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Socioeconomic impacts of COVID-19 in Uzbekistan: perspectives of mahalla representatives

Findings and policy recommendations from a survey conducted in May-June 2020

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EXECUTIVE SUMMARY

Like other countries of the world, Uzbekistan was affected by the novel coronavirus (COVID–19) pandemic, the first case of which was recorded in the republic in March 2020. Thanks to timely preventive measures,¹ the country has managed to avoid a sharp increase in the number of people affected and gain time to prepare for the fight against the pandemic. At the same time, the introduction of a nationwide quarantine and a set of restrictive measures have caused a negative impact on the welfare of the population, especially people in the most vulnerable situations.

UNDP Uzbekistan with the Ministry for Mahalla and Family Support conducted a survey of local communities in Uzbekistan to assess the social and economic impact of the government's COVID-19 response on the countrywide population. The study targeted mahalla leaders, covering 3,670 respondents– chairpersons of mahallas, their deputies and specialists (25% of respondents were women). The study, conducted in May-June 2020, focused on assessing the consequences of the nationwide quarantine for the overall wellbeing of communities, selected sectors, various social groups, and on women particularly. The study also considered the capacity of mahallas to effectively deliver social support to the most affected populations.

1. The study found that the **pandemic has significantly increased poverty risks within communities**, especially in urban areas, as a result of a significant drop in income, loss of jobs, labor migrants who returned without work and the emergence of hidden unemployment. The survey data shows that declining income (74% of respondents identified this problem) and loss of employment (58% of respondents) have become the main problems faced by residents of the mahalla. The gap between these two figures suggests that the pandemic may not only lead to direct job losses but also the emergence of "hidden" unemployment resulting from salary cuts, forced leave without pay, as well as loss of earnings by the informally employed. Almost half (44%) of respondents recorded an increase in the number of labor migrants that had returned to mahallas, leading to an increased burden on the communities to re-socialize migrants and find them jobs to compensate for lost remittances.

The negative implications of the pandemic have been *more pronounced in urban areas*. A number of indicators in the regional context have shown more negative values for such territories as Tashkent city, Tashkent and Samarkand regions. For urban communities, the loss of jobs is tantamount to the complete deprivation of income for a significant part of the population. In rural areas, in contrast, households have additional livelihood mechanisms, such as opportunities to engage in livestock and crop production on a small scale for their own needs. In cities, especially large ones, households are deprived of such opportunities. Therefore, the risks of extreme poverty have increased more prominently in cities as a result of the quarantine.

2. The pandemic has had the most negative impact on small and medium enterprises in catering, trade, construction, transportation and paid services. According to the survey data, the reduction in jobs was most prominent in food services and catering (80% of responses). The second most affected area was other types of locally-provided services (58%), followed by the construction sector, trade and education (both preschool and formal schools), and the hotel business. Considering that SMEs employ more than 78% of the workforce and produce more than 56% of GDP, disruption in their activities will have negative socio-economic implications in local communities throughout the country.

¹ See Распоряжение Президента Республики Узбекистан об образовании специальной республиканской комиссии по подготовке программы мер по предупреждению завоза и распространения нового типа коронавируса в республике Узбекистан [Order of the President of the Republic of Uzbekistan on the Formation of the Special Republican Commission for the Preparation of the Program of Measures to Prevent the Import and Spread of a new type of Coronavirus in the Republic of Uzbekistan], 29 January 2020, <u>https://lex.uz/docs/4720408</u>

Furthermore, Uzbekistan's labor market exhibits gender segregation across various sectors of the economy. Women account for more than three-quarters of all workers in the social sectors (healthcare, social work and education combined) and more than half of those in accommodation and food services. Thus, the high rates of job losses in the service and education sectors most likely had a profound impact on women's employment.

3. COVID-19 has expanded the categories of vulnerabilities, which, in addition to the unresolved problems of social groups that were in vulnerable situations before the pandemic, will objectively increase the burden on the country's social infrastructure. According to the empirical data obtained, in May 2020, the mahalla administrators had already noted an increase in the number of residents in need of social protection. Every third respondent (33.8%) was of the opinion that this need would grow slightly. Every tenth expected a sharp increase in the number of people in need.

Most acutely the negative consequences of COVID–19 were experienced by *low-income families* (48% of responses), *multi-child families* (40%), and *returning labor migrants* (34%). The problem of low-income families is notably high in the Samarkand and Namangan regions (more than 55% of responses). Multi-child families² as the most affected group were more often reported in the Tashkent region (49%). Labor migrants as the most negatively impacted category were mentioned in the Jizzakh and Kashkadarya regions (47%-48%).

4. **COVID-19 had a disproportionately negative impact on the economic, social and psychological wellbeing of women**. According to the survey, women were the most likely to approach mahalla centers for assistance (89% responses). While this may indicate that women are more likely to be claimants for social benefits, in this case it most likely indicates that this particular category has been particularly vulnerable due to the pandemic. First, women are a majority of formal or informal workers in the services, food and beverage and education sectors, which were greatly impacted by the crisis. Second, women take on the major role of looking after children- a role that they continued to provide when also staying home during the pandemic. The increased burden on women of childcare, as well as overseeing children's education, reduced their ability to work. Almost 50% of the respondents confirmed that the quarantine has *increased women's domestic workload* (housework, care for children, the elderly and ill family members). Third, as the majority of migrant workers from Uzbekistan are men, the pandemic resulted in wives of migrant workers losing their livelihoods due to the closure of borders during the most profitable season for labor migration. Fourth, and this is a national feature of the Central Asian countries in which multi-generational families are common, quarantine measures that required people to stay at home likely resulted in daughters-in-law being put under psychological and emotional pressure from their husbands' relatives.

Loss of employment, decrease in income, coupled with forced isolation within the family have caused increased psychological tension in many households, and this in turn **increases the risk of domestic violence**. This phenomenon was observed around the world when various countries introduced "lockdown" measures to fight COVID-19. In the case of Uzbekistan, the situation is complicated by *outdated knowledge and practices regarding domestic violence and the misconception that it is a shameful phenomenon* that is better hidden and suppressed than recognized and combated. This belief is indirectly indicated by the share of responses (99%) that no facts of domestic violence have been observed in mahallas of Uzbekistan. This response is in direct contrast to other sources of data. For example, according to the Ministry of Internal Affairs of the Republic of Uzbekistan, the number of complaints of domestic violence made to the police increased from June to July 2020; of 202 registered cases of crimes against women in this period, 54% concerned psychological violence, 44% concerned physical violence and the remaining cases were related to

 $^{^{2}}$ According to the Law of the Republic of Uzbekistan "On Amendments and Additions to Certain Legislative Acts of the Republic of Uzbekistan" dated October 5, 2020 #LRU640, the Family Code of the Republic of Uzbekistan was supplemented by Article 4, which states that "a family with four or more children under eighteen years, is a large family".

economic violence.³ From January to April 2020, the law enforcement bodies of Uzbekistan issued 527 protection orders for survivors of domestic violence.⁴

Although local community leaders in urban areas are better prepared to respond to cases of domestic violence, for the most part, *local mahalla leaders have limited awareness of how to deal with domestic violence cases*. Thus, 39% of mahalla representatives expressed a need for further information about methods of preventing domestic violence. It is worrying that very few respondents saw a need to improve their own capacities to identify domestic violence cases (15%), or to dispel misconceptions about this form of violence (11%), when the responses to other survey questions suggest that these are areas that are especially problematic for mahalla leadership. Lastly, less than 10% of respondents saw a need for support in how to work directly with survivors of domestic violence.

5. Finally, the study attempted to assess the **needs of mahallas** to mitigate the negative effects of the pandemic. It was found that tangible forms of assistance, such as distribution of "food packages to those in need" (over 44% of cases), are in greater demand than other forms, such as volunteer help. The main beneficiaries of the socio-economic assistance provided by mahallas during the quarantine have been women and older people (a group that likely also includes women). When asked about any assistance that the mahallas needed to cope with the pandemic, most representatives (47%-49%) cited the need to improve the system of local self-governance, including equipping mahalla offices with modern equipment, reducing bureaucratic reporting and increasing wages for staff.

In the current circumstances, the government remains constrained in the options for policies that could be applied to overcome the crisis. A number of measures have already been taken to provide social support to the population, to prevent bankruptcy of enterprises, and to stimulate employment and economic activity. At the same time, in order to increase the effectiveness of such measures, a holistic approach to the situation is required.

Based on the findings, the study proposes the following **set of measures** aimed at mitigating the negative consequences of COVID-19.

1. Measures to revive economic activity and employability of the population in mahallas

1.1. Adjust economic policies to facilitate accelerated recovery of small and medium businesses in labor intensive sectors. This involves permitting small business in domestic services and sale of non-food products to operate within mahallas in strict compliance with all sanitary standards. Measures to stimulate economic recovery should be designed with value chains in mind and take into account seasonal factors to ensure that the quarantine has as little impact as possible on the harvest season in the countryside and the sale of the crops, especially in the private sector.

1.2. Expanding opportunities for family-based entrepreneurship through creating platforms for small private business in mahallas. Family-based businesses can potentially be sources employment and income for women, and for young people (both young men and women). It is important to facilitate creation of small private businesses on the basis of mahallas with a focus on longer-term investments in the production of consumer goods that are in demand by the residents of the mahalla, as well as encouraging the private sector to import or produce scarce goods locally. This requires increasing access to start-up capital, for example, preferential bank loans, significantly reducing the cost of banking services, and reducing collateral requirements for issuing loans with mahalla guarantees⁵. Mahalla bodies could act as backers of long-term

³ Data from the Ministry of Internal Affairs of the Republic of Uzbekistan, 16 July 2020, <u>https://telegra.ph/Operativnaya-svodka-Ministerstva-vnutrennih-del-po-sostoyaniyu-na-6-12-iyulya-2020-g-07-16</u>

⁴ Oparina, D., Uzbekistan: Domestic Abuse during Coronavirus Continues, 20 May 2020, Central Asian Bureau for Analytical Reporting (CABAR), <u>https://cabar.asia/en/uzbekistan-domestic-abuse-during-coronavirus-continues/</u>.

⁵ In particular, this concerns the organization of public monitoring of the implementation in practice of paragraph 5 of the Decree of the President of the Republic of Uzbekistan "On additional measures to improve the system of involving the population in entrepreneurship and the development of entrepreneurship" dated October 13, 2020 No. PP-4862. It established the procedure according to which persons who have received special

loans and international development grants. Any initiatives to increase women's role in family businesses must ensure that measures are taken to alleviate the burden of unpaid domestic and care work and not increase the burden further.

2. Measures to refocus the social protection policies on the most affected groups

2.1. Social protection policies must become more operationalized and targeted to produce the maximum multiplier effects. In addition to the most affected groups identified by the survey – low-income families, multi-child families, and labor migrants – social protection policies should cover single mothers raising children under the age of 18, retirees, both single and living with their children and grandchildren, persons living with disabilities, persons of working age who have lost their jobs in the formal sector and survivors of domestic violence.

2.2. Improving the skills and retraining of people of working age through short-term vocational training courses through public-private partnership between the Ministry of Employment and non-state educational institutions. This will help restore demand for educational services, provide citizens with more opportunities for self-realization in economic activity and in the long run significantly increase the human capital of the country. Special attention should be devoted to young women and men who are in not in education, employment, or training (NEET) in order to mitigate the potential negative impacts of COVID-19 in disrupting their education.

2.3. Improving the quality and availability of data on the social groups most seriously affected by the pandemic. This involves developing digital solutions (information systems for case management, electronic registries, etc.) to collect, process and analyze information on the social, economic and gender profile of mahalla residents applying for social assistance, as well as building digital skills of the mahalla workers. These measures, as well as capacity building for mahalla representatives in how to collect and analyze data disaggregated by sex and other factors, will help introduce data-driven and evidence-based approaches to the decision-making related to social support of the local population.

3. Measures to address COVID-19 impacts on women

3.1. Measures to alleviate the unequal burden of unpaid domestic and care work on women should be a priority. Public investments should be made in social care infrastructure, especially child care, elder care and care for the long-term ill, that provide universally accessible (especially in rural areas) and high-quality care services. Investments in this sector would generate decent work opportunities for women and men and enable a greater number of women to enter or reenter the workforce, helping to close the gender gap in labor force participation.

3.2. Addressing women's specific needs could start from introducing a mechanism by which women and girls who are experiencing domestic violence could confidentially request assistance from the mahalla. This should be accomplished by engaging and collaborating with women's non-governmental organizations and specialists. During the pandemic, mobile operators could provide women with access to hotline numbers even with a zero balance (free of charge). Digital solutions could be created or utilized (such as Telegrambots or mobile apps) to report the incidents of violence against women to mahallas and law enforcement bodies.

3.3. Building gender responsive skills of mahalla administrations to establish a system for identifying conflicts in families and incidents of domestic violence, supporting women in families experiencing

certificates of non-governmental educational organizations of JSCB "Microcreditbank" are allocated: microcredits without collateral in the amount of up to 33 million soums for organizing their own business to individuals with entrepreneurial initiatives, including youth and women;

microcredits in the amount of up to 225 million soums to persons who established microfirms and small enterprises, on the basis of a guarantee of third parties, insurance policies, a pledge of property acquired on credit, a guarantee of the State Fund for the Support of Entrepreneurial Activities and other types of security provided for by law. At the same time, microcredits are allocated for a period of up to 3 years, including a grace period of up to 6 months at the main rate of the Central Bank "

domestic violence, providing survivors with referrals to social support (such as primary psychological and medical assistance, legal counseling or temporary shelter), as well as providing professional assistance to help families resolve conflicts. It is necessary to develop and publish in Uzbek, Russian and Karakalpak languages special methodological manuals for mahalla activists to identify and prevent gender-based violence, as well as to provide appropriate support to survivors. A series of training programs must be conducted for mahallas on identification, prevention and supporting survivors of violence against women.

3.4. Developing and implementing awareness raising programs to improve the knowledge and attitude of the population towards domestic violence. In addition to educational measures, these programs should actively utilize soft tools and behavioral modeling, positive discrimination, etc. to strengthen the culture of intolerance for violence against women in society, as well as to help in identifying and differentiating various types of violence - psychological, emotional and physical.

4. Measures to improve the capacities of mahallas to respond to COVID-19

4.1. Building technical and human resources capacities of the Ministry for Mahalla and Family Support. This calls for addressing the operational needs of the newly established ministry by providing support in equipping its offices, building its digital infrastructure, enhancing inclusiveness of its premises to enable effective work with various populations in vulnerable situations – such as people with disabilities, survivors of gender-based violence, people in situations of homelessness, etc. Capacity building and training programmes must be designed and implemented for ministry staff on modern approaches to social protection based on best international practices and good understanding of the local context.

4.2. Improving the government's COVID-19 response communication strategy with a focus on explaining the absence of risk from those who had undergone appropriate COVID-19 treatment to counter stigma and discrimination. Also, the materials covering the situation around the pandemic should be based on critical analysis in order to objectively identify and illustrate cause-and-effect links. This requires enhancing the capacities of public relations and communication specialists of the key agencies engaged in the COVID-19 response in Uzbekistan (Ministry of Health, Ministry for Mahalla and Family Support, local khokimiyats) on appropriate communications with regard to COVID-19, its effects and consequences.

4.3. Explore and utilize innovative approaches to social protection. To meet an increasing number of requests for assistance, mahallas need to explore opportunities to mobilize sponsorship and humanitarian aid for affected populations. In this regard, the Ministry for Mahalla and Family Support could expand its collaboration with international humanitarian organizations, local NGOs and volunteer communities to collect and allocate sponsorship funds. This requires setting up a mechanism for identifying and quantifying specific types and forms of assistance that the local population needs in close consultation with senior mahalla members (aksakals). To ensure transparency and mobilize resources (through fundraising or crowdsourcing), this information must be published online.

In general, in order to improve the targeting of the subsequent packages of socio-economic support, the government and other stakeholders must better consider the regional context according to such criteria as population density, level of urbanization, presence of large industrial enterprises and other stable sources of income, inflow and outflow of migrants. It is also important to account for seasonal factors so that the quarantine has a minimal impact on the harvest and sale season, especially in the private sector.

INTRODUCTION

On 30 January 2020, the Director-General of the World Health Organization declared the outbreak of a novel coronavirus (COVID-19) as a public health emergency of international concern.⁶ By decree of the President of the Republic of Uzbekistan, a Special Republican Commission (headed by the Prime Minister) was immediately established to develop and coordinate counter-pandemic policies and activities for the country.⁷ After the first person with COVID-19 was registered within Uzbekistan on 15 March 2020,⁸ the Special Republican Commission began to suspend key services, taking a phased approach. All educational institutions were temporarily closed (16 March 2020), followed by the suspension of some public services (for example, court hearings and public transport), the closure of trade centers, businesses and bazaars that serve multiple clients (with exceptions for food markets and pharmacies; 19 March 2020) and the transfer of business activities to remote services when possible (24 March 2020). Lockdown and self-isolation measures were introduced throughout the country.

