents – especially boys – at risk of child labour. This will enable targeted outreach in communities to understand and address the barriers households face in sending their adolescent children to school.

Generation Equality Action Coalition linkages:

- **Technology and Innovation for Gender Equality:**
 - Action 1: Bridge the gender gap in digital access and competences.
 - Action. 2: Invest in feminist technology and innovation.
- **Economic Justice and Rights:**
 - Action 2: Expand decent work and employment in formal and informal economies.
 - Action 4: Engender national economic reforms and stimulus packages.
- **Bodily Autonomy and Sexual and Reproductive Health and Rights:**
 - Action 1: Expand comprehensive sexuality education.

2. Protection from age- and gender-based violence

- a. Ensure that adolescents have access to online and phone-based reporting mechanisms and telephone helplines to expand opportunities to report age- and gender-based violence, including harmful practices such as child marriage and FGM/C. Invest in outreach activities through community leaders and adolescent/youth groups so that young people – including those without phone or internet connectivity – are aware of how to access these reporting mechanisms and services.
- b. Provide support to parents, including around positive discipline approaches, given heightened household tensions during lockdown. This could be through existing networks and online platforms in urban contexts where internet connectivity is better, and via radio and TV broadcasts in rural areas.
- c. Ensure that timely, rigorous research into contextual drivers of child marriage during covid-19 feeds into programming and policy. Mixed-methods research lends itself to investigating child marriage, as different methods can distil the variety of factors leading to child marriage and what works to prevent it.

Generation Equality Action Coalition linkages:

- **Gender-based violence (GBV):**
 - Action 1: Create an enabling policy, legal and resource environment for the elimination of GBV against women and girls in all their diversity.
 - Action 2: Adapt and scale up evidence driven prevention programming for the elimination of GBV against women and girls in all their diversity.
 - Action 3: Scale up comprehensive, accessible, and quality services for survivors of GBV against women and girls in all their diversity

3. Adolescent girls' voice and agency

- a. Ensure that adolescent girls' perspectives and experiences are accorded priority in the development of policy and programming responses to the pandemic, and that programme design is evidence-based, adequately financed and addresses immediate, life-saving needs as well as promoting longer-term resilience.

- b. Meaningfully engage adolescents and young people in emergency and recovery responses through partnerships, funding and leadership positions, and ensure that girls from diverse backgrounds and social groups are equitably represented and supported in these roles. Providing opportunities for adolescents to volunteer in their communities and access recreational facilities will be key in helping them continue to access social relations in their communities, schools and families that will promote their mental well-being. This is particularly critical for girls, who have seen a further reduction in their mobility during the pandemic.
- c. Engage with girl- and youth-led organisations to shape the pandemic emergency and recovery responses. With household finances under greater pressure than before, a slowing of educational commitments, limited options for leisure and increased household stress, there needs to be a more nuanced awareness among programmers and policy-makers of the effects of the pandemic on adolescent coping mechanisms.
- d. Develop low-cost and easily scalable programming – whether socially distanced in-person or virtual options – for young people to connect with peers while schools remain closed. A (temporary) reduction in internet and data costs would allow some of the most disadvantaged adolescents to connect with their peers and log on to remote learning platforms.

Generation Equality Action Coalition linkages:

- Economic Justice and Rights:
 - Action 4: Engender national economic reforms and stimulus packages.
- Feminist Movements and Leadership:
 - Action 3: Advance gender parity in decision-making and leadership.
 - Action 4: Strengthen adolescent girl-led, youth-led and youth-serving movements and organisations.
- Technology and Innovation for Gender Equality:
 - Action 3: Build Inclusive, Transformative and Accountable Innovation Ecosystems.