The emergency measures did not apply to businesses or individual enterprises considered essential. Private companies that were able to ensure social distancing and meet epidemiologic standards, or could transfer business processes to on-line or telecommuting formats, continued to operate. For example, a significant number of cafes and restaurants in cities started to provide takeaway services. Such measures meant that the severity of unemployment was mitigated in the short-term. Public agencies continued to operate with certain limitations, mostly related to ensuring social distancing and preventing crowding.

All people who were diagnosed with COVID-19 were placed in quarantine for treatment, regardless of the severity of their symptoms, in order to prevent possible spread of the virus and ensure appropriate medical treatment. Anyone who had been in contact with, or who was likely to have been in contact with, a person who contracted COVID-19 was placed in quarantine for at least 14 days, depending on results of COVID-19 testing. Measures were taken to facilitate the return of Uzbek citizens from abroad. Upon arrival, all citizens were placed under quarantine in a centralized facility. Specialized medical institutions and quarantine zones were established in all regions of the republic. For instance, quarantine zones were created in the Tashkent, Namangan and Surkhandarya regions, and a thousand bed specialized multifunctional hospital was built in the Zangiata district of the Tashkent region. As a result of such measures, the rate of coronavirus infections decreased from March-April 2020, and the number of people who recovered from COVID-19 increased. The number of people being treated for COVID-19 was reduced to minimal levels by May 2020. See Figure 1, below.

⁶ WHO, WHO Director-General's statement on IHR Emergency Committee on Novel Coronavirus (2019-nCoV), 30 January 2020, <u>https://www.who.int/dg/speeches/detail/who-director-general-s-statement-on-ihr-emergency-committee-on-novel-coronavirus-(2019-ncov)</u>

⁷ The 25-member commission is formed of ministers and the heads of state agencies. Currently there are two female members of the commission: the Minister of Heath and the Minister of Pre-school Education. See Распоряжение Президента Республики Узбекистан об образовании специальной республиканской комиссии по подготовке программы мер по предупреждению завоза и распространения нового типа коронавируса в Республике Узбекистан[Order of the President of the Republic of Uzbekistan on the Formation of the Special Republican Commission for the Preparation of the Program of Measures to Prevent the Import and Spread of a new type of Coronavirus in the Republic of Uzbekistan], 29 January 2020, https://ex.uz/docs/4720408 ⁸ According to the Agency for Sanitary and Epidemiological Welfare under the Ministry of Health of the Republic of Uzbekistan.

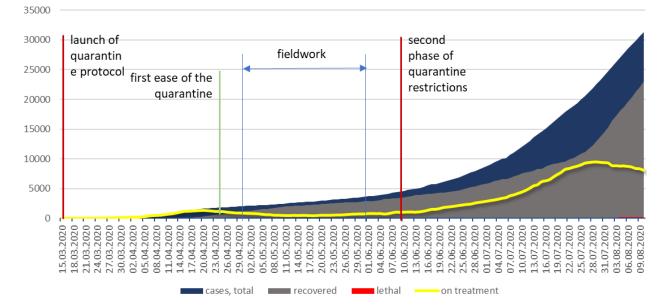


Figure 1. COVID-19 in Uzbekistan

To address the negative economic impacts of emergency measures, President Mirziyoyev announced the first anti-crisis economic stimulus package on 19 March 2020.⁹ A ten trillion UZS¹⁰ an anti-crisis fund was established under the Ministry of Finance to support economic recovery and enhance the healthcare system. Among the measures, small businesses and individual enterprises were granted tax relief as well as a number of other tax incentives and deferred payments on loans. From March-April 2020, an additional three stimulus packages were adopted by the president.

Efforts to increase the capacities of the healthcare system included the construction of three specialized hospitals for the treatment of COVID-19 and the procurement of additional supplies and equipment, such as ventilators, oxygen concentrators and personal protective equipment. Around 500 billion UZS were recently allocated¹¹ to purchase COVID-19 tests, polymerase chain reaction (PCR) machines and other laboratory equipment. Several medical institutions were redesigned.

Uzbekistan received humanitarian assistance from a number of countries worth over 78 million USD in total.¹² Attempts to provide social support to the most vulnerable groups of the population were taken. Vulnerable groups are those that generally had been recipients of support before the COVID-19 pandemic, including low income households, single mothers, single elderly people and people with disabilities. The institution of the mahalla- a unit of administration at the local community level- has the primary role in ensuring the targeted delivery of social allowances and employment assistance. From February 2020, the work of the mahallas has been coordinated by the newly established Ministry for Mahalla and Family Support.

⁹ Gazeta.uz, Создается Антикризисный фонд на сумму 10 трлн сумов [Anti-crisis fund in the amount of 10 trillion soums is being created], 19 March 2020, <u>https://www.gazeta.uz/ru/2020/03/19/anti-crisis-fund/</u>

¹⁰ UZS – Uzbek Sum - National currency of the Republic of Uzbekistan

¹¹ UZA, Насколько оправдан повторный карантин, или как Узбекистан намерен дальше бороться с пандемией [How justified is a repeated quarantine, or how Uzbekistan intends to continue to fight the pandemic], 16 July 2020,

http://uza.uz/ru/society/naskolko-opravdan-povtornyy-karantin-ili-kak-uzbekistan-name-16-07-2020

¹² Podrobno.uz, Антикризисный фонд, созданный правительством Узбекистана для борьбы с коронавирусом, уже потратил порядка \$75 млн [Anti-crisis fund created by the government of Uzbekistan to fight coronavirus has already spent about \$75 million], 16 April 2020, <u>https://www.podrobno.uz/cat/obchestvo/antikrizisnyy-fond-sozdannyy-pravitelstvom-uzbekistana-dlya-borby-s-koronavirusom-uzhe-potratil-porya/</u>.

Despite measures to mitigate its impact, restrictive measures adopted in response to the COVID-19 pandemic have had significant socio-economic consequences for the country. According to the State Tax Committee, as of April 2020, 38.4% of individual entrepreneurs (over 95 000 entrepreneurs), suspended their activities due to the quarantine restrictions.¹³ A further 196 000 enterprises significantly decreased their output. Tax revenues for 20 days in April decreased by 30-40% in a number of regions, and in some districts and cities-by more than 50%.¹⁴ In Uzbekistan, the number of unemployed persons increased from 1.35 million to two million due to the suspension of many business activities in efforts to control the COVID-19 pandemic.¹⁵ Due to the closure of international borders, 550,000 labor migrants in Uzbekistan were unable to travel to other countries for work.¹⁶ Note that official available unemployment rates and data about labor migrants and entrepreneurs relevant to the COVID-19 pandemic are not disaggregated for men and women.

At the same time, there is limited information about the current situation in local communities or about the severity of the pandemic's impact on living standards. Without accurate and detailed data on the critical needs of the population at the household level, measures taken by the Government of Uzbekistan to fight against the pandemic and its aftermath are less effective.

The Government has acknowledged that the measures taken to enforce social distancing and limit economic activities are not capable of stopping the pandemic. Moreover, such measures will inevitably worsen the socio-economic situation in the country and have negative consequences for the living standards and the wellbeing of the population. Other long-term consequences include the potential for increased criminal activity and deterioration of the population's psychological health. Uzbekistan is seeking effective solutions, not only for rapid economic recovery, but also for targeted initiatives on social protection, employment and increasing the capacity of the labor force to respond to new conditions.

PURPOSE AND METHODOLOGY OF THE STUDY

The purpose of the study was to assess the economic and social impacts of preventive measures taken to limit the spread of COVID-19 at the local (mahalla) level. It is intended that the findings from the study will assist the government in preparing anti-crisis measures and to support the most vulnerable households and communities. The study was conducted through anonymous surveys distributed to representatives of mahallas of the Republic of Uzbekistan.

Mahalla is a traditional Uzbek institution of civic self-governance that dates back to the Central Asian khanates. Since independence in 1991, the status of the mahalla has been governed by a specific law. The mahalla structure consists of a chairperson, who is elected by citizens living in the local community, deputies to the chairperson (who consult on specific issues) and advisors. Note that the law describes the head of a mahalla as "chairman" (*aksakal*).¹⁷ While traditionally mahalla leadership was considered a man's role, this is not a requirement for the position (as estimated in 2016, women were the elected leaders of 14.3% of mahallas;¹⁸ this is an increase from previous years). The chairperson of the mahalla should be aware of the situation in the local community and the wellbeing of each household. Because of its oversight role in the

¹³ Gazeta.uz, Из-за карантина приостановили работу 38% ИП— ГНК (уточнено) [Due to quarantine, 38% of individual entrepreneurs were suspended- according to the State Tax Committee], 21 April 2020, <u>https://www.gazeta.uz/ru/2020/04/21/individual-entrepreneur/</u>

¹⁴Gazeta.uz, Президент дал поручения по обеспечению занятости населения [The President gave instructions to ensure employment of the population], 22 April 2020, <u>https://www.gazeta.uz/ru/2020/04/22/employment/</u>

¹⁵ Gazeta.uz, Число безработных достигло почти 2 миллионов из-за пандемии [The number of unemployed reaches almost 2 million due to the pandemic], 9 June 2020, <u>https://www.gazeta.uz/ru/2020/06/09/unemployment/</u>
¹⁶ Ibid.

¹⁷ Law of the Republic of Uzbekistan on Self-Government Bodies of Citizens (amended), April 22, 2013, No. ZRU-350.

¹⁸ Kuliev, K., Uzbekistan: Why Should the State Weaken Control Over the Institute of Mahalla?, 17 January 2019, Central Asian Bureau for Analytical Reporting (CABAR), <u>https://cabar.asia/en/why-should-the-state-weaken-control-over-the-institute-of-makhalla/</u>

community, the mahalla is uniquely placed to manage the system of social protection and also to provide an assessment of the impacts of the COVID-19 pandemic, and measures to address it, at the most local level.

As noted above, in February 2020 the new Ministry for Mahalla and Family Support (the Ministry) was established by Presidential resolution.¹⁹ The Ministry for Mahalla and Family Support is the State body responsible for the development and implementation of policy in support of "families, women and the elderly."²⁰ One of the most significant changes brought about by the creation of the Ministry was the dissolution of the Women's Committee of Uzbekistan, a quasi-governmental structure that coordinated women's affairs at the national, regional and local level, and abolishing the structure of local women's committee leaders who had occupied deputy ministerial, or equivalent, positions at the national and regional levels. One of the primary directions of the new ministry is to support "the social activity of women, strengthening their place in society, strengthening guarantees for the protection of their rights and legitimate interests" which includes the identification of problems that primarily affect women, the provision of social, legal, psychological and material assistance to women and improving employment opportunities and working conditions for women.²¹ It can be stated that the Ministry has taken over some of the structures of the former Women's Committee. Separately, it should be noted that in 2020 the post of deputy chairman of the gathering of citizens for family, women and social and spiritual issues was introduced to replace the post of a specialist in working with women and strengthening spiritual and moral values in families, one staff unit for each gathering of citizens, as well as while maintaining the order of financing from the local budget.²²

The role of the Ministry, and of mahallas themselves, is especially important in light of other State commitments to guarantee the equal rights of women and men, including in the economic and social spheres, and freedom from domestic violence. As described in legislation, all ministries share responsibility for ensuring the implementation of state policy and programs aimed at achieving equal rights and opportunities for women and men²³ and aimed at protecting women from violence and harassment.²⁴

This study was conducted by UNDP in Uzbekistan and the Ministry for Mahalla and Family Support through a sociological survey of local community representatives in all regions of the country. The fieldwork was conducted in May and June 2020. In conformity with UNDP practice of assessing gender gaps in such areas as livelihoods, welfare, and living conditions, the survey included several questions to elicit information about pandemic impacts on women relative to men during the pandemic.

The survey was administered remotely (through an online platform). It was completed by 3,670 respondents, consisting of mahalla chairpersons (84.7% of total respondents), their deputies (12.8%) and experts or activists of mahallas (2.5%). For comparison, there are an estimated 8,973 mahallas in Uzbekistan, and on average 3 000 citizens live in each mahalla.²⁵ The majority of mahallas represented in the study are in rural areas (62.9% of respondents). Note that according to official statistics, 49.4% of the population of Uzbekistan lives in rural areas, but some regions are considerably more urbanized than others.²⁶

¹⁹ See Resolution of the President of the Republic of Uzbekistan On the organization of the activities of the Ministry to support the mahalla and family of the Republic of Uzbekistan, 18 February 2020, No. PP-4602, <u>https://lex.uz/ru/docs/4740337</u>

²⁰ See Decree of the President of the Republic of Uzbekistan On Measures to Improve the Social and Spiritual Atmosphere in Society, Further Support the Institution of the Mahalla, as well as Raising the System of Work with Families and Women to a New Level, 18 February 2020, No. No. UP-5938, <u>https://lex.uz/ru/docs/4740347</u>

²¹ Ibid. 22 Ibid.

²³ Law of the Republic of Uzbekistan on Guarantees of Equal Rights and Opportunities for Women and Men, 2 September 2019, No. ZRU-562, <u>https://lex.uz/docs/4494873</u>

²⁴ Law of the Republic of Uzbekistan on Protecting Women from Harassment and Violence, 2 September 2019, No. ZRU-561, https://www.lex.uz/docs/4494712

²⁵ Kuliev, K., Uzbekistan: Why Should the State Weaken Control Over the Institute of Makhalla?, 17 January 2019, Central Asian Bureau for Analytical Reporting (CABAR), <u>https://cabar.asia/en/why-should-the-state-weaken-control-over-the-institute-of-makhalla/</u>

²⁶ Data for 2018. The State Committee of the Republic of Uzbekistan on Statistics, Share of urban and rural population in total number of population by regions (2011-2018), <u>https://gender.stat.uz/en/osnovnye-pokazateli-en/demografiya-en/naselenie-en/426-chislennost-postoyannogo-naseleniya-na-1-yanvarya-2011-goda-en</u>

The gender breakdown of survey respondents was as follows: 75% of the respondents were men and every fourth respondent was a woman. There was considerable variation by region. For instance, over a third of the respondents from mahallas in the Andijan region were women, as compared to only 9.9% in the Surkhandarya region. Additionally, women respondents were more likely to represent urban areas than rural ones.

Further details about the survey methodology is provided in an Annex to this report.

The particular respondent group, representatives of mahalla leadership, are considered to be well-informed representatives of the communities due to their role in implementing social projects and activities. Their opinions are an important assessment of the ongoing changes in the population during the COVID-19 pandemic and can serve as one of the sources of information for developing action plans to organize support for people who have been put in especially vulnerable situations.

However, there are several important limitations to the survey methodology that should be kept in mind. First, the time period for the field work corresponded to the first easing of restrictions (See Figure 1, above) as well as the increased availability of products harvested from household plots (a source of food for many rural households). Thus, at the time of the field work, the positive effects of counter pandemic measures were creating a general sense of improvements in the near future. Furthermore, for most of the questions, mahalla representatives were asked to compare the current situation of residents of their particular mahalla to the situation in the 30 days prior to the survey. This meant that they were asked to assess the situation at the time when restrictions were being eased to that of the first phase of the quarantine, when most economic activities were suspended and the number of COVID-19 cases was increasing.

Second, several questions were aimed at assessing the particular impacts on women. However, since a relatively small number of women were among the survey respondents, most mahalla leaders were answering on behalf of the underrepresented group. In terms of reliability of data, therefore, the findings related to the impacts on women suggest that further research is needed. These facts should be borne in mind when interpreting the results of the survey and considering the recommendations in this report.

KEY FINDINGS: IMPACTS OF COVID-19 QUARANTINE MEASURES

The primary focus of the study was the impact of the coronavirus outbreak, and measures taken to contain it, on the wellbeing of the population, as assessed by mahalla leaders. At the local community level, wellbeing is evaluated through access to employment and entrepreneurship, accessibility of social protection measures and public services and the stability of social benefits delivery. All of these factors experienced serious pressure both during the first stage of the quarantine in March-April 2020 and following the easing of restrictions in May-June 2020.

From January-June 2020, GDP growth slowed to 0.2% as compared to 6.0% for the same period in 2019 and 5.9% in January-June 2018.²⁷ The GDP per capita amounted to the equivalent of \$766 USD which represented a decrease from January-June 2019 of 1.8%. In previous years, 2018 and 2019, the GDP per capita had increased by around four per cent annually.²⁸ In fact, the period in which the State took measures to address the COVID-19 global pandemic represents the first time since 1997 that the GDP per capita in Uzbekistan demonstrated negative growth rates.

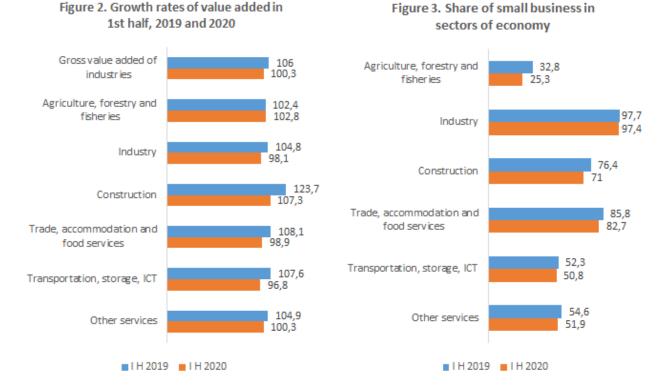
At the end of 2019, small businesses and individual entrepreneurship²⁹ accounted for more than half of the GDP and provided three-quarters of the jobs in the formal labor market.³⁰ Small business ventures played a significant role in income generation of households but were also especially hard hit during the COVID-19 pandemic. In January-June 2020, small businesses accounted for 51.3% of the total added value of the country's economy, which was 0.2% lower than in January-June 2019. The greatest reductions in contributions to the GDP were observed in small business in the sectors of agriculture, construction and services. (See Figures 2 and 3).

²⁷ The State Committee of the Republic of Uzbekistan on Statistics, Production of Gross Domestic Product, <u>https://www.stat.uz/uploads/docs/yalpi_ichki_iyun_en.pdf</u>

²⁸ Ibid.

²⁹ According to law in the Republic of Uzbekistan, "small enterprises" include the following categories: individual entrepreneurs (sole proprietors), micro firms and small businesses. Classifications are based on both number of employees and sectors of the economy.

³⁰ The State Committee of the Republic of Uzbekistan on Statistics, Share of small business and private entrepreneurship, https://www.stat.uz/en/181-ofytsyalnaia-statystyka-en/6387-5476547457



Source: State Statistics Committee, Production of Gross Domestic Product, https://www.stat.uz/uploads/docs/yalpi_ichki_iyun_en.pdf.

At the same time, small and individual businesses are generally considered to be flexible and agile, which in turn means that it is less costly (in both time and money) to suspend and to restore operations than it is in large-scale enterprises. The positive dynamic in countering the pandemic in March-April and the ease of the quarantine regime in May could have influenced respondents' expectations of a sooner return to business and recovery of income. But, obviously, this would not apply to all cases.

1. Impacts on wellbeing

The survey revealed a level of dissatisfaction and anxiety about the situation. Every fourth respondent felt that the welfare of the mahalla residents had deteriorated (either the situation had become "worse" -20.8%, or had become "much worse" -4.6%). More than three-quarters of the respondents (76.7%) stated that the number of families who had lost income had increased in the 30 days prior to taking the survey. In addition, 89.9% of representatives of mahalla communities noted an increase in the number of applications for financial assistance.

The above figures suggest that there is a limit in the population's ability to self-isolate, and reflect an increase in people's anxiety about solving emerging problems and their need to seek help from the mahalla.

Loss of income and work

The main negative consequences of the introduction of quarantine measures are seen in the economic sphere. In general, the population understands the importance of countering COVID-19, but also expresses concern about the possibility of a significant decline in income, including from loss of their jobs. Declining income, followed by loss of work, were identified by mahalla leaders as the most significant problems residents were

facing. See Figure 4, below. Note that respondents were asked to rank five options from a list of 19, with the possibility of adding problems they identified.

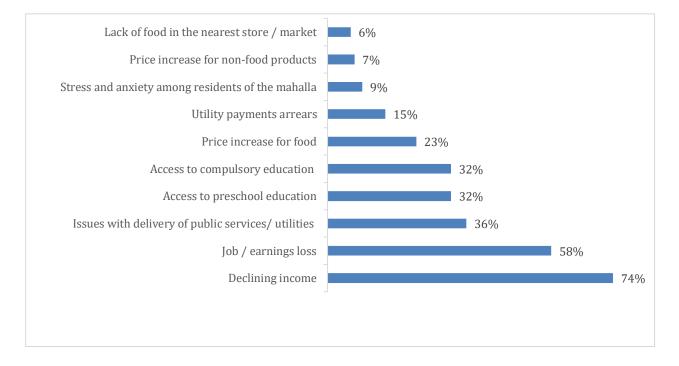
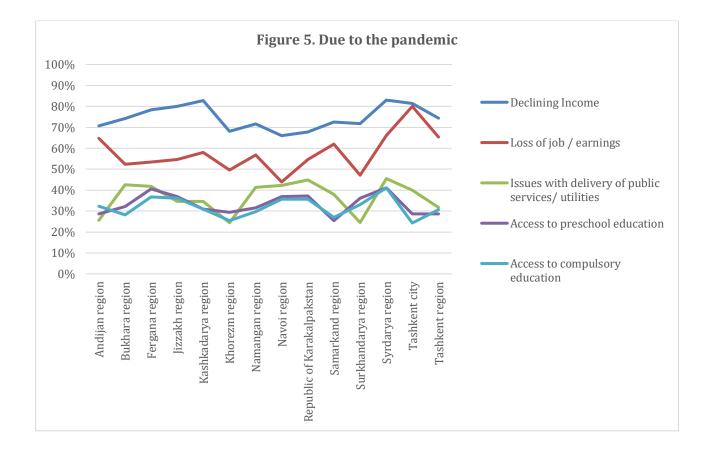


Figure 4. Top ten problems facing mahalla residents related to the quarantine conditions

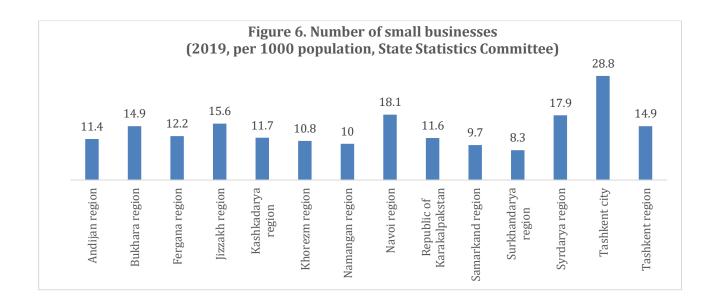
The most widespread problem among the population, according to mahalla leaders, is declining incomes (74.4% of respondents). This problem, which was identified as the most significant for both urban and rural areas, captures not only loss of earnings but also other financial inflows to the household, such as remittances. The second most pressing problem is the loss of work and/or earnings, referring to wages or profits from small business or entrepreneurial activities. More than half of the respondents (58.4%) believe that residents of their mahalla are already facing this problem. The majority of respondents (72.2%) noted that the number of families that lost their jobs or source of earnings had increased in the 30 days prior to taking the survey. No distinction was made in the survey responses about which family members, women or men, had lost work.

Comparing regions of Uzbekistan, the two indicators, declining income and loss of sources of income, were viewed as serious problems in Tashkent city (80% of respondents highlighted these two issues, Figure 5.). In the Jizzakh, Kashkadarya and Syrdarya regions, over 80% of respondents also noted a drop in income, but to a lesser extent reported the loss of their sources (in Syrdarya, 66% noted the loss of jobs/earnings, with less than 60% in the two other regions). Respondents of the Khorezm region had the most positive responses (only 68% and 50%, respectively, identifying these as two issues as critical for the population).



Small business is the main source of income and employment in Uzbekistan. In 2019, 76.5% of the labor force was employed by small enterprises. Small and micro enterprises were especially prevalent in specific sectors of the economy, namely in passenger transportation (where small/micro businesses accounted for 90.7% of the sector), followed by trade (84.3%), construction (75.4%), cargo transport (54.6%) and services (52%).³¹ During the quarantine these sectors have suffered the most. The greater the number of small businesses in the region (Figure 6), the more intense the problem of income generation (the only exception is Navoi region where the most developed free industrial zone is located). See Figure 6.

³¹ The State Committee of the Republic of Uzbekistan on Statistics, Малое предпринимательство [Small business], <u>https://stat.uz/uploads/doklad/2019/yanvar-dekabr/ru/8.pdf</u>.



Box 1. Women entrepreneurs in Uzbekistan

Significant State efforts to support entrepreneurship have contributed to women's increasing involvement in this sector. Still, women remain the minority of those who are engaged in private business. In 2018, there were more than 182 000 women entrepreneurs in Uzbekistan, representing 29% of all registered business entities in the country (presumably including also individual entrepreneurs).³² According to national statistics, women owned 14.9% of all enterprises in Uzbekistan in 2019.³³

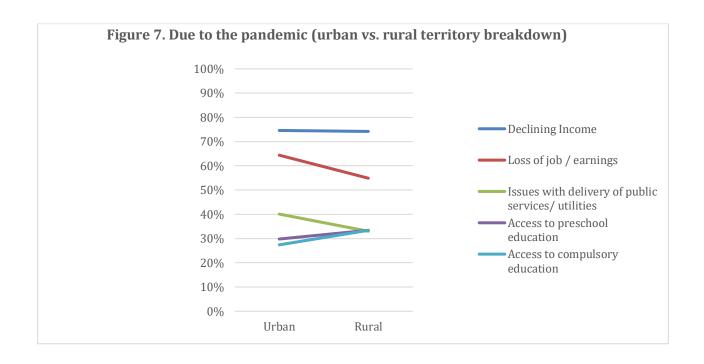
There are also specific characteristics of "women's businesses" that impact their ability to remain solvent during and after the pandemic period. First, women-led businesses are concentrated at the micro or individual level, a reflection of the fact that women have limited access to key resources, including capital and loans, business skills and financial literacy and even time that can be devoted solely to business activities (the latter due to women's primary responsibilities for unpaid domestic and childcare work). Businesses led by women are also concentrated in specific sectors, mainly the service sector (accounting for around a third of all women's businesses), followed by trade and production (of food and non-food).³⁴ The quarantine measures not only deeply impacted the operation of service sector businesses but also included the temporary closure of child-care facilities and schools. Both of these constraints would have serious consequences for women entrepreneurs and present specific challenges for them to maintain viable businesses throughout this period.

In terms of type of settlements, the loss of jobs and earnings was more severe for mahallas in cities rather than in rural territories (Figure 7.), while the severity of decline in income was estimated at the same level both in rural and urban territories. In rural territories, households have the opportunity to produce some food and agricultural products for their own needs and in many cases to sell at local markets. Urban residents do not have such opportunities to mitigate the risks of poverty in cases of job loss. Accessibility of utilities and household services is also more important in cities than in rural areas. Well-developed ICT infrastructure in cities provided better opportunities for distant learning in schools and universities and the possibility of working from home for residents of urban mahallas. These factors have made the issue of access to educational services less acute in cities than in rural settlements.

³² Report of the Implementation of the Beijing Declaration and Platform for Action Uzbekistan, 2019, p. 11.

³³ The State Committee of the Republic of Uzbekistan on Statistics, Share of women-owned firms, https://gender.stat.uz/en/i-groupen/1337-share-of-women-owned-firms.

³⁴ Asian Development Bank, 2018, Uzbekistan Country Gender Assessment Update, p. 35.



The findings suggest that the pandemic may not only lead to direct job loss but also the emergence of "hidden" unemployment. In practice, when a person is formally registered as employed (a potential "source of income" is not lost), but his/her salary may have been significantly reduced or not paid at all during the quarantine, and thus there is a loss in income in practice. Another explanation for such answers is the inability to sell self-produced products or provide paid services due to the quarantine measures (for example, a private hairdresser would have been classified as "employed" but unable to provide paid services).

Women and men would experience loss of income and/or loss of employment or wages differently, based on how they were represented in the labor market prior to the COVID-19 outbreak. Unfortunately, the survey methodology and questions did not specify which household members within mahallas were experiencing these problems. However, it should be kept in mind that women's share in formal employment (45.7% of all economically active women) was lower than that of men's (54.3% of all economically active men)³⁵ before the pandemic. Among the total formally employed population in 2017, men accounted for 61.5%.³⁶ The gender gap in labor force participation is widest when women are in their child-bearing years, reflecting their responsibility for unpaid domestic and care work.³⁷ In 2017, women represented just over half of those who applied to Centers of Assistance to Employment and Social Protection, under the Ministry of Labor and employment.³⁸ Given that women's limited engagement in formal work was already an issue before the COVID-19 outbreak, there is a risk that any economic downturn will push them deeper into economic dependence.

A significant number of respondents (43.8%) recorded an increase in the number of labor migrants that had returned to the mahalla in the period covered by the survey. It is significant that the survey was conducted in May 2020, a time in which international borders were closed in order to contain COVID-19, and labor

³⁵ Data for 2017. The State Committee of the Republic of Uzbekistan on Statistics, Number of economically active population, https://gender.stat.uz/en/osnovnye-pokazateli-en/trud-en/aktivnoe-naselenie-en/535-chislennost-ekonomicheski-aktivnogonaseleniya-en

³⁶ The State Committee of the Republic of Uzbekistan on Statistics, Female to male ratio of total employment in the formal sector of the economy in 2017, https://gender.stat.uz/en/osnovnye-pokazateli-en/trud-en/zanyatost-naseleniya-en/978-female-to-male-ratio-of-total-employment-in-the-formal-sector-of-the-economy-in-2017

³⁷ See generally, Khitarishvili, T., Gender inequalities in labour markets in Central Asia, UNDP, 2017.

³⁸ Asian Development Bank, 2018, Uzbekistan Country Gender Assessment Update, p. 11.

migrants who had lost their jobs in receiving countries (e.g. Russia and Kazakhstan) were unable to return.³⁹ Since that time, travel restrictions have eased and the outflow of migrants has increased, and thus the internal labor market of Uzbekistan will experience a corresponding additional burden.⁴⁰ The swiftness of the actions taken in the region to control COVID-19 meant that labor migrants had little opportunity to prepare for their return, in terms of accumulating funds that could be used to help with their return, re-socialization and search for new employment. In the opinion of the mahalla representatives, returned labor migrants will be most in need of material and food support (25% and 28% of respondents, respectively), as well as job security (54% of responses).

Labor migration from Uzbekistan is itself a form of employment mainly undertaken by men. By some estimates, as many as 87% of labor migrants from Uzbekistan to Russia are men.⁴¹ This pattern partly reflects the type of work that is available in foreign labor markets (e.g. almost half of all migrant workers leaving Uzbekistan are construction workers or drivers⁴²) as well as traditional notions about men's role in providing financially for their families and expectations that women will stay behind. The specifics of labor migration patterns mean that the COVID-19 pandemic will have direct impacts on returning men who will be out of work and also on households that previously depended on remittance income.

Price dynamics

The cost of basic goods directly affects the economic wellbeing of the population. Almost half of the respondents (48.5%) noted that they had not observed changes in food prices in stores and markets located on the territory of their mahallas during the 30 days preceding the survey. More than half of the respondents (64.2%) did not observe an increase in prices for household goods. This observation can be explained by the fact that from the first days of quarantine the government introduced strict control over prices, including for socially important goods.

Still, every third respondent (33.2%) noted a slight increase in food prices in May 2020. Furthermore, prices may have been more variable depending on the specific goods. For instance, monitoring of independent websites indicated that private pharmacies significantly increased the prices for antiviral drugs, and private clinics for conducting tests almost doubled from 250 000 to 400 000 UZS, against the background of high demand for medicine.⁴³ This suggests that the existing private market for goods and services in Uzbekistan has the potential to respond flexibly to negative changes in working conditions, despite strong government control.

Regional variation in wellbeing

Survey respondents from regions with high population densities were likely to report on the negative effects of the pandemic on the local population. Territories such as Tashkent city and the Tashkent and Samarkand regions were characterized by more negative indicators of wellbeing in general.

Box 2. Regions with high population density were more affected by COVID-19

When asked, "How do you think the wellbeing of the residents of your mahalla will change in the next 30

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<sup>41</sup> FAO, 2019, Gender, Agriculture and Rural Development in Uzbekistan, Country Gender Assessment Series, p. 16.
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³⁹ See, e.g., Radio Free Europe/Radio Liberty, Central Asian Migrants, Trapped In Russia Amid Pandemic, Pushed Back At Border, 04 August 2020, https://www.rferl.org/a/central-asian-migrants-stuck-at-border/30766473.html.

⁴⁰ Three passenger trains with Uzbek citizens left the Russia–Kazakhstan border in the direction of Tashkent on 16 July 2020. Upon arrival, all passengers of these trips will be sent to the quarantine zones of the Namangan and Tashkent regions. See UZnews, Узбекистанцев, застрявших на российско-казахстанской границе, вернут на родину поездами [Uzbekistanis at the Russian-Kazakhstan border will be returned to homeland by trains], 16 July 2020, https://uznews.uz/ru/article/22539.

⁴² These two groups represent 43.4% of the most common professions among migrant workers, based on data collected in 2018-2019 under a joint project of UNDP and the Women's Committee of Uzbekistan.