4. Livelihoods and social protection

- a. Strengthen gender- and adolescent-responsive social protection, leveraging pre-existing platforms where possible, informed by needs assessments and research about young people who are not being reached by existing social protection responses. Despite the range of pandemic-related responses to meet the immediate economic, food security and hygiene/sanitation needs of vulnerable adolescents and their families in some contexts, our findings indicate that many have received either one-off support only or nothing at all. It is therefore vital to invest in multi-purpose cash (and/or asset) transfers informed by age- and gender-sensitive vulnerability assessments and with links to complementary adolescent-responsive services in the form of 'cash-plus' programme designs.
- b. Urgently monitor social protection investments in terms of design and programme participants, with more tailored approaches so as to effectively support the newly vulnerable and less visible groups of disadvantaged young people, including migrant adolescents, who often have no access to family support.

Generation Equality Action Coalition linkages:

- Economic Justice and Rights:
 - Action 1: Increase women's economic empowerment by transforming the care economy.
 - Action 4: Engender national economic reforms and stimulus packages.

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Annex 1: Covid-19 country-specific contextual overview

Bangladesh: one year on from the onset of the pandemic

Notwithstanding low testing rates, confirmed cases in Bangladesh are among the highest in the South-East Asia region, with 3,229 cases per 1 million inhabitants (WHO, 2021: 2), and the health system has struggled to keep up with the virus's spread (see Figures 2 and 3). As a result of government restrictions designed to curb the pandemic, the International Monetary Fund (IMF) estimates that Bangladesh's gross domestic product (GDP) will grow by 2% for 2020, which represents a 5.9 percentage point decrease compared to 2019 (IMF, 2020; IPC-IG and UNICEF ROSA, 2020). The United Nations (UN) further warns that the pandemic has not only strained the country's health services but it has plunged millions of people into poverty. Some estimates posit that covid-19 will push 16.4 million people into poverty, while others suggest it could result in the entry/re-entry of as many as 42 million people into poverty – with rural areas most affected (Rahman et al., 2020; UNCT Bangladesh, 2020). Covid-19 has also interfered with the trajectory of economic growth and climate change adaptation in Bangladesh (UNCT Bangladesh, 2020). Furthermore, with an estimated 95% of total employment in the informal sector, the International Labour Organization (ILO) has estimated that nearly all informal workers (63.5 million) risk significant losses to their livelihoods (Bacil and Soyer, 2020; ILO, 2020).

The government has announced economic stimulus and social protection measures equivalent to 3.7% of GDP, in addition to measures to boost health infrastructure (UNCT Bangladesh, 2020). The government has also issued a range of macroeconomic and fiscal policies, alongside expanding social protection coverage to vulnerable groups. In Annex 2, we provide illustrative examples of social protection schemes and other government measures, with the understanding that

rollout has been intermittent, and many schemes remain ongoing. The extent to which assistance schemes target adolescents and young people, as opposed to targeting households remains unclear, although our findings suggest that social protection has been patchy in Dhaka's slums. Our qualitative data highlights that while some extreme poor households have received various forms of in-kind and other aid, many families who occupy a position just above 'extreme poor' status have been left behind.

Bangladeshi adolescents, and adolescent girls in particular, have been adversely impacted by the pandemic in a multitude of ways. The prolonged school closures the country continues to witness are likely to offset recent educational gains particularly for girls across the education cycle, and students from disadvantaged areas (Baird et al., 2020; Rahman and Sharma, 2021). Notwithstanding the government's introduction of TV lessons on 29 March 2020 on a state-owned television channel, the Sangsad TV, with daily lessons provided between 11.00 a.m. to 2.30 p.m. for secondary-level students, uptake has been limited (Farheen et al., 2020). Additionally, numerous implementers have introduced a multitude of radio-based, mobile-based and internet-based distance learning options, in order to maintain learning continuity for students. This notwithstanding, girls remain more likely than boys to drop out of school to offset household financial downturn, which may lead to negative coping mechanisms (UNFPA and UNICEF, 2020). In addition, research suggests that COVID-19 has increased risks of domestic abuse and violence for women and children in the home, and exacerbated gender inequality (Saleh, 2020).

Ethiopia: one year on from the onset of the pandemic

The first confirmed case of covid-19 in Ethiopia was announced on 13 March 2020. The government quickly

initiated widespread mass communication around social distancing and preventive hygiene measures, and closed land borders and schools, placed restrictions on public gatherings, and required many employees to work from home. Less than a month later, a five-month state of emergency was declared to prevent further spread of the virus. By 19 May, Ethiopia had only identified 352 confirmed cases and was initially considered a success story in its response (Financial Times, 27 May 2020). However, this number had risen to 5,689 cases by the end of June 2020, jumping to 100,000 by November and more than 160,000 as at the beginning of March 2021, with 2,391 deaths (WHO, 2021).

As well as dealing with the pandemic, Ethiopia has been disrupted by three other large-scale shocks during this period. The desert locust upsurge has caused concern for the nation's food supply, particularly for farming communities in the southern/western areas of the Southern Nations, Nationalities and Peoples Region (SNNPR) and Oromia, and in the northern/eastern areas of Somali, Dire Dawa and Afar, as well as Tigray and parts of Amhara regions. Furthermore, the killing of a prominent vocal artist from the Oromia region on 30 June 2020 exacerbated existing ethnic and religious tensions and sparked protests and riots in Addis Ababa and Oromia towns. In response, the government blocked the internet for two weeks and restricted travel into the capital. More recently, in November 2020, a conflict broke out between the Tigrayan regional government special police, the militia forces and the Ethiopian Federal Government Armed Forces, and has since descended into a state of protracted unrest, with allegations of human rights abuses by all parties, including the Eritrean armed forces. The international community, especially the European Union, has reacted by suspending aid payments. Together with covid-19, these shocks are likely to have a sustained impact on people's lives, and their economic and social well-being.

The primary mechanism for the government's social protection response has been the flagship Productive Safety Net Programme (PSNP), which reaches 8 million households in rural areas (Araya et al., 2020) and the Urban PSNP, which reaches nearly half a million households (see Table 3). Recent analysis by the World Bank and the International Food Policy Research Institute (IFPRI) found that the PSNP was protective during the pandemic in terms of offsetting food insecurity, and reductions in health and education expenditures (Abay et al., 2020), but

other analysts have highlighted that existing programmes have limited ability to respond to people who are newly vulnerable, especially in urban contexts (e.g. Baird et al., 2020c). Moreover, adolescents and youth were especially likely to be excluded from social assistance provisioning (Jones et al., forthcoming).

Jordan: one year on from the onset of the pandemic

After detecting the first cases of covid-19 in March 2020, the government of Jordan reacted quickly by closing the borders, imposing a strict lockdown with mandatory curfews, and closing schools and universities. These prompt actions were initially successful in curbing the spread of the virus, and Jordan was cited as one of the global success stories in managing the response to the pandemic (The Guardian, 2020). However, gradual relaxation of the restrictions and eventual opening of its borders resulted in a sharp increase in cases in September and October 2020, forcing the government to impose new measures (see Figures 5 and 6). These included restrictions on movement and closure of schools again just two weeks after they had reopened in September. Throughout 2020, schools provided either distance learning or a hybrid model for students in lower grades.

The socioeconomic situation in Jordan deteriorated due to these measures, and by the third quarter of 2020, the unemployment rate had risen to 23.9% compared to 19.1% for the same quarter in 2019 (Department of Statistics (DOS), 2020). Youth were particularly affected, with unemployment reaching 53.1% among 15–19-year-olds and 45% among those aged 20–24 (ibid.). Refugees in Jordan, who largely rely on informal employment, have been disproportionately affected by the worsening economic conditions, with many families losing their only source of income (UNDP, 2020; Kebede et al., 2020).

The Social Protection Committee formed by the Jordanian government at the beginning of the crisis aimed to coordinate the response of various stakeholders in order to expand coverage and support to a larger number of families affected by the pandemic (UNICEF, 2020a). The government's national response to covid-19 and ongoing efforts to support implementation of the Jordan National Social Protection Strategy 2019–2025 have been supported by UNICEF in the areas of: health and nutrition;

water, sanitation and hygiene (WASH); and child protection and education programmes for vulnerable children and women (ibid.). The UN's Framework for the socio-economic response to covid-19 in areas that UN country offices are contributing in Jordan shows that interventions to address the pandemic crisis have a strong focus on health and protection, but a more muted response in terms of its economic, macro-economic and social cohesion dimensions (UNINFO, 2021) (see also Table 3 on social protection programme details).