⁴³ Repost, В Узбекистане цены тестов на коронавирус в частных клиниках повысились [Prices for coronavirus tests in private clinics rise in Uzbekistan], 17 July 2020, https://repost.uz/aj-v-dva-raza.

days?," respondents from the city of Tashkent and the Samarkand region were the most pessimistic. These regions had the highest proportion of respondents who answered that the situation would either become "worse" or "much worse' (19.9% in the city of Tashkent and 18.0% in the Samarkand region), as compared to other regions.

More than half of the respondents from Tashkent city noted that prices had increased (52.1%, including both "strongly increased" and "slightly increased"). The equivalent responses for the Tashkent (46.9%) and Samarkand regions (45.6%) were also high. The highest share of respondents who observed an increase in prices for household goods was recorded in Tashkent city (41.4%) and Tashkent region (38.9%).

For the combined questions about declines in the income and the loss of sources of income, respondents in Tashkent city listed these as the most pressing issues (80% of respondents ranked each of these issues first). Mahalla representatives from Tashkent city also noted the largest increase in the number of people who had lost their source of income (over 50% of responses), followed by respondents from the Samarkand region (over 30%). Over a quarter of those surveyed in Tashkent city and Samarkand region stated that there had been a deterioration in access to quality medical services during the pandemic.

Concerning direct requests for income support from the mahalla committees, the largest increases in such requests were reported by the respondents in Tashkent city (60% noted such a significant increase), followed by those in the Samarkand region (where over 40% of respondents noted a "significant" or "slight" increase in requests for assistance). In contrast, the situation is relatively favorable in the Navoiy and Khorezm regions, where a significant increase in requests for support was selected by only 20% of respondents, and over 25% said that they had not received more such requests.

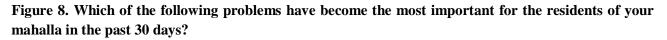
This correlates to the data regarding the most urgent issues the residents of mahallas experienced at the time that the survey was administered – declining incomes and loss of jobs, and the structure of each region's economy. For instance, two-thirds of the Navoi region's domestic product is formed by the gold extraction industry. Services and construction together account for only 16.5% of the regional production. In contrast, in the Khorezm region, agriculture is the key driver of the local economy creating 50% of the regional GDP. The share of industry here is 15%, and the construction and services sectors together form 37% of regional value added. From a sociological point of view, regional differences in wellbeing (including in perceptions of wellbeing) can be explained by the fact that territories with higher population density are more urbanized. Some of the most significant differences in urban and rural populations as related to the COVID-19 pandemic include:

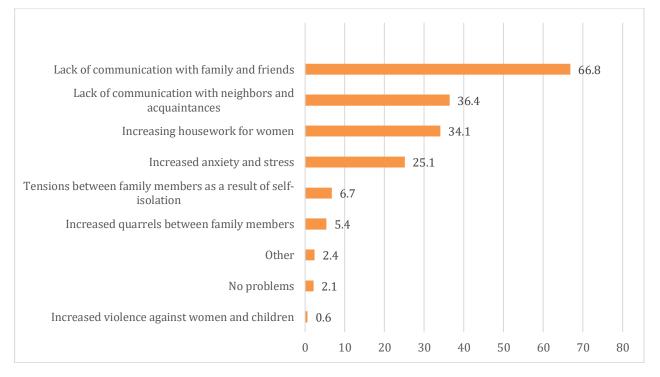
- Residents of urban areas tend to have higher social needs and expectations than rural residents due to lack of other options of income generation, such as private plots, smallholdings etc.;
- Urban residents rely primarily on fixed salaries and do not have additional sources of income;
- Differentiation in terms of income is more pronounced in cities, and therefore, any increases in poverty is visually manifested faster;
- The population in cities has greater accesses to multiple sources of information, including through social media, which may act as catalysts for panic and pessimism about the situation;
- The higher population density in cities makes social distancing more difficult. This may lead to more contacts and thereby a higher probability of infection as well as stress associated with trying to maintain isolation;
- The population in rural areas of Uzbekistan is more committed to collectivism, including due to strong family relations. Multi-generational households are more common in rural areas, and they provide additional material and food support.

Socio-psychological problems

Living in quarantine and self-isolation has caused certain interpersonal issues according to almost 98% of respondents (survey respondents were asked to choose the three most common problems). The primary

issues noted by mahalla leaders were lack of communication with others, noted by the majority of respondents. While a quarter of respondents pointed to increased anxiety and stress as a result of the pandemic as a particular problem, it can be inferred that other common issues, such as the increased burden of housework on women, tensions in the family, and issues such as loss of household income and unemployment, would all lead to high levels of stress. See Figure 8, below. The respondents were not asked to pinpoint who, among residents, had in their opinion experienced difficulties. Research conducted in a number of other countries⁴⁴ has suggested that stress levels have been especially high among women due to the fact that they take on the primary household responsibilities of caring for children, the elderly and people who are ill, as well as other domestic tasks, which became increasingly difficult in quarantine conditions, to say nothing of also managing children's education and work responsibilities. At the same time, higher levels of job loss among men, if that has been the pattern in Uzbekistan, combined with financial worries, are stressors for men. Further studies of how the COVID-19 pandemic has impacted the psychological health of women and men would be useful in terms of understanding what kinds of support could be offered through mahallas in future.





Effectiveness of communication

The survey revealed that communications to deliver the necessary information about COVID-19 to the population was effectively organized in Uzbekistan. On a five-point scale in which respondents were asked to estimate the level of awareness of mahalla residents about COVID-19 (where 5 represented "very high" awareness and 1 represented "very low"), about half of the respondents gave a 4-point score. Almost every third (28%) believed that the population is very well informed about this problem; they rated the level of knowledge with a maximum of five points.

⁴⁴ See, e.g., UN Women Regional Office for Europe and Central Asia, 2020, The Impact of COVID-19 on Women's and Men's Lives and Livelihoods in Europe and Central Asia: Preliminary Results from a Rapid Gender Assessment, p. 37.

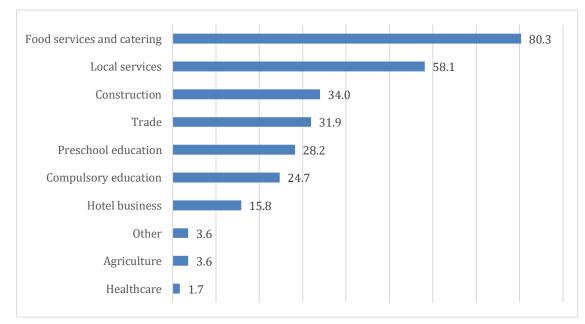
The data also indicate optimism about prospects that could be credited to informational activities carried out in the mahallas. The overwhelming majority of respondents believe that the welfare of their residents will change for the better in the near future even while the pandemic continues (75.8% of the survey participants answered that the situation "will become better" and "it will become much better" in the coming 30 days).

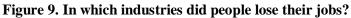
At the same time, it is advisable when assessing the impact of the COVID-19 pandemic, to critically analyze the situation in order to objectively identify cause-and-effect relationships. If such (overly positive) sentiments continue to persist among mahalla leadership, it will limit their effectiveness in identifying and resolving issues of concern to their communities.

2. Impacts on selected sectors

Job losses in the service and education sectors

According to the respondents, the most significant job losses, related to countering COVID-19, occurred in the service sector, mainly food services and catering (e.g. restaurants, cafes, tea houses, canteens, etc.). When asked which spheres of activity experienced the greatest job losses, the overwhelming majority of respondents noted this particular sector (over 80%), followed by other locally-provided services, such as hairdressers, beauty salons, repair shops, ateliers/tailoring (noted by over 58%) and education (job losses in preschool and compulsory education (general secondary education) was mentioned by 52.9% of respondents). Construction and trade were noted by between 25% and 30% of respondents, and about 15% noted that job losses had occurred in hospitality, specifically in the hotel business. See Figure 9, below.





As noted above, the survey respondents were asked to provide information on loss of employment in their mahallas generally, without specifying unemployment of men or women. In fact, the labor market of Uzbekistan exhibits gender segregation by sector of the economy, and thus the prevalence of job losses in the service sector (specifically in food services and catering) and education sector most likely had a profound impact on women's employment. Women account for more than half of those in accommodation and food services and more than three-quarters of all workers in the social sectors (healthcare, social work and

education combined).⁴⁵ Among employees of general educational institutions (excluding preschools), 70.9% were women during the 2017-2018 academic year.⁴⁶ In theory, some of the work that women typically undertake could have been transferred to remote arrangements (online teaching as compared to construction), which would have resulted in less income or job losses. However, the information provided by the mahalla leadership suggests that many employees in education, most likely mainly women, have lost their jobs during the pandemic. On the other hand, some work performed mainly by women would have been deemed essential, such as health services.

In contrast, men predominate in technical fields, representing more than 90% of employees in construction, transport and storage.⁴⁷ Male-dominated fields associated with higher salaries, but construction work appears to have also been impacted by job loss during the pandemic. However, work performed mainly by men may also have been among the first to be prioritized for re-opening when quarantine measures were lifted, as compared to hospitality and services in which women are over-represented (not only as employees but also as business owners). Further research and analysis is needed in order to develop a more nuanced picture of the experiences of both women and men in terms of declining income, loss of wages and unemployment.

As discussed in more detail in the following section, mahalla leaders reported on the widespread closure of local services provided by small businesses in the community (such as small repairs, hairdressing, housecleaning, etc.). Such personal services and the work of non-food shops were the most often reported to have been suspended (by 50.4% and 22.3% of respondents, respectively). The closures not only resulted in the unemployment of a number of people in each mahalla, primarily women, but the loss of such services also increased the unpaid work burden on women in the household, who typically fill the gaps when such services are not available.

In terms of future actions, the fact that food retail outlets were able to strictly observe sanitary standards and they did not become a source of infection for the population, it is advisable to extend this experience to other local services and the sale of non-food products within the mahallas. Such initiatives would necessitate the involvement of unemployed people in small business activities that do not require direct contact with buyers or customers. Some examples include the development of online business through workshops, allocation of small grants, as well as the formation of clusters around large manufacturing enterprises that could transfer small orders to mahallas.

Availability of basic goods and services

The spread of COVID–19 and the related restrictive measures generally had a negligible impact on the provision of goods and basic services, including infrastructure services supplied by the government, at the mahalla level. At the same time, 35.6% of respondents identified "problems obtaining local services" as the third most common problem faced by the population, after reductions in income and job loss.

The quarantine measures significantly reduced the accessibility of the kinds of paid services that are typically provided in mahallas, such as shoe repair, tailoring, hairdressing, barbers, etc. In recent years, the practice of paid services, such as house cleaning, washing dishes, cleaning carpets, etc., has become widespread, but such services were also suspended during the quarantine period.

⁴⁵ The State Committee of the Republic of Uzbekistan on Statistics, Employed persons by sex and economic activity in 2017, <u>https://gender.stat.uz/en/osnovnye-pokazateli-en/trud-en/zanyatost-naseleniya-en/918-employed-persons-by-sex-and-economic-activity-in-2017</u>

⁴⁶ The State Committee of the Republic of Uzbekistan on Statistics, Teachers of educational institutions by sex and type of educational institutions in 2007/2008-2017/2018 academic years, <u>https://gender.stat.uz/en/osnovnye-pokazateli-en/obrazovanie-en/srednee-en/504-chislennost-uchashchikhsya-prinyatykh-v-pervyj-klass-kh-en</u>

⁴⁷ The State Committee of the Republic of Uzbekistan on Statistics, Employed persons by sex and economic activity in 2017, <u>https://gender.stat.uz/en/osnovnye-pokazateli-en/trud-en/zanyatost-naseleniya-en/918-employed-persons-by-sex-and-economic-activity-in-2017</u>

When asked to evaluate the provision of infrastructure services over the 30 day period preceding the survey, in the opinion of the respondents, the quality generally remained at the pre-quarantine levels. In particular, the respondents noted *improvements* in the provision of pensions and benefits, law enforcement and public safety, medical services and the operation of food outlets. According to the respondents, the population did not experience problems with electricity and gas supply during the period of introduction and first easing of restrictive measures. Waste disposal was carried out on a regular basis. This distribution of respondents' answers was typical for both urban and rural areas of all regions of Uzbekistan, indicating that the country retains a strong local State apparatus.

Sphere	Improved (become slightly/much better)	Remained at the same level
Payment of pensions and benefits	80.8	13.2
Law enforcement and public safety	78.0	19.8
Medical services	69.9	26.4
Grocery stores and markets	65.2	27.6
Banks and their branches	58.5	29.4
Pharmacies	51.0	45.4
Power supply	49.6	45.6
Garbage removal	46.6	44.2
Natural gas supply	46.2	50.0
Public service centers	43.8	43.3
Drinking water supply	36.2	55.9

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Table 1. now has access to	the following services change	u over the past 50 days?

At the same time, the most significant levels of dissatisfaction related to the functioning of the Internet (the deterioration was noted by almost every fourth respondent -19.5%). Internet provision was affected by surges in use that corresponded with the period of self-isolation. It would be useful to further assess the impact of limited access to the Internet on schooling and remote working for households, especially those in rural areas.

Access to health care

Survey respondents were asked two questions to assess the extent to which the population was able to access healthcare. In respect to a general question about whether access to medical services had changed in the period prior to the survey, almost 70% indicated that there had been some improvement. See Table 1 above. However, when asked specifically about whether residents of their mahalla had experienced difficulties in accessing medical care, 59.3% noted that there had been no change (of note, 20% stated that access had become more difficult). This response was consistent for the country as a whole, as well as in all regions. Access to health care is about the same in urban and rural areas. However, in Tashkent city, Syrdarya and Samarkand regions, more than 25% of respondents indicated a slight deterioration in access.

In general, the responses provided by the mahalla leadership suggest that they did not identify any particular changes in the work of medical services, which would have been expected during the fight against

coronavirus in which non-essential services were necessarily limited. This circumstance indicates the importance of strengthening the work of primary health services in mahallas.

It should also be noted that the specific type of medical service was not specified in the survey. While there is no corresponding data for Uzbekistan, in other assessments conducted during approximately the same period in Central Asia, a significant proportion of women reported difficulties in accessing sexual and reproductive health services.⁴⁸ It would be useful to further examine whether there have been lasting difficulties accessing health services for both women and men, based on their specific needs.

Access to education

According to the research, the fourth and fifth most commonly-identified problems in the mahallas concerned access to preschool (32.1%) and to compulsory education (31.2%). Almost every third respondent, both in cities and in rural areas, called these problems important for the residents of their mahalla. While the survey questions did not specify the particular issue with education, the results indicate that the population is unsure of the impact of quarantine measures on the education sector, most likely due to the timing of when such measures were introduced and the onset of school holidays. However, the public is still quite pessimistic about the educational process under the conditions of restrictions. About 20% of respondents noted difficulties in organizing distance learning. Other general worries concern the lower quality of education after schools were closed and teaching was done via lessons broadcast on television. Only a few schools, mostly private, were able to deliver on-line classes with a schedule comparable to that before the COVID-19 outbreak. As for the whole republic, the educational system does not have the capacity to provide remote services to all children.

While the survey did not include any direct questions on the impact of school closures on women, around half of respondents were of the opinion that overall women's unpaid domestic responsibilities, including for childcare, increased during the pandemic period. (This topic is discussed in Section 4, below). In fact, in many countries of the world, women have taken on the primary responsibility for overseeing children's education during periods of "lockdown." Thus, even though the issue was not raised by the survey, children's limited access to education has serious impacts for their development as well as on women's ability to engage in income generating, or other, activities.

Another common worry for the population is the prospect of obtaining higher education and ensuring employment for school graduates. In 2020, 452 000 boys and girls will graduate from secondary schools in Uzbekistan. It is expected that 70 000 of them will enroll in higher education and 85 000 in professional education. If an expected 95 000 young people will find employment, it will still be necessary to provide jobs for another 200 000 young women and men.⁴⁹

While Uzbekistan has close to full gender parity in compulsory education, gender gaps appear at the postsecondary and higher educational levels. For instance, among students enrolled in higher education in the 2018-2019 academic year, 44.3% were women and 55.7% were men.⁵⁰ Women are also less likely than men to complete higher education, a reflection of the fact that marital and domestic responsibilities become more pressing at that age. Among the population aged 25 and older, 12.5% of women have completed higher

⁵⁰ The State Committee of the Republic of Uzbekistan on Statistics, Численность студентов высших образовательных учреждений по регионам на начало 2010/2011-2018/2019 учебного года, <u>https://gender.stat.uz/ru/osnovnye-</u> pokazateli/obrazovanie/vysshee/1134-chislennost-studentov-vysshikh-obrazovatelnykh-uchrezhdenij-po-regionam-na-nachalo-2010-

⁴⁸ See UN Women Regional Office for Europe and Central Asia, 2020, The Impact of COVID-19 on Women's and Men's Lives and Livelihoods in Europe and Central Asia: Preliminary Results from a Rapid Gender Assessment, p. 31.