Palestine: one year on from the onset of the pandemic

On 5 March 2020, immediately after the first reported cases of covid-19 in the West Bank, the President of the State of Palestine declared a state of emergency in the Palestinian territories, closing schools and education facilities, restaurants, cafes, hotels, markets, wedding halls and religious places in both the Gaza Strip (hereafter referred to as Gaza) and West Bank. Lockdown measures included periods of 24-hour curfews, sometimes for several weeks, and more recently (as of December 2020) night curfews, restrictions on movement within and across governorates, and strict penalties for anyone flouting social distancing policies (United Nations Health Cluster, 2020). covid-19 measures have also included redeploying resources to combat the pandemic, including closure of some primary health centres (United Nations Population Fund (UNFPA), 2020).

Even before the first cases of covid-19 were reported in Palestine, there were concerns about how to tackle the virus, especially in Gaza, which is one of the most vulnerable and densely populated areas of the world, compounded by 14 years of a strict international blockade and deliberate de-development policies (Abu Hamad et al., 2020). In practice, the virus has followed different trajectories in Gaza and the West Bank, with the first case of covid-19 in Gaza not reported until 23 August 2020. There are a number of reasons for this. First, the West Bank is a relatively large area, is more open to the external world, and has fewer restrictions on travel to or outside the

West Bank territories than Gaza. This contributed to the rapid evolution of the pandemic there, while the blockade enforced by Israel since 2007 has ironically played a protective role in terms of limiting the spread of the virus to Gaza (ibid.). Second, while Gaza has only two entry points that limit the number of persons who can travel, the West Bank has multiple entry points (many of which are illegal exits) that are more difficult for local authorities to control. Third, many Palestinian workers from the West Bank (an estimated 180,000) have their workplaces in Israel and interact with large numbers of other people without using adequate safety measures (Ministry of Health, 2021). Finally, the Palestinian Authority does not have full control over all the areas in the West Bank; some areas are under the control of Israel (area C), and few safety measures, if any, were applied in these areas (Asi, 2020). In Gaza, local authorities were stricter in enforcing protective measures than their counterparts in the West Bank.

As at the beginning of March 2021, a total of 212,485 covid-19 cases had been reported in Palestine, including 55,430 in Gaza (Palestinian Institute of Public Health, Ministry of Health and WHO, 2021). The total number of deaths is 2,281, with 553 of these in Gaza (case fatality is 1.1%) (ibid.). A covid-19 vaccination programme started in February 2021; the Palestinian Ministry of Health has secured deals with four companies to provide vaccines for 70% of the population, although as of mid-February, only several thousand doses had been delivered. The Office of the United Nations High Commissioner for Human Rights (OHCHR) has stated that it is Israel's responsibility to provide equitable access to covid-19 vaccines for Palestinians in Gaza and the West Bank, in line with the Fourth Geneva Convention (OHCHR, 2021) but the Israeli Health Minister is disputing this.

In terms of the economic consequences of the pandemic, the World Bank considers the Palestinian economy to have faced multiple challenges in 2020, including a resurgent covid-19 outbreak, a severe economic slowdown, and a political standoff with the government of Israel that disrupted clearance revenues² for over six months (May–November 2020) (World Bank, 2020a). The World Bank estimates that GDP has contracted by approximately 8% and the unemployment rate has risen

² According to Oslo Accords (1993), Israel continues to control the borders and movement of goods imported and exported to the Palestinian Territories. Subsequently, Israel is supposed to collect the taxes and tariffs for the authority and monthly transfers the tax revenue to the Palestine authorities after deducting some administrative fees. However, Israel has frequently withheld the taxes it owes the Palestinian Authority for political reasons.

to 28.8%, with considerable regional divergence – a rate of 48.5% in the Gaza Strip compared to 18.2% in the West Bank. Poverty has, in turn, been adversely affected by slow growth, with an estimated 27.5% of Palestinians now living below the poverty line (ibid.).

In terms of social protection, the government response has been limited. The Ministry of Social Development and other development partners began piloting a shock-responsive social protection mechanism through the National Cash Transfer Programme to support vulnerable households (UNICEF, 2021b). This included

provision of a one-time emergency cash transfer to vulnerable households affected by the pandemic to help poor families cope with the consequences of lockdown measures and closure of businesses. Also, the Ministry of Social Development provided short-term temporary job opportunities for unemployed graduates especially from the health sector. Cash assistance was also provided by several actors, particularly UNRWA, Qatar Fund, 'Wakfet Izz' (A Community solidarity fund) and also by others (see also Table 3 on social protection programme details).

Annex 2: Overview of social protection programme responses to the pandemic in GAGE focal countries

Country	Social assistance scheme	Programme objectives	Implementing agencies	Target beneficiaries	Scale	References
Bangladesh	In-kind food distribution and subsidised commodities (an expansion of Bangladesh's Special Open Market Sales programme and the Food Friendly Programme)	One-off food distributions as well as regular open market subsidised food sales were expanded to mitigate food insecurity for low-income households	Government of Bangladesh	Households receiving assistance pre-covid-19 plus newly enlisted beneficiaries	10.25 million people	IPC-IG and UNICEF ROSA, 2020
	Database to facilitate the distribution of in-kind relief	The government is seeking to launch a database of 12.5 million poor and low-income families to facilitate the distribution of rice and other aid commodities and streamline the distribution of relief to impoverished households	Government of Bangladesh	Poor and low-income families	12.5 million people	IPC-IG and UNICEF ROSA, 2020
	School feeding programme	Fortified biscuits are distributed to primary school children who were not receiving school meals due to school closures. Announcements have been made that distribution would last the duration of school closures	Government of Bangladesh in partnership with the World Food Programme (WFP)	Primary school-aged children receiving school meals pre-covid-19	3 million children (by May 2020)	Alamgir, 2020
	Cash transfers	Coverage has increased by 163% partly due to a cash benefit scheme of 2,500 taka (BDT) (approximately \$30) to 5 million households who suffered livelihood losses during lockdown	Government of Bangladesh	Households receiving assistance pre-covid-19 plus newly enlisted beneficiaries	15 million to 39.8 million people	Bacil and Soyer, 2020; Gentilini et al., 2020

Country	Social assistance scheme	Programme objectives	Implementing agencies	Target beneficiaries	Scale	References
Ethiopia	Urban Productive Safety Net Programme (UPSNP)	Exemption from public works obligation and receipt of 3 months' advance payment; small increase in transfers to pregnant women	Government of Ethiopia and World Bank	Existing UPSNP beneficiaries, 'low-income citizens', pregnant women, and those in 16 cities identified as 'high-risk' of covid-19 exposure	604,000 existing UPSNP beneficiaries; 550,000 additional households added temporarily in response to the pandemic.	Gentilini et al., 2020; Melesse, 2019; Venton, 2020; Cancedda et al., 2020
	Rural Productive Safety Net Programme (PSNP)	Exemption from public works obligation and receipt of 6 months' advance payment; scaling up of caseload from July 2020 and increase in cash value by 22%	Government of Ethiopia and World Bank	RPSNP beneficiaries	8 million people; scaling up to include an additional 1 million people (\$50 million – \$70 million allocated for scale-up)	Ministry of Agriculture and Rural Development, 2014; Gentilini et al., 2020
	Paid leave and unemployment along with labour regulation adjustments	Prohibition against laying off workers and terminating employment contracts	Government of Ethiopia	People working in formal employment	5.5 million people (10% of 5.47 million working-age people who are in formal waged employment)	Gentilini et al., 2020; World Bank, 2017
	In-kind assistance and food vouchers	Provision of basic food items to those who are under 'stay at home' orders and allocation of money for purchasing essential goods	Government of Ethiopia	Poor individuals not currently covered by PSNP or UPSNP	15 million people (0.6% of GDP allocated)	African Development Bank, 2020; Gentilini et al., 2020
Gaza and West Bank	Emergency cash transfers in the West Bank (\$20 million)-funded by the World Bank	One-time cash transfer to vulnerable households affected by the pandemic in the West Bank to help poor families cope with the consequences of lockdown measures and closure of businesses	Ministry of Social Development	Vulnerable households who lost their income due to lockdown measures. Highly vulnerable households that are already registered in the Palestinian cash transfer programme	68,000 families	World Bank, 2020b
	Cash-for-work in the West Bank (\$8 million)- funded by the World Bank	Providing short-term temporary job opportunities for unemployed graduates from social sector-related disciplines, especially health. 50% of the beneficiaries should be women to promote women's employment	Ministry of Labour, in coordination with the Palestinian Fund for Employment and Social Protection for Workers	Unemployed graduates from social disciplines, particularly graduate of health colleges	3,060 beneficiaries (1,530 women)	World Bank, 2020b