⁴⁹ Nuz.uz, Со следующего учебного года в школах вводится система профессионального обучения [Vocational training system is introduced in schools from the next academic year], 14 July 2020, <u>https://nuz.uz/obschestvo/1159768-so-sleduyushhego-uchebnogo-goda-v-shkolah-vvoditsya-sistema-professionalnogo-obucheniya.html</u>

education as compared to 20% of men.⁵¹ At the same time, unemployment rates for young women (ages 16 to 25) are considerably higher than those of young men in the same age group- 20.5% for women as compared to 15.7% for men in 2019.⁵² While there is no indication from the survey that young women are facing more compromised access to education, given the pre-existing gender disparities, special attention should be paid to ensuring that young women in transition years, those completing secondary education and those moving from education and work, are supported to overcome the negative impacts of COVID-19. The government of Uzbekistan has undertaken a number of initiatives to support the education of girls and young women, especially those from rural areas, and it will be important to ensure that achievements in this area are not reversed as a result of the pandemic.

These findings generally indicate the importance of launching an active information campaign in the summer on the medium-term prospects of secondary and higher education in Uzbekistan in the context of a further fight against the pandemic.

3. Increasing vulnerabilities

The pandemic has led to an expansion of the category of people who are considered to be in vulnerable situations, which, in addition to the unresolved problems of social groups that were historically considered vulnerable, objectively increased the burden on the country's social infrastructure. The assessment of a person as "vulnerable" and eligible for social assistance is done after a direct visit by the authorized mahalla committee member (sometimes accompanied by a representative of the police) to the household. In the past, "vulnerable groups" was a category that included people with disabilities and low-income households, single parent households, elderly people and others in need. Gender intersects with situations of vulnerability in important ways. For example, the large majority of single parents in Uzbekistan are mothers; women and girls with disabilities often face specific issues in accessing appropriate medical services and education, and elderly women and men have distinct needs. In general, women and girls who are in vulnerable situations are exposed to multiple forms of discrimination, based on their gender and other factors. The COVID-19 outbreak has put people who were previously marginalized in even greater situations of vulnerability. It has also shown that specific groups of women and men, or girls and boys, who may not have been considered "vulnerable" before, such as migrant workers, women living in situations of domestic violence, people with chronic health conditions, and people from minority groups, to name a few, can be pushed into vulnerable situations.53

In May 2020, the leadership of the mahalla committees had already noted an increase in the number of residents of the mahalla in need of social protection services, including, but not limited to, social allowances to low income families with children, unemployment benefits, institutional support of formal employment for the informally employed, legal and psychological consultations on civic and gender-based violence issues to women and survivors of GBV, social services to people with disabilities, and other types. Every third respondent (33.8%) answered that it will increase slightly. Every tenth expected a strong change in the direction of growth.

In the context of a pandemic, assistance from the mahalla will be needed by the poor, amid a decline in earnings and the threat of loss of sources of income, but it will also be vital to accurately assess all current socially vulnerable groups.

⁵¹ The State Committee of the Republic of Uzbekistan on Statistics, The level of education of the population is 25 years and older in the Republic of Uzbekistan, <u>https://gender.stat.uz/en/ii-group-en/943-the-level-of-education-of-the-population-is-25-years-and-older-in-the-republic-of-uzbekistan</u>

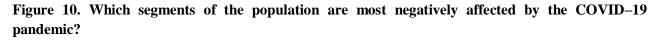
⁵² The State Committee of the Republic of Uzbekistan on Statistics, Unemployment rate among women and men aged 16-25 years, https://gender.stat.uz/en/i-group-en/1336-unemployment-rate-among-women-and-men-aged-16-25-years

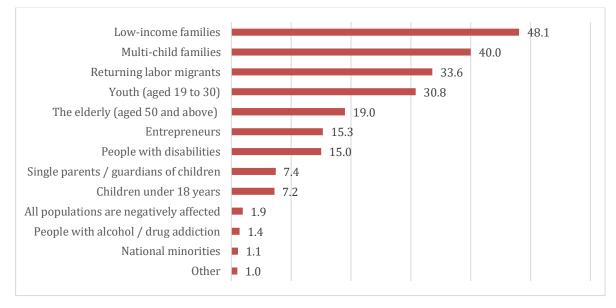
⁵³ See United Nations, COVID-19 and Human Rights: We are all in this together, April 2020,

 $[\]underline{https://www.un.org/victimsofterrorism/sites/www.un.org.victimsofterrorism/files/un_-_human_rights_and_covid_april_2020.pdf$

Most affected segments of the population

When asked which segments of the population have been most acutely experiencing the negative consequences of COVID–19, 40% of respondents identified "low-income families" and "multi-child families" (defined as having five or more children). More than 30% of the respondents mentioned labor migrants and able-bodied youth under the age of 30. See Figure 10.





From 15% to 20% of the total number of respondents referred to entrepreneurs, the elderly and people with special health needs/disabilities as experiencing negative consequences of the pandemic. About seven per cent each identified single parents and minor children, while less than two per cent of mahalla leadership included ethnic minorities or people with addictions among the most affected by the epidemic.

These figures indicate the importance of continuing and expanding the ongoing work of mahallas to provide assistance to multi-child families and socially vulnerable segments of the population. At the same time, this kind of assistance should be accompanied by the creation of conditions for creating additional sources of income through entrepreneurial activity. The answers also suggest that mahalla leadership has more readily identified particular groups that have historically been supported by social benefits, such as low-income families, but they may need additional capacity-building to recognize new areas of vulnerability that have arisen due to the COVID-19 pandemic, such as individual entrepreneurs who have lost their businesses, people who were in informal employment and had no access to the social safety net, populations with specific health needs that have been unable to access specialized medical services (including people chronic illnesses, such as persons living with HIV, as well as people with addictions), etc.

In general, additional assessment is needed to fully understand how particular groups have been negatively impacted. For instance, young people who are "affected" by the pandemic may be experiencing the loss of educational or employment opportunities, while older people may be impacted by ill-health or isolation. It would further be effective to apply gender analysis to identify which segments of the population have been put in especially vulnerable situations. For example, as noted above, most returned migrants are men. However, within such general categories as "working age youth", the "elderly," "entrepreneurs," and "people with disabilities" women and men face distinct difficulties that could be more effectively addressed if they were clearly identified.

Regional variation in assessments of vulnerabilities

Low-income families as the primary affected group were indicated somewhat less frequently in Tashkent city (34% of respondents in the region), while in other regions this group was identified by approximately 40% or more respondents. The highest rate of respondents giving this answer were in the Samarkand and Namangan regions, where the responses exceeded 55%.

Multi-child families as the main affected group were significantly less likely to be selected in the Khorezm region (26% or respondents) compared to other regions (where they were noted by at least 35% of mahalla representatives). The share of references to such families is especially high in the Tashkent region (49% of the respondents).

Tashkent (both the city and the region) sharply differs from other regions in the low frequency of responses about *labor migrants* who have returned to the mahalla. Labor migrants as the most affected group were often identified in almost 10 out of 14 regions with response rates ranging from 34 to 48%. Jizzakh and Kashkadarya regions have the highest response rate – 47 and 48%, respectively. The regional differences in answers concerning the impact of COVID-19 on labor migrants is explained by the fact that labor migration is a much more common feature of rural areas, where employment and income-generating opportunities are limited, leading to both internal and international migration.

	Andijan region	Bukhara region	Fergana region	Jizzakh region	Kashkadarya region	Khorezm region	Namangan region	Navoiy region	The Republic of Karakalpakstan	Samarkand region	Sirdarya region	Surkhandarya region	Tashkent city	Tashkent region
Low-income families	51	45	49	51	54	40	56	49	46	57	49	41	34	43
Multi-child families	37	38	38	40	43	26	40	35	39	43	42	36	42	49
Returning labor migrants	42	37	39	47	48	37	43	24	43	26	38	34	9	16
Youth (aged 19 to 30)	29	34	33	35	27	27	28	24	29	31	35	33	39	31
The elderly (aged 50 and above)	24	13	17	12	12	18	17	23	16	23	21	17	34	19
Entrepreneurs	14	17	19	16	9	15	15	19	17	14	20	11	25	14
People with disabilities	18	11	11	13	7	10	10	22	13	19	19	12	22	23
Single parents / guardians of children	8	9	5	5	12	2	6	4	3	6	2	6	16	11
Children under 18 years	3	9	5	7	10	5	4	8	8	9	5	10	16	6

Table 2. Segments of the population most affected by the negative effects of COVID-19 by region

In Tashkent city, in comparison with other regions, *youth between the ages of 19-30* was indicated as the main affected group (by 39% of respondents). This option was chosen least often in the Navoiy region (by only 24% of respondents).

In addition, respondents in Tashkent city indicated that *older people* (ages 50 and above) have been impacted by the pandemic much more often than those in other regions (34%, which is 10%–20% higher than the proportion of other respondents). This option was rarely noted in Bukhara, Jizzakh and Kashkadarya regions (with only 12%–13% of respondents in each region).

Also, in the capital of the country, *entrepreneurs* were more often indicated as a severely affected group (25%, which is 5%–15% higher than the share of respondents in other regions). Most likely this is a reflection of the overall presence of small businesses in larger cities and in Tashkent, in particular. Very few respondents mentioned entrepreneurs as a vulnerable group in the Kashkadarya region (only eight per cent).

In addition, in the Kashkadarya region, *people with special health needs / disabilities* were indicated as a particularly vulnerable group of the population during the pandemic (by seven per cent of respondents). At the same time, more than 20% of respondents in Tashkent city, Tashkent region and Navoiy region identified this group.

Tashkent city differs from most regions in the high number of mahalla representatives that mentioned *single women/ guardians with children* and *minor children* as particularly affected groups (over 15% of Tashkent residents, compared with only 2%–10% of respondents from other regions). The Kashkadarya region also has a relatively high rate of the same responses. In contrast, the Syrdarya and Khorezm regions show a very low share of respondents identifying single parents or minor children as those who were especially impacted by the pandemic (less than five per cent).

Needed forms of assistance and support

The findings indicate that overall the mahalla representatives recognize the need to help vulnerable groups in the community, but that they also tend not to see a role for themselves in solving such problems. For example, in response to the problem of unemployment brought about by the pandemic, the respondents consider the main solution to be for the State to create ready-made high-paying jobs in various sectors of the economy. Additionally, the mahalla representatives place considerable importance on cash payments (so-called "helicopter money") and the issuance of food packages. On average, around three quarters of the surveyed representatives of mahallas noted the need for financial/material and food assistance for the residents.

It should be emphasized that providing direct assistance is important for those groups of people who are unable to solve their problems independently. In particular, the following groups were most often singled out as in need of such assistance (40–60% of respondents): people with special health needs, multi-child families and single parents (or guardians). With regard to multi-child families, the option of providing jobs was also quite popular (more than 30% of respondents gave this answer), however it was less often given as an option for single parents with minor children (only 18% of respondents). The latter finding suggests that childcare and/or preschool options, as well as flexible working schedules are limited in most mahallas, thus making it very unlikely that single parents (mainly single mothers) could benefit from employment assistance.

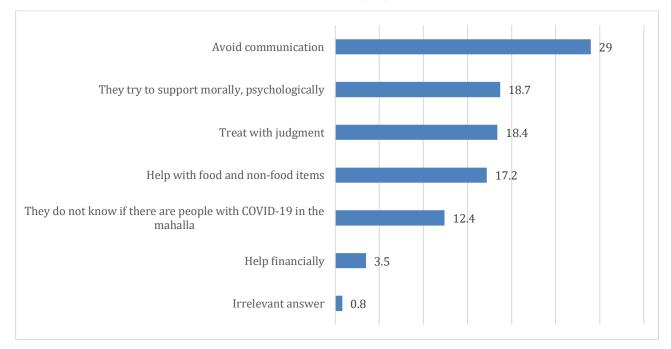
Concerning single elderly people, there was sufficient divergence in respondents' opinions about the necessary assistance. Approximately the same frequency of responses (20%–30% of respondents) indicated moral support, material support, psychological support, medical assistance, and the provision of medicines. Food aid was chosen more often (by 37% of survey respondents). This finding suggests that either elderly people have a diverse range of vulnerabilities and needs or that further assessment is needed to more precisely pinpoint what kind of support would most benefit elderly men and women.

All the above-mentioned types of assistance were indicated as necessary for people with special health needs by around a quarter to a third of respondents, but here material and food support, as noted above, were the leading options.

In the case of those suffering from alcohol or drug addiction, over 20% of the respondents indicated the need for psychological support and, approximately 15% each, for medical assistance and job opportunities.

Stigmatization of people who have COVID-19

Although the survey was conducted in May 2020, by that time all regions of the country had been affected by the spread of COVID-19. The highest percentage of mahallas whose representatives reported that there were people who have/had COVID-19 in their mahallas, was observed in Tashkent city (8.1%) and the Navoi region (7.2%). At the same time, one of the main problems revealed by the study is the wary attitude towards persons who are being treated for or who are recovering/have recovered from COVID-19. Almost every third respondent said 'avoid communication' when asked about the attitudes of mahalla residents towards such people.⁵⁴ In addition, almost one of five respondents expressed condemnation of residents, indicating a problem of stigmatizing patients with COVID-19.





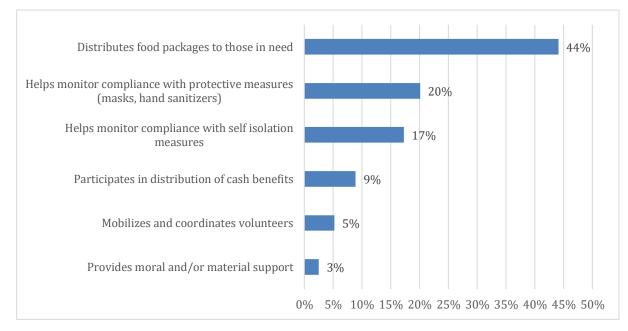
Avoiding communication with persons who were being treated for or recovered from CVOID-19 was mentioned by over 30% of the respondents (from among the mahallas where, according to respondents, there has been an outbreak) of the Jizzakh, Namangan, Samarkand, Surkhandarya regions and Tashkent city.

Respondents from Andijan, Navoi, Surkhandarya and Tashkent regions reported a condemning attitude towards people who were being treated for or recovered from COVID-19 at a level of about 30% and above. This finding indicates the presence of certain phobias among the population of certain regions of the country in relation to recovered patients. What is not clear, however, is whether there is also a gender dimension to such stigmatizing attitudes. Global patterns indicate that women are more likely to be diagnosed with COVID-19, which is linked to the fact that they represent the majority of healthcare workers around the world and are more likely to be tested. However, higher death rates have been consistently recorded among men as compared to women. Many countries do not report on COVID-19 cases or deaths disaggregated by sex, and this appears also to be the case in Uzbekistan. However, it can be assumed that given their role as health sector workers, and as those who care for ill persons in the family, women are exposed to specific risks for COVID-19 infection, and consequently may face stigmatization if they have, or are presumed to have, COVID-19. At the same time, men may also be subjected to stigma or may fear stigmatization if they appear to be taking precautions to avoid being infected (such as wearing face masks).

⁵⁴ The results refer only to those categories of respondents who indicated the presence of COVID-19 patients in their mahallas.

Despite their communities' cautious attitudes towards people who are being treated for COVID-19, survey respondents reported that the mahallas are taking action to assist such people. The most common form of assistance is food packages (44% of respondents listed this form of aid), followed by ensuring that people comply with protective and self-isolation measures. See Figure 12, below.

Figure 12. How does your mahalla help people with COVID-19?



The forms of assistance that the mahallas have provided to people who are being treated for COVID-19 are similar to those generally offered to vulnerable households (see Section 5) Specifically the provision of food is the most common form of aid, and much more common than direct financial support or the coordination of services provided by volunteers in the community.

4. Specific impacts on women

In early April 2020, the UN Secretary-General issued special guidance on addressing the impacts of COVID-19 on women, drawing attention to such issues as economic and health impacts, the increase in unpaid care work performed by women and girls and the exponential increase in gender-based violence as a result of social isolation and 'lockdowns.'⁵⁵ Countries around the world were called on to place "women and girls – their inclusion, representation, rights, social and economic outcomes, equality and protection" at the center of all national responses.⁵⁶

As noted earlier in this report, the Government of Uzbekistan gives serious consideration to promoting equal rights and opportunities for women and men and protecting women from violence, including violence that occurs in the home. The Ministry, and individual mahallas, have an important role to play in ensuring that these guarantees are realized in practice. Before the establishment of the new Ministry, mahalla committees had a position of a specialist on issues pertaining to women and girls that was linked with local branches of the former Women's Committee. The restructuring of the Women's Committee has arguably increased the responsibility of mahallas to take direct action related to improving the lives of women and girls.

⁵⁵ United Nations, Policy Brief: The Impact of COVID-19 on Women, 9 April 2020, <u>https://unsdg.un.org/resources/policy-brief-impact-covid-19-women</u>

⁵⁶ İbid, p. 2.

The mahalla is a traditional and at times conservative structure, in which women have not had a very prominent role historically. For example, it is only in recent years that women's leadership, as chairpersons of mahallas, has surpassed ten per cent. Despite efforts by the government to ensure women's equal representation in every aspect of life, women in Uzbekistan are still underrepresented in decision-making positions in almost all sectors. For instance, women constitute only 22% of the members of the Legislative Chamber and 14% of the members of the Senate of Oliy Majlis. Just 23% of members of local parliaments (Kengashes) are women. As of 2018, the share of women in the Cabinet of Ministers was 6.5%, and among the leadership of the executive power it was 15.3%. Women occupy only ten per cent of senior management posts (heads, deputies) in ministries, state committees and agencies and 24% of the mid-level positions.⁵⁷

This study included several questions designed to identify the particular impacts of the COVID-19 pandemic and preventive measures on the welfare of women, as well as how mahalla leadership in Uzbekistan has identified and responded to such issues. Overall, the survey responses provided a rather ambiguous picture. Although the survey data suggest that the COVID-19 pandemic has had a gendered impact, the findings are too imprecise to draw any broad conclusions. At the same time, the responses also suggest that the surveyed mahalla representatives have specific knowledge gaps about issues that are critical for women, most particularly about whether domestic violence is occurring in households of the mahalla as well as the kind of assistance that victims require.

The burden of unpaid household and care work

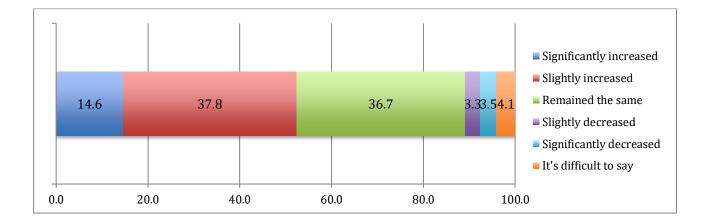
Before the COVID-19 pandemic, women in Uzbekistan shouldered the larger burden of unpaid domestic and care work in their households. This situation is reflected in women's lower engagement in the labor force and as entrepreneurs, as compared to men. Although there has not been a republic-wide study of how women and men use their time, small-scale studies conducted in *rural* areas found that women report that about 60% of their day is devoted to tasks such as cooking, cleaning, laundering, ironing and repair of clothing. Men report that they spend about 11.5% of their time on such activities. Women in rural areas calculate that they spend approximately 14 hours per day on unpaid household chores and childcare.⁵⁸

When asked whether they had observed any changes in women's domestic workload (consisting of housework, childcare and the care for family members who were ill) during the quarantine period, approximately half of the mahalla representatives reported that the burden on women had increased (either "significantly"- around 15 percent- or "slightly"). Over a third of respondents were of the opinion that women's workload had not changed, and a very small proportion felt that their workload had decreased. See Figure 13, below.

Figure 13. To what extent did women's share of unpaid domestic and care work change in connection with COVID-19? (% responses)

⁵⁷ Report of the Implementation of the Beijing Declaration and Platform for Action Uzbekistan, 2019, p. 38

⁵⁸ The data is derived from research and focus group discusions conducted in the framework of projects by the Asian Development Bank. Asian Development Bank, 2014, Uzbekistan Country Gender Assessment, p. 10.



Representatives of mahallas in the Fergana region, followed by the Tashkent and Bukhara regions, were the most likely to report that women's domestic workload had increased (over 42% of respondents in Fergana, followed by over 40% in the other two regions). Respondents from the Republic of Karakalpakstan, Khorezm, Kashkadarya and Navoiy regions were less likely to have observed such an increase in the domestic workload (less than 30% of respondents).

The respondents in Tashkent city were the most likely to describe a *significant increase* in the burden on women (28% of Tashkent respondents versus 15% in most regions), followed by the Syrdarya region (20%) and Andijan region (17%).

The greatest percentage of respondents to say that the burden of domestic work and the care of children and ill people remained the same for women during the period in which measures were taken to prevent the spread of COVID-19 were in the Navoi region (55% of respondents in this region felt that the burden had not changed, as compared to 32% that were of the opinion that women's burden had increased). Representatives of the Jizzakh region were the least likely to report that there had been a *significant increase* in women's domestic work and childcare (only seven per cent gave this response), but a larger percentage felt that the work burden had increased *slightly* (40% of all respondents in the Jizzakh region).

The regional variations in estimations of changes to women's unpaid workload may well reflect varying degrees of urbanization. Representatives of mahallas in urban areas were slightly more likely to report their perception that women's workload had increased, while those from rural areas were relatively more likely to select the option that women's workload had remained at the same level. The fact that the quarantine measures required the closure of non-essential services (including cleaning services, shops selling prepared food, etc.), would have had a greater impact on women who had previously relied on such services, which are more prevalent in urban settings. It is also likely that women in urban areas more often switched to remote work, at a time when preschools and schools were temporarily closed and children were at home. In contrast, some of the daily tasks that rural women undertake in addition to childcare and household chores, such as collecting and boiling water for household use, tending household plots, caring for livestock and poultry, producing dairy products and baking bread,⁵⁹ may neither have been disrupted nor made more timeconsuming as a result of the measures taken to address COVID-19. Similarly, lack of pre-school institutions in Uzbekistan is an issue that predates COVID-19. Only 24% of children aged three to six years receive preschool education, and coverage is significantly lower in rural areas than in urban ones.⁶⁰Thus, the mahalla representatives in rural areas may not have observed any significant increase in women's daily work, including caring for young children.

⁵⁹ See generally, Asian Development Bank, 2018, Uzbekistan Country Gender Assessment Update.

⁶⁰ Report of the Implementation of the Beijing Declaration and Platform for Action Uzbekistan, 2019, p. 21.

More accurate estimates of how women and men use their time can be generated through self-reporting, usually calculated through time use surveys. The large majority of mahalla representatives covered bythis survey were men who were providing information about the impact of the pandemic on women's time. Nevertheless, it is clear from research conducted before the outbreak of COVID-19, and suggested by half of the mahalla leaders, that women disproportionately experience time poverty- meaning that the time that women spend performing unpaid traditional reproductive tasks leaves them little time for productive, paid work. Note that the issue of how the quarantine measures taken to address COVID-19 may have affected women's employment and incomes, based on how women are represented in the labor market of Uzbekistan, are discussed in Sections 1 and 2 of this report. Public investment in social care services that decrease the burden of unpaid work and care responsibilities on women can have far-reaching consequences, not only in reducing inequalities between women and men, but also empowering women and girls, reducing poverty and promoting decent work and sustainable economic growth.⁶¹

Domestic violence

The legal framework in Uzbekistan to address violence against women has been considerably strengthened in recent years, covering the early detection and prevention of domestic violence, the establishment of a system of social support and protection for survivors of violence, facilitating the prosecution of violence against women and strengthening data collection. The Law on the Protection of Women from Violence and Harassment (2019) identifies several forms of violence (physical, sexual and psychological) and introduces the protective order that allows the police to temporarily remove an abuser from the home. Violence against women is addressed through a multi-sector approach, involving law enforcement bodies as well as "central and local executive authorities, education, labor and health authorities, women's and other non-governmental organizations, citizens' self-governing bodies [the mahallas] and special centers to assist victims of harassment and violence."⁶²

There is no current national prevalence data on domestic violence. However, a study carried out in 2015 found that 28% of respondents had experienced psychological violence (in the forms of verbal abuse, prohibition on working, threats, isolation from family members and friends, denial of money), 5.8% of the respondents had been subjected to physical violence by a partner, and 0.5% reported having been victims of sexual abuse.⁶³

In 2018, a nation-wide telephone hotline was launched in order to provide assistance to women and girls (it was operated by the former Women's Committee). Over approximately a year, the hotline received more than 15 000 calls, the majority of which concerned "family conflicts."⁶⁴ As of early 2019, more than 160 centers offering complex support for survivors of violence were operating in Uzbekistan, with centers in each region (regional, city and district level). Administrative data from the centers indicates that from January-March 2019, 4 120 women had received assistance through the centers. Non-governmental organizations located throughout the country also run telephone hotline services and offer shelter, legal assistance, psychological counseling and other aid to women survivors of violence.

Despite significant developments in social and legal protections of women and girls who have been subjected to violence, research has uncovered serious weaknesses in the response at the community level (specifically a 2019 study conducted in 100 mahallas in Tashkent and the Samarkand and Bukhara regions). The following gaps have been identified: limited support for survivors of violence, limited effectiveness in

⁶¹ See UNDP and UN Women, Investing in social care for gender equality and inclusive growth in Europe and Central Asia, Policy Brief 2017/01, 2017, <u>https://www.undp.org/content/dam/rbec/docs/undp-rbec-gender-investing-in-social-care-for-gender-equality-and-inclusive-growth.pdf</u>

⁶² Government of the Republic of Uzbekistan, Sixth periodic report submitted by Uzbekistan under article 18 of the Convention on the Elimination of All Forms of Discrimination against Women, 23 January 2020, CEDAW/C/UZB/6, para. 27.

⁶³ Report of the Implementation of the Beijing Declaration and Platform for Action Uzbekistan, 2019, p. 27.

⁶⁴ Ibid, p. 29.

preventing domestic violence, lack of cooperation among responsible agencies working on violence against women, lack of awareness among women about their rights, especially in the context of domestic violence, and persistent discrimination against women, both in society and in the family.⁶⁵ In response to these findings, the Women's Committee issued recommendations on strengthening the response to domestic violence that were aimed at particular institutions, including specialists in mahalla committees responsible for women's issues, women's shelters in regions and representatives of the Ministry of Internal Affairs that deal with domestic violence.

When the COVID-19 outbreak occurred, the UN Office of the High Commissioner for Human Rights expressed concern that, stay-at-home restrictions and other measures that required people to isolate at home were contributing to an increase in gender-based violence, including violence against women.⁶⁶ In Uzbekistan, the Commission for Ensuring Gender Equality of the Oliy Majilis likewise noted the risk of increased violence to women and girls and launched a dedicated hotline offering free consultations (by lawyers and/or psychologists) to coincide with the quarantine period.⁶⁷ The Ministry for Mahalla and Family Support and UNDP jointly prepared outreach materials for women at risk of domestic violence that were distributed in local pharmacies and through television clips.⁶⁸

Due to incomplete data, it is not possible to describe the dynamic in domestic violence incidents during the quarantine period in Uzbekistan. However, during the first week in which quarantine conditions were imposed, two well-established NGO hotlines experienced a fivefold increase in calls in the first week. These registered numbers probably represent a fraction of the true scale of violence in the country. Many women endure violence because they are not aware of their rights or are too afraid to report the violence or to seek help or there are no functioning shelters nearby where they can find refuge. Data published by the Ministry of Internal Affairs of Uzbekistan for 6-12 July 2020 shows that on a week-to-week basis the number of reported domestic violence cases increased from 187 to 213- 54% concerned psychological violence, 44% concerned physical violence and the remaining were cases of economic violence.⁶⁹ Law enforcement issued 527 protection orders from January to April 2020, as compared to none being issued from September to December 2019 (which was when the legal mechanism was introduced).⁷⁰

Questions included in this survey were intended to assess changes in reported incidents of, and the level of information about, domestic violence among mahalla leadership and steps that had been taken to address such violence within communities. The responses revealed, however, that the mahalla representatives were generally not able to provide useful information about the situation concerning domestic violence. As discussed in section 1 of this report, when mahalla leaders were asked to identify the most urgent problems facing residents, five of the top ten problems concerned financial difficulties (unemployment, income loss, price increases, etc.). See Figure 4. Of the list of issues that the respondents were asked to consider, "domestic violence against women" was ranked last, selected by only 0.2% of respondents. This option also fell behind issues that were considered more important but which, in practice, frequently coincide with domestic violence, such as job loss, stress, "family disputes," alcohol or drug abuse and the initiation of divorce.

https://www.ohchr.org/Documents/Issues/Women/COVID-19_and_Womens_Human_Rights.pdf

⁶⁵ Ibid, p. 27.

⁶⁶ OHCHR, COVID-19 and Women's Human Rights: Guidance, 15 April 2020,

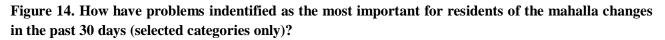
⁶⁷ The hotline service was also supported by UNFPA. Information Service of the Senate of the Oliy Majlis of the Republic of Uzbekistan, Налажена работа телефона доверия Гендерной комиссии [Initiation of a telephone hotline of the Gender Commission], 11 April 2020, <u>http://senat.uz/ru/lists/view/1312</u>

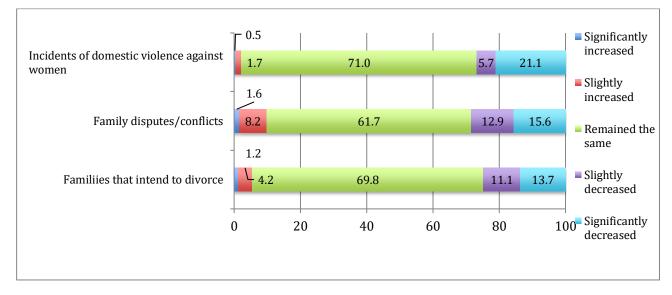
⁶⁸ See UNDP, Reducing domestic violence caused by the COVID-19 lockdown in Uzbekistan, 27 April 2020, <u>https://www.uz.undp.org/content/uzbekistan/en/home/presscenter/pressreleases/2020/04/reducing-domestic-violence-caused-by-the-covid-19-lockdown-in-uz.html</u>

⁶⁹ Data from the Ministry of Internal Affairs of the Republic of Uzbekistan, 16 July 2020, <u>https://telegra.ph/Operativnaya-svodka-</u> Ministerstva-vnutrennih-del-po-sostoyaniyu-na-6-12-iyulya-2020-g-07-16

⁷⁰ Oparina, D., Uzbekistan: Domestic Abuse during Coronavirus Continues, 20 May 2020, Central Asian Bureau for Analytical Reporting (CABAR), <u>https://cabar.asia/en/uzbekistan-domestic-abuse-during-coronavirus-continues/</u>

When asked about a number of possible impacts on the wellbeing of households in their mahallas, over the previous 30 days, most respondents indicated that the number of incidents of domestic violence against women had not changed (71%) or had, in fact, decreased (27% of respondents). See Figure 14, below.





Each of these findings should be interpreted with caution, and should not be used to suggest that domestic violence is not a serious problem. First, the fact that more than a quarter of mahalla representatives considered the number of domestic violence cases to have decreased during a time of considerable financial and psychological stress, suggests that victims were simply not able to access channels of support that had been available previously and that cases had become even more latent. The respondents felt that family disputes and divorces had increased more than incidents of domestic violence. These findings suggests a lack of understanding that domestic violence is very often at the center of such conflicts and the dissolution of marriage. Furthermore, the low priority that the respondents gave to the issue of domestic violence is not consistent with government efforts to prevent violence against women and increase the protection of survivors.

There is a lack of clarity in the survey question about whether domestic violence increased, decreased or remained the same, as there is no comparison of the pre-COVID-19 period to the time when the survey was administered. For this reason, respondents were also asked directly if there had been any cases of domestic violence against women in their mahallas in the 30 days prior to the survey. In response, an overwhelming 98.9% of respondents answered that there had been no such incidents. This pattern was the same for every region, but respondents from urban areas were almost three times more likely to report that domestic violence had occurred than those from mahallas in rural areas. Respondents who confirmed cases of domestic violence against women in their mahalla reported one to three such incidents had occurred in the previous 30 days. Again, given the general and cyclical patterns of domestic violence, it is highly unlikely that the survey sample included mahallas in which no domestic violence had in fact occurred, especially given information from other sources that victims had contacted the police and support hotlines during this time.

However, it is possible that victims had been in touch with law enforcement directly, without involving the mahalla committee, had received assistance through a telephone hotline or had contacted local centers or NGOs. Still, if this were the case, it would raise the question of why mahalla leaders were not better informed about the welfare of residents, especially women, and were seemingly unaware that domestic

violence had taken place. Other possibilities are that some mahalla leaders do not recognize or know how to identify domestic violence as a violation of women's rights. Or perhaps the mahalla leaders simply felt it would not be acceptable to openly acknowledge the occurance of domestic violence when completing the survey. In research conducted about violence in the family prior to the COVID-19 pandemic (among the general population), 60% of respondents stated that there was no domestic violence; only two per cent had the opinion that physical violence took place.⁷¹ Thus, it can be concluded that the very topic of violence against women and girls is a taboo subject, and there is a strong tendency to preserve the appearance of successful and healthy family relations. Such an attitude not only prevents survivors of violence from seeking help, due to feelings of fear and shame, but also means that the very structures that are in place to detect domestic violence and prevent it from escalating will not be effective.