Country	Social assistance scheme	Programme objectives	Implementing agencies	Target beneficiaries	Scale	References
Gaza and West Bank	Cash assistance for vulnerable families and workers who lost their casual work (Wakfet Izz) Fund generated specifically for covid-19 through community donations till July 2020 (\$28 million)	Reinforcing community solidarity and supporting households affected by the pandemic. Supporting health services	Community Committee in coordination with the Ministry of Labour and trade unions	Workers affected by the pandemic (40,000) Poor families (30,000) Jerusalemite families affected by the pandemic Charitable societies and hidden families in the camps of Lebanon and Syria Ministry of Health	35,000 families in West Bank 5,000 families in Gaza	Wakfet Izz, 2020
	Supporting people in quarantine (Gaza Strip)	Providing hospitality and catering services for people in quarantine, including providing health and psychosocial services	Ministry of Social Development	People, families hosted	30,000 guests	Ministry of Social Development, 2020
	Providing food and health packages for families in home quarantine (Gaza Strip)	Distributing food and health parcels to quarantined families, at a cost of \$2 million	Coordinated by Ministry of Social Development with contribution of governmental bodies, international and civil society organisations	Quarantined families	29,869 families (186,853 individuals)	Ministry of Social Development, 2020
	Cash assistance Qatar Fund	Supporting poor families, especially unemployed \$100 to every needy family, monthly	Ministry of Labour	Needy families, unemployed graduates	100,000 families	Majid , 2021

'Some got married, others don't want to attend school as they are involved in income-generation'

Country	Social assistance scheme	Programme objectives	Implementing agencies	Target beneficiaries	Scale	References
Gaza and West Bank	Food assistance (Gaza) (door-to-door home and at United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) distribution centres)	Increasing food security for poor refugee households in Gaza	UNRWA	Registered refugees who are classified as poor	1.14 million refugees in Gaza (food assistance)	UNRWA, 2020
	Cash and food assistance (West Bank) Provide cash assistance to poor households in Gaza (\$40 per person)	The provision of electronic food vouchers and food baskets for families in home quarantine in the West Bank Supporting livelihood conditions in the Gaza Strip			110,400 refugees, 23,000 vulnerable refugee households in the West Bank (cash and food assistance) In Feb/March 2021 supporting 11,500 households (36,000 individuals) in Gaza (total \$1.4 million) cash assistance	
Jordan	Health services	Government, in partnership with ministries and organisations, provided free treatment to covid-19 patients, free medicine delivery and employed awareness-raising efforts to prevent covid-19 spread	Government in partnership with UNICEF and community volunteers	Patients registered through hospitals, medical centres via telephone service or an online application form	Government delivered medications to 26,000 individuals in five governorates. Lack of data about the needs of particularly vulnerable groups	UNICEF, 2020a
	Free covid-19 vaccinations for refugee populations	Jordan has become one of the world's first countries to start covid-19 vaccinations for refugees	Government in partnership with UNHCR	Refugee population in Jordan	2,000 Syrian refugees had registered to receive the vaccination, of which 1,200 qualified under the government's priority system 248 refugees had been vaccinated (as at the date of writing) in Zaatari camp	UNHCR, 2021 Jordan Times, 2021