Women's non-governmental organizations have pointed out that survivors of domestic violence are often stigmatized and blamed for the violence, and therefore public awareness campaigns, such as the 16 Days of Activism against Gender-based Violence are essential to promoting the unacceptability of such violence and support for survivors.⁷² It is equally critical that mahalla leaders receive targeted informational and educational messages, not only to foster intolerance of violence, but to clarify their role in prevention efforts.

The respondents were asked to identify from which sources the usually learn about incidents of domestic violence against women occurring in the mahalla. As above, the large majority stated that there had been no cases of such violence in their mahalla (it is unclear whether this was interpreted as referring to a particular time period or generally). Those that acknowledged the existence of domestic violence were more likely to learn about it from other residents⁷³ (28,4% of respondents gave this answer) or from outside agencies (the police and women's NGOs accounted for 21% of the responses) than from the survivor herself (17%) or from the survivor's family or friends (16%). See Figure 15, below. Note also that mahalla activists were the least likely to be a source of information about domestic violence, and anonymous calls were also rarely mentioned as a source of information.

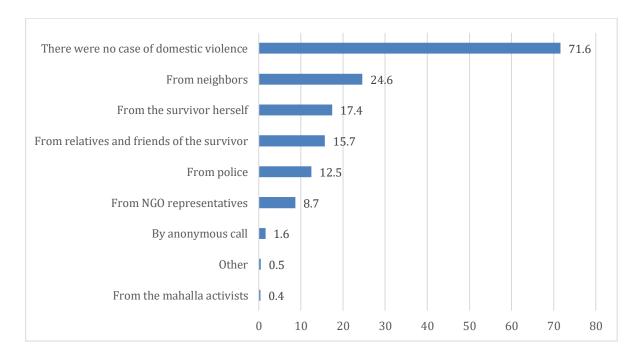


Figure 15. How do you usually find out about domestic violence against women if it happens?

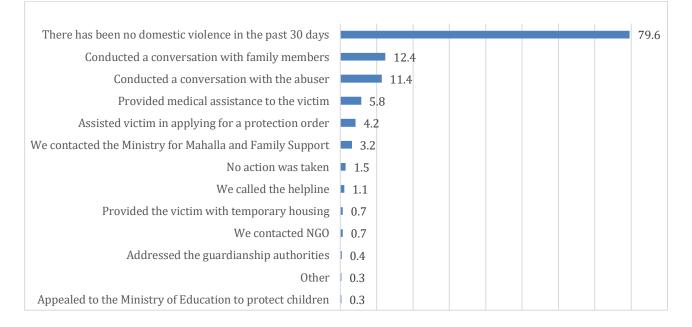
⁷¹ Report of the Implementation of the Beijing Declaration and Platform for Action Uzbekistan, 2019, p. 28.

⁷² Report on Implementation of the Provisions of the Beijing Declaration and Platform for Action, by NGO- Nongovernmental Nonprofit Organizations of Uzbekistan, 2019, p. 7.

⁷³ Respondents were able to select more than one possible source of information.

When asked about the measures that had been taken to address concrete incidents of domestic violence in the 30 days prior to the survey being administered, almost 80% of the respondents underlined that no such cases had occurred in their mahalla in this time period. Of the remaining, almost a quarter (a combined 23.8%) described having spoken with family members or with the perpetrator of the violence. In contrast, fewer actions were taken to address the immediate needs of the survivor (such as providing medical assistance, providing temporary shelter, contacting a specialist NGO). See Figure 16, below. It is notable that four per cent of the respondents reported that they had facilitated applying for a protection order for the survivor. While this is a very small percentage of respondents, it should be kept in mind that the protective order mechanism was still relatively new at the time of the survey. The largest number of respondents to give an answer referring to protective orders was in Tashkent, suggesting that mahalla leaders are more familiar with this mechanism and the application process, or that there are better connections between mahalla leadership and law enforcement.

Figure 16. What measures were taken after the identification of a case of domestic violence against a woman in the previous 30 days?



Given the key role that mahallas can play in early detection of domestic violence and prevention of its escalation, the responses described above are concerning. Conversations with perpetrators of violence, especially by those who are not specialists in this field, have at best been found to be ineffective mechanisms to prevent violence in countries where this has been studied,⁷⁴ and at worse they may put survivors in even greater danger (especially when there are no legal consequences for the perpetrator). Rather, good practices emphasize the importance of addressing the safety of survivors as a first priority, and assisting them to access specialized assistance, such as provided by NGOs or women's centers, in a coordinated way. The findings of the survey suggest that mahalla leadership has limited experience in referring survivors to service providers, and may not even be aware of the services that exist locally.

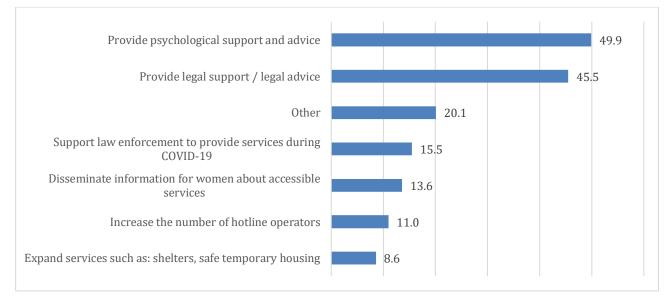
In this context, the importance of more active interaction with law enforcement and other relevant authorities can be noted. So, the duties of the deputy chairman of the gathering of citizens on law and order issues are assigned to the senior inspector for prevention, in the absence of this position, on the inspector for prevention

⁷⁴ See, e.g., Council of Europe, 2014, Domestic and Sexual Violence Perpetrator Programmes: Article 16 of the Istanbul Convention, <u>https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=090000168046e1f2</u> This paper outlines the methods that are generally seen to be effective in working with perpetrators of domestic violence, the minimal standards of practice to ensure consistency and key principles that should guide any intervention with perpetrators.

(paragraph 16 of the Decree of the President of the Republic of Uzbekistan "On measures to improve the social and spiritual atmosphere in society, further support of the institute makhallas, as well as raising the system of working with families and women to a new level" No. PD-5938 dated February 18, 2020).

The actions that the respondents identified correspond closely with their views on the measures that would be needed during the COVID-19 pandemic. Around half of the respondents identified the provision of psychological support, followed by legal counseling. A minority saw the need for increased support for law enforcement to respond to domestic violence, and an even smaller group of respondents identified the need to increase outreach to women (through direct information or by increasing the number of hotlines) or specialist services for survivors. See Figure 17.

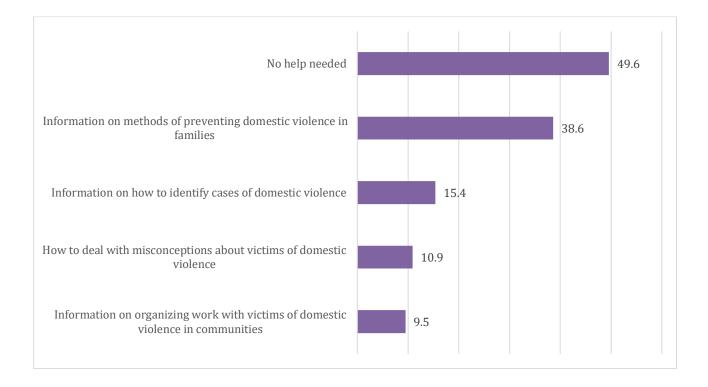
Figure 17. What measures are needed to support women survivors of domestic violence during the COVID-19 outbreak?



The predominant opinion that psychological advice should be provided to survivors of domestic violence explains the fact that when assistance is offered by mahalla leadership, it primarily takes the form of speaking with affected family members and the perpetrators of violence. It is unclear whether the other responses to the question about support for survivors of domestic violence indicate that the respondents (i) do not believe such forms of support are needed by survivors of violence at all, (ii) are satisfied with existing services (i.e. they do not see a need to *increase* the number of hotline operators) or (iii) are unaware of existing telephone hotlines, women's centers and NGOs and how they operate.

Answers to a direct question about what kinds of support the respondents view as most needed within the mahalla so that staff could better protect women from domestic violence, provide further insights into responses to the previous questions. Around half of the respondents stated that no such support was needed. See Figure 18, below. However, more than a third expressed a need for further information about methods of preventing domestic violence. It is worrying that very few respondents saw a need to improve their capacity to identify domestic violence cases, or to dispel misconceptions about this form of violence, when the responses to other survey questions suggest that these are areas that are especially problematic for mahalla leadership. Lastly, less than ten percent of respondents saw a need for support in how to work directly with survivors of domestic violence.

Figure 18. What help do the responsible staff in your mahalla need for protecting women from domestic violence?



The need for gender-sensitive leadership

Although limited conclusions can be drawn from the survey responses, the prevalence of certain answers suggest that mahalla leadership lacks understanding of the issues that are most pressing for women, in general and in response to the COVID-19 pandemic. For instance, when asked for their opinion about difficulties that women survivors of domestic violence may have faced in the period before the survey was administered, the overwhelming majority reiterated that there were no cases of domestic violence in their mahalla (92% of respondents). The next most commonly given response was "it is difficult to answer" given by almost five per cent of respondents. Only a small minority highlighted such issues as women's own fears of being sanctioned for violating quarantine if they sought help (2.4%) or the lack of accessible services (support centers or temporary housing; identified by less than two per cent). Among the answers to the question of potential difficulties in providing support to survivors of domestic violence, the survey included the option "women do not have the opportunity to call the helpline," but apparently none of the respondents selected this answer. While these answers are not definitive evidence of the level of understanding among mahalla leaders of domestic violence, they do suggest that there is a general lack of sensitivity to the serious risks that women have faced in their own homes during the quarantine period, including the likelihood that perpetrators of violence were exercising even more control over women when people were confined together.

Likewise, it is unexpected that a considerable proportion of respondents held the opinion that women's domestic workload either stayed the same or decreased. While there had been some easing of restrictions during the time that the survey was administered, it is unlikely that they had the effect of reducing women's workload. In contrast, organizations, such as the World Bank, warned that due to the measures taken to contain COVID-19, "women will likely experience a significant burden on their time given their multiple care responsibilities as school closures and confinement measures are adopted, possibly leading to reductions in working time and permanent exit from the labor market."⁷⁵ It is quite possible that the mahalla leaders, as is common across society, are not sensitive to the amount of unpaid work that women perform every day and

⁷⁵ World Bank Group, Policy note: Gender dimensions of the COVID-19 pandemic, 16 April 2020, https://openknowledge.worldbank.org/handle/10986/33622

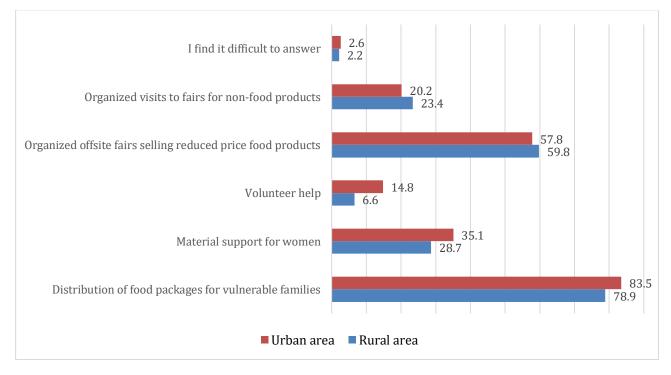
thus were not able to give an accurate estimate of how women had been impacted. There is a need to continued and comprehensive work with mahalla leadership, and to improve women's representation among leadership, so that they are better able to address the risks to women's welfare.

5. Assessment of the capacity of mahallas to deliver social support

Tangible forms of assistance are needed

There is a lack of understanding among mahalla leadership of the importance of providing new forms of assistance to the population during the COVID-19 pandemic. Over 80% of respondents indicated that the primary form of assistance is the distribution of food packages to vulnerable households, and about 60% noted the organization of offsite food fairs that sell groceries at reduced prices, with little difference between urban and rural mahallas. Supporting or coordinating the work of community volunteers to provide assistance was viewed as the least needed service. See Figure 19, below. It is unclear whether this response reflects the fact that there are other institutions through which people are volunteering (possibly NGOs or religious organizations) or mahalla leadership tends to rely on external forms of assistance, rather than drawing on the resources within the mahallas themselves.

Figure 19. Which services to support the population of your mahalla during the fight against COVID– 19 do you consider the most needed?



When asked about the forms of assistance needed by the residents of the mahalla at the time that the survey was administered, the most popular options (given by over 30% of respondents for each type of assistance) were programs to create new jobs, subsidized loans and the provision of protective equipment and food packages for households. From 20% to 25% of the respondents indicated the need to ensure sufficient food supply in local shops and access to medical services. Approximately 18% highlighted the need to preserve existing jobs, provide tax benefits and defer utility bills, providing assistance in the form of monetary benefits. Thus, among the required forms of assistance, the respondents foremost identified the need to secure favorable economic conditions, followed by the provision of necessary medical goods and services and then stability in food supply. It should also be noted that complex social problems, such as ensuring that

children have access to high-quality education, addressing the psychological health of residents or the prevention of family violence, were identified by a fraction of the respondents. For instance, only around two percent of the respondents recognized a need to provide assistance to victims of domestic violence, a topic which was discussed in greater detail in the preceding section of this report. Given that the impacts of the pandemic go beyond the economy, mahallas may not be ready to deal with other emerging issues in their communities.

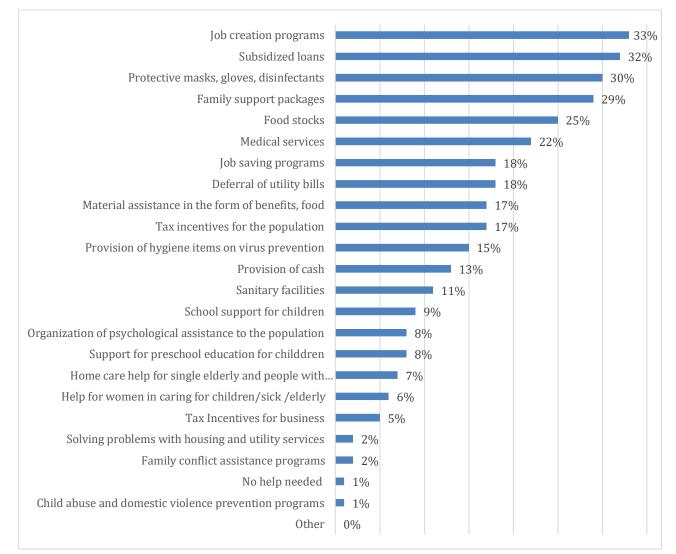


Figure 20. What kind of assistance do residents of your mahalla need at the present moment to counteract the impacts of COVID-19?

Requests for and provision of support

According to the survey results, almost 90% of respondents reported that residents of their mahallas had applied for help due to the COVID-19 pandemic. The majority of those applying for and receiving assistance were women, and more than 65% of applicants and recipients were single elderly people. These figures indicate the availability of sponsorship and humanitarian aid in the mahallas, on the basis of which material support is provided to the population. Of course, the category of "elderly people" likely also includes women, and so this differentiation is not particularly useful. Furthermore, the survey questionnaire only allowed respondents to specify a total and these two categories of recipients. It is probable that women take on the role of requesting social support for their households, and so that fact that high numbers of women received assistance is not an indicator that they were the only ones to benefit from it.

Over 92% of mahalla representatives were able to specify the exact or approximate number of requests for assistance. Virtually all knew the number of recipients of financial assistance, and over 95% could specify whether the assistance was provided to a woman or to an elderly person (in the case of elderly people, the survey questions did not specifying the sex of the person). The type of assistance was also not specified in the survey, but during the lockdown period the government provided financial support, food packages and medicines.

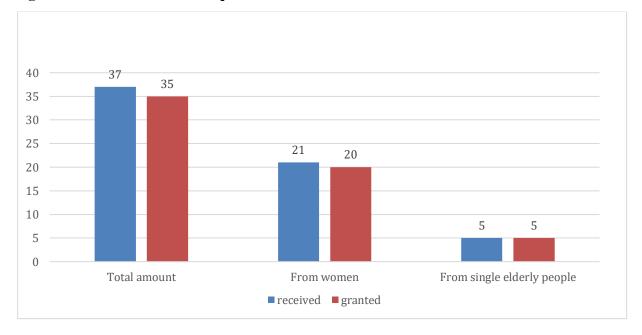


Figure 21. Median number of requests for assistance to mahallas related to COVID-19

Across the total survey, the median number of requests for assistance was 37 people per mahalla, of which 35 requests were granted. For comparison, there are around 300 households per mahalla on average in Uzbekistan. The median number of applications submitted by women was 21 per mahalla, and of these virtually all assistance requests were granted. The median number of applications received and granted for elderly people was five per mahalla. Overall, 70.3% of requests for assistance were made by women or elderly people. Again, further information about who particularly requested and received assistance would be useful, for instance, categorized by both sex and age as well as other social statuses (e.g. single/married/divorced/widowed, in households with children or without children, employment status, etc.).

The mahalla institute needs strengthening

The mahalla representatives were asked to provide information about the needs of mahalla committees that would enable them to better support residents during the pandemic. The most popular responses focused on reorganization of the structure itself, namely equipping the committees with modern technology, reducing bureaucratic reporting and increasing wages for mahalla staff (noted by approximately 47-49% of respondents). The next most common answers concerned the provision of financial and material assistance, such as reducing interest rates on mahalla loans, supporting local fairs (where residents can buy food and non-food items), increasing the number of food packages, as well as improving interaction between the mahalla committee and health care organizations (indicated by between 20% and 25% of respondents). The least needed type of support, identified by mahalla leaders, included assistance with sanitary measures (for mahalla offices) and the provision of informational/educational materials about COVID-19 (indicated by only 8%-11% of the respondents). Just under 15% indicated that the mahalla committee did not need any particular support. The lack of an identified need for informational materials about COVID-19 may reflect the timing of the field work as well as the fact that mahalla leaders noted that residents had quite a high level

of awareness about the pandemic. Still, given that the responses to questions about persons who were being treated for COVID-19 suggest a fairly high level of stigmatization, there may be a need for targeted awareness-raising with the population to allay fears and anxiety.

It is possible to overcome this kind of dependent mood by expanding the processes of families being involved in entrepreneurial activities and increasing the public activity of residents within the institution of the mahalla itself.

RECOMMENDATIONS

In the current circumstances, the Government of Uzbekistan remains constrained in the options for policies that could be applied to overcome the COVID-19 crisis. A number of measures have already been taken to provide social support to the population, prevent bankruptcy of enterprises, stimulate employment and economic activity. At the same time, in order to increase the effectiveness of measures, a holistic approach to the situation is required. Based on the survey findings, the following set of measures are proposed aimed at minimizing the negative social, economic and other consequences of the COVID-19 pandemic.

1. Measures to revive economic activity and employability of the population in mahallas

1.1. Adjust economic policies to facilitate accelerated recovery of small and medium businesses in labor intensive sectors. This involves permitting small business in domestic services (hairdressing salons, repair of clothes, shoes, etc.) and sale of non-food products to operate within mahallas in strict compliance with all sanitary standards.

Measures to stimulate economic recovery should be designed with value chains in mind. For example, the restoration of the economic viability of the service sector and public catering should be carried out with the resumption of the activities of educational institutions, construction, large shopping malls and other facilities that mobilize significant labor resources. At the same time, the full resumption of their activities is complicated if the functioning of urban and intercity transportation is limited.

Support measures must take into account seasonal factors to ensure that quarantine has as little impact as possible on the harvest season in the countryside and the sale of crops, especially in the private sector. Perhaps this also applies to the organization by the Ministry, together with the relevant departments, coordination of the work of commercial procurement structures, including foreign ones, in order to ensure the full implementation of the crops grown in the regions of the country by farmers and individuals.

1.2. Expanding opportunities for family-based entrepreneurship through creating platforms for small private business in mahallas. Family-based businesses can potentially be sources employment and income for women, and for young people (both young men and women). It is important to facilitate creation of small private businesses on the basis of mahallas with focus on longer-term investments in the production of consumer goods in demand by residents of mahallas, as well as encouraging the private sector to import or produce scarce goods locally. It requires increasing access to start-up capital, for example, preferential bank loans for women entrepreneurs, significantly reducing the cost of banking services, and reducing collateral requirements for issuing loans with mahalla guarantees. Mahalla bodies could act as backers of long-term loans and international development grants.

The creation of a family business on the basis of mahallas corresponds to the national and cultural characteristics of Uzbekistan, where great importance is traditionally attached to family ties. Also, on the basis of mahallas, it is possible to create fairly simple forms of entrepreneurial activity (agriculture, trade, public catering, sewing, etc.), in which there is no need to use narrow specialists. Any initiatives to increase women's role in family businesses, however, must ensure that measures are taken to alleviate the burden of unpaid domestic and care work and not increase the burden further.

The Ministry could take on the task of helping to overcome various transaction costs, which include the establishment of contractual and administrative relations (obtaining permits, standardization, taxes and social security contributions, countering imposed charity and unofficial payments, etc.). In general, the strategy of supporting small businesses based on mahallas should be aimed at providing entrepreneurs with greater economic freedom, as well as attracting technical assistance from international organizations.

2. Measures to refocus the social protection policies on the most affected groups

2.1. Social protection policies must become more operationalized and targeted, reaching out to those population groups, which will produce the maximum multiplier effects. Thus in addition to the most affected groups identified by the survey – low-income families, multi-child families, and migrants – these include:

- Single mothers raising children under the age of 18. An important point is precisely the coverage of families with older children who do not study in the vocational education system and do not receive a stipend. This age group does not yet have employment opportunities and has not received professional skills, do not have employment opportunities during a pandemic, but at the same time have a significant impact on family budget expenditures.
- *Retirees, both single and those living with their children and grandchildren.* It is important to understand that as the oldest family member, retirees often play the role of heads of household, ensuring a rational distribution of family income. Expanding social assistance measures through retired household heads whose members of working age have lost their jobs will increase the likelihood of more efficient use of funds.
- Persons of working age who have lost their jobs in the formal sector. This category of persons can be identified by monitoring the regularity of their payment of income tax and contributions to the individually funded pension system. In the absence of such payments for two or more months, starting from March 2020, and provided that a person who applied online to state agencies for the promotion of employment and social protection, should be entitled to supportive measures.

Some of the measures that mahalla administrations could implement to provide support to these groups include using crowd-sourced and volunteer-based approaches to addressing their most pressing needs, such as collecting clothes, food and other items, assistance with household issues, providing interest-free miniloans, support in collecting documents to apply for social benefits, etc.

It is important to continue the government's policies on the organized export of the labor force, to ensure monitoring of the working conditions of Uzbek migrants in recipient countries (Russia, Kazakhstan, Turkey, South Korea). Also, managed migration helps to ensure partial accumulation of remittances in bank accounts, so that upon return, a labor migrant has initial funds to support re-socialization and searching for a new job.

2.2. Improving the skills and retraining of people of working age through short-term vocational training courses based on public-private partnership (PPP) between the Ministry for Mahalla and Family Support and non-state educational institutions. Within the framework of such a PPP, the Ministry can cover the costs of retraining persons of working age. The training can be carried out in a wide range of professions in the areas of construction, repair and technical services, financial and management accounting, entrepreneurship and other types of economic activity, which can be trained in less than three months. Applying this approach, on the one hand, will restore demand for education services, while on the other hand, it will significantly increase the human capital in the republic, providing citizens with more opportunities for self-realization in economic activity. Special attention should be devoted to young women and men who are in not in education, employment, or training (NEET) in order to mitigate the potential negative impacts of COVID-19 in disrupting their education. Measures should be taken to provide young people with training and skills that match job market demands. Additionally, special measures, such as scholarships, or outreach and combating gender bias, would be useful to assist women to have equal access to opportunities in STEM (science, technology, engineering and mathematics sectors. .

2.3. Improving the quality and availability of data on the social groups most seriously affected by the pandemic. This involves developing digital solutions (information systems for case management, electronic

registries of people in vulnerable situations) to collect, process and analyze information on the social and economic profile of mahalla residents applying for social assistance, as well as building digital skills of mahalla workers. These measures, in addition to capacity building for mahalla representatives in how to collect and analysis data disaggregated by sex, age, income, occupation and other factors, will help introduce data-driven and evidence-based decision-making on social support of the local population.

3. Measures to address COVID-19 impacts on women

3.1. Measures to alleviate the unequal burden of unpaid domestic and care work on women should be a priority. Public investments should be made in care infrastructure, especially childcare and elder care, that provide universally accessible (especially in rural areas) and high-quality care services. Investments in this sector would provide direct employment opportunities for women and would also enable a greater number of women to enter or reenter the workforce, closing the gender gap in labor force participation. Attention should also be given to promoting balanced responsibilities for domestic and care work within families and encouraging men to take a greater role in this area.

3.2. Creating more channels for reporting domestic violence. Addressing women's specific needs could start from introducing a mechanism through which women and girls who are experiencing domestic violence could confidentially request assistance from the mahalla. This should be accomplished by engaging and collaborating with women's non-governmental organizations and specialists. During the pandemic, mobile operators could provide women with access to hotline numbers even with a zero balance (free of charge). Digital solutions (such as Telegram bots (channels) or mobile apps) could be created or used to communicate violence against women to mahallas and law enforcement agencies.

3.3. Building gender-responsive skills of mahalla administrations to establish a system for identifying conflicts in families and incidents of domestic violence, supporting women in families experiencing domestic violence, providing survivors with referrals to social support (such as primary psychological and medical assistance, legal counseling or temporary shelter), as well as providing professional assistance to help families resolve conflicts. It is necessary to develop and publish in Uzbek, Russian and Karakalpak languages special methodological manuals for mahalla activists to identify and prevent gender-based violence, as well as to provide appropriate support to survivors. A series of training programs must be conducted for mahallas on identification, prevention and supporting survivors of violence against women.

3.4. Developing and implementing awareness raising programs to improve the knowledge and attitude of the population towards domestic violence. In addition to educational measures, these programs should actively use soft tools and behavioral insights, positive discrimination, etc. to strengthen the culture of intolerance for violence against women in society, as well as to help in identifying and differentiating various types of violence - psychological, emotional and physical. Today, understanding of the phenomenon of domestic violence in Uzbekistan is limited to physical abuse. While such types of violence as threats, harassment and psychological pressure are still not perceived in Uzbek society as "real" domestic violence.

The programs on preventing and combating domestic violence should not be limited to the Ministry for Mahalla and Family Support and the Ministry of Internal Affairs, but should also engage the Ministry of Culture. In particular, it is advisable to consider the development of standards and requirements for television, cinematographic, theatrical productions, ensuring the inclusion in each of them scenes demonstrating various manifestations of domestic violence, its negative consequences for families and children, society and the State, as well as recommended response by victims of violence, neighbors and other members of the local community, mahalla employees and law enforcement officials. In addition, cultural figures, singers, writers, and poets could play an important role in condemning domestic violence and promoting equality between women and men in their creative activities.

4. Measures to improve capacities of mahalla bodies to respond to COVID-19

4.1. Building technical and human resources capacities of the Ministry for Mahalla and Family Support. This calls for addressing the operational needs of the newly-established Ministry by providing support in equipping its offices, building its digital infrastructure, enhancing inclusiveness of its premises to enable effective work with various marginalized groups, such as persons with disabilities, survivors of gender-based violence, people experiencing homeless, etc. Capacity building and training programs must be designed and implemented for the staff of the Ministry on modern approaches to social protection based on best international practices and sound understanding of the local context.

4.2. Improving the government's COVID-response communication strategy with a focus on explaining the absence of risk from those who have undergone appropriate COVID-19 treatment to counter stigma and discrimination. Also, the materials covering the situation around the pandemic should be based on critical analysis in order to objectively identify and illustrate cause-and-effect links. This requires enhancing the capacities of public relations and communication specialists of the key actors engaged in the COVID-response in Uzbekistan (Ministry of Health, Ministry for Mahalla and Family Support, local khokimiyats) on appropriate communications with regard to COVID-19, its effects and consequences.

4.3. Explore and use new approaches to social protection. To meet an increasing number of requests for assistance, mahallas need to explore opportunities to mobilize sponsorship and humanitarian aid for the affected population. In this regard, the Ministry for Mahalla and Family Support could expand its collaboration with international humanitarian organizations, local NGOs and volunteer communities to collect and allocate sponsorship funds. This requires setting up a mechanism for identifying and quantifying specific types and forms of assistance that the local population needs in close consultation with the mahalla aksakals. To ensure transparency and mobilize resources (through fundraising or crowdsourcing), this information must be published online.

Today, volunteering is concentrated on the Internet, primarily in social media, such as Facebook and Telegram. It is important to intensify the work of the Ministry to mobilize public activity more effectively, as well as to prevent possible cases of Internet fraud. Better and efficient engagement with volunteers will not only increase the targeting and control of charitable aid, but will also assist in reducing the burden on the State budget during the difficult period of the pandemic.

In general, in order to improve the targeting of subsequent packages of socio-economic support, the government and other stakeholders must consider the regional context according to such criteria as population density, level of urbanization, presence of large industrial enterprises and other stable sources of income, inflow and outflow of migrants. It is also important to account for seasonal factors so that the quarantine has a minimal impact on the harvest and sale season, especially in the private sector.

ANNEX. Survey methodology

Objective. The main goal of the study was to assess the impact of preventive measures to contain COVID-19 on the socio-economic wellbeing of the population of Uzbekistan. The survey was used to determine the nature and extent of the systemic consequences of government measures to contain the pandemic, their scale, intensity and projected duration.

Period and geographic coverage. The study was conducted from May to June 2020 and covered all regions of Uzbekistan: 12 viloyats, Republic of Karakalpakstan and Tashkent city.

Respondents. The sample size was 3 670 respondents represented by chairpersons of mahallas (84.7% of all respondents), their deputies (12.8%) and activists of mahallas (2.5%). Twenty-five per cent of the respondents were women. Almost two-thirds (62.9%) of respondents represent mahallas from rural areas. The survey respondents were considered to be the most informed representatives of the communities due to their implementation of all social activities carried out in the communities. Their opinions can be considered as an assessment of the ongoing changes during the COVID–19 period and can serve as a source of information for developing action plans to organize support for people in especially vulnerable situations.

Questions. The questionnaire consisted of 74 questions. All questions included in the questionnaire were aimed at obtaining answers to the points of interest, in particular the channels of the impact of shocks on human well-being (Scheme 1, below). All questions were presented in a language that was clear to the respondent and was free from technical jargon. Key terms such as "government action," "expectations", etc. were defined in ways that ordinary people could understand.

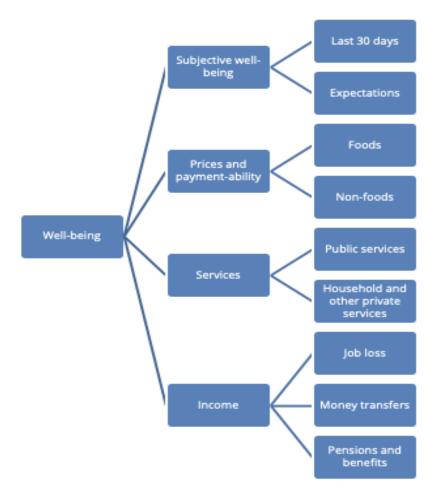
The answer options and their order were presented in a neutral way. Also, in order to maximize the percentage of responses, the answer options and scales were carefully selected, to be compatible with the target population and their abilities and knowledge.

Control questions were included in the questionnaire (the same question was asked in different ways to determine the respondent's inclination to the same answer). Sensitive and especially important questions were included at the end of the questionnaire in order to obtain quality answers when respondents felt more comfortable. Some less important questions were excluded in order to make the questionnaire short enough to hold the attention of the respondents.

The questionnaire consisted of eight parts, with multiple choice questions:

- 1. Impact of the spread of COVID-19 on the general welfare of residents and access to essential goods
- 2. Impact of the spread of COVID-19 on social infrastructure, supply of goods and services
- 3. Impact of the spread of COVID-19 on the mahalla population as a whole
- 4. Impact of the spread of COVID-19 on vulnerable groups
- 5. Women and domestic violence
- 6. Mahalla work to prevent the spread of COVID-19
- 7. COVID-19 counter-measures and support needed
- 8. Stigmatization

Scheme 1. Main channels of impact of COVID-19 impact on people's well-being



Each question provided a test for a specific hypothesis about the situation of the population, expectations and the relationship between policy and potential outcomes. Additional questions were included to test the most effective government interventions.

Timing and methods of data collection. The survey was conducted by specialized consulting companies through telephone calls.

Survey data collection was carried out in three rounds:

Round 1 - at the beginning of May 2020 – aimed at identifying the impact of prohibitions on the state of the population.

Round 2 - in mid-June 2020 - provided for the study of the state of the population in conditions of partial quarantine.

Round 3 - at the end of July 2020 – aimed at studying the state of the population in the post-quarantine period.

Weights. Out of more than 9 132 mahallas, 3 670 participated in the survey. Different mahallas have different sampling probabilities. Thus, some regions are underrepresented compared to others, and sample results may be biased in estimates of the parameters of the general population. Hence, weights are used to make them representative.