Country	Social assistance scheme	Programme objectives	Implementing agencies	Target beneficiaries	Scale	References
Jordan	National Aid Fund (NAF) cash assistance and expansion of provision to low-paid informal sector workers or those in temporary irregular jobs via NAF's Emergency Cash Assistance Programme to Daily Wage Workers	Government continued supporting vulnerable Jordanians via the NAF cash transfer programme and launched a new emergency 3-month programme for informal workers to rapidly deliver assistance through e-wallets for up to 250,000 households. The programme may be extended for another three months but no official announcement has yet been made	Government of Jordan	Vulnerable Jordanian families – eligibility criteria verified by the National Unified Registry	Over 440,000 existing and newly registered beneficiaries of NAF, including 250,000 new beneficiaries of the Daily Wage Worker Programme	UNICEF, 2020a
	Social insurance measures	Social Security Corporation (SSC) Investment Fund has widened set of policies, including in-kind transfers and benefits for the unemployed and self-employed	Government with support of IMF	Unemployed and self-employed, now also including Gazan refugees, non-Jordanian children of Jordanian mothers, and migrant workers.	The SSC has provided benefits to almost 1 million workers in the regular and informal sectors	IMF, 2020 UNICEF, 2020a
	Food assistance through vouchers	To address refugees' increasing vulnerabilities, WFP has expanded its aid coverage from August to December 2020 and continued providing monthly food assistance through cash-based transfers	WFP	Households receiving assistance pre-covid-19 plus newly enlisted beneficiaries.	Up to December 2020, benefited almost half a million refugees in camps and host communities. Most beneficiaries are from Syria	WFP, 2021
	Food security innovation programme for youth and adolescents	WFP is discussing social innovation labs (SILs) initiative with UNICEF to create a combined food security innovation programme for youth and adolescents in Jordan in 2021 to strengthen the programme in the light of the impacts of pandemic	WFP, UNICEF	Students enrolled in Makani SIL programme	Unknown	WFP, 2021
	Cash transfer	UNICEF has also scaled up its social assistance through its Makani programme and Hajati cash transfer programme by supporting children, while continuing efforts to help children stay safe and learn during the pandemic	UNICEF with partnership with government	Vulnerable households to support children's schooling	Regular cash support for over 30,000 children in-need and for additional 34,500 children with an emergency winter cash payment	UNICEF, 2020b



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About GAGE

Gender and Adolescence: Global Evidence (GAGE) is a nine-year longitudinal research programme generating evidence on what works to transform the lives of adolescent girls in the Global South. Visit www.gage.odi.org.uk for more information.

This report has benefited from the technical support of the Adolescent Girls Investment Plan (AGIP) Evidence Sub-committee. AGIP is a global partnership co-chaired by Plan International and Girls Not Brides and includes a group of civil society organisations, research institutions and foundations collaborating to drive evidence informed investments for adolescent girls' action, policy and programming. AGIP members include: International Planned Parenthood Federation (IPPF), Gender and Adolescence: Global Evidence (GAGE/ODI), Population Council, International Center for Research on Women (ICRW), Malala Fund and, Women Deliver. Additional technical partners of AGIP include Bill and Melinda Gates Foundation (BMGF) and Ford Foundation.

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This document is an output of the Gender and Adolescence: Global Evidence (GAGE) programme which is funded by UK aid from the UK government. However, views expressed and information contained within do not necessarily reflect the UK government's official policies and are not endorsed by the UK government, which accepts no responsibility for such views or information or for any reliance placed on them.

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ISBN: 978-1-913610-43-2

Front cover: Adolescent girl in Jordan © Nathalie Bertrams



**Adolescent Girls
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